

BEHAVIORAL HEALTH DEPARTMENT
Psychological Services

CLINICAL
PSYCHOLOGY
INTERNSHIP
PROGRAM



WELCOME TO WOODHULL MEDICAL CENTER

Introduction to Woodhull Medical Center

We welcome you to Woodhull Medical Center's Internship in Clinical Psychology Program. Following you will find a description of our hospital, a view of our neighborhood, information about our population, and a summary of our training modality. We have been accredited by the American Psychological Association since 2007. Questions related to the program's accreditation status should be directed to the Office of Program Consultation and Accreditation, American Psychological Association, 750 1st Street, NE, Washington, DC 20002. Phone: (202) 336-5979; E-mail: apaaccred@apa.org.

NYC Health and Hospitals (H+H), the largest municipal hospital and health care system in the country, is a \$5.4 billion public benefit corporation that serves 1.3 million New Yorkers and nearly 500,000 who are uninsured. H+H provides medical, mental health and substance abuse services through its 11 acute care hospitals, 5 skilled nursing facilities, 6 large diagnostic and treatment centers and more than 70 community-based clinics. Its mission is the pursuit of excellence in:

- Comprehensive and compassionate health services of the highest quality to all those needing care in an atmosphere of dignity and respect.
- Health promotion, disease prevention, and the delivery of health care and serving as advocates, innovators, and educators in partnership with the communities we serve.
- Improving the satisfaction of our patients, staff and other customers and enhance our primary care services. Develop strategic alliances with public and private partners. Match needs with resources.
- Health care education of graduate students in Psychology.

Woodhull Medical and Mental Health Center, is one of 11 municipal hospitals of New York City Health + Hospitals, a public benefit corporation created by the New York State legislature in 1970, to manage and assume the responsibility for the operation of municipal hospitals throughout the five boroughs of New York City. Woodhull Medical and Mental Health Center, is situated in the Bedford-Stuyvesant section of Brooklyn. Woodhull has 403 beds with an average of 23,000 admissions per year. Opened in 1982, Woodhull is a full-service city hospital providing a wide range of inpatient medical and mental health services, and ambulatory care services. The ambulatory services include Surgery, Physical Medicine and Rehabilitation, Pediatrics, Geriatric Care, Obstetrics, Gynecology, Cardiology, Dentistry, The Pride Health Center (focused on caring for the LGBTQ+ community), Bariatric Care, and Mental Health. A new state-of-the-art Emergency Department provides necessary emergency services to the community. There are separate areas for adult, pediatric, and psychiatric cases. The Emergency Department is open twenty-four (24) hours a day, seven days a week. The medical center is fully accredited by the Joint Commission (JC).

Woodhull Medical and Mental Health Center is the sole provider of inpatient obstetrical, psychiatric, and physical medicine and rehabilitation services in the North Brooklyn area. Our service areas have been given status as a Federal Health Manpower Shortage Area I (HMSA I) which indicates a severe paucity of health care providers compared to population at large.

On August 1, 2007, Woodhull Medical and Mental Health Center entered into an affiliation agreement with New York University/Langone Medical Center. North Brooklyn encompasses the major areas of Woodhull Medical Center. According to the 2018 census data, Woodhull serves some of the most economically disadvantaged neighborhoods in the borough. The demographics of the area's population are approximately 42% Latinx, 42% Black, 10% White, 4% Asian, and 2% other. Census data indicate that new immigrants have been arriving in the area at a slightly higher rate than the rest of Brooklyn, originating primarily from the Caribbean, Poland, Ecuador, Mexico, and China. The majority of the Hospital revenue (approximately 70%) is generated from Medicaid reimbursements. The medical center recorded 8,608 inpatient admissions during FY year 2020, along with over 56,981 emergency room visits. Among patients treated at the medical center, 16% are Medicare beneficiaries, 42% are Medicaid beneficiaries, 17% of the facility's patients are individuals whose care is funded by an HMO or other private health insurance plan, and 23% are self-pay.

Woodhull Medical and Mental Health Center is located in Bedford-Stuyvesant area, 8 miles from Manhattan. The hospital is easily accessible by public transportation or car. It is within a 15-minute drive of New York City and provides easy access for local community residents and persons from nearby New York and New Jersey suburban areas. New York City is the most populous city in the United States, with its metropolitan area ranking among the largest urban areas in the world. Brooklyn is known as the city's most populous borough and for its cultural, social, and ethnic diversity, an independent art and music scene, distinct neighborhoods and a unique architectural heritage. It is also the only borough outside of Manhattan with a distinct downtown area. For more information visit: brooklyn.com or brooklynonline.com.

Woodhull Medical Center and the Psychiatry Department is the primary sponsor of the psychology internship program. Statewide, H+H has approximately 35,000 employees, including a multidisciplinary clinical staff composed of psychiatrists, advanced practice nurses, psychologists, social workers, and counselors. Woodhull Medical Center provides the full-range of behavioral health services to individuals throughout the life span.

The North Brooklyn hub of NYC Health and Hospitals primarily serves residents of Bushwick/Williamsburg and surrounding areas, and is a major player in Brooklyn's public mental health system. It provides psychology interns seeking to become culturally competent psychologists with excellent training opportunities and experience working with an economically disadvantaged and underserved population made up predominantly of people from African American and Latinx communities.

MISSION STATEMENT AND PHILOSOPHY

Our Mission

The mission of Woodhull Medical and Mental Health Center is to provide comprehensive and compassionate health services of the highest quality to all those needing care in an atmosphere of dignity and respect. We strive to promote and ensure wellness, serving as advocates, innovators, and educators in partnership with the diverse communities we serve.

Our Vision

We are the Gateway to Healthcare in North Brooklyn. We are partners with the Community. We are a resource for other health care providers.

Our Goals

Improve the satisfaction of our patients, staff and other customers and enhance our primary care services. Attract more patients to Woodhull. Develop strategic alliances with public and private partners. Match needs with resources. Maintain quality standards. Increase cost effectiveness.

Program Philosophy

Woodhull Medical and Mental Health Center's Psychiatry department is dedicated to responding to the specific behavioral needs of diverse groups across the life span. The Psychology Internship Program is committed to training professional psychologists in an environment that supports, promotes, and implements a cultural context perspective to mental health services, as well as contributing to the provision of culturally and linguistically competent services to non-dominant groups of Brooklyn.

However, cultural competence as a service delivery approach is applied to systems that serve people representing diversity along a variety of dimensions, including those related to gender, age, income level, geographic region, neighborhood, sexual orientation, religion, and physical disability. The major aim of our training program is to foster the student's acquisition of skills as a clinician, as a provider of clinical, consultative, and preventative service that address the needs of different age groups. We emphasize the coordination of intensive theoretically based, supervised, clinical experiences with systematic evaluations in clinical and community practice. The program provides required rotations that address the needs of Adults, Children, and Families who experience a variety of psychological difficulties. These rotations expose the interns to a broad range of patient populations and disorders. It is our view that these types of experiences will help create a strong foundation of clinical skills and help interns practice regardless of the area of psychology in which they will specialize.

Within this model, it is anticipated that close supervisory relationships will develop, and supervising psychologists are aware of their responsibilities as mentors and professional role models. A major focus of the internship experience at Woodhull is the development of the intern's ability to work with other professionals and to understand their role in the context of a team approach. We believe that psychologists are uniquely qualified to understand and enhance communication among disciplines and that their level of education and training prepares them for leadership positions. The development of a mature professional identity is just as important as the clinical skills acquired during the training year. Particularly in this era of limited resources, it is vital that interns understand the changing role of the psychologist in the hospital setting and managed care's effect on the way that psychology will be practiced in the future. Finally, we espouse a strong commitment to the ethical principles of psychologists.

