# Table of Contents

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>I. Statement of Purpose and Goals</td>
<td>1</td>
</tr>
<tr>
<td>II. Policies</td>
<td>2</td>
</tr>
<tr>
<td>a. Supervisor requirements</td>
<td></td>
</tr>
<tr>
<td>b. Site selection</td>
<td></td>
</tr>
<tr>
<td>c. Site application</td>
<td></td>
</tr>
<tr>
<td>d. Pre-requisite requirements</td>
<td></td>
</tr>
<tr>
<td>e. Duration of internship</td>
<td></td>
</tr>
<tr>
<td>f. Professional conduct</td>
<td></td>
</tr>
<tr>
<td>g. Supervision of internship</td>
<td></td>
</tr>
<tr>
<td>h. Evaluation of internship</td>
<td></td>
</tr>
<tr>
<td>i. Termination of internship</td>
<td></td>
</tr>
<tr>
<td>j. AHTA Registration</td>
<td></td>
</tr>
<tr>
<td>III. Procedures</td>
<td>6</td>
</tr>
<tr>
<td>a. Program Content</td>
<td></td>
</tr>
<tr>
<td>b. Projects</td>
<td></td>
</tr>
<tr>
<td>1. Short term</td>
<td></td>
</tr>
<tr>
<td>2. Long term</td>
<td></td>
</tr>
<tr>
<td>3. Case Study</td>
<td></td>
</tr>
<tr>
<td>c. Documentation</td>
<td></td>
</tr>
<tr>
<td>1. Internship</td>
<td></td>
</tr>
<tr>
<td>2. Client</td>
<td></td>
</tr>
<tr>
<td>3. Supervision</td>
<td></td>
</tr>
<tr>
<td>4. Hours</td>
<td></td>
</tr>
<tr>
<td>IV. Supervisor responsibilities</td>
<td>9</td>
</tr>
<tr>
<td>a. Clinical responsibilities</td>
<td></td>
</tr>
<tr>
<td>b. Professional responsibilities</td>
<td></td>
</tr>
<tr>
<td>c. Conducting supervision</td>
<td></td>
</tr>
<tr>
<td>1. Frequency</td>
<td></td>
</tr>
<tr>
<td>2. Types/Methods</td>
<td></td>
</tr>
<tr>
<td>d. Off-site supervision</td>
<td></td>
</tr>
<tr>
<td>e. Online supervision</td>
<td></td>
</tr>
<tr>
<td>V. Internship Evaluation</td>
<td>13</td>
</tr>
<tr>
<td>VI. AHTA Documents and Forms</td>
<td>13</td>
</tr>
</tbody>
</table>
Horticultural Therapy Internship Handbook

I. Statement of Purpose and Goals

The Horticultural Therapy Internship is designed to provide a background in the theory and application of horticultural therapy as a treatment modality for people of all ages, backgrounds, and abilities. The internship is an opportunity for the intern to serve in the role of clinician, educator, and technician gaining experience in both the therapeutic and horticultural aspects of the professional horticultural therapist.

These guidelines provide a definition of the role and responsibilities of the intern and the supervisor, identify the requirements of the internship, and outline the structure of the internship conducted in the horticultural therapy setting. Forms necessary to complete the internship are included in Section VI.

Goals:

- To develop a functional knowledge of horticultural therapy, its theory and application, and a perspective of how it fits into the overall treatment process.
- To understand how horticultural therapy is similar to, and unique from, other disciplines.
- To develop an understanding of the social, psychological, and physiological aspects of disability.
- To develop skills in forming assessments regarding client goals, interests, and abilities, and to use this assessment to develop a treatment plan, appropriate activities and adaptations.
- To develop effective communication and interpersonal skills with clients and staff.
- To develop initiative in organization of individual and group programs.
- To gain knowledge of administrative requirements affecting the functioning of an organization or department supporting a horticultural therapy program.
- To develop the basic skills in horticulture to effectively utilize plant materials and methods to facilitate horticultural therapy programming.
II. Policies

A. Supervisor Requirements

Horticultural therapy interns must be directly supervised by a registered horticultural therapist at the HTR or HTM level. The supervisor is required to be professionally registered with the American Horticultural Therapy Association (AHTA). A prospective internship supervisor who is professionally registered as a horticultural therapist in another country will be considered upon request to AHTA.

It is the responsibility of the student to establish that the supervisor is professionally registered and that the internship site meets the requirements established by AHTA.

B. Site Selection

It is the responsibility of the student to research a potential internship site, to contact the horticultural therapy intern supervisor. It is the intern’s responsibility to arrange a site visit and interview, and follow through on placement.

The American Horticultural Therapy Association recommends that an internship take place at one site with one supervisor. An internship may take place at up to two sites and an intern may be supervised by up to two supervisors over the course of the internship.

