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RESEARCH ARTICLE

The impact of the COVID-19 pandemic on school psychology internship outcomes

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Abstract

The Ohio Internship Program in School Psychology was forced to adapt abruptly to the changing circumstances brought on by the novel coronavirus (COVID-19) pandemic beginning in March 2020. The purpose of this study was to determine the extent to which the school psychology internship outcomes were negatively affected by the COVID-19 pandemic in terms of supervisors' ratings of intern competencies, the number of students served by interns, and the outcomes of academic and behavior interventions supported by interns. Findings of the annual evaluation of the Ohio Internship Program in School Psychology for the school year directly affected by the pandemic (2020–2021) were compared to the findings for the year the pandemic began (2019–2020) and the 3 years before the start of the pandemic. The results provide evidence of gains in professional competencies and positive outcomes for students served by interns. The results also highlight racial disparities in the counts of students provided school psychological services during the pandemic. Implications for school psychology graduate preparation and practice are discussed.

1 | INTRODUCTION

The school psychology internship is a culminating, comprehensive field experience that ensures graduate students have the opportunity to integrate and apply professional knowledge and skill acquired through coursework and practica in preparation for independent practice as a school psychologist (National Association of School Psychologists, 2020a). Throughout the supervised internship year, interns are expected to enhance their competencies in providing student-level and systems-level school psychological services consistent with the National Association of School Psychologists' *Model for Comprehensive and Integrated School Psychological Services* (NASP, 2020a).

1.1 | Ohio Internship Program in School Psychology

Ohio has a significant history of supporting the training of school psychologists. For more than 50 years, Ohio has provided state funding for internships through the Ohio Department of Education (ODE) Office for Exceptional Children to school districts that meet criteria established in the *Ohio Internship in School Psychology Manual* ([X]DE, 2015). Oversight and coordination of the Ohio Internship Program in School Psychology involves a collaboration among ODE's Office for Exceptional Children and members of the Inter-University Council for School Psychology Faculty, a group comprised of faculty from all NASP–approved school psychology programs in Ohio. School psychology internships within the Ohio Internship Program in School Psychology are designed to be consistent with the National Association of School Psychologists (2020b) *Standards for Graduate Preparation of School Psychologists* reflecting the best practice standards of the school psychology profession. In particular, the NASP *Standards* emphasize the need for professional accountability for outcomes in that school psychologists deliver a comprehensive range of professional practices that result in "direct, measurable outcomes for children, families, schools and/or other consumers" (National Association of School Psychologists, 2020b). Ohio's state-funded internship program has been highlighted as a model for others to follow given its commitment to providing a salary for interns, graduate program collaboration, and accountability for internship outcomes (Prus et al., 2014).

1.2 | Evaluation of the Ohio Internship Program in School Psychology

The emphasis on accountability for comprehensive school psychological services led to the development of a model of the evaluation of the statewide internship experience with regard to outcomes for schools and students (Morrison et al., 2009, 2011). Using a case study approach (Morrison, 2013), outcomes of academic and behavior interventions supported by interns are used to evaluate the collective impact of school psychological services provided by interns across tiers of service delivery. The annual evaluation also examines interns' gains competencies, as rated by their field supervisors three times a year (fall, winter, and spring) and counts of students supported by interns across a multi-tiered system of supports framework. The Ohio Internship Program in School Psychology was just one of countless initiatives in K-12 education that needed to adapt abruptly to the changing circumstances precipitated by the novel coronavirus (COVID-19) pandemic.

1.3 | School systems' responses to the COVID-19 pandemic

In March 2020, Ohio was the first state within the United States to close all K-12 school buildings in an effort to mitigate the spread of COVID-19. Approximately 55.1 million students nationally were affected by school closures in the spring of 2020 (Education Week, 2020). Although states were generally consistent in their initial response of closing schools at the end of the 2019–2020 school year, decisions about how to best deliver instruction during the pandemic varied throughout the 2020–2021 school year (Grossmann et al., 2021). Across the country, local district leaders implemented widely divergent plans with some schools open for in-person instruction, others providing all remote instruction, and others offering hybrid plans that combined in-person and remote learning. Rural and suburban districts with smaller student populations, more ample classroom space, and greater capacity for in-person and hybrid instruction were more likely to provide in-person instruction, while urban schools with more crowded classrooms and limited resources were more likely to opt for remote learning. The pandemic and subsequent debates over school closure and reopening laid bare—and further exacerbated—socioeconomic inequities in the access to high-quality education.

1.4 | Impact of the pandemic on school psychological practice

The demands of physical distancing, health insecurity, financial hardship, and dramatically reduced access for families to school-based instruction, specialized instruction and behavioral health services, and social supports (i.e., school lunch, after-school care) created unprecedented challenges for school psychologists (Schaffer et al., 2021). School systems varied widely in their capacity to implement health and safety protocols while providing instruction, social-emotional and behavioral supports and services, and specially-designed instruction to students with disabilities. Student and teacher/staff absences due to illness or exposure to COVID-19 resulted in disruptions to learning in schools that provided in-person instruction. Opportunities for school psychologists to build relationships and engage in consultation with teachers and caregivers were reduced substantially due to social distancing guidelines and fatigue with video conferencing (Chafouleas & Iovino, 2021; Hilger et al., 2021). Many teachers experienced significant stress during the pandemic compounded by online teaching challenges and limited communication with colleagues (Baker et al., 2021; Pressley et al., 2021). School psychologists encountered obstacles to ensuring evidence-based academic and behavioral interventions were implemented with integrity despite abrupt transitions between in-person and virtual contexts (Fallon et al., 2022). Team decisions regarding whether a student had a disability were complicated by disruptions to instruction and limited access to evidence-based interventions implemented with fidelity. The administration and interpretation of psychoeducational assessments also posed challenges given the degree to which the assessments were administered in a context that differed from standardization (Farmer et al., 2021; Stifel et al., 2020).

