

**Virginia Treatment Center for Children
Pre-doctoral Internship
in
Clinical Psychology**

2017/18 Training Year

(updated 9/2016)

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This internship site agrees to abide by the APPIC Policy that no person at this training facility will solicit, accept or use any ranking-related information from any intern applicant prior to Uniform Notification Day.

This internship program is accredited by the American Psychological Association. Questions regarding accreditation may be directed to:

Commission on Accreditation
American Psychological Association
750 First St., NE
Washington, D.C. 20002-4242
202-336-5979

Background and Introduction

The internship program at the Virginia Treatment Center for Children, accredited by the American Psychological Association since 1975, is designed to provide training in the full continuum of care required to treat children and adolescents with serious emotional disturbances. Four funded positions are available each year in a training program that begins July 1 and ends June 30. Our stipend for the current training year is \$26,000.

The Virginia Treatment Center for Children is part of Virginia Commonwealth University Medical Center (VCUMC), one of Virginia's premier academic medical centers. A vital component of Virginia's community-based mental health system, VTCC continually works to improve the mental health of all of Virginia's children, youth, and families through clinical services, research, training and professional development.

VTCC is well-known within the field for its ability to successfully treat complex emotional and behavioral disorders. A diverse professional staff of psychiatrists, psychologists, social workers, educators, and occupational, recreational, and art therapists at VTCC provides acute inpatient treatment and outpatient therapy and medication management services for children, adolescents, and their families.

The population served at VTCC includes children and adolescents and their families from all regions of the state of Virginia. The children represent a diversity of cultural backgrounds, ethnicities, ages, diagnostic categories and severity of presenting problems. At VTCC, we are committed to giving each child the best treatment possible and extending to each family respect and compassion. We are committed to including parents and guardians actively in their child's care — from the initial evaluation to treatment to aftercare planning.

VTCC makes available to families a breadth and depth of clinical experience that is unique among Virginia's community of mental health care providers. The clinical services offered at VTCC are widely known for their excellence. As part of a university-based medical center, VTCC provides advanced training and professional development for mental health clinicians. In addition, through the Commonwealth Institute for Child and Family Studies, VTCC conducts research and provides technical assistance for Virginia's community-based mental health care system.

During the summer of 2017, a new VTCC facility will be opening, featuring state-of-the-art technology and architectural features designed to provide an accessible, family-friendly pediatric psychiatry environment. Interns will benefit from enhanced learning facilities, as well as design elements to enhance multidisciplinary collaboration.

Training Model and Philosophy

The Psychology Internship Program at VTCC is guided by the principle that professional growth and learning occur as a result of participation in a wide range of clinical and didactic experiences within a supportive environment, with the opportunity to receive

feedback and observe professional role models. The program is structured to provide a breadth and depth of child clinical and pediatric training experiences with a diverse population of youth and families. Our goal is to provide interns with the opportunities necessary to develop the competencies in knowledge, skills, and professional identity to move from student to entry level professional.

The training program is based on the model of the Local Clinical Scientist (Stricker & Trierweiler, 1995) to prepare psychologists to meet the mental health needs of children, adolescents, and families. The “Local” Clinical Scientist applies general psychological science as appropriate to the unique circumstances and needs of a specific case. Our application of this model emphasizes the use of the findings of psychological science to address clinical problems, including the implementation of empirically supported interventions when such interventions are available. In addition, we emphasize the use of scientific thinking in the clinical setting to “provide an attitude and an orientation to the problem at hand that will lead to an informed solution” (Stricker & Trierweiler, 1995; p. 999).

Through exposure to a wide range of presenting problems in a diverse client population, the training program provides each intern with the opportunity to develop professional skills and awareness of cultural and familial influences on children’s development. In addition, interns gain a working knowledge of the varied service systems designed to address the needs of children and adolescents and their families and develop the skills to influence those systems on the child’s behalf. Toward this goal, training occurs in multiple formats and multidisciplinary environments, with significant emphasis placed on effective functioning as a team member, and adapting one’s approach to the clinical setting.

The year-long training program is comprised of three month rotations, emphasizing either child and adolescent acute psychiatry or pediatric consultation/liaison. In addition, interns participate in year-long rotations focusing on outpatient psychology services and psychological assessment. There is also a strong emphasis on didactics and supervision, to prepare interns for and help them learn from the clinical experiences.

For more information on our training model, please see:

Stricker, G., & Trierweiler, S.J. (1995). The local clinical scientist: A bridge between science and practice. *American Psychologist*, 50, 995-1002.