If an internship is associated with a public garden and/or outreach program where the horticultural therapy programming takes place off-site, the public garden and/or outreach program is considered the primary site. The primary site must meet all criteria listed under Section III.A.

C. Internship Application

The AHTA Internship Application with On-site/Off-site Supervision serves as documentation of the internship and site. Application to a specific site is the responsibility of the intern. The intern may use an application provided by the internship site, or if there is no application process at the site, the AHTA Internship Application with On-site/Off-site Supervision should be completed. It is the intern’s responsibility to complete this form and provide the supervisor with a copy.

Internships supervised off-site. In the event the supervisor is off-site, it is the responsibility of the student to identify an on-site professional as a contact. The intern should complete the AHTA Internship Application documenting the on-site contact and provide the supervisor with a copy of the application form.
Internships supervised online. Internships with online supervision must be preapproved by AHTA. Students who meet the eligibility criteria for online supervision are required to complete the *AHTA Internship Application with Online Supervision* and submit the completed to AHTA for approval prior to beginning the internship.

The application must 1) document how the intern meets the eligibility requirements and 2) document the agreement between the intern, the on-site supervisor, and the internship supervisor. The internship site must:

- meet all AHTA standards and requirements.
- have a credentialed healthcare professional designated as an approved on-site supervisor who will serve as the liaison between the intern and the AHTA internship supervisor.

The *AHTA Internship Application with Online Supervision* and instructions are available in the Education/Internships Section of the AHTA website. The student eligibility criteria are identified in Section II.F.

D. Pre-requisite Requirement

A student is required to complete the Introduction to Horticultural Therapy course and additional required horticultural therapy course, a total of 6 semester credits, prior to beginning an internship.

E. Duration and Hours of Internship

The duration of an internship is 480 hours. Once an internship begins it must be completed within a minimum of 3 months and a maximum of 2 years totaling 480 hours.

Within the required 480 hours, at least 60% of intern hours must be in direct client services, and up to 40% may be a combination of both non-direct client and horticulture services. A suggested guideline is:

- 60% direct client services
- 15% non-direct client services
- 25% horticulture services

Recognizing that sites offer different opportunities, hours between non-direct client services and horticulture services may be adjusted. Documentation of hours is explained more thoroughly in Section III.C.

F. Professional Conduct

As a contributing member of the organization, interns will be expected to assume the role of a professional. The intern will have specific responsibilities to the clients, the facility and the department.
Interns will be directly responsible to the supervisor. Information, difficulties or questions relating to clients, staff, and/or performance should be directed to the supervisor.

Interns are expected to adhere to the AHTA Code of Ethics. Interns are expected to comply with the current Privacy Rule of the Health Insurance Portability and Accountability Act (HIPAA) provisions. HIPAA policy and information should be available through the internship facility.

G. Supervision of Internship

Students electing to undertake an internship after completing 6 semester credits are required to be directly supervised on-site by an HTR or HTM.

**Off-site:** If an intern is supervised off-site, the intern must have completed 9 semester credits in horticultural therapy before starting the internship.

**Online:** Students seeking online supervision must meet the following eligibility requirements:

- An intern is unable to obtain an AHTA internship supervisor within a geographic area.
- An intern cannot relocate and/or travel to a site where he/she can be supervised by an AHTA internship supervisor.
- An intern must have completed all 12 semester credits in plant science, 12 semester credits in human science, and 9 semester credits in horticultural therapy coursework must be completed prior to the start of an internship. Refer to Section II.C. of the AHTA Professional Registration Policies and Procedures for a list of required coursework.

Other limitations that prevent an intern from securing in-person supervision will be considered on an individual basis.

It is expected that the intern and the supervisor meet on a regular basis. The supervision meeting is an opportunity for the intern and supervisor to exchange information, discuss clients, and review horticultural therapy services. The supervisor is responsible for scheduling supervision. It is the intern’s responsibility to document the supervision meeting. Supervision is explained more thoroughly in Section IV.

H. Evaluation of Internship

Interns will be evaluated on an ongoing basis. The intern will work with his/her supervisor to complete the initial AHTA Internship Goals and Objectives which will be used in subsequent evaluations. The AHTA Internship Performance Report serves as the tool for evaluating the intern’s performance in the required program content areas.
and to track progress on the intern’s identified goals. It is recommended that the *AHTA Internship Performance Report* be completed after 240 hours and must be completed at the end of the 480 hours.

All internship performance and projects are to be evaluated using the *AHTA Internship Performance Report* regardless of the duration of the hours with one or two supervisors. It is the responsibility of the intern to ensure that documentation following these guidelines is complete.

It is the intern’s responsibility to turn in the final performance evaluation(s) with the AHTA professional registration application packet. Evaluations are explained more thoroughly in Section V.