1.5 | Impact of the pandemic on the school psychology internship

Throughout the COVID-19 pandemic, school psychology interns adapted school psychological practice alongside their supervisor in real-time during an emerging crisis. Interns balanced efforts to develop their professional competencies and meet the requirements for licensure with concerns for their own health and safety. Feedback regarding the intern's growth and progress was communicated via virtual meetings with field-based supervisors and university-based internship supervisors throughout the school year (Peterson et al., 2021). School psychology faculty trainers and field-based supervisors were faced with the challenge of exercising flexibility while maintaining the integrity of the training experience (Bell et al., 2020).

The *NASP COVID-19 Guidance for School Psychology Supervised Field Experiences for 2020–2021: Practica and Internship* (National Association of School Psychologists, 2020c) and other resources were developed in response to concerns regarding the quality and comprehensiveness of the school psychology supervised field experiences during the COVID-19 pandemic (Monahan et al., 2020). Kelly et al. (2021) created list of professional competencies by NASP Practice domain that could be targets for training or mentorship along with supports for their development as a result of compromises due to the COVID-19 pandemic. Despite all these efforts to address the shortcomings of the internship experience during the pandemic, the degree to which the school psychology internship was adversely impacted by restrictions during the COVID-19 remains both concerning and largely unknown (Peterson et al., 2021; Wolff et al., 2020).

1.6 | Purpose of the study

The purpose of this study was to determine the extent to which the school psychology internship outputs and outcomes were negatively affected by the COVID-19 pandemic. To this end, the findings of the annual evaluation of the Ohio Internship Program in School Psychology for the school year directly affected by the pandemic (2020–2021) compared to the year the pandemic began (2019–2020) and the three years before the COVID-19 pandemic. This study addressed the research questions:

1. To what degree were there changes in the attainment of intern competencies in the school year directly affected by the pandemic (2020–2021) relative to the year the pandemic began (2019–2020) and 3 years before the pandemic (2016–2017, 2017–2018, and 2018–2019)?
2. To what degree were there changes in the number of students provided school psychological services across the tiers for the school year directly affected by the pandemic (2020–2021) relative to the year the pandemic began (2019–2020) and 3 years before the pandemic (2016–2017, 2017–2018, and 2018–2019)?
3. To what degree were there changes in the outcomes of academic and behavior interventions supported by school psychology interns for the school year directly affected by the pandemic (2020–2021) relative to the year the pandemic began (2019–2020) and 3 years before the pandemic (2016–2017, 2017–2018, and 2018–2019)?

2 | METHOD

The annual evaluation of the Ohio Internship Program examines the outputs and outcomes of the state-funded internship program for the purposes of accountability. This study used descriptive research methods to examine the findings of the annual evaluation of the Ohio Internship Program in School Psychology for the 3 years before the emergence of the novel coronavirus (COVID-19), that is 2016–2017, 2017–2018, and the 2018–2019 school years and the year the pandemic began (2019–2020), with the evaluation findings for the school year directly affected by the pandemic (2020–2021).

2.1 | Sample

The sample included 101 graduate students who completed their internship as part of the Ohio Internship Program in School Psychology in 2020–2021. All but one of the interns were enrolled in one of nine NASP-Approved school psychology preparation programs in Ohio. One intern was enrolled in a NASP-Approved school psychology program outside of Ohio and agreed to the terms of the Ohio Internship Program with oversight provided by one of the nine Ohio-based graduate programs. The sample included 79 females (78.2%) and 22 males (21.8%). In terms of race/ethnicity, the majority of the interns were White, non-Hispanic (88.1%), followed by Black, non-Hispanic (7.9%). Interns who identified as Asian, Hispanic, or White/Arab together represented less than 4.0% of the sample.

All of the graduate students entering the Ohio Internship Program in School Psychology had been certified by their university program to be eligible for the Internship (e.g., completed all coursework and applied experience, demonstrated readiness for internship). The recommended interns apply to the Ohio Department of Education for approval for temporary licensure as a school psychologist before the start of their internship.

Interns in the sample were placed in 79 school districts or Educational Services Centers serving 34 counties across the state. The internship placements represented a variety of district demographic typologies (see Table 1). Approval to conduct this study using pre-existing data set was granted by the first author's Institutional Review Board.

2.2 | Measures

2.2.1 | Competency checklists

Each school psychology program adopted a competency checklist aligned with the NASP *Standards for Graduate Preparation of School Psychologists* (2020b) to assess individual intern's level of skill attainment. Field supervisors complete the competency checklist three times (fall, winter, and spring) during the internship year. The competency checklist is designed to provide formative and summative evaluation data on each intern's progress toward independent practice. Although each university had its own version of a competency checklist, all checklists were approved as part of the university's NASP approval process. The Internship Coordinator for each university program annually submitted their interns' field supervisors' ratings on the competency checklist for items corresponding to eight NASP Domains of School Psychology Education and Practice: (1.0) Data-Based Decision Making, (2.0) Consultation and Collaboration, (3.0) Academic Interventions and Instructional Supports, (4.0) Mental and Behavioral Health Services and Interventions, (5.0) School-wide Practices to Promote Learning, (6.0) School-wide Practices to Promote Safe and Supportive Schools, (7.0) Family, School, & Community Collaboration, and (8.0) Equitable Practices for Diverse Student Populations. A standard 4-point categorical rating scale was used across all nine graduate preparation programs, where 1 = Unsatisfactory/Not proficient, 2 = Developing/Novice, 3 = Satisfactory/Proficient, and 4 = Mastery/Highly Proficient.

