

NYU/Bellevue Clinical Psychology Internship Program Brochure



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NYU Grossman
School of Medicine

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Welcome to NYU-Bellevue Clinical Psychology Internship!

Thank you for your interest in the NYU-Bellevue Clinical Psychology Internship Program.

Our program is dedicated to the preparation of outstanding psychologists for work in the public sector, in private practice, in research, and in academic settings. Our goals include helping interns to broaden and deepen their clinical skills, facilitating the transition from graduate study to independent professional work, and encouraging the ongoing development of a distinct professional identity.

The Clinical Psychology Internship Program at NYU-Bellevue was inaugurated by Dr. David Wechsler in 1932, and it has been continuously accredited since 1959. Today the internship program is supported by both New York City Health + Hospitals/Bellevue and the New York University Grossman School of Medicine and maintains affiliations with the Hassenfeld Children's Hospital at NYU Langone Child Study Center and Kirby Forensic Psychiatric Center.

Our trainees gain a wide range of expertise in areas such as individual psychotherapy throughout the lifespan, inpatient and outpatient assessment and treatment, as well as family and group psychotherapy. Trainees interact with a diverse clinical population that represents an array of cultures, ethnicities, religions, sexual orientations, gender identities, socioeconomic backgrounds, and functional abilities.

The program takes pride in its long and distinguished history of training fine psychologists who make valuable contributions to clinical, academic, research, and public policy arenas, both nationally and internationally.

On behalf of the faculty, I invite you to learn more about our program in this brochure, and to contact me with any questions you may have.

Anna E. Odom, PhD

Clinical Associate Professor, Department of Psychiatry, NYU Grossman School of Medicine
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Application Information & Process

The NYU Langone–Bellevue Clinical Psychology Internship will accept 14 interns this year: 6 in the Adult Psychology Track, 4 in the Child and Adolescent Psychology Track, 3 in the Forensic Psychology Track, and 1 in the Neuropsychological Assessment Track.

Eligibility Requirements

Applicants are required to have completed a minimum of three years' experience in a professional psychology doctoral program, which must include experience in psychotherapy and psychological assessment, ideally at multiple sites, and, in the case of applications to specialty tracks, at practicum sites where they have had the opportunity to provide therapeutic care to the populations of interest. It is expected that applicants will also have evidence of active research scholarship. All coursework and comprehensive exams must be completed before beginning the internship, and dissertation proposal should be defended before beginning the internship.

We accept applications from advanced students in good standing enrolled in American Psychology Association–or Canadian Psychological Association–approved doctoral programs in clinical or counseling psychology.

The program does not require that applicants have received a minimum number of hours of intervention or assessment.

We are unable to offer supervised training positions to student in bachelor's or master's level programs.

Application Process

The application deadline is November 1st, at 11:59 pm, EST, for admission on July 1st of the following year.

Applicants must complete all sections of the online [Application for Psychology Internships \(APPI\)](#). Please note the following additional instructions when completing the AAPI for our program:

- Completed APPIC standardized application form, available on APPIC homepage (www.appic.org)
- Select site number **1476**
- In the cover letter portion of the AAPI, indicate which one of the four internship tracks you are applying for:

- Adult Psychology Track – Program code number **147611**
- Child and Adolescent Psychology Track – Program code number **147612**
- Forensic Psychology Track – Program code number **147613**
- Neuropsychological Assessment Track – Program code number **147614**

You may apply to only one track.

- Submit three letters of recommendation from faculty or supervisors familiar with your clinical work.
- We do not require, nor do we request, the submission of any additional materials (e.g. work samples or testing reports) unless you are applying to the Neuropsychological Assessment Track.
- If you are applying to the Neuropsychology Assessment Track, please provide two redacted adult neuropsychological assessment reports and two of your three letters of recommendation should be from a neuropsychology externship/practicum supervisor.

Each application is carefully reviewed by our faculty with an eye toward identifying candidates who have prior experience or have demonstrated interest in working as part of a multidisciplinary team and in settings that treat populations similar to those served by NYU-Bellevue and our affiliated sites. Specifically, applications are reviewed based on overall goodness of fit to our program, which includes previous clinical experience, recommendation letters, personal statement, academic performance, and overall ability to articulate internship goals and fit to our program.

[Applicant Interviews](#)

Virtual interviews will be conducted December 2nd through December 20th. The interview is a chance for applicants to meet our faculty, ask questions, and meet our current interns. In addition, the interview process allows faculty to get a sense of the fit of an applicant for the program, including an applicant's interests, personality, and clinical and supervision style. Invitations will be sent by email, and applicants will be notified of their interview status by December 13th.

On the day of the interview, applicants will participate in a virtual orientation to the program with the Internship Director to learn more about the program and to ask questions. During the orientation, applicants will have the opportunity to watch a virtual tour of the facilities. Each applicant will then have two individual interviews with staff psychologists at Bellevue. Applicants will have an opportunity to meet with the current interns to ask questions and learn about their experience. Applicants applying to the Child & Adolescent and Forensic Tracks will have additional virtual interviews in the afternoon with the faculty of NYU Child Study Center and Kirby Forensic Psychiatric Center,

respectively. This process will take place through WebEx, and applicants will receive links to these virtual meetings prior to the interview date.

Personnel Processing

Psychology interns matched to our program are required to complete personnel processing through our Human Resources Department, which includes a physical examination, mandatory drug screening, and child abuse registry screening before formal appointment and beginning the internship.

In accordance with New York State Governor's executive order, all NYC Health + Hospitals staff, including contractors, vendors, students, partners, employees, and affiliates, who work, volunteer, train or provide services in-person at any NYC Health + Hospitals facility, site or workplace, are required to be vaccinated for Covid-19.

In accordance with NYU Langone Health policy, and New York State Governor's executive order, the Covid-19 vaccination is required for all faculty, staff, voluntary attending physicians, HHMI employees who are on-site, non-compensated faculty, students, clinical or academic observers, and volunteers.

In light of the above, psychology interns across all four tracks will be required to provide proof of vaccination as part of the onboarding process.

It is the policy of our program to recruit, hire, and train without regard to race, color, creed, religion, gender, sexual orientation, marital or parental status, national origin, citizenship status, age, veteran status, disability, or socioeconomic backgrounds. All decisions are based on employment criteria in furtherance of the principle of equal employment opportunity.