### I. Termination of Internship

An intern is expected to conduct his/her self professionally at all times. A supervisor may terminate an intern at will for behaviors deemed unprofessional and/or unethical. In situations where the safety of the intern, or the client, is jeopardized by the intern, or where a situation may result in the unprofessional representation of the site on behalf of the intern, the supervisor has the right to terminate the intern at will.

It is the responsibility of the supervisor to make all attempts to resolve the situation. Situations requiring the action of termination should be thoroughly documented by both the intern and the supervisor.

An intern may resign from his/her internship at any time. The intern should notify the supervisor in writing with the effective date of resignation.

### J. AHTA Registration

It is the intern’s responsibility to complete all internship requirements set forth by AHTA. It is the intern’s responsibility to submit all documentation and forms identified in the AHTA registration application. Visit the AHTA website, www.ahta.org, for complete information about professional registration and a registration application.
III. Procedures

A. Program Content

1. Site Orientation
   a. Review of general policy and procedures
   b. Review of specific horticultural therapy policy and procedures
   c. Review of general safety procedures
   d. Review of client confidentiality requirements
   e. Orientation to clinical disciplines and operations
   f. Orientation to basic terminology needed to facilitate communication with other clinical staff

2. Horticulture as a Treatment Modality
   a. Develop client treatment plans
   b. Develop program activities
   c. Become knowledgeable of activity adaptations and modifications to include adaptive garden design, techniques and tools.
   d. Participate in interdisciplinary collaboration

3. Basic Horticultural Skills
   a. Basic plant processes
   b. Plant pest and disease management
   c. Propagation techniques
   d. Useful plants for HT programs

4. Professional Growth and Service
   a. Orientation to the American Horticultural Therapy Association
   b. Orientation to the AHTA professional registration process
   c. Orientation for personal growth through workshops, conferences, committee work and networking opportunities

5. Student Responsibilities
   a. To attend departmental meetings
   b. To be responsible for carrying out assigned programs and activities
   c. To complete all documentation required by the site
   d. To plan and conduct client sessions
   e. To develop and implement a short term project conducting a client session
   f. To develop and implement a long term project/program integrating horticultural therapy and its application to populations served
   g. To research and write a client case study
   h. To keep a personal log to be turned in to the supervising horticultural therapist for review at the midpoint and upon completion of the internship
   i. To complete all documentation required by AHTA for completion of internship
B. Projects

Interns will be required to complete two projects and a case study during the course of the 480 hour internship.

1. **Short-term project.** The short-term project is to be completed at one site and is a client-focused intervention. The intern is responsible for planning, organizing, and executing the session under the supervision of his/her direct supervisor. The plan should include an assessment of materials, time, budget, disability and goals. Other more specific factors will be determined in accordance with the nature of the project. The intern should work with the supervisor to identify the client activity. The intern is expected to write up the activity plan and submit it to the supervisor upon completion of the project.

2. **Long-term project.** The long-term project is to be completed at one site and should benefit the site in some lasting manner. Long term projects generally involve information gathering, program development, or research of some nature integrating horticultural therapy and its application to the people served by the program. The intern should work with the supervisor to identify a long term project and to allocate time in the intern’s schedule for the project. The intern is expected to write up a summary of the project with a description of how the project will benefit the site and submit it to the supervisor upon completion of the project.

3. **Case Study.** The case study is to be completed at one site. The case study is a detailed description of an individual client who has participated in the horticultural therapy program for the duration of the internship. The case study should include personal data, horticultural therapy group activity information, identified goals and objectives, and outcome results. It is suggested the intern use the *AHTA Case Study Guide* to complete this project. The intern is encouraged to discuss the case study with the supervisor during supervision. The case study should be developed over the course of the internship, completed, and submitted to the supervisor at the end of the internship before his/her final evaluation.

C. Documentation

1. **Internship.** The intern is required to keep a personal log with a record of daily activities to include client interventions, meetings, horticultural activities, supervision and documentation. In the event that the intern is supervised by an off-site supervisor, the personal log should document site visits and methods of supervision. In the event the intern is supervised online, the personal log should document the methods of supervision. The student is responsible for turning in the personal log at the midpoint for review and at the end of the internship.
2. **Client.** When documenting on horticultural therapy interventions, it is important to document client information. Client information should include diagnosis, goals, activities, and treatment outcomes. This information can be integrated into the personal log.

3. **Supervision.** The intern should write up a summary of the supervision meetings to include issues presented and discussed, and feedback from the internship supervisor. There is no required form to document supervision meetings and this information is not required to be turned in. Rather it is suggested that the intern use this information for personal development.