2.2.2 | Service delivery across the tiers

Each intern documented the number of students for whom they provided school psychological services for each tier in a multi-tiered system of supports (MTSS) framework: (a) Tier 1: universal supports/services,

TABLE 1 District demographics of internship placements, 2020–2021

District demographic typology	Percentage of intern cohort
Rural—High Student Poverty and Small Student Population	6.9%
Rural—Average Student Poverty and Very Small Student Population	5.0%
Small Town—Low Student Poverty and Small Student Population	6.9%
Small Town—High Student Poverty and Average Student Population Size	8.9%
Suburban—Low Student Poverty and Average Student Population Size	20.8%
Suburban—Very Low Student Poverty and Large Student Population	27.7%
Urban—High Student Poverty and Average Student Population	8.9%
Urban—Very High Student Poverty and Very Large Student Population	14.9%

(b) Tier 2: targeted intervention, and (c) Tier 3: intensive, individual intervention. Tier 1 services included those supporting effective system practices (school-wide and class-wide), such as assisting with universal reading screening, serving on decision-making teams to plan effective core practices such as Positive Behavior Interventions and Supports, or consulting with a teacher on classwide behavior support. Tier 2 services included assisting in planning, delivering, or consulting with teachers on evidence-based academic and behavioral interventions. Occasionally targeted Tier 2 intervention occurred with individual students, but typically interns provided Tier 2 support in small-groups. Tier 3 services included direct or indirect intensive interventions, such as designing and evaluating the results of a daily math intervention that is delivered by a classroom teacher for an individual student.

In response to the COVID-19 pandemic, interns capitalized on tele-related services (e.g., Individual and small-group interventions delivered via video conferencing, universal support for whole-group instruction via video conferencing, teleconsultation with teachers and family members) to provide these services. Given that an individual student could receive intervention and support across all three tiers, the count of students across the tiers in some cases may be a duplicated count. Interns recorded demographic data for any student who received either targeted (Tier 2) or intensive (Tier 3) intervention support from the intern. The demographic data included students' gender, race/ethnicity, disability status, and Limited English Proficiency (LEP) status. Data regarding students served by interns were submitted electronically by each intern.

2.2.3 | Intervention description data

Interns were asked to provide descriptive information for six interventions they were primarily responsible for designing, one intervention in each of the following categories: (a) Tier 1 academic supports; (b) Tier 1 behavior supports, (c) Tier 2 academic intervention; (d) Tier 2 behavior intervention, (e) Tier 3 academic intervention, (f) Tier 3 behavior intervention. The descriptive information included the core components of the intervention, the number of students served by the intervention, the role of the individual implementing the intervention, the setting, methods used for measuring intervention adherence, and the evidence of intervention adherence. The interventions were selected by the interns to be exemplars of the support services they provided during their internship year.

2.2.4 | Intervention outcome data

Goal Attainment Scaling (GAS) was the primary method used for summarizing intervention outcomes for students served by school psychology interns. The GAS process involved the development of a 5-point scale for measuring goal attainment as outlined by Kiresuk et al. (1994). The 0-rating "Expected Level of Outcome" level was replaced with "No Change" to better represent students' responses to the intervention. The other scale anchors remained the same: "+2 = Much More than Expected," "+1 = Somewhat More than Expected," "−1 = Somewhat Less than Expected," and "−2 = Much Less than Expected." GAS scores were calculated as *T*-scores using the conversion key recommended by Kiresuk et al. (1994) to aggregate outcomes across the intern cohort annually.

Reviews of the reliability and validity of the original GAS procedures are available in Cardillo and Smith (1994) and Smith and Cardillo (1994), respectively. Studies that used a 5-point scale (similar to the approach used herein) reported interrater reliability indices between 0.87–0.93 (Cardillo & Smith, 1994). Test–retest reliability also was acceptable (e.g., correlations of *r* = .84 over a 2- to 3-week period; see studies reported in Cardillo & Smith, 1994). GAS validity evidence includes analyses of many types of intervention outcomes including school-based interventions (see Kratochwill et al., 1995).

As a supplement the GAS process, two additional summary statistics were calculated among interns to quantify intervention outcomes. These summary statistics included the percentage of nonoverlapping data points (PND) and effect size (ES). PND was calculated by assessing the number of data points in the intervention phase that exceed the highest baseline data point (for interventions designed to increase a desired behavior) or counting the number of intervention data points lower than the lowest baseline point (for studies seeking to decrease a target behavior). The number of nonoverlapping data points is then divided by the total number of intervention points to obtain the PND. PND has been found to produce a summary statistic that is consistent with the outcomes obtained through visual analysis of individual participant graphs (Olive & Smith, 2005). The use of PND as a summary statistic that is easy to calculate and interpret has historical support in the research literature (Mathur et al., 1998; Scruggs et al., 1986, 1987, 1988). Ratings using PND are judged on the following scale: a PND greater than or equal to 90% is considered "Highly Effective," a PND of 70% to less than 90% is judged as "Moderately Effective," a PND of 50% to less than 70% is considered "Mildly Effective," and a PND less than 50% is rated as "Ineffective" (Scruggs et al., 1986).