The NYU-Bellevue Clinical Psychology Internship Program agrees to abide by the APPIC Internship Matching Program policy that no person at this training facility will solicit, accept, or use any ranking-related information from any applicant. Information about this policy and others can be obtained at: www.appic.org/.

The internship program is accredited by the American Psychological Association, Commission on Accreditation through 2032. For more information on the accreditation status of our program, please contact:

Office of Program Consultation and Accreditation
American Psychological Association
750 1st Street, N.E.
Washington, DC 20002
Phone: 202-336-5979
Email: apaaccred@apa.org
Web: <https://accreditation.apa.org>

Response to the COVID-19 Pandemic

The health and safety of our patients, trainees, and staff is of the utmost importance. The program remains committed to the highest standards of training while abiding by health and safety guidelines of the CDC and state, local, and hospital recommendations. The program has returned to the pre-pandemic schedule of rotations and electives. Didactics continue to be a combination of in-person and virtual to allow experts in the field to provide seminars in their areas of expertise. Interns are onsite daily and continue to provide in-person and virtual treatment to their outpatients.

Interns are given Professional Protective Equipment (PPE) consistent with CDC, state, local, and hospital recommendations. Interns are resupplied with PPE as needed and have access to cleaning supplies. Interns have access to private offices with computers and virtual treatment capabilities.

Introduction

Program Overview

Each year the program offers 14 positions across four separate tracks under the umbrella of the NYU-Bellevue Clinical Psychology Internship Program. While the overall internship class forms one cohesive unit, each track maintains a different emphasis, one complementary to the interests of the interns in that track. Therefore, interns share many clinical and didactic experiences with their colleagues in the other tracks but also have particular experiences unique to their areas of interest.

The Adult Track offers 6 positions; the Child & Adolescent Track offers 4 positions; the Forensic Track offers 3 positions; and the Neuropsychological Assessment Track offers 1 position. Interns across all four tracks spend time at NYC Health and Hospitals/Bellevue. Those on the Child and Adolescent track spend part of their time at the Hassenfeld Children's Hospital at NYU Langone's Child Study Center. Those on the Forensic track spend two days a week at Kirby Forensic Psychiatric Center.

NYC Health and Hospitals/Bellevue (Bellevue)

Bellevue is America's oldest public hospital, opened in 1736, and has grown from six beds to almost eight hundred today. Bellevue is the largest facility in New York City Health + Hospitals, which is the nation's largest public hospital system. Bellevue is affiliated with the NYU Grossman School of Medicine and offers a wide range of medical, surgical, and psychiatric services, which includes 800 inpatient beds and six intensive care units, a Level I Trauma Center, and has been deemed a Center of Excellence in several services, including Bariatric Surgery, Cardiac Care, HIV Services, Diabetes, Parkinson's Disease, and the World Trade Center (WTC) Environmental Health Center.

The mission of Bellevue is to treat patients of all backgrounds regardless of their ability to pay. The population served includes patients from the local community and the outer boroughs, as well as others who find their way to Bellevue from around the globe. More than 80% of Bellevue's patients come from the city's medically underserved populations throughout the New York City area. Patients range in age from birth to geriatric.

Bellevue's Department of Adult Psychiatry offers comprehensive behavioral health services, including inpatient, outpatient, and emergency services. The mission of the department is *to restore patients as vital, healthy participants in their families and communities*. Bellevue has 178 civilian psychiatric inpatient beds and 50 psychiatric forensic inpatient beds, with almost 4,000 discharges in 2020. In addition, there were over 35,000 adult outpatient psychiatry visits and almost 60,000 outpatient addictions services visits including almost 13,000 CPEP visits in 2020.

Adult psychiatric services include seven inpatient units; a methadone treatment program (MTP), Chemical Dependency Outpatient Clinic; emergency psychiatric evaluation services, including an evaluation unit, extended observation unit, Interim Crisis Clinic, and Mobile Crisis services; outpatient community psychiatric clinic, which includes Assisted Outpatient Treatment Program (AOT) for ongoing, court-mandated outpatient services and an Assertive Community Treatment (ACT) Program, which offers comprehensive community-based care; and a Consultation Liaison Service available to inpatient medicine.

In addition, the Department of Child and Adolescent Psychiatry includes three inpatient psychiatry units; a Consultation Liaison Service to the Pediatric inpatient service; a community outpatient clinic; and a partial hospitalization program. Public School 35, a Special Education school serving psychiatrically ill children and adolescents is located on site. The Department also includes a Child and Adolescent Comprehensive Psychiatric Evaluation Program (CPEP), extended observation unit, and Interim Crisis Clinic; home-based crisis intervention program; and a mental health team located at the Agency for Children's Services (ACS) Pre-Placement Center. Both departments are served by a multidisciplinary team composed of psychiatrists, psychologists, nurse practitioners, nurses, social workers, activity therapists, case managers, and trainees from diverse disciplines.

[Hassenfeld Children's Hospital at NYU Langone's Child Study Center \(CSC\)](#)

The Hassenfeld Children's Hospital at NYU Langone's Child Study Center (CSC) is part of NYU Langone's [Department of Child and Adolescent Psychiatry](#), which is one of only two independent child and adolescent psychiatry departments within an academic medical center in the nation. The CSC was founded in 1997, and is now an internationally renowned clinical research center with \$40 million in research grants in a variety of different clinical research and training areas. The mission of the CSC is to *help transform the lives of children and families through science, education, and practice*.

Today the CSC has over 70 clinicians from different disciplines including psychologists, psychiatrists, social workers, nurse practitioners, developmental pediatricians, and nutritionists. The center is a research-based center whose aim is to deliver evidenced-based care to children, teens, and families.

The CSC provides treatment for children, adolescents, and families from the tristate area on an outpatient basis through their specialized programs that provide evidence-based treatment for childhood psychiatric disorders, including ADHD, autism spectrum disorders, anxiety and mood disorders, feeding and eating disorders, gender and sexuality issues, sleep-related disorders, psychotic disorders, and tics and Tourette disorders with practitioners with expertise in these areas. The CSC has over 40,000 patient visits a year.