4. **Hours.** It is the responsibility of the intern to record his/her internship hours. The intern is responsible for submitting the *AHTA Documentation of Hours* form to the supervisor upon completion of the internship. The following is a description of what is counted as internship hours in each category:

**Direct client services**
- Direct client hours – hours providing horticultural therapy services to clients in a group or one-to-one.
- Documentation – documentation specific to a client activity, example progress notes, treatment plan.
- Program planning/preparation – planning and preparation for specific client interventions and/or groups.
- Client meeting – client assessment, multi-disciplinary team meetings, case conference.
- Supervision meetings – observed client groups and/or one-to-ones and supervision hours.
- Non-supervision meetings – when intern observes other disciplines conducting client groups.

**Non-direct client services**
- Non-client meetings – staff meetings, committee meetings, in-services.
- Special projects – both short and long-term projects and case study hours. Also include hours intern provides services to staff such as an in-service about the horticultural therapy program.
- Registration preparation – preparation of materials for submission of the AHTA professional registration application packet.

**Horticulture services**
- Garden, landscape, or greenhouse – direct preparation, planning, design, construction, implementation of horticulture structures and/or facilities.
- Horticulture education – educational opportunities related to horticulture topics, plants, techniques, pest management.
- Maintenance – direct plant, garden, greenhouse, landscape maintenance, and pest management.
- Program supply and material – ordering supplies and materials.
IV. Supervisor Responsibilities

The internship supervisor is responsible for providing the intern with the opportunity to meet the goals and requirements of internship. The internship supervisor is an integral part of the horticultural therapy internship serving as a mentor, educator, and role-model to facilitate the personal and professional growth of the intern. All supervisors are expected to adhere to the *AHTA Code of Ethics*.

A. Clinical Responsibilities

It is a supervisor’s role to teach, model, and demonstrate professional clinical and safety skills to an intern in the context of delivering horticultural therapy services. A supervisor is responsible for assisting an intern to develop counseling and communication skills to work effectively with the clients. Specific counseling skills such as empathy, active listening, summarization, and positive regard are all suggested counseling skills for an intern to develop.

It is the supervisor’s role to recognize strengths and weaknesses of the intern and to develop appropriate goals and objectives to foster future professional competency. It is the supervisor’s responsibility to identify the intern’s caseload. The supervisor is expected to assist the intern in developing the appropriate skills to perform task analysis, develop treatment plans, and deliver horticultural therapy services designed to meet the specific client treatment goals. The supervisor is responsible for ensuring that treatment goals are appropriate to the client served.

The supervisor should demonstrate skills in adapting horticultural activities to meet the specific needs of the client served. The supervisor should discuss aspects of disability and the process of identifying appropriate adaptations.

It is the supervisor’s role to maintain professional boundaries with the intern at all times. The supervisor is expected to provide constructive feedback when necessary and demonstrate appropriate therapeutic boundaries when working with clients.

**Termination of an intern.** Supervisors are responsible for anticipating serious problems affecting an intern’s ability to function in the capacity as an intern and to deliver horticultural therapy services. If the supervisor recognizes areas of concern, the supervisor must promptly communicate with the intern and make all efforts to solve the situation with the intern. In situations where a supervisor feels that an intern is acting in an unprofessional or unethical manner, it is the responsibility of the supervisor to discuss this with the intern and make all attempts to resolve the situation.

The supervisor has the right to terminate the intern at will. In the event the supervisor is off-site, the supervisor should communicate with the identified contact person at the internship site to discuss possible solutions to the situation. The off-site or online
supervisor has the right to refuse completion of the internship and recommend termination of the intern to the site. All situations requiring the action of termination should be thoroughly documented.

B. Professional Responsibilities

The supervisor is responsible for introducing the intern to the facility and its structure. The supervisor should provide the intern with the opportunity to attend orientation, review general safety procedures, review client confidentiality requirements, and orient the intern to the policies and procedures of the facility.

The supervisor is responsible for providing the intern opportunities to learn about the horticultural components of the program. These may include, but are not limited to, interior plants, outdoor gardening, landscaping, and greenhouse production. If the intern requires, the supervisor must provide opportunities for the intern to learn basic horticultural skills such as propagation and pest management.

It is the supervisor’s role to assist the intern in developing the horticulture knowledge and skills to identify appropriate plant selection for safe horticultural therapy programming. The supervisor should introduce the intern to resources for adaptive tools and equipment.

The supervisor is responsible for providing all materials, supplies, and equipment necessary to conduct horticultural therapy activities. The supervisor must allow time in the intern’s schedule to prepare for, conduct, and cleanup work areas.

It is the supervisor’s responsibility to work with the intern to identify a short-term project and a long-term project. In addition, the supervisor is expected to work with the intern to complete the required case study. The supervisor is responsible for ensuring that the intern is familiar with the AHTA, its professional registration process, and professional training opportunities.

C. Conducting Supervision

Supervision must be documented. It is the responsibility of the intern to document the meeting and record the hours. The supervisor should record the supervision hours to verify the intern’s record of hours.