The second summary statistic, ES, was calculated as the standard mean difference, that is the change in achievement or behavior relative to the baseline standard deviation (Busk & Serlin, 1992). Interventions that yield an ES greater than or equal to 0.80 are considered to have a large effect. An ES between 0.50 and 0.79 represents a moderate effect, whereas an ES between 0.20 and 0.49 reflects a small effect. ES of greater than ±3.0 (equivalent to three standard deviations) were capped at ±3.0 to better represent the outcome attained.

2.3 | Design and procedures

The use of intervention-based data for strong accountability evaluation was originally developed, piloted, and researched through funding provided by the Ohio Department of Education for early intervention practice and was used as basic summative data for training effectiveness within a school psychology graduate preparation program. The summative methods, such as using brief intervention and instructional trials as accountability data, ES estimates, goal attainment scaling, and percentage of nonoverlapping data, have received extensive and rigorous juried review (e.g., Barnett et al., 2004; Barnett, Daly, et al., 1999; Barnett, Pepiton, et al., 1999;). The current model for evaluating the Ohio Internship Program was also critically examined as part of a peer-review process (Morrison et al., 2011, 2009).

3 | RESULTS

3.1 | Attainment of intern competencies

Internship supervisor ratings were obtained for 101 school psychology interns (100% of all Interns) completing their internship during the 2020–2021 school year. Supervisor ratings indicated an attainment of professional competencies across eight NASP domains of school psychology education and practice consistent with levels of attainment recorded in years before and at the start of the COVID-19 pandemic (see Table 2).

3.1.1 | Service delivery across the tiers

Ninety-four school psychology interns (93.1% of the intern cohort) who completed their internship during the 2020–2021 school year provided data regarding the number of students they served within a three-tiered model of

service delivery. The results indicate a decrease in the number of students supported by interns in 2020–2021 across all tiers of the multi-tiered system of support resulting from restrictions on instruction and service delivery during the pandemic. On average, each intern provided Tier 1 universal supports/services to 312 students, Tier 2 intervention services to 17 students, and Tier 3 intervention services to 20 students. Table 3 displays the 5-year trend in the mean number of students served by each intern for the three school years before the COVID-19 pandemic (2016–2017 to 2018–2019), the year the pandemic began (2019–2020), and the school year directly affected by the pandemic (2020–2021).

TABLE 2 Interns' competencies in eight domains of school psychology education and practice

| Domains of preparation and practice | End-of-year ratings | | | | |
	2017 N = 87	2018 N = 96	2019 N = 96	2020 N = 92	2021 N = 101
Data-Based Decision Making	3.79	3.80	3.77	3.97	3.79
	0.36	0.34	0.42	0.45	0.43
Consultation and Collaboration	3.84	3.81	3.81	3.94	3.80
	0.31	0.36	0.35	0.46	0.37
Academic Interventions and Instructional Supports	3.74	3.78	3.79	3.90	3.77
	0.40	0.39	0.40	0.52	0.39
Mental and Behavioral Health Services and Interventions	3.77	3.75	3.73	3.87	3.73
	0.37	0.41	0.44	0.50	0.48
School-Wide Practices to Promote Learning	3.80	3.75	3.71	3.88	3.77
	0.34	0.43	0.43	0.48	0.40
Services to Promote Safe and Supportive Schools	3.76	3.67	3.75	3.87	3.73
	0.42	0.45	0.40	0.50	0.43
Family, School, & Community Collaboration	3.78	3.76	3.81	3.91	3.57
	0.36	0.39	0.37	0.46	0.43
Equitable Practices for Diverse Student Populations	3.81	3.86	3.85	3.96	3.85
	0.36	0.32	0.32	0.42	0.34

Note: Standard deviations are in italics. Intern competencies were assessed by their field supervisors three times a year using the following scale: 1 = Unsatisfactory/Not proficient, 2 = Developing/Novice, 3 = Satisfactory/Proficient, and 4 = Mastery/Highly Proficient.

TABLE 3 Five-year trend for the mean number of students served per intern by tier of support

Tier of support	2016–2017	2017–2018	2018–2019	2019–2020	2020–2021
Tier 1	500	917	410	389	312
Tier 2	46	29	30	31	17
Tier 3	21	27	22	25	20

Note: The mean number of students served was calculated for the number of interns reporting their data. The number of interns reporting data and the response rate are as follows: 2016–2017: 87 interns or 98.9%, 2017–2018: 96 interns or 92.7%, 2018–2019: 98 interns or 96.9%, 92 interns or 94.6%, 101 interns or 93.1%.

3.2 | Intervention service delivery counts by race/ethnicity

School psychology interns provided data regarding the race/ethnicity of the students they provided Tiers 2 and 3 intervention services. Relative to previous school years, fewer students received targeted and intensive, individualized interventions supported by school psychology interns in 2020–2021. African American/Black or African students and Hispanic students received disproportionately fewer intervention supports than in previous years, which may reflect the significant disruption of the COVID-19 pandemic to urban school systems that serve a predominately African American/Black and Hispanic student population. Figure 1 displays the 5-year trend in the race/ethnicity of students receiving Tier 2 and/or Tier 3 interventions supported by interns for the three school years before the COVID-19 pandemic (2016–2017 to 2018–2019), the year the pandemic began (2019–2020), and the school year directly affected by the pandemic (2020–2021).

During this same 5-year span, the percentage of students who had an educational disability classification served by interns decreased from 48.6% (2016–2017), 55.5% (2017–2018), and 40.3% (2018–2019) before the pandemic to 28.7% (2019–2020) and 27.7% (2020–2021) during the pandemic.