<https://nyulangone.org/locations/child-study-center>

Kirby Forensic Psychiatric Center (Kirby)

Kirby Forensic Psychiatric Center, a maximum-security hospital operated by the New York State Office of Mental Health (OMH), opened in 1985, and provides secure intermediate and long-term treatment and evaluation for the forensic patients and courts of New York City, Westchester, and Nassau and Suffolk Counties. Most patients are received through the courts after having been found unfit to proceed with trial or not guilty by reason of mental disease or defect, or are placed by the OMH Commissioner's office under the New York State Code of Rules and Regulations (NYSCRR) regarding hospitalization of the mentally ill.

Kirby provides intermediate and long-term evaluation and treatment to male and female patients ages 18 and older. There are nine separate inpatient units that treat approximately 215 patients. Patients committed to Kirby fall into one of three categories: (1) those requiring restoration of competency to stand trial, about 55% of the population; (2) those adjudicated not criminally responsible due to mental disease or defect (a.k.a. not guilty by reason of insanity or NGRI), 40% of the patient population; and (3) civil psychiatric patients determined to pose a significant risk to self or others due to problems with behavioral control, about 5% of the patient population. Patients present with a wide range of psychopathology, including serious mental illness, severe personality disorder, intellectual disability, neurocognitive disorders, substance abuse, and trauma related disorders.

Division of Psychology

Currently there are 40 staff psychologists at Bellevue who are involved in the psychology internship program. Psychology plays an active role in inpatient and outpatient psychiatry, and throughout the hospital, including rehabilitation medicine and oncology, as well as other programs such as the World Trade Center Environmental Health Program.

Psychology has played a strong role in the tradition at Bellevue. Dr. David Wechsler joined the Department of Psychiatry in 1931, and during his tenure he originated the Wechsler-Bellevue and Wechsler Adult Intelligence Scales, originally published in 1939 and 1955,

respectively, which set the standard for formalized assessment of intelligence. Psychology has also been an active participant in the establishment of the first psychiatric methadone maintenance unit (1972), first AIDS program in a NYC public hospital (1985), and first World Trade Center 9/11 treatment center (2005).

In addition to the psychology internship program, practicum-level externship training is offered to doctoral students.

The division of psychology is housed within the Departments of Psychiatry and Child and Adolescent Psychiatry. Most psychologists have an appointment at NYU Grossman School of Medicine.

Internship Structure

The internship is directed by the internship director who is responsible for the planning, implementation, and daily running of the internship program. The internship director is aided by the Directors of Psychology and Child & Adolescent Psychology who liaison with hospital administration to provide resources to support the internship. The planning is also aided by the Internship Training Committee who meets monthly to discuss topics related to internship, such as policy, procedures, curriculum, and concerns that arise. Members are from across the different settings and programs of the internship. The internship director is also in regular communication with the track coordinators, who are also members of the Internship Training Committee to discuss track-specific changes or concerns. Finally, the internship is supported by upwards of 70 supervisors across various settings that provide ongoing support, didactics, and supervision to interns. Supervisors are in regular contact with the internship director and meet at least three times a year as a group to discuss the intern's progress in the program.

The internship is imbedded within three large systems, NYC Health and Hospitals/Bellevue, NYU Grossman School of Medicine, and NYU Langone Medical Center. Interns are employees and receive their salaries from one of these systems. As such there are policies and procedures required of all employees of these institutions that are separate from the internship requirements. The policies and procedures of each institution differ. The internship director can help interns navigate these systems but the decisions of those systems are made independently of the internship itself.

Internship Stipend and Benefits

Funding for the internship program derives from three different sources. Interns on all four tracks will be paid a stipend of \$50,000. Interns on the Adult, Child & Adolescent, and Neuropsychological Assessment Tracks are paid bi-weekly. Interns on the Forensic Track are paid monthly.

Interns on all tracks have 15 accrued days of vacation and personal time and 5 accrued days of paid sick time. Depending on pay line, interns also have 9 or 12 paid federal

holidays. Health benefits are also provided and become active on July 1st. In the event of a medical condition or family needs that require leave, the program allows reasonable unpaid time off to interns in excess of sick leave and personal time off.

Resources

Each of the intern's designated offices have computers with video capabilities and printers, with additional access to computers throughout the hospital. Interns have onsite and secure offsite access to their Bellevue and NYU email accounts, electronic medical record, and their remote computer desktop. Interns also have access to a state-of-the art assessment library that is continually updated with the most recent versions of standardized psychological and neuropsychological assessment instruments. In addition, interns have access to all of the libraries in the NYU system.

Time Commitment

The internship is an intense, multi-faceted training experience which provides exposure to a wide array of clinical settings and treatment modalities. It is the philosophy of our program that internship is a time to sharpen clinical skills and to gain experience. In order to maximize the rich and varied opportunities at Bellevue and its affiliates and acquire the skills necessary to function effectively as an independent professional, the intern spends approximately 45 – 50 hours a week at the internship. The time commitment includes at least two evenings per week to see outpatients, whether individuals, groups or families. On occasion, interns may find it necessary to supplement the hours spent at the hospital with additional time for writing, reading, or other internship-related responsibilities.

The internship requires a total of 2160 hours over the course of the year for completion of the program (48 weeks x 45 hours per week). Interns have a total of 15 days (3 weeks) of vacation time and 5 days (1 week) of sick/personal time, resulting in 48 weeks of training.

The Internship Program

The internship program is a twelve-month, in-person, intensive experience that is designed with the aim of readying interns for independent practice at its conclusion. With this in mind, the combination of diverse populations, training facilities, and eclectic faculty offers a multitude of training options. Within the general structure of the internship, the program is individualized to meet each intern's specific needs and interests. 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 the program as the year 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.

Training Model

The internship program adheres to the scholar-practitioner model, which emphasizes both scholarship across a number of theoretical and applied domains, as well as competence in the skills necessary for autonomous clinical practice. This model assumes the interdependence of scholarship and practice, such that clinical work follows from scholarship and rigorous critical thinking, and scholarly and research initiatives flow from an appreciation of the depth and breadth of clinical phenomena. This blend of science and practice is consistent with our training philosophy and expertise.

Internship Aims

The program provides interns with numerous opportunities to gain further proficiency in an array of clinical modalities and therapeutic and assessment techniques, while serving a population that encompasses a broad variety of ages, cultures, psychiatric diagnoses, and levels of functioning. The program seeks to facilitate the transition of the psychology intern with a strong academic foundation into a mature professional practitioner.