Internship Description

Each year the psychology faculty polls interns to learn how many hours they are putting into their internship experiences. Interns have generally reported an average workweek of about 45-50 hours. Their time is proportioned approximately as follows: delivering clinical services (55 percent); attending treatment related meetings (15 percent) and seminars (10 percent); receiving clinical supervision (10 percent); and providing case management (10 percent).

Internship Clinical Rotations

Acute Inpatient Program *(2 3-month rotations)*

Interns participate in multidisciplinary teams, and serve as primary therapists for their assigned child and adolescent patients admitted to the acute treatment program. The primary therapist is the leader of a mini-team of mental health professionals, providing intensive individual and family therapy, consulting with psychiatrists regarding medication, and developing and implementing an effective treatment program and discharge plan. The primary therapist also is responsible for behavior management consultation, community liaison work, case management and case advocacy. Interns also provide group therapy on the units three to four times a week, in collaboration with other disciplines.

The interdisciplinary team at VTCC provides rapid diagnostic and psychopharmacologic assessment and seeks to quickly stabilize acutely affected patients. Upon the child's admission to the hospital, the team joins with the family to evaluate the child and develop an individualized treatment plan. The treatment team works with the family to stabilize the child and provide a smooth transition back to the family, school and community environments. Active case management is a priority, and the program's emphasis is on stabilization and linking the child and family to community services. Acute hospitalization generally lasts for five to seven days but length of stay can vary widely.

Weekend Therapist Duties

All therapists, including psychology interns, rotate through a weekend schedule to be available to provide individual and group therapy for the inpatient unit, as well as to conduct weekend admission assessments. Interns serve as the weekend therapist for approximately five weekends per year and provide back-up on-call service an additional four weekends.

Pediatric Consultation and Liaison Service *(2 3-month rotations)*

While on the Pediatric Consultation and Liaison Service (C&L), interns provide clinical evaluation and intervention services to pediatric medical patients hospitalized at VCU Medical Center who have psychosocial difficulties that interfere with medical treatment. Trainees from both psychiatry and psychology participate in this service. Medical teams refer patients who demonstrate emotional, behavioral or psychiatric problems. The trainee's role is to assess the youth's needs and to provide immediate, short-term intervention. A multidisciplinary C&L team meeting is held each week. At this meeting,

trainees receive clinical supervision and participate in discussion about C&L issues. Supervisors also do floor rounds with the interns, allowing for direct observation, consultation, and feedback.

As part of the Pediatric Rotation, interns also serve as mental health consultants to a pediatric craniofacial clinic and provide consultation and short-term interventions within a general pediatric department clinic one half-day per week.

VTCC Outpatient Clinic

VTCC operates a large outpatient clinic serving children, adolescents, and families from the Richmond metropolitan area. The Outpatient Services Program offers a wide range of assessment and treatment services for children and adolescents and their families. Outpatient care reflects a family-focused philosophy emphasizing collaboration between the family and clinical staff. Program goals include providing the clinical support and treatment needed for the child and the family while they remain within their communities, and providing support and follow-up for children and adolescents who have been discharged from more intensive treatment programs.

Interns are expected to conduct approximately four outpatient sessions per week, providing individual and family therapy and case management services. Participation in the outpatient rotation provides opportunity for longer-term treatment experience and exposure to a broader range of psychopathology.

Psychological Assessment Service

Referrals for psychological evaluations are managed by the Psychology Assessment Service and assigned to interns on a rotating basis. Referrals come primarily from the VTCC outpatient clinic. Interns receive weekly supervision in intellectual and personality assessment and conduct an average of one evaluation per month. Interns participate in the Assessment Service throughout the year, with the goal of completing 10 comprehensive evaluations by the end of the internship experience, which usually include cognitive testing, the use of projective or other personality measures, as well as various symptom and behavioral checklists. There is an emphasis in developing skills in conceptualization and integrated report writing.

Supervision

When interns enter the training program, they are assigned a preceptor who serves as a primary support to the intern. Each intern's preceptor provides supervision and mentoring throughout the year and coordinates clinical activities and evaluation feedback for the intern.

Interns receive at least four hours of supervision weekly, including at least two hours of individual supervision with a licensed clinical psychologist. Therapy rooms are equipped with one-way mirrors and video equipment to allow video-recording of sessions and live supervision, and faculty members emphasize observation and review of video for training purposes.