Program Aims

The predominant aim of the Woodhull Medical Center's Internship in Clinical Psychology is to provide culturally competent training to the next generation of health service psychologists that: 1. Prepares them for entry-level practice in which they deliver high quality services within an integrated (medical and mental) healthcare system. 2. Fosters growth and development of psychologists who take interest in applying their knowledge to better serve an increasingly culturally diverse community. 3. Fosters the ability to integrate social justice issues and can effectively apply their knowledge and skills to ensure access, availability and affordability of psychological interventions to meet the needs of the public. 4. Fosters an inclusive perspective to leadership and development, including scholarly contributions that help disseminate and demystify psychological knowledge to the community. 5 To foster and encourage the highest acquisition and integration of advanced clinical skills within a context of culturally sensitive, ethical practice standards.

TRAINING MODEL

The combination of diverse populations, training facilities, and eclectic supervisors offers a multitude of training options. Within the core structure of the internship, the program is individualized to meet each trainee's specific needs. Clinical rotations are assigned after an initial assessment of each intern's interests, experiences, and training needs. Thereafter, regular meetings with the internship director allow the intern to remain aware of options available, and to be involved in the decision-making process regarding the specific components of their program as it evolves. Attempts are made throughout the year both to address gaps in the intern's previous experience and to augment and nourish the special interests of each intern.

The primary objective of Woodhull Medical Center's Internship in Clinical Psychology is to prepare interns for the practice of professional psychology with children and adults with a wide range of levels in functioning. Training includes experiences in psychological assessment, evaluation, consultation, and treatment of high need, underserved populations. The program provides an integrated year of training which emphasizes both breadth and depth of clinical exposure. The internship year consists of three full year rotations (Child Outpatient, Adult Outpatient, and Adult Inpatient). In order to obtain a beginning concentration in a particular area of clinical psychology students must also complete a minimum of two minor rotations within our "elective" specialties, thereby assuring that breadth of exposure is achieved. The overall training objectives of the program reflect a commitment to the development of clinical psychologists who are scientist practitioners and scholar-practitioners with broad-based clinical skills

The following principles guide our training staff and students in meeting the goals and objectives of the program:

- The internship program contains mandatory requirements that essential to the development of competency in providing psychological services to clients with a wide range of difficulties and levels of functioning in the identified developmental age range, with particular focus on services for underserved people from non-dominant ethnic and cultural groups.
- The emphasis on a dual track-based rotation in Child and Adult; (2) elective rotation assignments; (3) community involvement; (4) seminars; and (5) the diversified supervision process. The particular experiences acquired will vary according to the trainees' needs and interests, the combination of rotations selected, and the nature of the intern's clinical background and experience.
- Interns learn to work collaboratively and cooperatively with each other, engaging in joint projects, mutual support, and peer feedback and supervision.

PROGRAM STRUCTURE

The internship year begins the first week in September and ends on the last working day in August. Interns typically work 40 hours per week to satisfy all clinical and agency requirements, thus affording interns a minimum of 1820 - 2000-hour internship (above the minimum required for licensure). Interns are expected to provide approximately 18 face-to-face client contact-hours per week. As the agency uses both 30-minute and 45-minute therapy hour as a standard (with 15 minutes following for case notes and related paperwork), this generally translates into a caseload of approximately 8-10 cases in Child Outpatient services and 10 in the adult services who are typically seen on a weekly or bi-weekly basis.

The required core rotation involves direct clinical activities. Clinical activities are organized so that interns acquire and refine basic skills in assessment, consultation, and intervention with a variety of populations. The Internship program offers intensive training in four specific areas (core rotations) of clinical psychology: (1) Adult Outpatient, (2) Adult Inpatient Clinical; (3) Child/Adolescent Clinical, and (4) Psychodiagnostic Assessment. All interns are admitted to the core rotations and will select an area of concentration, which represents their professional focus and/or interests. Each intern completes three full year rotations and a minimum of two elective rotations within their area of specialization. The elective rotations are determined at the beginning of the internship year by the intern with input from the Training Director.

Core Treatment Rotation

Outpatient Level of Care

The Outpatient Clinic at Woodhull Medical Center has the responsibility for providing comprehensive behavioral health services within the Northern Brooklyn area. Most of the patients who receive services at Woodhull experience multiple, co-occurring clinical problems as well as social stressors such as lack of financial resources, inadequate school placements, adapting to a new culture, as well as involvement with the foster care system. Services offered include initial evaluation and assessment of prospective patients, emergency crisis-oriented services, outreach and engagement, short-term and long-term care, continuing individual, family, and group psychotherapy on an outpatient basis. Abundant individual and group supervision is provided for individual and group treatment with adjunct bi-weekly clinical case seminar that examines clinical, systemic, and professional development issues.

The Child and Adolescent Outpatient Department provides English and bilingual (English/Spanish) assessment and treatment services to youngsters between the ages of 3-18 years, and their families. This rotation emphasizes exposure to children and families presenting with a broad range of presenting problems including histories of trauma, psychotic disorders, mood disorders, learning disabilities, ADHD, obsessive-compulsive disorder, post-traumatic stress disorder, eating disorders, and PDD. Interns have access to supervisors representing a variety of theoretical orientations (e.g., cognitive-behavioral, psychodynamic, attachment, interpersonal and family systems). Interns participate as members of multidisciplinary treatment teams that specialize in working with children and adolescents. Close collaboration occurs with school teachers, social workers, psychiatrists, and caregivers. Clinical treatment typically occurs within the context of individual, family, dyadic, and/or group therapy modalities utilizing evidenced informed interventions. Interns also may have the opportunity to provide consultation regarding behavior management in the classrooms and/or consultation to local schools.

The Adult Outpatient Department provides English and bilingual (English/Spanish) treatment which include diagnosis and evaluation, short-term and long-term individual and group therapy, medication, and psychological testing to individuals starting at 18 through the developmental spectrum. This rotation emphasizes exposure to, individual and group therapy. Patients are experiencing a variety of emotional difficulties, ranging from anxiety and mood disorders to personality, dissociative disorders and psychotic disorders, with significant histories of trauma. Referrals to the Adult OPD most often result from the individuals themselves, although referral from physicians, inpatient settings, local hospitals, the justice system, other community agencies and the Department of Social Services also occur. Therapy interventions allow a variety of approaches to client treatment to provide for intern clinical growth and refinement of a variety of therapeutic techniques.

Interns participate as members of multidisciplinary treatment teams that specialize in working with adults and close collaboration occurs with social workers, psychiatrists, psychologists, counselors, and nurses.

Interns also participate in referrals to additional services offered at the Adult OPD when appropriate: The **Center for Integrated Health (CIH)** is a combined medical/mental health clinic that is co-located within the Adult Outpatient Psychiatric Department. The program, which opened in 2011, enables OPD patients with both behavioral and medical conditions to see a team of doctors who can collaborate and coordinate their care and help them avoid drug interactions. An array of services is offered, including screenings for chronic conditions such as diabetes, hypertension, HIV testing, and cardiac, and respiratory disease. This program has improved compliance with medical care, decreased the number of psychiatric admissions, lessened medical complications, demonstrated improved rates of chronic disease control, and achieved a significantly higher rate of patients attending their scheduled primary care appointments. Patients in the Adult OPD may also be referred for services within the home. **NYC H+H/Community Care** is a critical element in H+H's integrated healthcare delivery, targeted toward providing services for low-income individuals who have been significantly underserved by existing home care services. Nurses (or other professional staff members) visit patients at home to help them manage their chronic conditions or acute illnesses. Home health aides assist patients with daily activities such as shopping, meal preparation, bathing, and communicating with friends and family. These ongoing relationships help patients maintain their connection to the outside world.