The program further aims to train and prepare professional psychologists for the practice of psychology in accordance with the professional and ethical standards set forth by the American Psychological Association. The internship emphasizes the acquisition and integration of advanced clinical skills within a context of culturally-sensitive practice. The internship year is also intended to be a time during which the intern further develops a distinct identity as a well-rounded clinical psychologist.

Goals and Objectives

To develop advanced clinical skills through the integration of theory, research, and practice

Objectives: The intern will further develop and refine their clinical skills through supervision and clinical work in a variety of inpatient and outpatient settings with patients who vary in age, socioeconomic backgrounds, race, ethnicity, culture, sexual orientation, gender identity, and level of functioning.

To facilitate the transition of interns from students to autonomous, ethical, and responsible practicing psychologists

Objectives: The intern will develop a sense of personal efficacy and a greater awareness of ethical issues and cultural competence through ongoing exposure to a wide variety of patients, intensive supervision, and didactic training.

To develop the ability to work effectively with health professionals from other disciplines, including psychiatry, social work, nursing, and activity therapy

Objectives: The intern will work on a multidisciplinary treatment team across a variety of settings to learn to effectively partner with other professionals to ensure that patient care is integrative and comprehensive.

Profession-Wide Competencies

To meet these goals and objectives, the program provides training in and assesses interns' performance in the nine profession-wide competencies: Research; Ethical and Legal Standards; Individual and Cultural Diversity; Professional Values, Attitudes, and Behaviors; Communication and Interpersonal Skills; Assessment; Intervention; Supervision; Consultation and Interprofessional/Interdisciplinary Skills.

Adult Psychology Track

Program Code Number 147611

The Adult Track provides a broad-based training with adults, adolescents, and children in a variety of clinical modalities with a wide range of patients.

Track Requirements

Interns on this track complete three, four-month clinical rotations, a year-long elective, and participate in various outpatient services, diagnostic evaluations, supervision, and didactic seminars.

In collaboration with the internship director, interns rank their rotation and elective preferences at the beginning of the training year. At least one rotation will be an adult inpatient service. Interns rank their choice of their other two rotations among any of the other possible rotations offered. Interns also rank their elective preference, which allows exposure to specialty services offered at Bellevue.

Psychotherapy

This track offers a diverse outpatient psychotherapy caseload, representing a spectrum of demographic and cultural backgrounds, clinical presentations, and treatment needs. Interns treat six outpatient adults, one child, and one adolescent; participate in the family program, treating families and/or couples; or co-lead an adult outpatient group with a staff clinician. Outpatient groups include: Hearing Voices Support Group, Mindfulness Practices Group, and STAIR Group.

Assessment

In addition to the assessment opportunities offered within rotations, interns will conduct one to two inpatient and one outpatient psychological assessment over the course of the year in addition to two to three intake evaluations within the Adult Outpatient Clinic.

Didactics

In addition to the didactics offered across the internship tracks, Adult and Neuropsychological Assessment Track interns participate in a weekly *Case Conceptualization Seminar*, which is composed of didactics and case presentations, focusing on conceptualization and application of the theory and techniques discussed. Following each of the didactic presentations, interns present their own outpatient cases to practice case conceptualization and application of techniques. The seminar includes readings that enhance understanding and application of the theories and techniques presented. Topics include conceptualization of psychosis from psychodynamic and cognitive perspectives, as well as the treatment and conceptualization of personality disorders from various theoretical frameworks.

Child and Adolescent Psychology Track

Program Code Number 147612

Interns in the Child and Adolescent Track pursue specialized training in child and adolescent psychology. The program combines the assets of the Child Study Center – part of Hassenfeld Children’s Hospital at NYU Langone and NYC + Health Hospitals/Bellevue to offer concentrated training with children, adolescents, young adults, and families in both inpatient and outpatient settings.

Track Requirements

Interns on this track divide their time between Bellevue and the Child Study Center. At Bellevue, interns complete three, four-month rotations. One rotation is on the Child or Adolescent Inpatient Service. A second rotation will be child- or adolescent-focused.

Interns will also spend time at the NYU Child Study Center, where their activities will include: treating outpatients with internalizing and externalizing disorders; conducting neuropsychological and/or educational testing protocols; co-leading groups in specialized group therapy programs; attending specialized seminars and individual supervision; and attending weekly Child and Adolescent Psychiatry Grand Rounds. Interns also choose two concentrations: Adolescent DBT, Family Therapy Program, Gender and Sexuality Service, Integrated Behavioral Health, and Parent Child Interaction Therapy (PCIT).

<https://nyulangone.org/locations/child-study-center>

Psychotherapy

At Bellevue, interns conduct individual psychotherapy throughout the year with two adults in the Adult Outpatient Clinic. Interns also treat outpatients in the Child Study Center's various services mentioned above, as well as within their concentrations. Interns may elect to co-lead groups in the Child Study Center's specialized ADHD and Behavioral Disorders, Anxiety and Mood Disorders, or Autism Spectrum Disorders Services.

Didactics

In addition to the didactics offered across the internship tracks, Child and Adolescent Track interns participate in additional didactics at the Child Study Center, including case conference, Child and Adolescent Psychiatry Grand Rounds, and specialty didactics.

Forensic Psychology Track

Program Code Number 147613

The Forensic track has a dual focus in both clinical and forensic psychology. The program combines the resources of Bellevue and Kirby Forensic Psychiatric Center to offer training in both acute and long-term care with forensic patients who are at various stages of involvement with the criminal justice system.

At both sites, interns are active members of a multidisciplinary treatment team and acquire greater knowledge of and sensitivity to the needs of forensic patients, as well as experience managing the many legal, clinical, and organizational issues that affect these individuals.

Track Requirements

The Forensic Track is comprised of three four-month rotations, individual psychotherapy through the Bellevue Adult and Child & Adolescent Outpatient Psychiatry Clinics, a didactic seminar series, and case conference. Two of the rotations, Forensic Assessment and Forensic Inpatient Treatment, are required. Interns choose a third rotation among any of the other possible rotations offered.

Throughout the internship year, forensic interns spend two full days per week at Kirby treating patients individually and in a group setting, performing various types of forensic evaluations and assessments, working as part of a multidisciplinary treatment team, and attending and participating in forensic-focused didactics and case conferences.