The psychology training faculty shares a general family systems perspective on the patients seen at the treatment center; however, they utilize a variety of psychotherapeutic approaches to facilitate changes in the system. These approaches include family, attachment-based, cognitive behavioral, and play therapies, as well as integrationist approaches. The intern will be provided with the opportunity to use all of these approaches, as appropriate to the needs of their patients.

VTCC Internship Supervisors

DEBORAH BLACKBURN, PhD, LCP, Assistant Professor

Specialties: psychological assessment, play therapy, Circle of Security™ intervention for children and families with a history of attachment difficulties, clinical supervision

JAEE BODAS, PhD, LCP, Assistant Professor

Specialties: CBT, family therapy, and anxiety disorders

Research Interests: childhood mood and anxiety disorders; developmental psychopathology

LESLIE KIMBALL FRANCK, PhD, LCP, Assistant Professor

Specialties: PTSD, dissociative disorders, cognitive behavioral therapy, dialectical behavior therapy

Research Interests: alexithymia, PTSD, therapist self-care

JENNIFER HINESLEY, Psy.D., LCP, Assistant Professor

Specialties: attachment, child-parent interactions, early childhood, trauma

Research Interests: the effects of trauma on attachment and caregiving behavior

JULIE LINKER, PhD, LCP, Assistant Professor

Psychology Training Director, Chief Psychologist

Specialties: cognitive behavioral therapy, mood disorders

Research Interests: mood disorders, program development and evaluation

JENNINE MORITZ, PhD, LCP, Adjunct Professor

Specialties: child and family therapy, attachment

Seminars and Clinics

A variety of didactic and experiential seminars are offered to interns at VTCC. These include:

Family Therapy Clinic/Supervision: This weekly supervision clinic utilizes a multisystemic model of family therapy and reviews structural, strategic, Bowenian, and other therapeutic approaches. Other topics in family therapy are offered, depending on the interests and training needs of the interns, and includes guest speakers on various evidence-based family treatment models. Co-led by Jennine Moritz, Ph.D., and a Psychology Post-Doctoral Fellow.

Assessment Seminar: This seminar includes a didactic portion that covers topics such as administration, scoring, and interpretation of the Rorschach, empirically validated assessment of specific disorders including trauma, anxiety, nonverbal learning disabilities, autistic spectrum disorders, etc., as well as a peer supervision portion in which interns take turns presenting protocols from assessments they are actively working on. Seminar meets twice per month, with more intensive time in the summer spent on Rorschach training. Led by Debbie Blackburn, Ph.D. and a Psychology Post-Doctoral Fellow.

Multidisciplinary Child Mental Health Series: This seminar series meets weekly. Through most of the year, it is attended by psychology interns, psychiatry fellows, and social work interns, and provides an opportunity for cross-disciplinary training. Occasionally, specific seminars are provided to psychology interns only. Topics are taught by Psychology, Psychiatry, and Social Work faculty. In addition to the following seminars, special topics in Child Mental Health are presented, including sessions on topics such as Motivational Interviewing, Psychopharmacology with Children and Adolescents, and evidence-based treatments for various disorders.

Ethics Seminars: These seminars provide an overview of training in professional standards and ethics that are likely to be encountered in a child-serving mental health facility, and includes discussions of ethical and legal standards from the perspectives of multiple disciplines. It also includes a session provided only to psychology interns for review of "Ethical Principles of Psychologists and Code of Conduct," followed by application of the Principles and Codes to difficult cases examples.

Cultural Competency Seminar: Through this seminar, interns have the opportunity to increase their level of comfort and sensitivity in working with diverse populations. The cultural diversity seminar is based on the premise that we become more adept at meeting the challenges of working with individual and cultural differences if we have opportunities to contemplate and practice talking with one another about how differences influence interactions and communication with team members and clients. We also develop our skills by exploring our own cultural heritage and the ways we are influenced by our unique histories. Through this process, we sometimes become aware of long-held biases and stereotypes that we might wish to question. This seminar is

experiential and discussion-oriented, and begins early in the training year to form a basis for discussion of diversity issues in other seminars and in clinical supervision throughout the year. Co-led by Julie Linker, Ph.D., and Cheryl Al-Mateen, M.D.

Treatment of Trauma: This seminar focuses on principles of treating traumatized children and adolescents, and presents empirically-based treatments for trauma-related symptoms. This seminar also provides opportunities for discussing the experience of treating trauma and the impact of this on the therapist as a person. Topics covered include stages of trauma treatment, dissociation, Dialectical Behavior Therapy, Trauma-Focused Cognitive Behavior Therapy, vicarious trauma and therapist self-care, seeking safety, the biology of trauma, complex trauma, non-interpersonal trauma, and resilience and posttraumatic growth. This seminar is primarily didactic in nature, but allows for discussion of the practical application of these principles to interns' current therapy interventions. Led by Leslie Kimball Franck, Ph.D.