3.3 | Intervention outcomes

Interns were required to select six interventions from among all of the interventions they supported to document the impact of their school psychological services. Three of the six interventions were academic interventions, one at each tier: Universal supports (Tier 1), Targeted intervention (Tier 2), and Intensive intervention (Tier 3). The other three interventions were behavioral interventions, one at each tier. As such, 101 school psychology interns would be expected to report on a total of 606 interventions. During the 2020–2021 school year, 94 school psychology interns provided data on their selected interventions, for a response rate of 93.1%. Academic interventions implemented in 2020–2021 included 83 Tier 1 supports, 87 Tier 2 interventions, and 90 Tier 3 interventions. Behavioral interventions included 81 Tier 1 supports, 87 Tier 2 interventions, and 83 Tier 3 interventions. In all, the
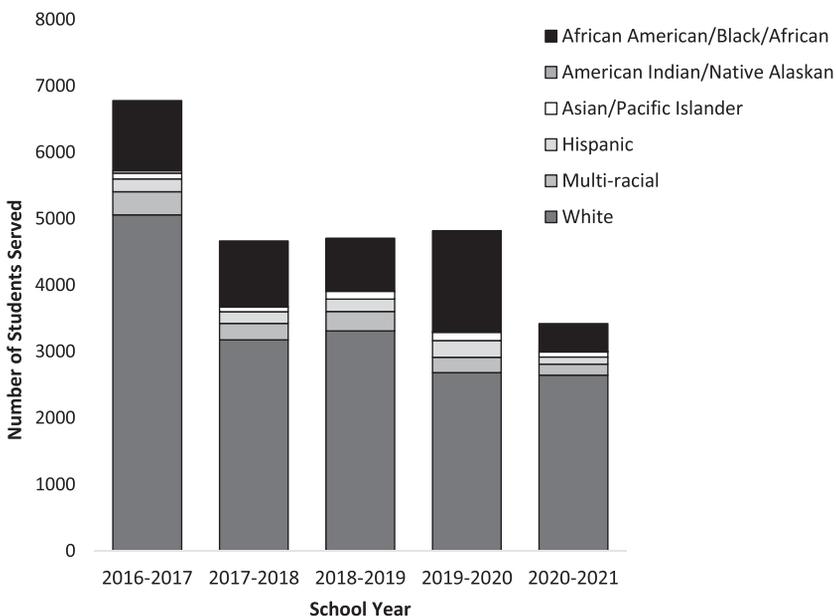
FIGURE 1 Count of students served by interns at Tier 2 and 3 by student race/ethnicity

outcomes of 511 interventions (i.e., 260 academic interventions and 251 behavioral interventions) provided evidence of the support provided by Ohio's school psychology interns in 2020–2021.

Table 4 displays the 5-year trend in the number of interventions completed by tier and the percentage of the expected number of interventions that number represents. Before the pandemic, 90.8%–96.6% of the expected number of interventions were completed. In 2019–2020, however, the number of interventions developed by school psychology interns in consultation with teachers and family members decreased sharply (range = 69.6%–76.1% completed) as many interventions were in the development or early intervention phase when schools closed abruptly in March 2020 and continuity of instruction was severely compromised by the COVID-19 pandemic.

A description of the set of academic and behavioral interventions and their outcomes supported by interns during the 2020–2021 year follows. Interns reported on 83 Tier 1 academic class-wide/system-wide supports. Classroom teachers were primarily responsible for implementing 77.1% of Tier 1 academic interventions, school psychology interns implemented 19.3% of the interventions, a paraprofessional and other school personnel each implemented two interventions, and the school psychologist and a tutor each implemented one intervention. Intervention adherence (i.e., the degree to which the intervention was implemented as planned) was measured for 90.4% of Tier 1 academic interventions. In the 3 years before the COVID-19 pandemic, the percentage of interventions from which intervention adherence was measured for Tier 1 academic interventions ranged from 89.8% (2017–2018) to 92.4% (2018–2019). Among the 83 Tier 1 academic supports, 30 supports resulted in outcomes that were "Much More" than expected and 41 resulted in "Somewhat More" than expected change in the positive direction relative to the present level of performance. Six supports produced "No Change" and 6 interventions had "Somewhat Less" than expected change. ES were provided as supplemental evidence for a subset

TABLE 4 Number and percentage of academic and behavior interventions completed by Tier

	School year				
	2016–2017	2017–2018	2018–2019	2019–2020	2020–2021
Tier 1					
Academic	83	88	90	64	83
	95.4%	91.7%	91.8%	69.6%	82.2%
Behavior	84	88	90	70	81
	96.6%	91.7%	91.8%	76.1%	80.2%
Tier 2					
Academic	84	88	91	69	87
	96.6%	91.7%	92.9%	75.0%	86.1%
Behavior	82	89	90	65	87
	94.3%	92.7%	91.8%	70.7%	86.1%
Tier 3					
Academic	82	89	89	70	90
	94.3%	92.7%	90.8%	76.1%	89.1%
Behavior	82	89	90	70	83
	94.3%	92.7%	91.8%	76.1%	82.2%

Note: The number of interns reporting data and the response rate are as follows: 2016–2017: 87 interns or 98.9%, 2017–2018: 96 interns or 92.7%, 2018–2019: 98 interns or 96.9%, 92 interns or 94.6%, 101 inters or 93.1%.

of these interventions, where such calculations were appropriate. For Tier 1 academic supports, the mean ES was 1.6 (N = 69 supports), indicating a large effect.