Forensic Assessment

The Forensic Assessment rotation is based in the Kings County Forensic Psychiatry Court Clinic, which provides mental health evaluation services to the Brooklyn Supreme and Criminal Courts. The clinic conducts court-ordered evaluations of adult and adolescent

criminal defendants for fitness to proceed evaluations (CPL 730) and pre-pleading/pre-sentencing evaluations (CPL 390).

The intern's primary responsibility is to interview the defendant, review collateral data, and prepare a 3 to 5-page report review by the intern's supervisor addressing the specific referral question and any other pertinent information. Psychological testing may also be needed. These evaluations are used by the Court for a variety of purposes, such as placement of offenders in jail diversion programs addressing problems of substance abuse and/or psychiatric issues, domestic violence issues, anger management, and gaining insight into adolescent offenders waived into adult criminal court for violent crimes. Interns are supervised by the psychologists at the Kings County Forensic Psychiatric Evaluation Court Clinic.

Forensic Inpatient Treatment

The Forensic Treatment rotation is located on the Forensic Inpatient Psychiatry Service at Bellevue, which provides acute psychiatric care to male patients ages 16 and older. Patients on this service may be pre-arraignment, awaiting trial, or post-conviction. Interns work as part of a multidisciplinary team comprised of a psychiatrist, psychologist, social worker, activity therapist, and medical students.

The intern serves as the primary therapist for one or two patients at a time. This role includes an initial intake interview, meeting with the patient three times each week for individual psychotherapy, participation in weekly treatment team meetings, documentation, and the preparation of a discharge summary. Interns may also carry an additional one or two patients for twice-weekly psychotherapy and co-lead a psychotherapy group with a member of the psychology staff. The treatment team psychologist provides supervision for individual and group therapy and whenever possible, interns are encouraged to provide supervision for other trainees on the unit. Interns are also encouraged to attend Court Proceedings at Bellevue Hospital Court and observe ECT.

Psychotherapy

Interns carry a diverse outpatient psychotherapy caseload at Bellevue, representing a spectrum of demographic and cultural backgrounds, clinical presentations, and treatment needs. Interns treat three outpatient adults, as well as one child and one adolescent patient. Interns have a supervisor for their adult patients and another supervisor for their child and adolescent patients.

While at Kirby, each forensic intern is assigned one long term individual therapy patient. Interns also provide consultation to the unit treatment teams and perform psychological testing with a focus on the assessment of malingering.

Forensic Track interns conduct weekly psychotherapy and psychoeducational groups, including fitness to stand trial groups, and they will have an opportunity to co-lead a group with a psychology extern who they also supervise. Interns receive weekly supervision of the group, as well as supervision of being a supervisor.

Assessment

In addition to the Assessment Rotation at the Brooklyn Court Clinic, interns participate in and conduct various types of forensic evaluations at Kirby: evaluations of competency to stand trial, violence risk assessment, risk assessment of sex offenders, and forensic evaluations to assist the court in determining the dangerousness and future institutional placement of patients.

Didactics

In addition to the didactics offered across the internship tracks, Forensic Psychology Track interns participate in additional forensic-focused didactics and case conferences at Kirby.

Neuropsychological Assessment Track

Program Code Number 147614

Neuropsychological Assessment Track pursues specialized training in neuropsychological assessment and rehabilitation psychology in addition to enhancing an intern's general clinical skills providing broad-based training with adults, adolescents, and children in a variety of clinical modalities with a wide range of patients. The emphasis on generalist training is developed through an integrative lens to meet the guiding principles of both the APA's Profession Wide Competencies for Health Psychology as well as the Houston Conference Guidelines on Specialty Education and Training in Clinical Neuropsychology at the doctoral internship level.

Track Requirements

The intern will spend at least 50 percent of their time conducting Neuropsychological Evaluations in both inpatient and outpatient settings within psychiatry and in other areas of medicine such as neurology, oncology, and surgery. Neuropsychological training emphasizes comprehensive evaluation of cognitive functioning of ethnically and culturally diverse inpatient and outpatient adults who present with a wide range of psychiatric, neurological, and other medical disorders, including, but not limited to, psychiatric and/or personality disorders, neurodegenerative disorders, stroke, substance abuse, and traumatic brain injury. The intern will be instructed in effective interviewing techniques, standardized administration and scoring of empirically validated neuropsychological tests, test data interpretation, integrated conceptualization that drives relevant practical recommendations, as well as oral and written communication of findings.

Neuropsychology supervision is provided on an ongoing basis throughout the year by a board-certified neuropsychologist and focuses on conceptualization of theoretical models of adult neuropsychology, neuropsychological assessment, behavioral neurology and cognitive neuroscience. The intern will interact with trainees and staff from various other disciplines to increase appreciation of the value of teamwork in this interdisciplinary setting. Bilingual (Spanish/English) candidates are highly encouraged to apply and will receive supervision by a bilingual neuropsychologist.

The intern will spend one afternoon a week on the Inpatient Rehabilitation Medicine Service, treating and assessing patients.

Psychotherapy

The intern will carry a diverse outpatient psychotherapy caseload, representing a spectrum of demographic and cultural backgrounds, clinical presentations, and treatment needs. The intern will treat three outpatient adults, as well as one child and one adolescent patient. The intern will have a supervisor for their adult patients and another supervisor for their child and adolescent patients.

Didactics

In addition to the didactics offered across the internship tracks, Adult and Neuropsychological Assessment Track interns participate in a weekly *Case Conceptualization Seminar*, which is composed of didactics and case presentations, focusing on conceptualization and application of the theory and techniques discussed. Following each of the didactic presentations, interns present their own outpatient cases to practice case conceptualization and application of techniques. The seminar includes readings that enhance understanding and application of the theories and techniques presented. Topics include conceptualization of psychosis from psychodynamic and cognitive perspectives, as well as the treatment and conceptualization of personality disorders from various theoretical frameworks.

The Neuropsychological Assessment Track intern will also participate in a neuropsychological case conference and didactic seminar.

Qualifications

Course work and experience in neuropsychology is required.

Rotations

The internship year is divided into three, four-month rotations. In general, the hours of rotations are 9:00 am – 12:00 pm on Mondays, Tuesdays and Thursdays and, 1:00 pm to 5:00 pm on Wednesday and Friday afternoons. Some rotations such as CPEP begin at 8:30

am. Additional time may be needed outside of these hours, on occasion, to fulfill rotation responsibilities. Interns rank their preferences of rotations in consultation with the internship director during orientation. Supervisors tailor the training experience to the intern's particular interests and training needs. Though valuable, no prior experience is necessary for any of the rotations.