Intern Participation in OPD: Interns carry approximately 14-18 cases, throughout the year. Interns can complete this requirement by including core and elective experiences. Training caseloads are provided to ensure a variety of treatment experiences as well as focused experience in a diagnostic area of particular interest. In this core rotation, the major portion of the clinical time is spent in the provision of individual, group and family treatment. Interns work as part of a multidisciplinary treatment team, including social workers, psychiatrists, and other clinical and non-clinical staff. Interns are responsible for treatment of their clients, as well as administrative responsibilities (maintenance of appropriate documentation, including treatment plans and progress notes). By the end of the year, interns are expected to develop treatment plans that require minimal correction. In addition, interns participate in an outpatient intake rotation, generally completing between 10 and 15 intake evaluations over the course of their internship. In this service, interns will more frequently collaborate with family members and as such the intern will learn how to organize and formulate clinical findings when two or more generations are involved. The intern will also gain experience in integrating information from school settings.

Inpatient Level of Care: Interns spend one day per week for three months. Within this experience, interns may carry individual cases, participate in case management, and lead groups. Participation in the milieu and meeting regularly with the clinical team are central aspects of the experience. In addition, interns must review treatment plans for their clients and maintain regular contact with the treatment team, which includes psychiatrists, medical students, social workers, nurses, music and arts therapists, and families. In addition, all interns must conduct a small applied QI project within the Inpatient units, typically focusing on some aspect of service delivery.

Group Treatment: All Interns are expected to participate in leading or co-leading at least two group therapy programs during the course of the internship year. This requirement can be met in the Inpatient Units, OPD and in many of the elective settings. Supervision for the group therapy experience is typically of an apprentice nature, in that the intern is co-leading a group with a more experienced clinician, with whom the issues of the group are discussed before and after the group meetings.

Core Assessment Rotation

- Outpatient Intake Evaluations
- Inpatient Intake Evaluations
- Psychodiagnostic Assessment (Outpatient and Adult Inpatient)
- Crisis Evaluations (ER, Mobile Crisis, CPEP, and Inpatient)

Intake Evaluations: Interns conduct intakes in the Child and Adult Outpatient Services. Interns receive individual supervision on their intakes from a psychologist in the outpatient services during the 10 months they are in this rotation. This supervision

typically begins in an apprentice fashion, as interns observe and participate in intakes conducted by their supervisors. Eventually, interns conduct the intakes on their own and are supervised weekly in this activity.

Psychodiagnostic Assessment (Outpatient and Inpatient): All interns spend approximately 3 hours a day per week throughout ten months engaged in formal psychological evaluations of both adolescents and adults. These include clinical interviews, cognitive testing, use of instruments measuring adaptive functioning, and projective and objective personality testing, neuropsychological screening, learning disabilities assessment, and assessment of dementia. Interns are expected to prepare a minimum of 5 reports and present findings to clients and families, as appropriate, and to make recommendations regarding diagnosis, treatment, school placement, and other discharge plans. Interns are provided individual supervision in psychological testing by a licensed psychologist on a weekly basis. They will also be involved in a monthly Testing Seminar conducted by licensed psychologists who have an interest in psychodiagnostic testing. Interns will be expected to demonstrate basic competency in testing. Interns will be assessed by testing supervisors in September as to the skills in administration, scoring, and interpretation of basic instruments. This will be done initially by review of your APPIC application and discussion. Individual supervision will be provided by the supervisors identified, on a weekly basis. Supervisors expect 5 batteries minimum, but might be more depending on need, to be completed. Interns are expected to devote a minimum of one hour per week to these activities for the duration of the internship year. By the end of the year, interns are expected to complete at least two reports with minimal corrections. In addition, there is a didactic seminar and Testing Lab associated with the testing rotation.

Crisis Evaluation: Interns receive individual supervision on their crisis assessments from a licensed psychologist in our Mobile Crisis Service during the six months they are in this rotation. As with the intake assessments, the supervision usually begins in an apprentice fashion and may develop into one in which interns present the assessments they have done independently. In this setting, interns also work with a multidisciplinary team who review the cases and assess the patients as well.

Required Didactic Experience

Woodhull Medical Center Orientation:

The orientation session for all new employees of Woodhull Medical Center is held on the first month of employment, typically September. The interns attend this along with all other new employees. Among other topics, employees learn about Woodhull's regulatory requirements, HIPAA compliance laws, patient safety requirements, and hospital benefits.

Psychiatry Department Orientation:

The orientation is conducted for all new employees and psychology interns and externs of Woodhull Medical Center's Psychiatry Department. The orientation includes a discussion of the Psychiatry Department's mission, vision, values, and goals, as well as its organizational structure and general policies and procedures. In this meeting, issues of confidentiality, HIPAA requirements, health and safety procedures, patient rights, cultural diversity, clinical documentation, and child and elderly abuse reporting are covered. The complete psychological services handbook is distributed.

Internship Orientation: Throughout September, different activities are scheduled to ensure that interns are prepared to transition smoothly to the program. Immediately after the Woodhull Medical Center and the Psychiatry Department's orientations, typically the third full day of employment, the interns meet as a group with the Director of Training. At this point, the requirements of the internship program are reviewed in detail. The interns are given the internship orientation manual and it is carefully reviewed with the Director of Training. The interns are also taken on a walking tour of the Psychiatry Department and of Woodhull Medical Center.

History of Bushwick Community: Scheduled in early September to introduce interns to the history of Bushwick. During this class, demographic aspects of the population are reviewed, and there is a discussion of the various neighborhoods and communities within Brooklyn. The interns go on a two half-day visit to the Bushwick community during late September. These are

independent visits where an intern can walk through the neighborhood, schedule to stop at a spiritual house, a school, an employment training facility, a local restaurant, and/or multi-service non-profit agency serving the community of Bushwick. At each facility, interns can schedule to meet with a staff member who tells them about the resources and challenges in the area.

EPIC (Electronic Medical Record): We require all interns to take the following course by the end of their second month (October 30). This training allows the intern to have reading access only to patients' medical record.

Street Art Project: Interns are asked to observe pre-selected street art/murals in the neighborhood to better understand the social and emotional life of the area. This allows the interns to begin to take in the neighborhood, its local social messages, and hone observational skills.

Additional Seminars (full year)

Psychology Intern Group Meeting and Supervision: Weekly group supervision for 75 minutes is provided by the Director of Training. Within this context, interns have the opportunity to discuss and present concerns about their progress through the program. This is the forum in which the interns discuss their educational experiences. In addition, they may elect to discuss individual treatment cases and present didactic material of special interest to them.

Psychological Assessment Seminar and Lab: The lab provides interns an opportunity to reflect and discuss "everyday questions" regarding testing/assessment. This meeting will follow a peer supervision format where interns and a faculty member will explore administration, scoring, writing, and feedback issues.

Complex Trauma Focused Discussions: Traumatic exposure has been implicated as a risk factor for numerous major mental health disorders, including depression, substance use/dependence, and PTSD. Trauma is also associated with physical health problems (e.g., ischemic heart, chronic lung and liver disease), negative health behaviors (e.g., smoking and severe obesity), difficult social, academic, and/or occupational functioning and overall decreased quality of life. This seminar will address the relevance of trauma to general clinical practice in children and adults. Discussion will also include knowledge of trauma science and the different types of best practice informed treatment

Advanced Issues in Behavioral Health:

1. **Cultural Context Competency:** covers issues associated with racial, ethnic, religious, gender, sexual orientation, age, and ability differences.
2. **Ethics and Risk Management:** covers general issues of ethics and risk management for psychologists, as well as guidelines APA has issued for specific areas.
3. **Professional Development:** psychologists from the community and within Woodhull are invited to discuss licensing issues, EPPP exam, private practice development and varied non-traditional roles of psychologists.
4. **Advanced Issues in Behavioral Health:** covers advanced issues in clinical practice including PTSD, Substance Abuse, DBT, Child Maltreatment, Chronic Mental Illness, Play-Therapy. The topics covered vary depending on training needs.

Other Didactic Experiences: Internal training seminars sponsored by H+H, and web-based trainings. For example, this year training included learning about the DSM V, Play Therapy for young children and Trauma Focused Cognitive Behavioral Therapy (TF-CBT), CBT-for Psychosis, and Impact of Gentrification on the community.