1. Frequency. It is recommended that the supervisor and the intern meet on a regular basis. The recommendation for a full-time intern is weekly. The recommendation for a part-time intern is upon the completion of every 40 hour cycle. The supervisor is expected to determine the appropriate amount of time to allot for supervision.
The delivery of supervision services may depend on several factors:

- Availability of intern
- Number of clients served
- Skill level of intern
- Type of setting
- On-site, off-site, or online supervision

2. **Types/Methods.** Methods of supervision may take the form of: 1) personal, one-to-one meeting, 2) direct observation of horticultural therapy groups, 3) teaching, 4) co-facilitation, and 5) non-direct communication.

Examples of non-direct communication include phone conversations, written correspondence, email, and visual/electronic communication (Skype, Facetime, video chat, Meetup, and other related technology are acceptable means of communication).

Video is not accepted in lieu of the required written case study, long-term, and/or short-term projects.

Client confidentiality must be ensured through the use secure software. It is the responsibility of the intern to coordinate confidential transmission of all documents.

**D. Off-site Supervision**

The off-site supervisor is expected to provide supervision through one of the above stated methods of communication. The off-site supervisor should provide supervision every 40 hours or, at a minimum, once a month. It is the responsibility of the intern to document the meeting and record the hours. The off-site supervisor should record the supervision hours to verify the intern’s record of hours.

The off-site supervisor is required to provide a minimum of three on-site visits to observe the intern: an initial visitation/evaluation, at the midpoint of the internship after 240 hours have been completed, and a final site visit. Visitations must be documented and a copy provided to the intern.

When possible, the off-site supervisor is expected to perform all stated duties and responsibilities of an on-site supervisor. The off-site supervisor is encouraged to communicate with the contact person at the internship site to facilitate the intern’s learning experience and to coordinate the delivery of horticultural therapy services necessary to achieve the stated goals and objectives of the internship.


E. Online Supervision

In-person supervision is preferred. In cases where in-person supervision is not available, AHTA will consider online supervision to meet the requirements for supervision by a professionally registered horticultural therapist with the American Horticultural Therapy Association.

Internships supervised by an online supervisor must be preapproved by AHTA. The application process is outlined in Section II.C. The online supervisor is required to complete the application with the student and request verification from the student of AHTA approval before beginning supervision with the intern.

Intern eligibility requirements are identified in Section II.F. It is the Online Supervisor’s responsibility to ensure the student meets the academic requirements as required by AHTA.

The online supervisor is expected to provide supervision through one of the above stated methods of communication. The supervisor should provide supervision every 40 hours or, at a minimum, once a month. It is the responsibility of the intern to document the meeting and record the hours. The supervisor should record the supervision hours to verify the intern’s record of hours.

When possible, the online supervisor is expected to perform all stated duties and responsibilities of an on-site supervisor. The online supervisor is required to communicate with the contact person at the internship site to facilitate the intern’s learning experience and to coordinate the delivery of horticultural therapy services necessary to achieve the stated goals and objectives of the internship.

The online supervisor is required to coordinate the internship evaluation with the approved on-site supervisor.
V. Internship Evaluation

A. Evaluation, Forms and Schedule

The AHTA Internship Goals and Objectives serves as the tool to establish the base-line performance level of the intern and to identify specific areas to address. This form should be completed with the intern at the beginning of the internship. Recognizing the various education, skills, and experience that interns bring to his/her internship, an intern may or may not need to focus on each area identified in the program content. It is the responsibility of the supervisor to work collaboratively with the intern to identify and develop the goals and objectives along with the expected timeline for completion.

The AHTA Horticultural Therapy Internship Performance Report serves as a tool for evaluating the intern’s performance in program content areas, projects, and to progress on his/her identified goals. It is suggested to complete the Internship Performance Report after 240 hours and must be completed at the end of the 480 hours.

It is recommended that both the supervisor and intern complete the first performance report separately after 240 hours have been completed. This gives the intern the opportunity to self-evaluate and to focus on accomplishments to date. The supervisor and the intern should then discuss any differences which appear in the rating.

At the conclusion of the internship program, the intern and the supervisor will meet to evaluate the internship experience and complete the final performance evaluation. This meeting is an opportunity to evaluate the intern’s performance as well as the success of the internship program. Final evaluations must be fully documented and state the following; the number of internship hours served, goals successfully mastered, areas for improvement, and overall student assessment.

If an intern is completing an academic internship, the supervisor will evaluate the intern using the school’s grading scale. In the event that the student is not completing an academic internship, the supervisor will evaluate whether the intern has mastered or not mastered the internship requirements.

Internships with online supervision: The approved onsite supervisor serves as the liaison between the intern and the AHTA internship supervisor. The approved onsite supervisor must complete the internship performance report.