***Rotations are subject to change based on staffing.**

Adult Inpatient Psychiatry Service

The adult inpatient psychiatry service comprises 220 beds across eight civilian general and specialty units (e.g. Comorbid Substance Use Disorders Unit, Extended Care Unit, Geriatric and Medical Co-Morbidities Unit, Multicultural Unit). It serves patients diagnosed with a Serious Mental Illness (SMI); among the most common of these are schizophrenia and schizoaffective disorder, as well as bipolar and major depressive disorders. A considerable number of patients also have personality disorders and many have co-morbid substance use disorders in addition to significant psychosocial stressors, including housing, immigration status, and family difficulties, which play a key role in patients' presentations while on the service and in their discharge planning.

Interns work as part of a multidisciplinary team and serve as the primary clinician for two to three patients, with responsibility for nearly all aspects of treatment from initial assessment through discharge. Responsibilities include attendance at daily rounds; participation in community meetings; individual and group psychotherapy; and occasional, brief psychological and cognitive assessments. Interns are also actively involved in the process of discharge planning and collateral/family meetings as indicated.

In addition, interns have the opportunity to supervise/debrief psychology externs, medical students, or other trainees. Interns also attend and participate in unit didactics, such as Journal Club and are encouraged to attend Court Proceedings at Bellevue Hospital Court and to observe ECT.

Chemical Dependency Outpatient Clinic

The Chemical Dependency Outpatient Program (CDOP) is a comprehensive and integrated intensive treatment program for individuals with substance use disorders. Most patients attend the program several times a week for several hours a day. The patient population is diverse across a wide variety of dimensions, including, but not limited to, cultural background, socioeconomic backgrounds, sexual orientation, substance use history, and stage of change. Many patients are also experiencing multiple co-occurring psychiatric disorders. This rotation allows interns to become familiar with various treatment approaches to substance use disorders, such as relapse prevention, motivational interviewing, and other evidenced-based techniques for this population.

Interns work in conjunction with the program psychologist and treat two to three individual patients, conduct intake and diagnostic evaluations, and lead or co-lead groups. Interns are part of the multi-disciplinary team, participate in the weekly community meeting and receive weekly supervision.

Child and Adolescent Comprehensive Psychiatric Emergency Program (C-CPEP)

The Child and Adolescent Comprehensive Psychiatric Emergency Program (C-CPEP) provides comprehensive psychiatric services including triage, psychiatric evaluation, and extended observation in the Child and Adolescent CPEP Emergency Room and Interim Crisis Clinic, which provides outpatient services while the patient is awaiting follow-up in the community. The Child CPEP serves a cross-section of child and adolescent patients with diverse psychiatric presentations. This rotation provides interns with experience in rapid psychiatric assessment and differential diagnosis through training and refinement of interviewing techniques, conducting mental status exams, and providing brief crisis interventions for children, adolescents, and families.

The intern serves as a primary clinician on a multidisciplinary team. Responsibilities include performing psychiatric evaluations and formulating an appropriate disposition plan for patients requesting emergency evaluations; providing individual psychotherapy and co-leading group therapy for patients admitted to the extended observation unit; and providing individual and family therapy sessions through the Interim Crisis Clinic for patients released home from the extended observation unit while awaiting connection to long-term outpatient care.

Child and Adolescent Inpatient Psychiatry Service

This service is composed of three units, one child and two adolescent units. Presenting problems include trauma, mood disorders, psychosis, severe anxiety disorders, behavioral disturbances, character pathology, and autism. This service offers a unique training experience, as it is one of the few inpatient services dedicated solely to the treatment of children and adolescents.

Interns are an integral member of a multidisciplinary treatment team, acting as the primary clinician for two to three patients at a time; serving as co-leader of a variety of psycho-education, CBT, and social skills groups; and providing neuropsychological and psychological assessments. All three units are primarily CBT/behaviorally oriented. Interns also gain experience in behavior management interventions in a milieu setting. While on this rotation, interns participate in morning rounds, treatment planning conferences, case conferences, family meetings, community meetings, and unit didactics. In addition, interns have the opportunity to supervise/debrief psychology externs, medical students, or other trainees.

Child and Adolescent Partial Hospitalization Program

The Child and Adolescent Partial Hospitalization Program (CPHP) offers comprehensive training in the diagnostic evaluation and clinical treatment of children and adolescents presenting with a variety of psychiatric problems. CPHP provides treatment for patients between the ages of 5 and 17 with acute psychopathology, including mood and anxiety disorders, psychotic disorders, behavioral disturbances, and emerging personality disorders.

The program provides intensive psychiatric treatment with the goal of decreasing the number of inpatient hospitalizations and offers a dynamic training experience that serves patients at the intersection of inpatient and outpatient care. The CPHP works in close collaboration with PS 35M, a New York City Department of Education special education school located within NYC Health & Hospitals/Bellevue. All CPHP patients attend PS 35M and receive their psychiatric care (psychopharmacology, individual, group, family, and milieu therapy) in the CPHP.

Interns work as an integral member of a multidisciplinary treatment team, serving as the primary clinician for two patients and as the co-leader of one to two groups. While on this rotation, interns participate in team rounds, didactics, school consultation, and family meetings. Interns will conduct psychological assessments as needed.

Comprehensive Psychiatric Emergency Program (CPEP)

The Comprehensive Psychiatric Emergency Program includes the CPEP Emergency Room, which offers triage, psychiatric evaluation, and extended observation; Interim Crisis Clinic, which provides outpatient services while patients await follow-up in the community; and Mobile Crisis Unit, which provides assessments in the community. CPEP serves a cross-section of patients with diverse psychiatric presentations.

This rotation provides interns experience with in-depth, rapid psychiatric assessment and differential diagnosis. Intern training focuses on refining interviewing techniques, conducting mental status exams, and providing brief psychotherapeutic crisis interventions. Interns may also administer brief cognitive screenings to assist in evaluation.

In the CPEP Emergency Room, interns serve as primary clinician on a multidisciplinary team comprised of psychiatry, psychology, social work, and nursing staff. Interns have the primary responsibility for patient care and chart documentation, including the diagnostic evaluation and disposition plan. Concurrent supervision is provided for each case by experienced psychiatrists and psychologists.