Cognitive Behavioral Therapy: This seminar emphasizes the application of CBT conceptualizations and techniques to the complex and challenging cases that are frequently encountered at VTCC. Depending on the knowledge and background of the seminar participants, it may include review of specific manuals for treatment of mood, anxiety, or behavioral disorders. Participants will learn principles and strategies for identifying when and how to adapt CBT interventions according to cultural, developmental, or other factors that a child and/or family is presenting. Led by Julie Linker, PhD.

Attachment Seminar: This seminar emphasizes principles related to attachment, child development, and parenting. This seminar is primarily process oriented in nature, such that participants engage in active, focused discussion based on assigned scientific readings and reflections. Trainees are expected to come to each meeting with three questions or talking points from the assigned readings. After completing the assigned reading, participants are responsible for writing a brief (1-2 page) reflection paper focused on thoughts and reactions related to the article. Led by Jennifer Hinesley, Psy.D.

Psychopathology Seminar: This weekly series uses Problem Based Learning (PBL) strategies, in which psychology, psychiatry, and social work trainees utilize cases to raise questions and solve problems with an active learning mentality. This works by reviewing introductory material to a case, defining questions that need to be resolved about the case, and the trainees researching the answer to the question and teaching the answer to the group at the subsequent session. A faculty/expert is present to facilitate the learning. This seminar will be organized into 3 session modules. PBL cases will be presented, through which aspects of differential diagnosis, DSM-V criteria, epidemiology, testing and assessment, formulation and treatment planning will be explored. All major diagnostic categories will be covered over the course of the year, and each module will also focus on separate co-morbid or concomitant issues (for example, a Depression case may also focus on violence and suicide prevention, while

an Anxiety case might focus on co-morbid medical conditions such as diabetes.) The seminar is led by rotating psychology and psychiatry faculty.

Intensive Training Seminars

Family of Origin Seminar: The Family of Origin Seminar provides an opportunity for psychology interns to explore the family issues they bring to the therapy process. The first day of this training is designed to offer trainees the opportunity to share information about their own families; the second half-day focuses on the clinical relevance of family of origin issues. In this confidential seminar, interns are encouraged but not required to explore and share their own family of origin issues with the lens of the family therapist and as they relate to their clinical work. Led by Jennine Moritz, Ph.D.,

Play Therapy Seminar: This daylong seminar is a fun training day with a focus on play therapy with children. The day involves a combination of lectures, viewing videotapes and discussion. Interns are introduced to theories about the curative factors of play therapy, the stages of traditional nondirective play therapy, as well as several structured play therapy interventions. Led by Debbie Blackburn, Ph.D.

Internship Resources

Each intern is provided with an individual office equipped with a desktop computer and printer. All interns are provided with clerical support from the Medical Records department for dictation and preparation of documents and other medical records management. Outpatient office staff is available for scheduling intern outpatient appointments. Therapy rooms are available for individual, family, and play therapy sessions. Most therapy rooms are equipped with recording equipment to facilitate videotaping of sessions for review with supervisors.

Interns are provided with a stipend of \$26,000, which is paid out twice a month over the course of the year. Benefits include health insurance, a total of 20 days of annual/holiday/education leave, and 15 days of sick leave.

Internship Application and Selection Policies

The VTCC Pre-Doctoral Psychology Internship program uses APPI Online to post internship details and application requirements. APPI is also used to receive applications. Deadlines are posted on APPI Online, and only complete applications received by that date are accepted.

Once applications are received, they are carefully reviewed. Applicants who are selected by interview are notified by phone or email by the deadline set by APPI. In-person interviews are encouraged, but phone interviews are accepted. Applicants are given a choice of three to four dates on which to interview during the first weeks of January.

Applicants selected for interview are provided with a one-hour group overview of the VTCC program by the training director and other available faculty. After the overview, each applicant is interviewed by two different faculty members for 30 minutes each, using standardized interview questions. They also go on an hour-long tour of the facility conducted by current interns and post-doctoral fellows. Throughout the half-day visit, applicants are encouraged to ask questions of both faculty and trainees, and they are provided with contact information if they have follow-up questions. Adherence to the APPIC requirements for the selection process is emphasized, and VTCC does not follow up with applicants to enquire about their interest in the program, or for other reasons other than to respond to applicant inquiries. After all interviews are completed, the faculty meet together to review and rank each applicant. Selection procedures follow VCU and VCUHS hiring guidelines.