VI. AHTA Documents and Forms

a. Internship Application with On-site/Off-site Supervision
b. Internship Application with Online Supervision
c. Internship Goals and Objectives
d. Internship Performance Report
e. Documentation of Hours
f. Case Study outline
Internship Application with On-site/Off-site Supervision

Intern:
Name __________________________________________________________
Address __________________________________________________________
City __________________ State __________ Zip __________
Phone ___________________________ E-Mail ____________________________
Internship start date: ___________ Projected end date: ____________
School(s) attending/attended: ______________________________________
________________________________________________________________________
________________________________________________________________________

Site:
Facility Name _________________________________________________________
Address _____________________________________________________________
City __________________ State __________ Zip __________
Phone ___________________________ E-Mail ____________________________
Type of Facility _______________________________________________________

Supervisor:
Is there an HTR/HTM on site:   Yes _____   No ______
Name of HTR/HTM supervisor ___________________________________________
Address _____________________________________________________________
City __________________ State __________ Zip __________
Phone ___________________________ E-Mail ____________________________

By signing this form, I agree to the policies and procedures stated in the AHTA
Internship Handbook.

Signature of intern: ___________________________ Date: ________________

By signing this form, I agree to be the HTR/HTM supervisor for the intern listed on this
form.

Signature of HTR/HTM supervisor: ___________________________ Date: ________________
Instructions for Internship Application with Online Supervision

Online supervision must be pre-approved by AHTA. Interns must complete this form and submit to AHTA prior to beginning an internship with online supervision.

To submit the Internship Application with Online Supervision:

1. Download and print the Internship Application with Online Supervision.
2. Complete the form and fill out all sections completely.
3. Complete the Verification of Coursework form.
4. Scan the Internship Application with Online Supervision and submit the completed form by email to the AHTA office.

Note: The form must have the required three signatures:

1. Your signature as the intern
2. The HTR/HTM supervisor
3. The onsite supervisor

* Approval of online supervision is not intended to replace the professional registration review process.
Internship Application with Online Supervision

Intern:
Name ____________________________________________________________
Address __________________________________________________________
City ___________________________ State ________________ Zip __________
Phone _________________________ E-Mail _____________________________

Internship start date: ___________________ Projected end date: ______________

Internship Site Information:
Facility Name _______________________________________________________
Address ___________________________________________________________
City ___________________________ State ________________ Zip __________
Phone _________________________ E-Mail _____________________________
Type of Facility _____________________________________________________

Online supervisor:
Name of HTR/HTM supervisor ___________________________________________
Address ___________________________________________________________
City ___________________________ State ________________ Zip __________
Phone _________________________ E-Mail _____________________________

Onsite supervisor:
Name of onsite supervisor _____________________________________________
Onsite supervisor professional credentials _______________________________
Address ___________________________________________________________
City ___________________________ State ________________ Zip __________
Phone _________________________ E-Mail _____________________________

By signing this form, I agree to the policies and procedures stated in the AHTA Internship Handbook.
Signature of intern: _______________________________ Date: ______________

By signing this form, I agree to be the online HTR/HTM supervisor for the intern listed on this form.
Signature of HTR/HTM supervisor: ______________________ Date: ______________

By signing this form, I agree to be the onsite supervisor for the intern listed on this form.
Signature of onsite supervisor: ______________________ Date: ______________
Verification of Eligibility:

Interns must meet the following eligibility requirements:

1. An intern is unable to obtain an AHTA internship supervisor within a geographic area.

2. An intern cannot relocate and/or travel to a site where he/she can be supervised by an AHTA internship supervisor.

3. An intern must have completed all 12 semester credits in plant science, 12 semester credits in human science, and 9 semester credits in horticultural therapy coursework must be completed prior to the start of an internship.

Please provide a brief explanation of how you meet eligibility requirement #1 and #2:

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

Please submit the following information listing coursework completed in fulfillment of eligibility requirement #3 noted above. Coursework must be aligned with the requirements for professional registration as identified in the *AHTA Policies and Procedures for Professional Registration*. Approval of coursework to meet the requirements for online supervision is not intended to replace the professional registration review process. Attach additional pages if necessary to document required coursework. Official transcripts are not required.
Coursework:

Horticulture (12 credits required):

College or University ____________________________________________ Year course completed ______
Course Title ____________________________________________ Semester Credits ____________
Core Course/Topic Area **Introduction to Horticulture** __________ Grade C- or above? Yes ___ No ___

College or University ____________________________________________ Year course completed ______
Course Title ____________________________________________ Semester Credits ____________
Core Course/Topic Area **Plant Propagation** __________ Grade C- or above? Yes ___ No ___

College or University ____________________________________________ Year course completed ______
Course Title ____________________________________________ Semester Credits ____________
Core Course/Topic Area **Pest and Disease Plant Management** __________ Grade C- or above? Yes ___ No ___

College or University ____________________________________________ Year course completed ______
Course Title ____________________________________________ Semester Credits ____________
Approved Elective/Topic Area ____________________________ Grade C- or above? Yes ___ No ___