Interns reported on 81 Tier 1 behavior supports. Classroom teachers were primarily responsible for implementing 69.1% of Tier 1 behavioral interventions, school psychology interns implemented 23.5% of the interventions, other school personnel implemented 9.9% of the interventions, and a paraprofessional implemented two interventions. Intervention adherence was measured for 93.8% of the Tier 1 behavior interventions. In the 3 years before the COVID-19 pandemic, the percentage of interventions from which intervention adherence was measured for Tier 1 behavioral interventions ranged from 86.9% (2016–2017) to 93.3% (2018–2019). Among the 81 Tier 1 behavior supports, 25 supports resulted in outcomes that were "Much More" than expected and 44 resulted in "Somewhat More" than expected change in the desired direction relative to the present level of performance. Seven supports produced "No Change," 2 supports resulted in "Somewhat Less" than expected change, and 3 supports had "Much Less" change. The PND and ES were provided as supplemental evidence for a subset of these interventions, where such calculations were appropriate. The mean PND was 72.8% (N = 61 behavior supports), indicating moderate effectiveness. The mean ES was 1.3 (N = 66 behavior supports), representing a large effect.

Interns reported on 87 Tier 2 academic interventions. School psychology interns were primarily responsible for implementing 50.6% of the Tier 2 academic interventions, classroom teachers implemented 21.8% of the interventions, other school personnel implemented 11.5% of the interventions, paraprofessionals implemented 9.2% of the interventions, a tutor implemented 6.9%, and a parent-implemented one intervention. Intervention adherence was measured for 96.6% of the Tier 2 academic interventions. In the 3 years before the COVID-19 pandemic, the percentage of interventions from which intervention adherence was measured for Tier 2 academic interventions ranged from 89.9% (2017–2018) to 94.0% (2016–2017). Among the 87 Tier 2 academic interventions, 33 interventions resulted in outcomes that were "Much More" than expected and 43 resulted in "Somewhat More" than expected change in the desired direction relative to the present level of performance. Nine interventions produced "No Change," and 2 supports resulted in "Much Less" than expected change. ES were provided as supporting evidence for a subset of these interventions, where such calculations were appropriate. The mean ES was 1.6 (N = 67 interventions), which can be interpreted as a large effect.

Interns reported on 87 Tier 2 behavioral interventions. School psychology interns were primarily responsible for implementing 58.6% of the Tier 2 behavioral interventions, classroom teachers implemented 26.4% of the interventions, other school personnel implemented 10.3% of the interventions, a paraprofessional implemented 4.6% of the interventions, and a school psychologist implemented one intervention. Intervention adherence was measured for 96.6% of the Tier 2 behavioral interventions. In the 3 years before the COVID-19 pandemic, the percentage of interventions from which intervention adherence was measured for Tier 2 behavioral interventions ranged from 91.0% (2017–2018) to 93.9% (2016–2017). Among the 87 Tier 2 behavior interventions, 33 interventions resulted in outcomes that were "Much More" than expected, and 46 resulted in "Somewhat More" than expected change in the desired direction relative to the present level of performance. Five interventions produced "No Change," 2 supports resulted in "Somewhat Less" than expected change, and 1 produced "Much Less" than expected change. PND and ES were provided as supporting evidence for a subset of these interventions, where such calculations were appropriate. The mean PND for Tier 2 behavior interventions was 70.5% (N = 75 interventions), indicating moderate effectiveness. The mean ES was 1.7 (N = 65 interventions), representing a large effect.

Interns reported on 90 Tier 3 academic interventions. School psychology interns were primarily responsible for implementing 56.7% of the Tier 3 academic interventions, other school personnel each implemented 17.8% of the interventions, classroom teachers implemented 14.4% of the interventions, paraprofessionals implemented 5.6% of the interventions, a tutor implemented 3.3% of the interventions, and two interventions were implemented by school psychologists. Intervention adherence was measured for 92.2% of the Tier 3 academic interventions. In the 3 years before the COVID-19 pandemic, the percentage of interventions from which intervention adherence was

measured for Tier 3 academic interventions ranged from 89.8% (2017–2018) to 92.4% (2018–2019). Among the 90 Tier 3 academic interventions, 29 interventions resulted in outcomes that were "Much More" than expected and 45 resulted in "Somewhat More" than expected change in the desired direction relative to the present level of performance. Thirteen interventions produced "No Change," and three interventions resulted in "Somewhat Less" than expected change. ES were provided as supporting evidence for a subset of these interventions, where such calculations were appropriate. The mean ES was 1.7 (N = 67 interventions), which can be interpreted as a large effect.

Interns reported on 83 Tier 3 behavioral interventions that were provided to support learners in grades prekindergarten through Grade 12. School psychology interns implemented 53.0% of the interventions, classroom teachers implemented 34.9% of the Tier 3 behavioral interventions, paraprofessionals implemented 9.6% of the interventions, other school personnel implemented 4.8% of the interventions, and one intervention was implemented by a school psychologist. Intervention adherence was measured for 92.8% of the Tier 3 behavioral interventions. In the 3 years before the COVID-19 pandemic, the percentage of interventions from which intervention adherence was measured for Tier 3 behavioral interventions ranged from 90.2% (2016–2017) to 96.7% (2018–2019). Among the 83 Tier 3 behavior interventions, 34 interventions resulted in outcomes that were "Much More" than expected and 34 resulted in "Somewhat More" than expected change in the desired direction relative to the present level of performance. Eleven interventions produced "No Change", and 4 interventions resulted in "Somewhat Less" than expected change. PND and ES were provided as supporting evidence for a subset of these interventions, where such calculations were appropriate. The mean PND for Tier 3 behavior interventions was 71.2% (N = 71 interventions), indicating moderate effectiveness. The mean ES was 1.5 (N = 62 interventions), representing a large effect.

