

Virginia Treatment Center for Children Doctoral Internship in Clinical Psychology

2026/27 Training Year
(updated 9/2025)

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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. The internship is in Pediatric Psychology, accredited as a doctoral internship in Health Service Psychology. 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

VTCC Psychology Doctoral Internship Brochure

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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 a continuum of care for treating children and adolescents with serious emotional disturbances. The internship program just completed a successful APA site visit and was granted a full 10 year accreditation through 2032. 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 \$32,635.

The Virginia Treatment Center for Children is part of the 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 the 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, pediatric consultation, 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 strive to give each child the best treatment possible and extend to each family respect and compassion. We are committed to including parents and guardians actively in their child's care — from the initial evaluation through treatment and in 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 April, 2018, VTCC moved into a newly built facility, featuring state-of-the-art technology and architectural features designed to provide an accessible, family-friendly pediatric psychiatry environment. Interns benefit from enhanced learning facilities, as well as design elements to enhance multidisciplinary collaboration. For a virtual tour of our building, go to: https://youtu.be/_YfeUXjUJ9g

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 thoughtful application of psychological science to address clinical problems, including the implementation of empirically supported interventions. 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 two six month major rotations(one in acute/intensive services and the other in an assessment specialty) emphasizing either child and adolescent acute psychiatry or pediatric consultation/liaison. In addition, interns participate in year-long clinical services focus 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 tracks intern time to learn how many hours they are putting into their internship experiences. Interns generally report an average workweek of about 40-45 hours. A total of 2000 hours are required for completion of the program (which is inclusive of 21 days of accrued paid time off leave). 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 case management (10 percent).

Internship Clinical Experiences

VTCC Outpatient Psychotherapy Clinic (*all year*)

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

There are also additional opportunities to engage in group facilitation of group psychotherapy, based on training needs and interest throughout the year.

Psychological Assessment Service (*all year*)

Comprehensive Psychology Evaluations (All year)

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 3 by the mid year evaluation and **6 comprehensive evaluations** by the end of the internship experience. These evaluations are inclusive of 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.

Internship Clinical Rotations

Major Rotations (6 months)

Acute/Intensive Care Services Rotation (*6-month rotation*)

Acute Inpatient Program Supervising Faculty Dr. Cosby)

Interns participate in multidisciplinary teams, and serve as therapists for their assigned child and adolescent patients admitted to the acute treatment program. The therapist will assist and collaborate and cofacilitate with other therapists, providing intensive individual and family therapy, consulting with psychiatrists regarding medication, developing specialty behavior management plans and strategies, and developing and implementing an effective treatment program and discharge plan. The therapist also provides 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.

Additional opportunities for acute consultation model: If the team has a question that we can help answer, these brief assessments can help guide the course of inpatient treatment and recommendations. While we can provide diagnoses with these evaluations, the main focus is to help with case conceptualization or clarification of concerns that may be hindering treatment progress. Examples of appropriate referrals include: degree of psychosis, malingering, autism spectrum screening, personality functioning, and trauma symptoms. Emotional functioning (e.g., depression, anxiety) may be assessed to provide a snapshot of current symptoms but may not be representative of general functioning. On rarer occasions, interns may provide cognitive testing as a part of this service.

During this rotation, interns will also have the opportunity to provide supervision to psychology practicum students.

Interns provide group psychotherapy for acute unit patients, 2-4 times per week. Groups are co-led with education staff and or social work staff, and follow a structured, Dialectical Behavioral Therapy skill development-oriented curriculum.

VTCC Partial Hospitalization Program-Mood and Anxiety (Supervising Faculty Dr. Cosby)

Our Partial Hospitalization Program is designed to meet the needs of children and teens who don't require inpatient care, but could benefit from a supportive, intensive and coordinated day-treatment environment. This 10-day program is specially designed to help children and teens build coping skills and strategies to address the challenges they face. The program includes: Multifamily group therapy, Individual therapy, Family therapy, Dialectal behavioral therapy – focuses on restructuring thoughts to change behaviors., Cognitive behavioral therapy – helps patients manage intense emotions, maladaptive (negative or irrational) thinking patterns and problematic behaviors. Interns will be involved with a multidisciplinary team delivering group, family, and individual therapy services.

Assessment Rotation: Interns will choose between 2 specialty assessment areas to focus on for 6 months.