Because the VTCC internship training has an emphasis in child clinical and pediatric psychology, applicants who show promise of a career focus in these areas will be given priority. Evidence of prior experience in and commitment to child clinical or pediatric psychology will be weighed heavily in evaluating applicant credentials. Experience in child/adolescent psychological assessment is preferred. Because of the emphasis on including families in treatment at VTCC, experience in family therapy is also considered.

Internship Training Goals and Competencies

The following goals, objectives, and competencies form the basis of the internship training curriculum. By the end of the training year, interns are expected to demonstrate these competencies, usually without assistance or corrective supervision.

Goal 1: To promote competence in theories and methods of psychological assessment, diagnosis, and case conceptualization with children and adolescents.

- Demonstrates effective clinical interviewing skills with children and families.
- Demonstrates ability to appropriately select tests and measures to be used in assessment.
- Demonstrates ability to effectively administer, score, and interpret cognitive and developmental tests.
- Demonstrates ability to effectively administer, score, and interpret projective tests.
- Demonstrates ability to effectively administer, score, and interpret behavior rating scales and objective self-report measures.
- Demonstrates knowledge of DSM-IV and utilizes historical, interview, and psychometric data to diagnose accurately.
- Demonstrates skill in assessment of children and adolescents of diverse backgrounds.
- Demonstrates ability to effectively collect data from multiple sources and effectively combine information to conceptualize key clinical issues.

- Writes reports in an accurate, organized, and clear manner.
- Completes assessments in a timely manner.
- Provides recommendations that are specific and individualized.
- Effectively communicates findings to patients and/or families, and interdisciplinary team members.

Goal 2: To promote competence in theories and methods of clinical intervention with children, adolescents, and families.

- Formulates a useful case conceptualization.
- Demonstrates ability to formulate and implement a treatment plan that is effective and consistent with the case conceptualization, and utilizes best practices and scientific literature.
- Collaborates with patient and/or family to develop appropriate treatment goals.
- Demonstrates ability to effectively develop, maintain, and use the therapeutic relationship. Manages and uses own emotional reactions to the patient productively.
- Utilizes data to evaluate effectiveness of interventions, and modify intervention efforts as needed.
- Effectively communicates and collaborates with other disciplines and community providers in intervention efforts.
- Demonstrates understanding of family systems concepts and ability to conceptualize patient problems from a family systems perspective.
- Demonstrates ability to structure a family therapy session, and can develop family goals and themes in order to help resolve the presenting problem.
- Demonstrates skills in intervention with children and families from diverse backgrounds.
- Demonstrates ability to complete key patient care tasks (e.g., phone calls, letters, and case management) in a timely and effective manner.
- Completes documentation according to agency requirements. Records include appropriate and crucial information. Written communication is concise and respectful.
- Demonstrates ability to effectively respond to clinical emergencies and to manage clinical crises. Consults and communicates with supervisors about critical clinical issues.

Goal 3: To promote competence in theories and/or methods of consultation, evaluation, and supervision.

- Demonstrates ability to determine and clarify referral questions/issue.
- Effectively selects and collects appropriate information to address the referral question.
- Understands and works within the scope of the consultation role.
- Demonstrates skill in identifying referrals and helping family's access services.

- Effectively communicates with other professionals regarding consultation and recommendations.
- Demonstrates effective teaching and case presentation skills.
- Demonstrates understanding of principles of program evaluation and is able to design, implement, and utilize a program evaluation.
- Demonstrates knowledge and application of supervision theories and techniques

Goal 4: To promote development of skills in understanding and responding to issues of cultural diversity.

- Demonstrates skill in assessment of children and adolescents of diverse backgrounds.
- Demonstrates skills in intervention with children and families from diverse backgrounds.

Goal 5: To promote the development of ethics, values, and professional identity and behavior to reflect and enhance the professional practice of child clinical and pediatric psychology.

- Demonstrates well developed understanding of ethical and applicable state law and consistently applies these, seeking consultation as needed.
- Demonstrates professional interpersonal behavior with treatment teams, peers, and supervisors.
- Demonstrates professional demeanor in interactions with patients (including nonverbal presentation and attire.)
- Seeks consultation/supervision and uses it productively.
- Effectively manages stress and competing demands to maintain professional functioning and quality patient care.
- Demonstrates skills in efficiency and time management.