Core Educational Activity/Teaching Experience: Interns develop and present, with the supervision of a mentor, a topic about a body of psychological knowledge to a target audience. The topic must cover some aspect of multicultural competency. Audiences can be mental health professionals inside Woodhull Medical Center, professionals, or non-professionals who have requested training from Woodhull staff, (e.g., teachers, a church group, Child Protective Services, and Head Start programs).

All core rotations are located at Woodhull Medical Center.

Elective Rotations

Number of months and hours vary depending on rotation.

Some of the services described as part of the core program are also available as elective rotations. Students already scheduled for these experiences may choose to spend more than the minimal time or take on more than the minimal number of cases. For example:

Interns may spend more time in the Inpatient service.
Interns may pick up more than one therapeutic group.

In addition, electives are available in the following service areas.

Assertive Community Treatment: ACT is a service-delivery model that provides comprehensive, locally based treatment to people with serious and persistent mental illness. It provides highly individualized services directly to consumers. ACT patients receive multidisciplinary services of a psychiatric unit, but in their own home and community. The ACT team is composed of psychiatrists, social workers, nurses, substance abuse and vocational rehabilitation counselors, and psychologists.

Bilingual (English/Spanish) Clinical Experience: Interns will work collaboratively with Child and Adult Outpatient Service supervisors that provide services to the Latinx community of Bushwick. Interns will provide individual and/or family therapy in Spanish to children/adolescents and adults attending the outpatient department. Interns are required to provide at least one psychoeducational presentation to the Latinx community or to staff who work in the different community agencies. Interns participate in group/individual supervision (in Spanish) for 1 hour per week for 12 months. Supervision is provided by a Bilingual/Bicultural licensed psychologist.

Dialectical Behavior Therapy: Interns may elect this program, within Child and Adult Outpatient Services, which provides individual therapy, utilizing a Dialectical Behavior Therapy model, for adolescents and adults with complex trauma histories and associated symptomatology. A didactic seminar will accompany the therapeutic experience. Supervision will be provided by a licensed psychologist.

CPEP/Emergency Room: Intern will be exposed to the daily operations of a Psychiatric Emergency room by evaluating patients with a broad range of mental disorders including psychotic and affective illnesses requiring hospitalization, to adjustment disorders or brief supportive intervention cases referred to outpatient treatment. The intern will have the opportunity to provide interim follow up on high risk cases by seeing the patient with the mobile crisis unit until the patient attends their first outpatient appointment. In addition, interns will acquire a working knowledge of medications, used in an ER setting, to treat specific mental disorders, and learn about the side effects that contribute to non-compliance. The intern will work under the supervision of a full-time psychiatrist and a licensed psychologist.

HIV/AIDS Center: The clinic provides medical services for children and adults who are HIV affected. Our interdisciplinary mental health team includes psychiatrists, psychologists, social workers, and rehabilitation and addiction counselors. We offer an array of individual and group mental health services, including: mental health assessment, psychiatric consultation, individual psychotherapy, group psychotherapy (Support Groups, Men's Group, Women's Group, Anger Management, and Addiction Groups), substance abuse counseling and treatment adherence counseling. Interns may co-lead groups and carry individual cases.

Mobile Crisis Unit: Interns will assist in the assessment of cases in crises, and learn the bases of decisions regarding hospitalization. The more acute experience will be primarily an apprenticeship, in which interns watch experienced clinicians, and then participate along with them. Toward the end of the rotation, they may have an opportunity to conduct assessments independently and review them immediately afterward with a supervisor. Interns will be involved in the

assessment of the full age range of patients. Interns will participate in this rotation one day per week, for six months. In-vivo supervision plus an additional 1 hour per week with a psychologist.

OB- Clinic Collaborative: The Department of Obstetrics, Gynecology and Women's Health offers expertise in the management of high-risk pregnancies; treatment of malignancies in the reproductive system; and treatment of difficult gynecological problems. The department also offers complete primary obstetrical and gynecological care for teenagers and young adult women, ages 15-21. Interns' participation focuses on women's reproductive mental health needs in an effort to reduce stress and improve well-being; high levels of stress have been shown to increase the risk of adverse outcomes for women and newborns. Increasingly, assessment and management of mood and anxiety problems during pregnancy entails consideration of life stress and interpersonal relationships with partners, friends, and family members. Our services would provide pregnant and postpartum women with emotional support through groups and/or individual meetings.

Consultation Liaison (Brief Behavioral Intervention-BBI): Psychiatric consults are requested by attending physicians, residents, nurses, or other health care providers from a variety of specialty units for patients hospitalized for medical diagnoses and experiencing comorbid psychological difficulties. Consultations are commonly requested for assessment of depression, anxiety, suicidal ideation, behavioral changes, psychosis, delirium, cognitive impairment, substance abuse and decisional capacity. After an initial assessment by the Consultation Liaison psychiatrist, with whom the interns will work closely, patients will be referred to interns for brief, bedside interventions for the duration of their inpatient stay. During this rotation, interns will strengthen differential diagnostic skills when working with the medically ill, as well as learn to communicate and collaborate effectively with physicians and other providers involved in the patient's care. Interns may also collaborate with patients seen by the Consult for Addiction Treatment and Care in Hospitals (or CATCH) program. Interns will participate in this rotation for 4 hours a week for three or six months.

Quality Improvement Project: All interns can select to conduct a small applied research/outcome evaluation project, typically focusing on an evaluation of some aspect of service delivery in one of the service units to which they are assigned. This project is designed in collaboration with the supervisor, the training director, and the director of psychological services and the findings are communicated orally and in written form to the unit supervisor/administrator and to the staff. To fulfill this requirement, interns may also participate in the development of services in which goals and outcome measures for a proposed project are identified. Examples of future Quality Improvement Projects include attendance rates to screening/intake/treatment appointments, role of attendance in the effectiveness of treatment and clinic functioning, and exploring high rates of readmits to the Inpatient unit.

Substance Abuse Program: Interns carry 1-3 substance abuse outpatient cases and participate in the intensive outpatient program. Clients present with a range of alcohol and other substance use disorders and addictions. Interns will conduct intake evaluations, observe and run 1-2 groups, and participate in treatment team meetings. Supervision is held 1 hour per week provided by a licensed psychologist.

Kids Ride Club: The goal is to turn NYC youth on to cycling and/or to live a more active life in a way that's fun and safe. This program will nurture healthy living habits and lifestyles in our young people and provide them with a "mentorship" relationship outside the therapy office. The Kids Ride Club is made possible by our sponsors and partner groups. Rides are generally planned from May through October. There will always be at least two to four seasoned and senior Kids Ride Club leaders on each ride (usually more). Your main role is to work with the senior leaders to keep the rides safe, make sure we stay together, and help with planned activities and of course, to develop healthy relationships with the youngsters. There is a brief orientation for kids and leaders before every ride. Your assistance is greatly appreciated. To prove it, anyone who volunteers for at least three rides receives a free cycle jersey. After 6 rides a pair of matching shorts is provided. Gloves, a cycling cap, and socks complete the uniform after 9 additional rides. More importantly, we think you will enjoy exploring the city and beyond with our youth.

Group Therapy

- **Child/Adolescent Group Therapy:** Interns co-lead a group in the Child and Adolescent Outpatient Services, either with a staff member or another intern/extern. Groups may focus on particular age ranges, diagnostic categories, skills, or

content areas. Interns might also develop a group for a selected population of their interest. Supervision will be provided by the staff member who is the co-therapist, or by an assigned supervisor, if interns lead a group together as well as supervision through group seminar.