Consult-Liaison Service

Bellevue's Consult Liaison Service comprises a multi-disciplinary team that includes a

consultation-liaison fellow, social worker, a psychologist, and multiple attending CL psychiatrists with varied subspecialties including Women's Mental Health, Addictions, and Palliative Care. The service conducts psychiatric consultations in the general hospital to various services including: Internal Medicine, ICU, Surgery, OB-GYN, Neurology, Rehabilitation and TBI Medicine, Infectious Disease, Trauma Surgery, and Prison Medicine.

Interns work in close conjunction with the consultation team, assessing and treating patients with the full spectrum of psychiatric conditions that occur in medically complex disorders. Specific duties include psychiatric consultation, assessment and treatment of delirium, capacity to make informed healthcare decisions, suicide risk assessment, and diagnostic assessments. Responsibilities include attendance at morning meeting to discuss and distribute referrals, assessment and brief psychological interventions, and work with the patient's providers to educate, implement, and transition the patient.

Health Steps Program

The HealthySteps Program is an evidence-based program for parents and young children ages birth to 3 years-old that is integrated within the primary care pediatric clinic at NYC H+H/Bellevue and aims to promote healthy early childhood development and positive parent-child relationships.

The intern is embedded within the primary care pediatric clinic and is part of a multi-disciplinary team including psychologists, pediatricians, community health workers, and social workers. Interns work closely with the supervising psychologist to provide support and guidance around child development and parenting to high-risk families at their preventive pediatric well child visits. Interns will learn how to conduct behavioral and developmental screenings and brief assessments, and will assist with referrals for more intensive services such as Early Intervention. In addition, interns learn how to conduct maternal mental health screenings, and work closely with the Women's Health Reproductive Psychiatrist and social workers to collaborate on referrals.

Electives

Adult Track interns select an elective, which is a year-long experience that provides exposure to specialty services offered at NYC H+H/Bellevue in addition to the three primary rotation experiences. In consultation with the internship director, interns may express their preference to participate in one of the following elective options. Electives are approximately 4-5 hours a week and include clinical and didactic elements.

***Electives are subject to change based on staffing.**

Child and Adolescent Comprehensive Psychiatric Emergency Program (C-CPEP) Elective

The Child and Adolescent Comprehensive Psychiatric Emergency Program (C-CPEP) provides comprehensive psychiatric services including triage, psychiatric evaluation, and

extended observation in the Child and Adolescent CPEP Emergency Room and Interim Crisis Clinic, which provides outpatient services while the patient is awaiting follow-up in the community. The Child CPEP serves a cross-section of child and adolescent patients with diverse psychiatric presentations. This rotation provides interns with experience in rapid psychiatric assessment and differential diagnosis through training and refinement of interviewing techniques, conducting mental status exams, and providing brief crisis interventions for children, adolescents, and families.

The intern serves as a primary clinician on a multidisciplinary team. Responsibilities include performing psychiatric evaluations and formulating an appropriate disposition plan for patients requesting emergency evaluations; providing individual psychotherapy and co-leading group therapy for patients admitted to the extended observation unit; and providing individual and family therapy sessions through the Interim Crisis Clinic for patients released home from the extended observation unit while awaiting connection to long-term outpatient care.

Child and Adolescent Outpatient Psychiatry Clinic Elective

The Child and Adolescent Outpatient Clinic serves a multicultural socioeconomically diverse population of children and adolescents under the age of 18 years. Interns have the opportunity to evaluate and treat a broad spectrum of developmental and psychiatric disorders through conducting individual psychotherapy and group therapy.

In this elective the intern will co-lead a psychotherapy group with a C & A OPC psychology extern, tailored to specific age groups and parenting needs. The intern will also provide supervision to that psychology extern for the group. The intern will conduct individual therapy with an additional child and/or adolescent patient or co-lead a second psychotherapy group with a C & A OPD social work clinician and conduct individual therapy with one additional outpatient.

Child and Adolescent Partial Hospitalization Program Elective

The Child and Adolescent Partial Hospitalization Program (CPHP) offers comprehensive training in the diagnostic evaluation and clinical treatment of children and adolescents presenting with a variety of psychiatric problems. CPHP provides treatment for patients between the ages of 5 and 17 with acute psychopathology, including mood and anxiety disorders, psychotic disorders, behavioral disturbances, and emerging personality disorders. The CPHP works in close collaboration with PS 35M, a New York City Department of Education special education school located within NYC Health & Hospitals/Bellevue where CPHP patients attend.

The program provides intensive psychiatric treatment with the goal of decreasing the number of inpatient hospitalizations and offers a dynamic training experience that serves patients at the intersection of inpatient and outpatient care. Interns work in collaboration with the program's supervisor to identify or develop a weekly group that the intern will

lead. In addition, the intern will participate in team rounds, team supervision rounds, and will have the opportunity to observe admission interviews, crisis intervention, and classroom time. Finally, the intern will participate in milieu management, which involves implementation of the behavior management reward system, interacting via play with the children, and facilitating open-ended casual conversation during transition periods.

Extended Care Inpatient Unit Elective

The Extended Care Unit (ECU) is a 19-bed, intermediate-term inpatient unit for individuals with severe and persistent mental illness who require more comprehensive treatment than is feasible on short-term units in order to maintain wellness in the community. Most ECU patients carry a primary diagnosis of schizophrenia or schizoaffective disorder and are admitted to the unit for three to four months. The ECU utilizes a recovery-oriented approach and operates based on a social learning model. Medication management, psychotherapy, intensive group programming, and clinical case management are employed within the framework of a token economy system aimed at incentivizing adaptive skills and prosocial behavior. Treatment aims to maximize the potential for meaningful community re-integration.

This elective provides the intern with the opportunity to familiarize themselves with a recovery-oriented framework for treating patients with severe and persistent mental illness, and psychotic spectrum disorders in particular. The intern will learn about the application of social learning and behavioral techniques within this patient population and will receive training in an integrative therapeutic approach to working with people with psychotic disorders. Throughout the year, the intern will co-lead a psychotherapy group with the unit psychologist and meet with patients for individual psychotherapy.

Healthy Steps Program Elective

The HealthySteps Program is an evidence-based program for parents and young children ages birth to 3 years-old that is integrated within the primary care pediatric clinic at Bellevue Hospital Center and aims to promote healthy early childhood development and positive parent-child relationships.