College or University ____________________________________________ Year course completed ______
Course Title ____________________________________________ Semester credits ____________
Approved Elective/Topic Area ____________________________ Grade C- or above? Yes ___ No ___
Human Science (12 credits required):

College or University ________________________________ Year course completed ______
Course Title ________________________________ Semester Credits __________
Core Course/Topic Area **General Psychology** Grade C- or above? Yes ___ No ___

College or University ________________________________ Year course completed ______
Course Title ________________________________ Semester Credits __________
Core Course/Topic Area **Abnormal Psychology** Grade C- or above? Yes ___ No ___

College or University ________________________________ Year course completed ______
Course Title ________________________________ Semester Credits __________
Core Course/Topic Area **Human Lifespan Development** Grade C- or above? Yes ___ No ___

College or University ________________________________ Year course completed ______
Course Title ________________________________ Semester Credits __________
Approved Elective/Topic Area __________________________ Grade C- or above? Yes ___ No ___

College or University ________________________________ Year course completed ______
Course Title ________________________________ Semester credits __________
Approved Elective/Topic Area __________________________ Grade C- or above? Yes ___ No ___
Horticultural Therapy (9 credits required):

College or University ________________________ Year course completed _____
Course Title _________________________________ Semester Credits _________
Core Course/Topic Area _______________________ Grade C- or above? Yes ___ No ___

College or University ________________________ Year course completed _____
Course Title _________________________________ Semester Credits _________
Core Course/Topic Area _______________________ Grade C- or above? Yes ___ No ___

College or University ________________________ Year course completed _____
Course Title _________________________________ Semester Credits _________
Core Course/Topic Area _______________________ Grade C- or above? Yes ___ No ___

College or University ________________________ Year course completed _____
Course Title _________________________________ Semester Credits _________
Core Course/Topic Area _______________________ Grade C- or above? Yes ___ No ___

College or University ________________________ Year course completed _____
Course Title _________________________________ Semester Credits _________
Core Course/Topic Area _______________________ Grade C- or above? Yes ___ No ___
# Internship Goals and Objectives

Intern name: ______________________________________________________________

Internship facility: ________________________________________________________

Internship supervisor: ________________________________________________________________________

Internship start date: ________________________________________________________________________

<table>
<thead>
<tr>
<th>Goal 1:</th>
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</thead>
<tbody>
<tr>
<td>Objectives:</td>
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<td></td>
</tr>
<tr>
<td>Goal 2:</td>
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<tr>
<td>Objectives:</td>
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<td></td>
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</tbody>
</table>
Internship Goals and Objectives continued

<table>
<thead>
<tr>
<th>Goal 3:</th>
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</thead>
</table>

<table>
<thead>
<tr>
<th>Objectives:</th>
<th>Date met:</th>
</tr>
</thead>
</table>

___________________________________________________

Intern

___________________________

Date

Supervisor

___________________________

Date
Horticultural Therapy Internship Performance Report

Overview:

The American Horticultural Therapy Association (AHTA) Internship Performance Report (IPR) is designed to evaluate the performance of the intern and completion of required projects. The IPR provides for narrative, qualitative, and quantitative measurement of student/intern performance and skills, including direct client services, non-direct client services, and horticultural services.

Instructions:

The IPR is to be completed by the supervisor at the end-point of the internship. Interns and supervisors are advised to also use this document at the mid-point, as well as on an interim basis when problems and/or changes in plans arise.

The IPR completed form(s) are to be signed and dated by the intern/student and the internship supervisor. One original copy of the final IPR form (bearing original signatures of the parties) must be submitted by the student/intern at the time of application to the AHTA for professional registration.
Horticultural Therapy Internship Performance Report

Name of Intern ___________________________________________________________
Name of Facility __________________________________________________________
Intern's Address___________________________________________________________
City __________________________ State ________Zip __________
Home Phone _____________________ Cell/other ______________________
Email ________________________________________________________________
Name of Supervisor________________________________________________________
Supervisor's Address_____________________________________________________
City __________________________ State ________Zip __________
Business Phone __________________________
E-mail ________________________________________________________________
Supervisor's Professional Registration Status: HTR ____ or HTM ____
Supervision was on-site ____ or off-site/distance____

Internship Hours:

Direct Client Services _____________%
Non-Direct Client Services ____________%
Horticulture Services _____________%

Total number of hours completed __________

Overall rating of intern: Successfully mastered ____ Not mastered ______

Acknowledgement of Review of this Internship Performance Report for the time period starting _____________ to ____________ by all Parties as signed below:

Intern __________________________________ Date __________________
Internship Supervisor ____________________________ Date __________________
Please use the following scale to rate the intern on each of the goals and projects stated in the *AHTA Internship Handbook*.
- M = Mastered - Mastery level competency
- NM = Not Mastered - Unsatisfactory performance
- NA = No opportunity to observe or practice