- **Parenting Skills Group:** Interns will lead or co-lead a parenting group in the Child and Adolescent Outpatient Services. The groups will utilize a curriculum focusing on enhancing and developing parenting skills of parents with children ages 4-12 or adolescents ages 13-16. Groups will include the use of reading materials, verbal discussions, activities, visual aids and homework. Groups will be held in either English or Spanish. During a Spanish speaking term of a group, interns, who are not fluent in Spanish, may run a parallel group in English with the guidance, structured curriculum, and supervision.
- **Adult Group Therapy:** Interns co-lead a group in the Adult Outpatient Services, either with a staff member or another intern. Groups may be focused on particular diagnostic categories, skills, or particular content areas. Interns might also develop a group for a selected population of their interest. Supervision will be provided by the staff member who is the co-therapist, or by an assigned supervisor, if interns lead a group together.

SUPERVISION

Core Supervision

The Psychology Department is committed to the ongoing professional development and education of its interns and seeks to promote in the group a commitment to the pursuit of personal and professional exploration in supervision. The interns will have three primary supervisors for the core Child and Adult and Inpatient caseloads and receive at least three hours per week of individual supervision, as well as a number of additional hours of group supervision and other learning experiences. In addition to the core competency areas, supervisors also teach and provide supervision to interns in specific methods of assessment and treatment approaches, e.g. clinical interview-based assessments, the administration and interpretation of specific psychological tests, cognitive behavioral therapy, dynamic therapy, treatment interventions for trauma victims, etc. depending on the particular rotation and particular supervisor.

Interns will also have a supervisor for the three months spent in the inpatient unit. This supervisor will meet individually one hour per week in addition to in-vivo supervision while co-leading groups.

Elective Supervision

In addition to the primary supervisors, each intern will have several other designated supervisors assigned to him or her during the course of the year. Supervision in these settings is in the form of individual meetings, small group supervision, and apprentice experiences. Each intern's training program is different based on the rotations they have elected, but considering both core and elective supervision, an intern typically receives at least three hours of individual supervision, and at least six hours per month of paired or group supervision.

Supervision styles and theoretical orientations vary, but there is a common emphasis on psychodynamic, cognitive behavioral, developmental, and family systems perspectives informing our conceptualizations and treatment approaches. Clinical supervision will also be available in assessment and treatment seminars, which utilize audiotape and case conference methodology. Psychologists, psychiatrists, social workers, and mental health specialists throughout the hospital are also available for consultation and teaching in their areas of expertise. Complementing basic individual and group supervision, through the process of working closely with a number of different supervisors, interns are also exposed to role modeling and mentoring on an ongoing basis.

A Core Case Seminar is required for all interns. This didactic will provide training and supervision in the core cluster areas of: Adult Development, Trauma, Diagnosis, Community Systems and Services, and Professional Development. As our

hospital serves a very diverse linguistic, ethnic, and economic population, our programs also offer ongoing training in multicultural issues as they inform the work of the psychologist.

Mentorship

Valuable internship experiences not only include effective supervision, but also, a large component of mentoring. Mentors can help guide students through their training experience by having the opportunity to reflect on his or her experience in a supportive, educational atmosphere. The mentor can pass on a wealth of experience and knowledge, and benefits from a fresh perspective and new ways of thinking.

In early October, interns are provided with a list of psychologists who have volunteered to become their mentors. You will find a description of their professional interests and contact information. Selecting a Mentor is **optional**.

EVALUATION

Multicultural competency and scholarly inquiry are central commitments of our internship program and therefore are crosscutting core competencies that are embedded in each of the other core competency goals. Training in the core competencies occurs through both didactic and practicum experiences that include participation in department-wide core seminars and colloquia for all interns, as well as in site-specific seminars, in-service training, supervision, and teaching associated with particular rotations. Individual core competencies are listed below. Core competency training in each of the particular practicum placements/rotations is tailored to the needs of a particular target population being served (e.g., individuals whose primary language is not English). Interns' performance in the core competencies is assessed on an ongoing basis through individual supervision, group supervision, treatment team meeting, formal assessments completed by individual supervisors and then discussed with the interns by their primary supervisor and Training Director.

Competency Model of Evaluation

The fundamental aim of our internship program is to promote the professional development of interns in each of the nine core competency categories: (I) communication and interpersonal skills; (II) individual and cultural diversity; (III) professional values, attitudes and behavior; (IV) ethical and legal standards; (V) assessment; (VI) intervention; (VII) consultation and interprofessional/interdisciplinary; (VIII) supervision; and (IX) research and scholarship. Training in the core competencies occurs through an organized program consisting of multiple experiences. These include but are not limited to: the delivery of professional services in the core and elective placements; supervision and mentoring; participation in structured training such as the core seminar; and completion of a scholarly project. The progress of interns in developing these competencies is assessed by supervisors informally throughout the year and formally through written assessments at two points of time during the year. The competency categories and the individual competencies are as follows:

I. Communication and Interpersonal Skills

- A. Communicates effectively
- B. Forms positive relationships with others
- C. Manages complex interpersonal situations
- D. Demonstrates self-awareness as a professional

II. Individual and Cultural Diversity

- A. Demonstrates awareness of diversity and its influence
- B. Develops effective relationships with culturally diverse individuals, families, and groups
- C. Applies knowledge of individual and cultural diversity in practice

- D. Pursues professional development about individual and cultural diversity

III. Professional Values, Attitudes and Behavior

- A. Displays professional behavior
- B. Engages in self-assessment and self-reflection
- C. Demonstrates accountability
- D. Demonstrates professional identity
- E. Engages in self-care essential for functioning effectively as a psychologist

IV. Ethical and Legal Standards

- A. Demonstrates awareness of ethical and legal standards applicable to Health Service Psychology practice, training, and research
- B. Recognizes and manages ethical and legal issues in Health Service Psychology practice, training, and research
- C. Adheres to the APA Ethical Principles and Code of Conduct

V. Assessment

- A. Conducts clinical interviews
- B. Appropriately selects and applies evidence-based assessment methods
- C. Collects and integrates data
- D. Summarizes and reports data

VI. Intervention

- A. Formulates case conceptualizations and treatment plans
- B. Implements evidence-based interventions
- C. Monitors the impact of interventions

VII. Consultation, Interprofessional/Interdisciplinary and Systems-Based Practice

- A. Provides consultation (e.g. case-based, group, organizational systems)
- B. Engages in interprofessional/interdisciplinary collaboration
- C. Engages in systems-based practice

VIII. Supervision

- A. Seeks and uses supervision effectively
- B. Use supervisory feedback to improve performance
- C. Facilitates peer supervision/consultation
- D. Provides individual supervision/peer consultation (if applicable)

IX. Research and Scholarship

- A. Displays critical scientific thinking
- B. Uses the scientific literature
- C. Implements scientific methods

Evaluation Process

Toward the end of the first month of internship (September), each intern will complete a self-evaluation. This self-evaluation will assist in the identification of strengths and areas for further growth and development.

In addition to the on-going feedback and evaluation which is a natural part of the supervision process, each intern receives formal, written evaluation ratings from each of their primary supervisor at midpoint (March) and at the completion of each training year (August). On a monthly basis, each core supervisor completes and reviews with the intern a monthly report

rating form indicating whether the intern is making satisfactory progress or whether there are any areas of concern; the form is then submitted to the Director of Training. Throughout the year, and formally at the end of the year, interns are asked to include suggestions for improving the training program overall. Particular attention is paid to diversity of cases and volume, supervision, and on-site seminars.