Child Development Clinic (Supervising Faculty Dr. Wall)mcosby

Developmental pediatrics provides a unique approach to care which includes a team of specialists from developmental pediatrics, psychology, education, nursing and social work to care for your whole child and family. The Child Development Center provides a comprehensive assessment and evaluation, referrals, care coordination and recommendations for intervention services.

Neuropsychological Services (Supervising Faculty Dr. Walter)

Interns who want some exposure to clinical neuropsychology in order to become more well-rounded practitioners are able to complete a 6-month rotation in neuropsychology. The neuropsychology assessment service provides diagnosis of the cognitive and behavioral effects of various neurological and psychiatric disorders, including traumatic brain injury, stroke, cancer, sickle cell disease, epilepsy, congenital heart disease, and low-incidence genetic disorders. Interns may gain experience assessing individuals from approximately age five to 25. Those interested in this rotation must have previous neuropsychology practicum experience.

Pediatric Consultation and Liaison Specialty Services (3-4-month rotations)

As part of the Pediatric Consultation and Liaison Specialty services, interns serve as mental health consultants to various pediatric specialty clinics within the VCU Health System. Currently, these include:

Craniofacial Care Clinic: (Supervising Faculty-Dr. Le) The Center for Craniofacial Care at Children's Hospital of Richmond at VCU provides care for children with acquired or congenital conditions such as cleft lip and palate, premature fusion of the sutures of the skull, genetic syndromes, vascular malformations and skull and face asymmetry. The psychology service for this clinic has a preventative focus and involves substantial interdisciplinary team experience.

CHoR Pediatric Endocrinology and Healthy Lifestyles Center: (Supervising Faculty-Drs. Caccavale and Button) As part of the Health Psychology service, interns collaborate with the multidisciplinary team to optimize care for patients and families with type 1 and type 2 diabetes, obesity, and other endocrine disorders (e.g., thyroid, growth hormone deficiency). The Health Psychology service provides evidence-based evaluation and treatment including behavioral weight management, motivational interviewing, acceptance-based and cognitive-behavioral approaches to promote health behavior change and coping with medical conditions. Intervention may target disease-related distress, adherence to diabetes regimen, as well as positive behavior changes such as improving diet quality or addressing patterns of emotional eating. There are several modes of treatment ranging from brief consults, intake evaluations, to short and long-term psychotherapy cases. Interns also complete presurgical psychological assessments as part of the adolescent weight loss surgery program.

NICU Psychology-(Supervising Faculty Dr. Williams) Neonatal Intensive Care Unit (NICU) Psychology: In this rotation, psychology residents will receive specialized training in peripartum parental mental health and infant development. Psychology residents will have the opportunity to work closely with interdisciplinary teams in several peripartum settings including: High-Risk Inpatient Antepartum care, the Inpatient NICU setting, and the Continuing Care Program for the NICU's highest risk infants post-discharge (ages 0-2). Across the Antepartum and Inpatient settings, residents will conduct brief psychological assessments and provide brief, evidence-based treatments for the most common parental mental health concerns (e.g., PTSD, depression, anxiety) and conduct attachment-based therapies to promote caregiver-infant bonding. In the outpatient setting, residents will conduct brief psychosocial assessments and provide behavior-based interventions on common presenting concerns in parent-infant/toddler dyads.

Gastroenterology and Autonomic Clinic (Supervising Faculty Dr. Leffler)- Psychologist in the Division of Child and Adolescent Psychology and in Pediatric Gastroenterology, Hepatology, and Nutrition. Services may include individual assessments/evaluations, individual therapy, and family therapy.

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 Faculty/Supervisors

ALYSSA BUTTON, PhD, LCP

Internship Roles: Consultation & Liaison Rotation Supervisor

Specialties: Endocrinology/Healthy Lifestyles Center, health behavior change and adherence, coping with chronic illness, Motivational Interviewing

LAURA CACCAVALE, PhD, LCP

Internship Roles: Consultation & Liaison Rotation Supervisor

Specialties: Endocrinology/Healthy Lifestyles Center, health behavior change and adherence, coping with chronic illness, Motivational Interviewing

PAIGE CERVANTES, PhD, LCP

Internship Roles: Assessment supervision

Specialties: Autism, mental health conditions in the context of developmental disabilities, behavioral and cognitive behavioral therapies, autism services research

MICHELE COSBY, PsyD, LCP

Internship Roles: Training Director, Preceptor, Acute supervisor, Outpatient Supervisor

Specialties: Risk Assessment, crisis intervention, positive psychology, cultural competence, and clinical supervision