<table>
<thead>
<tr>
<th>Goal</th>
<th>M</th>
<th>NM</th>
<th>NA</th>
<th>Observations/Comments:</th>
</tr>
</thead>
<tbody>
<tr>
<td>To develop a functional knowledge of horticultural therapy, its theory and application, and a perspective of how it fits into the overall treatment process.</td>
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<tr>
<td>To understand how horticultural therapy is similar to, and unique from, other disciplines.</td>
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<tr>
<td>To develop an understanding of the social, psychological, and physiological aspects of disability.</td>
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<td>To develop skills in forming assessments regarding client goals, interests, and abilities, and to use this assessment to develop a treatment plan, appropriate activities and adaptations.</td>
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<td>To develop effective communication and interpersonal skills with clients and staff.</td>
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<tr>
<td>To develop initiative in organization of individual and group programs.</td>
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<tr>
<td>To gain knowledge of administrative requirements affecting the functioning of an organization or department supporting a horticultural therapy program.</td>
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<tr>
<td>To develop the basic skills in horticulture to effectively utilize plant materials and methods to facilitate horticultural therapy programming.</td>
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</tbody>
</table>
Please use the following scale to rate the intern on each of the projects stated in the *AHTA Internship Handbook*.

Yes = Complete  
No = Incomplete  
NA = No opportunity to observe or practice

Attach a complete description of the project and/or case study, demonstrating how it met each of the requirements detailed in the *AHTA Horticultural Therapy Internship Handbook*.

<table>
<thead>
<tr>
<th>Projects:</th>
<th>Y</th>
<th>N</th>
<th>NA</th>
<th>Observations/Comments:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Develop and implement a <strong>short-term project</strong> regarding conducting a client session.</td>
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<tr>
<td>Develop and implement a <strong>long-term project</strong>.</td>
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<tr>
<td>Research and write a client <strong>case study</strong>.</td>
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</tbody>
</table>

**Site Visits (Off-site/distance supervision only):** Please list dates and locations of at least three site visits by supervisor (face-to-face observations of the intern in practice).

1. Date: __________ Location: __________________________________________
2. Date: __________ Location: __________________________________________
3. Date: __________ Location: __________________________________________
4. Date: __________ Location: __________________________________________
5. Date: __________ Location: __________________________________________

**Additional Comments:**

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
AHTA Internship Hours

Direct client services:

1. Direct client hours: __________________________
2. Documentation: _____________________________
3. Program planning/preparation: ________________
4. Client meeting: _____________________________
5. Supervision meetings: _______________________
6. Non-supervision meeting: ____________________

Total: ____________

Non-direct client services:

1. Non-client meetings: _________________________
2. Special projects: ____________________________
3. In-service: _________________________________
4. Registration preparation: _____________________

Total: ____________

Horticulture services:

1. Garden, landscape, or greenhouse: ____________
2. Horticulture education: _______________________
3. Maintenance: ________________________________
4. Program supply and material: _________________

Total: ____________

Total accumulated hours: ____________

__________________________________________
Intern Date

__________________________________________
Supervisor Date
AHTA Case Study Outline

I. Client/Patient information: a thorough description including age, gender, ethnicity, physical characteristics, other identifying information (interns are cautioned to avoid use of last name and adhere to HIPAA policies). Include here how he/she presents at the first meeting(s), and/or the general background, how he/she functions in environment.

II. History of Case: include information on who is the client/patient, what is he/she, where does he/she live, work, play, etc. How does the client/patient look, sound, move? Does the client/patient make his/her needs/wants known? What are his/her social and family relations, work and personal history; etc. Do not yet discuss the problem or illness in this section.

III. Problem(s)/Symptoms & Diagnosis: a thorough discussion of the individual's problem, or a set of symptoms and a diagnosis.

IV. Prognosis/Discharge potential: describe the potential outcomes for the client/patient.

V. Treatment Plan: introductory description including overview of horticultural therapy intervention. Do not yet discuss how you or others applied the therapy.

   (A) PROBLEM ADDRESSED--a description of the identified problem(s) with a stated long-term and short-term goal. Include here the specific treatment plan.

   (B) ASSESSMENT—a description of how the client/patient was assessed for horticultural therapy services.

   (C) TREATMENT PROCEDURES--a description of how the treatment was given and/or what happened during (not after) the process of treatment. Include here the evaluation procedures/process.

   (C) RESULT/PROGNOSIS—a description of the results after the primary treatment cycle was completed, and/or what the prognosis--the long-range expectations--is. Include here an example of the evaluation procedure/process.

VI. Conclusion: a very brief conclusion reiterating the first name of the client/patient, his/her problem or illness, the treatment given, and the result.

Note: Do not tell a story in a narrative form. Formalize the information into subject categories and subcategories in the order of the outline.