Requirements for Completion of Internship

To successfully complete the internship, interns are expected to meet the following requirements: 1) 1820 hours: The internship requires one year of full-time training to be completed in no less than 12 months. Interns must complete 1820 hours of supervised on-duty time during the internship year. Interns have the option of completing additional hours beyond the 1820 hours to meet certain states' licensing requirements. 2) Psychological Assessment: Interns must complete a minimum of five assessment reports. These assessments must be based on data integrated from multiple sources and must include written reports with diagnostic impressions and recommendations. Assessments based solely on interviews do not meet this requirement. 3) Didactic Training: Interns are required to attend weekly Intern Seminars presented by department faculty members and are encouraged and often required to attend in-service conferences and other didactic presentations associated with their rotations. 4) Case Presentations: In addition to informal case presentations made in supervision, interns are required to present one psychotherapy case and one assessment/diagnostic case as part of the Psychology Internship Case Seminar Series in order to demonstrate competency in these areas. 5) Competence in Clinical Activities: **EVALUATIONS-** Goal for Intern Evaluations Done Prior to 12 Months (mid-year) All competency areas will be rated at a level of competence Intermediate (3) or higher. No competency areas will be rated with a score of 1- Needs Remedial Work or score of 2- Entry Level. If there is an area of competency with a score of 1 or 2, and immediate plan of correction is required in order to assist the trainee in progressing to a higher level of functioning. Goal for Intern Evaluation Done at 12 Months (end-of-year). In order to graduate from internship all competency areas will be rated at a level of competence of Intermediate (3) or higher. No competency areas will be rated with a score of 1- Needs Remedial Work or score of 2- Entry Level; intern will not graduate with scores of 1 or 2. If an intern received a score of 1 or 2 in the end-of-year evaluation a plan of correction will be discussed with the intern's graduate program and could include; extension of internship to complete remedial work.

PROGRAM SELF-ASSESSMENT AND QUALITY IMPROVEMENT

The internship program is committed to program self-assessment and quality improvement. The Director, Training Supervisors, and current intern class have the basic responsibility for program self-assessment and quality improvement. The program is evaluated in an on-going manner by both supervisors and interns, both participating in maintaining the program current and effective. The director and training supervisors review intern evaluations of the internship experience and their suggestions for improvements. The Training Supervisors are responsible to ensure the goals, objectives of the internship, and that opportunities for improvement are considered. Informal evaluation of the internship is a continuing on-going process. Interns are encouraged to bring up issues, concerns, and suggestions for improvement throughout the year to their supervisors and the Training Director. The Director meets briefly with the interns at the beginning of each weekly intern seminar to discuss possible concerns. Mid-year and at the completion of the program, interns meet with the Director to provide a more detailed evaluation of the internship. This includes a description of the primary activities of each rotation, including aspects of the rotation found to be most beneficial and suggestions for improving rotations. The interns are also asked to include suggestions for improving the training program overall. Particular attention is paid to diversity of cases and volume, supervision, facility resources, and on-site seminars.

DUE PROCESS AND GRIEVANCE PROCEDURES FOR INTERNS

Interns are employees of Woodhull Medical Center, and, as such, are entitled to the avenues open to all employees concerning problems that may come up during their internship year. In general, employees are encouraged to discuss concerns, complaints, and grievances with their immediate supervisors, and to take those concerns up the supervisory chain of command if the situation is unresolved after discussion with the immediate supervisor.

In the case of the internship program, the supervisory chain of command that exists for interns regarding their experience as interns is as follows:

1. Direct supervisor for the specific clinical rotation in which the student is located
2. Director of Psychology Training
3. Associate Executive Director
4. Chairman Department of Psychiatry

In addition, interns may register complaints or concerns about issues in a particular service at Woodhull Medical Center with the following individuals:

1. Clinician Supervisor of the unit
2. Clinician Administrator of the unit
3. Director of Services
4. Associate Executive Director

Interns may also discuss concerns about a particular service with the Director of Training, Dr. Carla Pereyra D'Aiello or with the Associate Executive Director, Dr. Yehezkel Lilu.

Interns' concerns are important to us and we never want interns to feel that any avenues of access are closed. Interns are free to consult with the Training Directors in their home institutions, with outside official or unofficial mentors, with other supervisors, or with anyone else whom the intern feels would be helpful.

The Hospital recognizes that employees may have more difficulty bringing complaints through the normal chain of command in certain cases, and has offices in charge of certain types of issues, which employees may access directly. At the beginning of the internship year, interns will be expected to complete Woodhull's orientation sessions that educate students about their rights and obligations.

OFFICE HOURS AND VACATION POLICY

The general office hours for the internship are 9:00 a.m. - 5:00 p.m. Monday through Friday. However, the intern's professional responsibilities may extend the workweek beyond its customary 40 hours depending on individual training program. There are 10 annual leave days allowed per year included in these ten days is, dissertation defense. In addition, interns have three conference days per year. Sick leave is separate but monitored on an individual case basis for validity. Additionally, you must have a discussion with the Training Director and advance leave slips must be signed before leave is approved. Slips must be signed two weeks in advance of the planned absences. This is necessary for planning for coverage

(especially on inpatient units and on interdisciplinary teams). An exception to the two-week advanced supervisor approval rule would be a true emergency.

The Internship Program Director and the interns are responsible for keeping track of approved leave. No extended leave is allowed in September and August. Requests for brief leave for a very special purpose will be considered, but only with advanced approval, as above. Any leave taken outside of the above procedures will be subtracted from the 10 days or if 10 days are used up, the time will be added on to the end of the year in order to complete internship. In addition to these 10 leave days, regularly scheduled holidays and those designated by appropriate administrative authority are available to the interns.

Stipend

The 2022-2023 support to be approximately \$31,382 for the twelve-month period

Holidays

September	Labor Day
October	Columbus Day
November	Election Day, Veterans Day, Thanksgiving
December	Christmas
January	New Year's, Martin Luther King Jr. Day
February	Washington's Birthday, Lincoln's Birthday (floating holiday)
May	Memorial Day
July	Independence Day

Woodhull Medical and Mental Health Center is an Equal Opportunity/Affirmative Action Employer and does not discriminate based on an individual's sex, race, color, religion, age, disability, veteran status, national or ethnic origin, sexual orientation, or gender identity or expression.

APA Accreditation Status

This internship program is fully accredited by the Office of Accreditation of The American Psychological Association. Questions related to the program's accreditation status should be directed to the Office of Program Consultation and Accreditation, American Psychological Association, 750 1st Street, NE, Washington, DC 20002-4242. Phone: (202) 336-5979; E-mail: apaaccred@apa.org. This internship site agrees to abide by the APPIC Match Policies.

APPLICANT QUALIFICATIONS FOR PSYCHOLOGY INTERNSHIP

The Training Committee at Woodhull Medical Center has identified the following criteria as essential qualifications in order for applicants to be considered for the internship program:

1. Enrolled in an APA approved doctoral training program in clinical, counseling, or clinical and community psychology;
2. Minimum of 400 face-to-face hours of assessment and intervention (combined) at the time of application
3. At least three years of graduate training;
4. Passed the comprehensive or qualifying exam by the application deadline;
5. Approved dissertation proposal by the application deadline; and
6. Prospective interns must have approval to pursue an internship from their program Training Director.

Applying to the Internship Program

Applicants for Woodhull Medical Center Internship must submit the following materials by **November 26, 2021**

- APPIC Application for Psychology Internship (AAPI2010) Form (This on-line application form is available from the APPIC Web Site at <http://www.appic.org/>)
- Official transcripts of related graduate work
- **Three letters** of recommendation from professionals who have observed the candidate's academic and applied performance. Two of these evaluations must be from clinical practicum supervisors.
- Current Curriculum Vita
- In the opening lines of the cover letter, please write in **bold** the name of your graduate program.

Intern Selection Process Dates:

- November 26, 2021 - Woodhull Medical Center Application Deadline
- December 17, 2021 – Final day of selection and notification by e-mail of candidates for interviews, Candidates who are finalists for the internship will be asked to have a personal interview. We are expecting to schedule virtual individual and group interviews. We will inform all interviewees, for the 2022-2023 internship cycle, if interviews will remain fully virtual. If we schedule virtual interviews **all interviews** will be conducted this way in an effort to support safe and equitable practices, on site interviews will not be permitted, even if a prospective applicant lives within close range of the site. Candidates are advised to email the Training Director for updates regarding virtual interviews first week in December. If we are able to hold on-site interviews, we will follow the most updated national, state and local safety recommendations and selected applicants will be informed promptly.
- Please bring/send a small passport-like picture of yourself to the interview. On the back of the picture, please write your full name and date of interview. It is very helpful for us to have your picture when we discuss potential interns and develop our rank order list. Your picture will be shredded once the match process is complete or if you prefer, we can mail it back to you. If you want it mailed back to you please provide a self-addressed envelope.
- Woodhull Medical Center adheres to the procedures established by the Association of Psychology Postdoctoral and Internship Centers (APPIC) for notifying candidates. Internship offers will be coordinated through the APPIC Internship Matching Program. Our program code number is 1746. 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.