Goal Attainment Scaling outcomes were converted to standard scores (T-scores) using the conversion key recommended by Kiresuk and associates (1994) to compare intervention outcomes across the 5-year span (See Table 5). The results indicate that the positive impact of the academic and behavior interventions on student performance was consistent for interventions implemented before and during the pandemic.

4 | DISCUSSION

The COVID-19 pandemic impacted all facets of daily life for individuals beginning in the United States in the spring of 2020. School psychology interns, field supervisors, and graduate educators were tasked with quickly adapting the final months of internships to ensure completion of training. Uncertainties continued into the 2020–2021 school year when a new cohort of interns entered their internship. Although school psychologists developed new practices in the socially distant delivery of school psychology, educators in general were forced to contend with inequities in instructional delivery formats across school types (Ohio Department of Education, 2022), coupled with racial and political climates that directly impacted educators (Horsford et al., 2021).

This study aimed to compare the findings from the annual evaluation of the Ohio Internship Program in School Psychology in the school years before and during the pandemic regarding intern competency development, service delivery practices, and outcomes for students served. Results suggest that the pandemic impacted the school psychology internship experience in various ways. End-of-year intern competency ratings across eight NASP domains of practice did not vary across the school years before and during the pandemic suggesting that interns during the pandemic had sufficient opportunities to engage in a comprehensive array of service delivery activities to develop their professional competences. This finding is consistent with studies reporting school psychologists' role during the pandemic included consultation and collaboration, counseling, and resource development and dissemination to support teachers and parents and less of a primary focus on psychoeducational assessment (Schaffer et al., 2021).

TABLE 5 Mean GAS standard score and standard deviation for intervention outcomes

| | School year | | | | |
	2016–2017	2017–2018	2018–2019	2019–2020	2020–2021
Tier 1					
Academic	60.96	61.82	61.56	61.41	61.45
	6.37	6.35	7.33	7.10	8.43
	(N = 83)	(N = 88)	(N = 90)	(N = 64)	(N = 83)
Behavior	59.64	61.25	60.89	59.43	60.62
	7.68	7.24	7.74	8.99	9.13
	(N = 84)	(N = 88)	(N = 90)	(N = 70)	(N = 81)
Tier 2					
Academic	60.83	62.39	60.88	61.62	62.07
	8.10	6.78	7.25	7.45	8.09
	(N = 84)	(N = 88)	(N = 91)	(N = 68)	(N = 87)
Behavior	59.51	60.45	61.00	61.85	62.41
	7.84	6.56	8.08	7.48	7.62
	(N = 82)	(N = 89)	(N = 90)	(N = 65)	(N = 87)
Tier 3					
Academic	60.73	61.12	61.57	60.71	61.11
	7.82	8.85	7.67	8.22	7.71
	(N = 82)	(N = 89)	(N = 89)	(N = 70)	(N = 90)
Behavior	60.24	62.81	60.11	62.57	61.81
	7.85	6.91	10.96	7.55	8.43
	(N = 82)	(N = 89)	(N = 90)	(N = 70)	(N = 83)

Note: GAS scores were calculated as *T*-scores using the conversion key recommended by Kiresuk and associates (1994). Standard deviations are in italics. The number of interventions is presented parenthetically.

The second research question focused on the number of students served annually by interns before and during the pandemic. The results of the study indicate a decrease in the number of students supported by interns in 2020–2021 across all tiers, a likely result of the restrictions on instruction and service delivery (e.g., requirements for social distancing that limited opportunities for in-person individual and small-group interventions, the proportion of students attending school virtually).

Evidence abounds that the pandemic exacerbated inequalities ingrained in the U.S. public education system (Dorn et al., 2021). School districts varied widely in their capacity to provide in-person instruction and support services while adhering to guidelines for mitigating the spread of the virus (e.g., social distancing, masking) and attending to political forces seeking to influence school closure and reopening decisions. In Ohio and elsewhere, large urban school districts that serve primarily students from minoritized backgrounds experienced that greatest disruptions to in-person instruction in 2020–2021. In the large urban school districts in Ohio, instruction was delivered virtually for 6 or more months while suburban and rural school districts provided in-person instruction with health and safety restrictions in place. It is not surprising then that in this study, African American/Black or African and Hispanic students received disproportionately fewer intervention supports from school psychology

interns in 2020–2021 than in the years before the pandemic as their access to intervention was sharply curtailed by school closures and virtual instruction. No other race or ethnic subgroup of students experienced this marked decline in school psychological services as a result of the pandemic.

The 5-year trend in the number of interventions completed by tier shows that the number of interventions supported by interns during the pandemic year of 2020–2021 was consistent with the number of interventions supported before the pandemic (2016–2017, 2017–2018, and 2018–2019), suggesting a continuity of practice and real-time innovation in intervention service delivery throughout the 2020–2021 school year. The abrupt closures of schools in March 2020, however, resulted in significant disruptions to school psychological services as indicated by a sharp reduction in the number of interventions completed in the year the pandemic began (2019–2020). This finding suggests that many interventions that were designed to be implemented in school and classroom settings in the spring of 2020 were cast aside because (a) the need for the intervention became less of a priority or (b) the intervention could not be adapted for implementation in a virtual learning environment.

Despite fewer interventions completed in 2019–2020, however, the positive impact of both academic and behavior interventions on student outcomes did not decline and the collection of intervention adherence data did not diminish for interventions completed at the beginning (2019–2020) and during (2020–2021) the pandemic. This finding provides the best evidence yet that school psychology interns were able to develop their professional competencies and have a positive, measurable impact on students despite pandemic conditions.