ANH-THUY LE, PhD, LCP

Internship Roles: Preceptor, outpatient and assessment supervisor

Specialties: ADOS and Autism Spectrum Disorder

JARROD LEFFLER, PhD, LCP ABPP

Internship Roles: Chair, Division of Child and Adolescent Psychology, Assessment Supervisor, Group Therapy Supervisor, Outpatient Supervisor, Preceptor, GI Supervisor

Specialties: Mood disorders, evidence based assessment and treatment, group therapy, program development and implementation, leadership acute and intensive treatment models , and clinical supervision

STELLA LOPEZ, PsyD, LCP

Internship Roles: Outpatient Supervisor, Preceptor

Specialties: Health psychology, trauma, complex trauma, cultural competence, and brief multidisciplinary assessments.

CARLA WALL, PhD, LCP

Internship Roles: Assessment Supervisor/Child Development Clinic

Specialties: Developmental pediatrics, Autism, intellectual/developmental disabilities, and neurodevelopmental disorders

JENNIFER WALTERS, PhD, LCP

Internship Roles: Assessment Supervisor

Specialties: Neuropsychological evaluation of patients with other conditions impacting brain functioning, including genetic disorders and congenital heart disease.

ALLISON WILLIAMS, PhD, LCP

Internship Roles: NICU Psychology CL Supervisor

Specialties: NICU Psychology inpatient and outpatient services, Parent support

ANNIE WRIGHT, PhD, LCP

Internship Roles: Adoption and foster care consultation, research, and didactic opportunities

Specialties: Adoption, Trauma, Attachment, Behavioral Parent Training, Anxiety Disorders

****Additional Psychiatry Faculty and staff will also provide didactic training throughout the year.****

Seminars and Didactics

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

Group Consultation in Autism and Related Developmental Disabilities: Youth with developmental disabilities are a population with significant mental health need, and yet mental health concerns in this population too often remain undetected and untreated. Autistic children and adolescents, in particular, make up a significant portion of the psychiatrically referred child and adolescent population and are far more likely to be seen in a general mental health clinic than in a specialized autism setting. Unfortunately, generalist providers frequently report feeling ill-equipped to assess and treat psychiatric difficulties in this group of youth, resulting in care disparities. To prepare our interns to better address the needs of this population, we **offer twice per month** group consultation with an autism specialist provider to receive targeted training, support, and recommendations in the assessment and treatment of youth with developmental disabilities and co-occurring mental health difficulties. Within this activity, opportunities to contribute to evidence-based group therapies and to research efforts focused on the co-occurrence of autism and mental health challenges will be available. Led by Paige Cervantes, Ph.D

Acute and Intensive Treatment Programs Seminar: This **monthly** seminar focuses on elements of acute and intensive treatment programs for youth. Content will address clinical, training, research, administration, and leadership. This seminar provides opportunities for discussing the experience of working with youth, families, and team members in these settings. Topics covered include history, models of care, working with a multidisciplinary team, transporting evidence-based treatments, implementation science, program development, and evaluation. This seminar is primarily didactic but allows for discussion of the practical application of these principles to interns' current training activities. Each trainee will develop a model of acute or intensive care and present that to the group at the end of the year. The seminar is led by Jarrod Leffler, PhD, ABPP.

Assessment Seminar: This seminar includes a didactic portion that covers topics such as administration, scoring, 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. Led by Anh-Thuy Le, Ph.D.

Professional Development/Program Director Rounds: This is a monthly seminar/meeting with the Program director to discuss progress, questions, and concerns openly.

- There will also be structured discussion of topic relevant to the professional development of a psychologist to include topics such as: resilience, imposter syndrome, communication, accountability, time management, self-reflection,

critical thinking, analysis, self-care, forensic matters, post-doctoral fellowship, as well as licensure.

- **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. Led by Michele Cosby, PsyD and other faculty based on topic area.

Psychology Division Chair Rounds: This is a Quarterly meeting with the Chair of the Division of Child and Adolescent Psychology to discuss progress, questions, and concerns openly. Led by Jarrod Leffler, PhD, ABPP

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.