APPLICANT INTERVIEW POLICY

An interview with our staff of psychologists and a visit to our site (if possible given COVID-19 safety precautions) is very helpful in assessing the fit between an applicant's training needs and the opportunities our internship program offers. For that reason, we require an on-site or virtual interview as part of the application process. After an initial review of the

applications we receive, we contact selected applicants in December to invite them for interviews. If the applicant is not selected for an interview, they will be notified by email during the last week in December.

Our interviews are scheduled during December and January. Groups of eight to ten applicants are invited at one time. We ask that applicants set aside 4 hours to spend with us. Applicants will be scheduled for one individual interview, one group interview, and meet as a group with the Training Director for an overview of the program, meet with various supervisors and staff to learn about different rotations, and with the current group of interns to hear about their experiences and to take a tour of the facility.

- Please bring/email a small passport-like picture of yourself to your interview. It is very helpful for us to have your picture when we discuss potential interns and develop our rank order list. Your picture will be shredded once the match process is complete.
-
- If we you are scheduled for a virtual interview you will be given a link to our WebEx meeting room.

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.

INTERNSHIP ADMISSION, SUPPORT, INITIAL PLACEMENT DATA

Internship Program Admissions

Date Program Tables are updated: Beginning of Internship Year/September

Briefly describe in narrative form Important Information to assist potential applicants in assessing their likely fit with your program. This description must be consistent with the program's policies on intern selection and practicum and academic preparation requirements:

The Clinical Psychology Program at Woodhull Medical Center provides a generalist training within a clinical model to meet the mental health needs of underserved populations. All interns are required to participate in a year-long core rotation of their choice in the Adult or Child and Adolescent Departments and 3 months with Inpatient Services. Interns are also required to develop an area of interest by selecting from minor rotations: HIV Center, Chemical Dependency Services, Mobile Crisis Team, Bilingual Community Outreach (Spanish/English) Service, DBT, ACT, ER, Obstetrics, Consultation/Liaison and Group Psychotherapy. Interns will participate in a didactic seminar series. We offer significant supervision in all minor and core rotations. An interview with our faculty members and a visit to our site is required to assess the fit between applicants' training needs and the opportunities our internship offers. After an initial review of the applications received, we contact selected applicants during December to invite them to interview. If you are not selected for an interview, you will be notified by email during the last week in December. Applicants will be scheduled for an individual interview, a group interview, meet with current intern class, and get to meet faculty. If you are bilingual (English/Spanish) applicant you will, in addition, have a 30-minute interview and information session in Spanish with a faculty member to better assess skill level and interest in bilingual/bicultural work.

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	<input type="checkbox"/> N	<input checked="" type="checkbox"/> Y	Amount: 350
Total Direct Contact Assessment Hours	<input type="checkbox"/> N	<input checked="" type="checkbox"/> Y	Amount: 50

Describe any other required minimum criteria used to screen applicants:

- *Applicants are required to have their dissertation proposal approved by application deadline
- *Applicants are required to have a Master's Degree by start of Internship

Financial and Other Benefit Support for Upcoming Training Year*

Annual Stipend/Salary for Full-time Interns	\$31,382	
Annual Stipend/Salary for Half-time Interns	NA	
Program provides access to medical insurance for intern?	<input checked="" type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
If access to medical insurance is provided:		
Trainee contribution to cost required?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Coverage of family member(s) available?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Coverage of legally married partner available?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Coverage of domestic partner available?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Hours of Annual Paid Personal Time Off (PTO and/or Vacation)	80	

Initial Post-Internship Positions

(Provide an Aggregated Tally for the Preceding 3 Cohorts)

	2018 – 2021	
Total # of interns who were in the 3 cohorts	15	
Total# of interns who did not seek employment because they returned to their doctoral program/are completing doctoral degree	1	
	PD	EP
Community mental health center		2
Federally qualified health center		5
Independent primary care facility/clinic		3
University counseling center		
Veterans Affairs medical center		

STATEMENT OF NONDISCRIMINATION

Woodhull Medical and Mental Health Center is an Equal Opportunity/Affirmative Action Employer and does not discriminate based on an individual's sex, race, color, religion, age, disability, veteran status, national or ethnic origin, sexual orientation, or gender identity or expression.

FACULTY AND SUPERVISORS



Associate Executive Director

Yehezkel Lilu, Ph.D., Alliant International University, 1984. Director of Psychological Services; Private Practice; Interests: Child and Adolescent Therapy; Couples and Family Therapy; Psychological Testing; Mental Health Systems Administration and Program Development; Quality and Information Management. Yehezkel.Lilu@nychhc.org

Director of Training

Carla Pereyra D’Aiello, Psy.D., Wright State University, 2000. Director of Psychology Training, Woodhull Medical Center; Private Practice; Consultation; Interests: Intersectionality and Cultural Context, Complex Trauma, Couples Therapy, Affective Disorders in Children and Adults, Intersubjectivity Systems Theory. Carla.Daiello@nychhc.org

ACT Program

Sean C. Malone, PsyD., Union Institute & University, 2018. Psychologist, Woodhull Hospital Medical Center, Team Leader, Woodhull Assertive Community Treatment Program. Interests: Cognitive Behavioral Therapy, Forensic Population, Forums on Community Outreach. Malones@nychhc.org

Adult Outpatient

Anabelle Lampón, Ph.D., Carlos Albizu University, 2015. Clinical Psychologist, Adult Inpatient/OPD; Interests: Evidence-based practice, Influence of Culture on Sexual Behavior, Impulsivity and Decision-Making, Severe and Chronic Psychopathology, Personality Disorders, Paraphilias, Intersectionality, Complex Trauma and Trauma-Informed Care, Effective Risk Assessment of Suicide and Violence, CBT for Anxiety and Mood Disorders, OPWDD Certification for Capacity Evaluations, Organizational Performance Enhancement. Lampona@nychhc.org

Deidre Bassolino, Ph.D., Fordham University, 2020. Counseling Psychologist, Adult OPD; Interests: Identity Intersectionality, Multiculturalism, Role Negotiations, Complex Trauma and Trauma-informed Therapy, Social Justice, Consultation-Liaison Psychology, Collaborative Care. Bassolid@nychhc.org

Child Outpatient

Jane Berkman Kim, Ph.D., Fordham University, 2016. Counseling Psychologist, Child/Adolescent OPD; Interests: Complex Trauma; LGBTQ Community; Intersectionality; Child Development; Identity Development Models; Crisis Management; Impact of Microaggressions; Role of Psychologists as Social Justice Advocates. Jane.Berkman.Kim@nychhc.org

Jay Voss, Ph.D. University of Vermont, 1993. Psychologist III and Quality Manager, Child and Adolescent Outpatient Services, Woodhull Medical Center; Private Practice; Interests: Evidence-Based Practices in Child and Adolescent Psychotherapy, Treatment of Complex Trauma, Culturally-Informed Family Therapy, Systems interventions & Multi-Systemic Therapy; Mindfulness-based interventions including DBT & Interpersonal Neurobiology; Ericksonian Hypnosis & Solution-Focused Therapy; Motivational Interviewing; EMDR Resourcing. Jay.Voss@nychhc.org

Cheré Denise Hunter, Ph.D., Lehigh University, 2021. Child and Adolescent Psychology, Woodhull Medical Center; Interests: Complex Trauma and PTSD in Children and Adolescents, LGBTQ populations, Cultural Context, Attachment related systems, Teubers Approach to Interpersonal Process in Therapy. Hunterm1@nychhc.org