4.1 | Limitations of the study

The current study makes several contributions to the empirical literature regarding the impact of the pandemic on school psychology training, specifically the internship experience. It is, however, an evaluative study of only one state's internship program and the results are descriptive in nature. A primary limitation is the absence of interrater reliability data for the internship supervisors' ratings of intern competencies. As such, it is possible that the internship supervisors' ratings of interns' performance during the 2020–2021 school year factored in situational variables of demonstrating professional competencies during a pandemic and inflated the ratings (i.e., a performance rated "Satisfactory/Proficient" during the pandemic might have only merited a "Developing/Novice" rating in the years before the pandemic). Yet, evidence of positive, measureable outcomes of interventions supported by interns counters weaknesses in the internship supervisors' ratings as a measure and provides strong support for the effectiveness of the internship program in supporting professional development.

A second limitation of the study is the reliance on interns' self-reports of the number of students served, student demographic characteristics, and intervention descriptions and outcomes. It is important to note that interns' documentation of their provision of school psychological services and their judgments regarding intervention outcomes were conducted under the supervision of their internship supervisors with additional oversight from their university-based supervisor. The procedures for documenting services and outcomes were established as standard practice for the evaluation of the Ohio Internship Program in School Psychology since 2004.

4.2 | Implications for graduate preparation and practice

Widespread adoption of tele-services has emerge as a positive consequence of the COVID-19 pandemic in the field of school psychology. Teleconsultation has been increasingly used to support to students, families, and educators (King et al., 2022), and electronically delivered support has had positive impacts on intervention implementation fidelity (Fallon et al., 2022). It will be crucial for graduate preparation programs to provide direct instruction and guided practice in the use of tele-services in the delivery of school psychological services with an emphasis on adhering to legal and ethical guidelines when implementing best practices with fidelity.

The results of this study highlight the need to ensure school psychology graduate students have ample opportunities in their course work and field experience to learn about the inequities that exist in education for marginalized groups and the need for social justice advocacy. The current study supports previous research (e.g., Van Lancker & Parolin, 2020; Yip, 2020), demonstrating that the pandemic disproportionally impacted marginalized student populations. Graduate preparation programs need to emphasize how inequities were not only revealed, but exacerbated by the COVID-19 pandemic contributing to greater unmet academic, behavior, and mental health needs and harmful opportunity gaps for children from certain marginalized communities.

4.3 | Future directions

The current study examined the impact of the COVID-19 pandemic on the Ohio Internship Program in School Psychology by examining outcomes of the annual evaluation for the school year directly affected by the pandemic (2020–2021) relative to the year the pandemic began (2019–2020) and 3 years before the pandemic (2016–2017, 2017–2018, and 2018–2019). Although data for the current study are limited to the 5-year period ending with the 2020–2021 school year, anecdotal reports from school psychology practitioners, graduate students, and faculty as well as emerging research (e.g., Dorn et al., 2021; Kuhfeld et al., 2022) suggest that the hardships created by the COVID-19 pandemic will persist in many schools and school districts and the long-term impact of the pandemic will be unknown for many years to come. Additional research is needed to determine the effectiveness of future school psychology service delivery and innovations in addressing the unmet needs and opportunity gaps created by the pandemic. The urgency of addressing academic, behavior, and mental health needs is particularly acute in urban school districts serving large proportions of African American/Black or African and Hispanic students as they disproportionately received fewer intervention supports during the COVID-19 pandemic.

As communities recover from the COVID-19 pandemic and school systems restore in-person learning, another area of future research involves the burgeoning use of distance-learning and virtual communication technology for the provision of school psychological services.

Future research should examine the extent which school psychology graduate preparation programs have placed adequate emphasis on the developing graduate students' use of technology (e.g., telepsychology, telehealth, and telesupervision) the effectiveness of these applications for psychological service delivery (Abramson, 2021).

School psychology graduate preparation programs should also explore further the effectiveness and acceptability of telesupervison for use with interns. The increased use of telesupervision may assist school psychology graduate preparation programs in supporting interns placed in rural, underserved areas of the state where the physical distance to the university presents an obstacle.

Finally, future research should include a qualitative examination of the perceptions of school psychology graduate students who completed their internship during the COVID-19 pandemic. A qualitative study may provide researchers an opportunity to have a first-hand account of the many obstacles that were presented during the pandemic as well as understand how interns navigated ongoing shifts in policies and procedures from school- and school district leaders, university figures (e.g., faculty, Provost, President), and state/federal officials.

5 | CONCLUSION

The school psychology internship is a culminating and pivotal training experience that allows graduate students to develop and apply skills learned in their coursework under the direct supervision of a licensed and experienced practitioner. Despite a tumultuous school year as a result of the COVID-19 pandemic, this study showed that school psychology interns attained the expected professional competencies and demonstrated a positive, measurable impact on student academic and behavior intervention outcomes. As a result of the disruptions to

learning and restrictions on in-person service delivery, this study also found that the number of students provided school psychological services across the tiers was diminished in the school year in which the pandemic began, creating disproportionate hardship for minoritized students in large, urban school districts. The positive lessons learned from the pandemic are important to consider (Burke & Arslan, 2020), including those that could improve the school psychology internship experience and outcomes. School psychologists who completed their internship during the school years most heavily impacted by the pandemic may emerge with a wider range of professional skills and an openness to innovative practices.

DATA AVAILABILITY STATEMENT

The data that support the findings of this study are available from the corresponding author upon reasonable request.

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