- **Evidence Based Therapy:** This seminar emphasizes the application of Cognitive Behavioral therapy and other evidence based therapy. It 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 and other evidence based interventions according to cultural, developmental, or other factors that a child and/or family is presenting. Led by Michele Cosby, Psy.D. and other Psychology faculty and guest presenters.
- **Treatment of Trauma:** This monthly 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 Michele Cosby, 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

- **Introduction to Cultural Mental Health:** Through 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 introductory, but it is expected that that concepts are applied to all case presentations throughout the year under consultation of their case supervisor. Led by Stella Lopez, PsyD
- **Supervision Retreat:** This is a 3 hour seminar to discuss the theories and techniques of supervision and to assist in preparing trainees for additional supervision experiences. Led by Debbie Blackburn, PhD
- **Psychopharmacology Seminar-** This 2 hour seminar focusses on the study and therapeutic use of psychotropic medication, in addition to traditional

psychological interventions, for the treatment of mental disorders and promotion of overall patient health and well-being. Led by Sandra Mitchell, PharmD

Other Rounds/Conference

Department of Psychiatry Grand Rounds (Every Friday 11:45 am)- Interns expected to attend 10 for the year, especially those related to child and adolescents.

Complex Case Conference (Every third Friday)- Each intern is required to present one case during the training year.

Morbidity and Mortality Rounds (3 times per year) Provide Confidential structured peer review for participatory discussion to “openly and critically examine critical thinking and action in context of challenging cases;” Reporting and analysis of adverse events, Discussion of evidence-based practice.

Internship Resources

Each intern is provided with an individual or shared 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 \$32,635 which is paid out bi-weekly over the course of the year. Benefits include health insurance, and 8.3 hours per pay period of leave. This leave accumulates to approximately 27 days, which can be used flexibly for annual/holiday/education/sick leave.

Internship Application and Selection Policies

The VTCC 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 (or prior to) the deadline set by APPIC. In an effort to continue to focus on equity and inclusion for applicants, virtual interviews will be offered. 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 have a “virtual tour” of the facility. Applicants will then have a meet and greet discussion with current interns and post-doctoral fellows. Throughout the half-day “virtual” 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 and Completion Requirements

The development of the following competencies form the basis of the internship training curriculum. Evaluation in the VTCC Internship is an ongoing process throughout the year. In the context of regular supervision, interns are provided with feedback related to their performance and progress toward demonstrating the competencies of a professional psychologist.

Interns are formally evaluated twice during the course of the year. The first evaluation occurs at the mid-point of the training year and the second is prior to the end of the year. Interns are informed during Psychology Orientation of the schedule for performance evaluation and are provided with a copy of the instrument that is used to evaluate their performance. The evaluation consists of ratings by supervising psychologists and the competency areas to be rated are directly linked to our program goals.

On 6 month evaluations, All competency areas will be rated at a level of competence of **I (intermediate-3)** or higher. No competency areas will be rated as **Remedial (1)** or **Entry Level (2)**. **Remedial(1)** or **Entry Level (2)** ratings require a written remediation plan, to be implemented promptly.

At 12 months evaluations, 75% of , competency areas will be rated as “high intermediate (4)” or higher with no areas rated as “remedial (1)” or “entry level (2).”

For successful completion of the internship program, by the end of the training year interns are expected to complete the following:

- 1) Demonstrate the program competencies, usually without assistance or corrective supervision.
- 2) Meet minimal program requirements including a minimum number of psychological assessment reports, outpatient session hours and didactics attendance.
- 3) Attend an average of four hours a week of supervision, including two hours of individual supervision with a licensed clinical psychologist.

EXPECTED COMPETENCIES:

Domain: Psychological Assessment

- 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-5 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 finding to patients and/or families, and interdisciplinary team members.

Domain: Clinical Intervention

- Formulates a useful case conceptualization.
- Collaborates with patient and/or family to develop appropriate treatment goals.
- Demonstrates ability to formulate and implement a treatment plan that is effective and consistent with the case conceptualization.
- 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.
- Conducts therapy groups skillfully, attends to member participation, completion of therapeutic assignments, group communication and safety. Readies materials for group as needed, and understands each session's goals and tasks.
- 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.

Domain: Consultation and interprofessional/interdisciplinary skills

- Demonstrates ability to determine and clarify consultation referral questions/issue.

- Effectively selects and collects appropriate information to address the consultation question.
- Understands and works within the scope of the consultation role.
- Effectively communicates with other professionals regarding consultation and recommendations.
- Demonstrates skill in identifying referrals and helping families access services.

Domain: Supervision

- Demonstrates knowledge of supervision theories and techniques.
- Applies supervision theories and techniques with other trainees in a consistent and effective manner, seeking consultation as needed. Builds good rapport with supervisees.