Adult Inpatient

Anabelle Lampón, Ph.D., Carlos Albizu University, 2015. Clinical Psychologist, Adult Inpatient/OPD; Interests: Evidence-based practice, Influence of Culture on Sexual Behavior, Impulsivity and Decision-Making, Severe and Chronic Psychopathology, Personality Disorders, Paraphilias, Intersectionality, Complex Trauma and Trauma-Informed Care, Effective Risk Assessment of Suicide and Violence, CBT for Anxiety and Mood Disorders, OPWDD Certification for Capacity Evaluations, Organizational Performance Enhancement. Lampona@nychhc.org

Marjorie Berkowitz, Psy.D., George Washington University, 2009. Inpatient Psychiatry, Team Lead; Private Practice; Interests: Childhood Trauma and Maltreatment; Inpatient Psychiatry; Forensic Psychology; Empirically Supported Interventions for special populations; Disruptive Behavior Disorders; Certified Provider, Collaborative Problem Solving ®; Berkowim@nychhc.org

Mobile Crisis Unit

Kaori Kato, Psy.D., Ferkauf Graduate School of Psychology at Yeshiva University, 2011. Clinical Psychologist, Director of Mobile Crisis Team in Comprehensive Psychiatric Emergency Program; Interests: Treatment for severe and persistent mental illness, crisis intervention, psychological/neuropsychological testing, cognitive-behavioral therapy, geropsychology, creative arts therapy, and multi-culturalism. Kaori.Kato@nychhc.org

Dale A. Singh, Psy.D., College of Saint Elizabeth, 2017. Counseling Psychologist, Mobile Crisis Unit, Woodhull Medical Center. Interest: Psychodynamic, Humanistic, Person Centered, Cognitive Behavioral and Trauma Informed Therapies, Crisis Intervention, Mindfulness Based Interventions, Multiculturalism, Social Justice, Treatment of Severe and Persistent Mental Illness, Individual Psychotherapy and Psychological Testing. Singhd15@nychhc.org

Bryan Kalish, M.A., University of Hartford. Psychologist, Woodhull Mobile Crisis/Woodhull Medical Center; Interests: Mindful-based interventions (e.g., meditation, Qigong, Tai Chi) across lifespan; psychodynamic psychotherapy; LGBTQ+ affirmative therapy; foster and kinship families; neuropsychological and projective assessment; complex trauma; adolescent development; interpersonal neurobiology. Kalishb@nychhc.org

AIDS Center Program/Pediatric/Perinatal AIDS Liaison

TBD

Psychological Testing Coordinator

Dale A. Singh, Psy.D., College of Saint Elizabeth, 2017. Counseling Psychologist, Mobile Crisis Unit, Woodhull Medical Center. Interest: Psychodynamic, Humanistic, Person Centered, Cognitive Behavioral and Trauma Informed Therapies, Crisis Intervention, Mindfulness Based Interventions, Multiculturalism, Social Justice, Treatment of Severe and Persistent Mental Illness, Individual Psychotherapy and Psychological Testing. Singhd15@nychhc.org

Jane Berkman Kim, Ph.D., Fordham University, 2016. Counseling Psychologist, Child/Adolescent OPD; Interests: Complex Trauma; LGBTQ Community; Intersectionality; Child Development; Identity Development Models; Crisis Management; Impact of Microaggressions; Role of Psychologists as Social Justice Advocates. Jane.Berkman.Kim@nychhc.org

DBT/Cumberland Mental Health Program

Fatima Barbosa-Hertz, Psy.D., Massachusetts School of Professional Psychology, 2005. Clinical Psychologist, Woodhull Medical Center; Private Practice. Interests: Adult and Adolescent Psychotherapy; Dialectical Behavior Therapy; Affective Disorders; Personality Disorders; Psychological Trauma, Health Psychology, HIV/AIDS. Fatima.Barbosa-Hertz@nychhc.org

NEW YORK CITY~ HEALTH AND HOSPITALS CORPORATION
HUMAN RESOURCES
POSITION DESCRIPTION

Position Title: Psychologist-in-Training
No Occupational Group

Title Code:

General Statement of Duties and Responsibilities:

Under direct supervision by a qualified psychologist, without latitude for independent or un-reviewed action or decision, performs work of ordinary professional difficulty and responsibility, in the field of Clinical Psychology.

Examples of Typical Tasks:

- Participates in treatment program by administering psychotherapy, i.e.individual and group psychotherapy, and interpreting and presenting therapeutic results.
- Administers and scores standard group and individual psychological tests.
- Selects test batteries to be administered.
- Administer, analyzes and interprets test results. Prepares reports of psychological findings for inclusion in clinical case records.
- Consults with psychologists, psychiatrists, physicians, and psychiatric social workers regarding the diagnoses, prognoses, and recommendations for treatment of individual cases.
- Attends and participates in Psychological Services staff meeting, and general staff conferences.
- Maintains suitable records and files of test performances and therapy progress of patients.
- Participates in research by collecting, analyzing, and summarizing data.
- May participate in instruction and/or in-service training in individual areas of expertise, or through presentation of psychodiagnostic and psychotherapeutic case material.

Direct Line of Promotion: None.

DIRECTIONS

By Car

From Brooklyn:

Take the Brooklyn-Queens Expressway (BQE) to Flushing Avenue exit. Turn right on Flushing Avenue and go two blocks. Make right onto Franklin Avenue. At the end of the block make left onto Park Avenue. Go straight for one and a half miles. Make left onto Throop Avenue. Parking lot on right hand side of street. Or take the Jackie Robinson (Interboro) Parkway to the Bushwick Avenue exit. Continue to Myrtle Avenue. Make left on Myrtle and go to Throop Ave. Make right on Throop. Hospital and parking lot on the right, immediately past Park Avenue.

From Manhattan:

Take Williamsburg Bridge. After crossing bridge bear right to reach Broadway. Make left onto Broadway. Continue on Broadway for approximately 15-20 lights. Make right onto Sumner Avenue. At next light make right onto Park Avenue. Go one block and make right onto Throop Avenue Parking lot on right hand side of street.

From the Bronx And Queens:

Take Bronx-Whitestone Bridge to the Whitestone Expressway to Grand Central Parkway (GCP). Take the GCP West to the Brooklyn Queens Expressway (BQE). Take the BQE to Flushing Avenue. Continue on Flushing Avenue for about 910 lights and make a right turn onto Broadway and continue as above.

From Staten Island:

Take the Verrazano Bridge to the Brooklyn-Queens Expressway (BQE). Take the BQE to Flushing Avenue exit. Turn right on Flushing Avenue and go two blocks. Make right onto Franklin Avenue. At the end of the block make left onto Park Avenue. Go straight for one and a half miles. Make left onto Throop Avenue. Parking lot on right hand side of street.

By Subway

J or M to Flushing Ave. stop at Broadway

G to Flushing Ave. stop walk down Flushing Ave. to Broadway Hospital at corner L to Myrtle Avenue and change for the J or M trains, to Flushing Ave, stop

By Bus

No. 15 Bus – New Lots

No. 40 Bus – Ralph Avenue

No. 46 Bus – Utica Avenue

B. 43 Bus - Tompkins Avenue

No. 54 Bus – Myrtle/Wyckoff Avenues

No. 57 Bus – Manhattan Avenue

No. 62 – Bus – Graham Avenue

Q 24 Bus – Bway/Lafay Ave No. 40 Bus

No. 25 Bus – Fulton/Bway No. 46 Bus

No. 26 Bus – Wyckoff/Myrtle No. 10 Bus

No. 38 Bus – Seneca/Myrtle No. 40 Bus

No. 44 Bus – Nostrand/Emmons No. 57 Bus

No. 48 Bus – Meeker/Gardener No. 57 Bus

B. 82 Bus – Penn/Seaview No. 40 Bus No.

52 Bus – Palmetto/St. N No.