Domain: Research

- Independently seeks current scientific knowledge to inform clinical practice and utilizes research findings or best practices as available and as appropriate for individual cases.
- Demonstrates ability to critically evaluate and disseminate research as applied to clinical cases in a case conference and/or other appropriate venues.

Domain: Ethical and Legal Standards.

- Demonstrates well developed understanding of ethical and applicable state law and consistently applies these, seeking consultation as needed.
- Conducts self in an ethical manner in all professional activities.

Domain: Professional Values, Attitudes and Behaviors

- 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.

Domain: Communication and Interpersonal Skills.

- Demonstrates professional interpersonal behavior with treatment teams, peers, and supervisors.
- Demonstrates professional demeanor in interactions with patients (including nonverbal presentation and attire.)
- Demonstrates effective teaching and case presentation skills.

Domain: Individual and Cultural Diversity

- Sensitive to the cultural and individual diversity of patients. Committed to providing culturally sensitive services.
- Aware of own background and its impact on patients. Committed to continuing to explore own cultural identity issues and relationship to clinical work.

INTERNSHIP PROGRAM TABLES

Date Program Tables are updated: 08/2025

Internship Program Admissions:

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. Training is presented through a strong didactic series, supervision from faculty holding a variety of theoretical orientations, and diverse clinical experiences. Interns are expected to develop sensitivity to and competence with individual and cultural differences, ethical issues, interdisciplinary teams, and systems issues. The VTCC internship provides broad experience in child clinical psychology that can be applied in a variety of settings, including hospitals, clinics, universities, or community agencies.

The program is designed for students in a doctoral training program that have practicum level experience in diagnosis, assessment, and interventions, with specific training with children/adolescents and families. Preference is given to students from APA-accredited doctoral programs in clinical psychology, but applications from other related programs will be considered. To be considered, applicants *must* have obtained a Masters degree in psychology or a related field, and proposed their dissertation before the application deadline.

Does the program require that applicants have received a minimum number of hours of the following at time of application? If yes, indicate how many:

Total Direct Contact Intervention Hours:	No	Amount:	NA
Total Direct Contact Assessment Hours:	No	Amount:	NA

Describe any other required minimum criteria used to screen applicants:

Applicants are preferred to have a minimum of 4 completed integrated reports *with children/adolescents*, and experience administering and scoring cognitive testing.

Intervention experience with a range of ages, with an emphasis on children and adolescents, and some family therapy experience, along with family therapy coursework is preferred.

Experience in a hospital, or other setting that would provide regular interactions with an interdisciplinary team is preferred.

VTCC conducts background checks on incoming interns and applicants need to be prepared to pass background checks and drug tests in compliance with state laws as well as Department of Health and Human Services policy. Not successfully passing these screenings/background checks may cause these sites to break a match with an incoming intern.

VTCC requires interns to receive the Influenza vaccination or an approved exemption prior to the internship start date.

Financial and Other Benefit Support for Upcoming Training Year:

Annual Stipend/Salary for Full-time Interns: \$32, 635

Annual Stipend/Salary for Half-time Interns: NA

Program provides access to medical insurance for interns? Yes

If access to medical insurance is provided:

Trainee contribution to cost required? Yes

Coverage of family member(s) available? Yes

Coverage of legally married partner available? Yes

Coverage of domestic partner available? No

Hours of Annual Paid Personal Time Off (PTO and/or vacation) 216

Hours of Annual Paid Sick Leave :

*all leave time is combined under 216 hours PTO

In the event of medical conditions and/or family needs that require extended leave, does the program allow reasonable unpaid leave to interns/residents in excess of personal time off and sick leave? Yes

Other benefits

Initial Post-Internship Positions

Total # of interns who were in the 3 cohorts:	11
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Total # of interns who did not seek employment because they returned to their doctoral programs/are completing doctoral degrees:	0
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	Post-Doctoral Residency Position	Employment Position
Community mental health center		
Federally qualified health center		
Independent primary care facility/clinic		
University counseling center		
Veterans Affairs medical center		

Military health center		
Academic health center	8	1
Other medical center or hospital		
Psychiatric hospital		
Academic university/department	1	
Community college or other teaching setting		
Independent research institution		
Correctional facility		
School district/system		
Independent practice setting	1	
Not currently employed		
Changed to another field		
Other		
Unknown		

Note: Each individual represented should be counted only one time. For former trainees working in more than one setting, select the setting that represents their primary position.