The intern is embedded within the primary care pediatric clinic and is part of a multi-disciplinary team including psychologists, pediatricians, community health workers, and social workers. Interns work closely with the supervising psychologist to provide support and guidance around child development and parenting to high-risk families at their preventive pediatric well child visits. Interns will learn how to conduct behavioral and developmental screenings and brief assessments, and will assist with referrals for more intensive services such as Early Intervention. In addition, interns learn how to conduct maternal mental health screenings, and work closely with the Women's Health Reproductive Psychiatrist and social workers to collaborate on referrals.

Neuropsychological and Psychological Assessment Service Elective

The Psychological and Neuropsychological Assessment Service provides evaluations to adults across the hospital's inpatient and outpatient settings and departments, including psychiatry, medicine, and neurology to address a variety of referral questions such as diagnostic clarification, current cognitive status, and treatment recommendations.

This elective offers interns an opportunity to gain specific experience in the assessment of adults with a broad spectrum of psychiatric, neurological and various other medical conditions with the aim of gaining a better understanding of brain-behavior relationships and strengthening their assessment skills, including their ability to select, administer and score neuropsychological measures, interpret test results, conceptualize cases, and effectively communicate the findings in written and verbal format to patients and referring clinicians. Interns will participate in the weekly Neuropsychology Seminar on Fridays; conduct assessments; and receive supervision tailored to the intern's specific needs and level of experience.

Oncology Psychology Service Elective

The Bellevue Cancer Clinic provides medically integrated cancer treatment to adults diagnosed with various forms of cancer. Within this setting, a multi-disciplinary team, consisting of an oncology psychiatrist, oncology psychologist, and oncology social worker provide medication management, supportive individual and group psychotherapy, as well as social services. Patients are referred for behavioral health treatment for stress-related and adjustment disorders, as well as anxiety and depression.

This elective offers psychology interns experience conducting diagnostic evaluations, providing supportive individual and group psychotherapy, participating in weekly supervision where readings by various contemporary psycho-oncology authors are discussed, and providing interdisciplinary consultation and collaboration.

Psychosis Elective

This elective provides a unique opportunity to develop a specialized understanding of multi-modal treatment for individuals with psychosis spectrum disorders. The intern will learn about the theoretical underpinnings and application of various treatment modalities and methods for assessment in working with individuals with psychosis spectrum disorders.

The Psychosis Elective, located on an acute adult inpatient unit and Adult Outpatient Clinic, provides both experiential and didactic learning opportunities for a specialized understanding of working with individuals with psychosis. The experiential component of the elective will involve co-leading Voices, Visions and Stressful Beliefs group on the inpatient unit and Hearing Voices Group in the Adult OPC. A didactic and supervisory

component will focus on treatment modalities for psychosis (meaning making approaches, CBT-P, acceptance and commitment therapy, trauma-informed approaches).

Inpatient Rehabilitation Medicine Service Elective

The Adult Inpatient Rehabilitation Medicine Service treats patients with a wide range of medical diagnoses, including traumatic brain injury, stroke, spinal cord injury, amputation, neurological disorders such as Parkinson's disease and multiple sclerosis, back surgery, chronic pain, and physical deconditioning due to illness or disease. Patients may have pre-morbid psychiatric disorders that impact their medical condition or may develop psychiatric symptoms as a result of injury or disease process.

The intern conducts intake interviews; formulates psychological diagnoses; conducts individual short-term psychotherapy; performs psychological and/or brief neuropsychological and/or educational assessments, and assists with mental health service disposition planning as needed. The intern works in consultation with other members of a patient's treatment team, including occupational therapists, physical therapists, speech pathologists, art therapists, social workers, consulting psychiatrists, physical medicine residents, and attending physicians. The intern also attends and participate in interdisciplinary case conferences and family meetings.

Substance Use Disorders Treatment Elective

The substance use disorders treatment service is housed within the Addictions Division and is comprised of the dual diagnosis inpatient psychiatry unit and the Chemical Dependency Outpatient Program (CDOP). Interns will spend six months on each service to gain a broad understanding of treating substance use disorders in multiple treatment settings. This elective parallels the experience of a patient and allows interns to become familiar with various treatment approaches to substance use disorders, such as relapse prevention, motivational interviewing, and other evidenced-based techniques for this population.

The psychiatric inpatient unit is composed of 30 beds that treats patients with substance use disorders and mental illness and is staffed by a multidisciplinary team of psychiatrists, social workers, nurses, behavioral health associates, a psychiatric nurse practitioner, and a fulltime psychologist. Clinical work will include providing individual therapy to one to two patients, co-leading a group, being a part of the multidisciplinary team, and receiving weekly supervision. There may be opportunities for intakes/evaluations or to provide supervision to other trainees.

CDOP is a comprehensive and integrated intensive treatment program for individuals with substance use disorders. Most patients attend the program several times a week for several hours a day. Many patients are also experiencing multiple co-occurring psychiatric disorders. The program provides an array of services, including initial intake assessments, individual and group psychotherapy, psychological assessment, psychiatric services, and

social work services. Clinical work will include providing individual therapy to one to two patients, co-leading a weekly group, and conducting diagnostic evaluations. Interns will also be part of the multi-disciplinary team and receive weekly supervision.

Culturally Competent Clinical Care

Providing culturally competent clinical care is essential, especially when working within a diverse public city hospital such as Bellevue. Given the infinite nuances of intersectional identities, it is impossible to address every aspect of diversity. Rather, the internship focuses on providing a framework for understanding diversity and intersectionality that can be applied broadly in clinical settings. Additionally, specialized attention will be given to certain populations that interns are likely to work with during the course of their internship year. To this end, these principles will be incorporated into the internship training through didactics, clinical care, intern-guided self-study, and participatory action, as well as experiential learning.

Didactic Program

The didactic components of the internship provide exposure to specialized topics and clinical experiences that directly relate to the intern's ongoing development as a well-rounded clinical psychologist. The didactics include weekly seminars, lectures, and case conferences, as well as ongoing Psychiatry and Child and Adolescent Psychiatry Grand Rounds. Topics and formats of these seminars are varied, including didactic and case presentations in order to balance the intern's developing clinical experience. Throughout, relevant readings are given to further enhance understanding and application of the information presented. Seminar leaders and presenters include faculty and supervisors from NYU-Bellevue, as well as psychologists, psychiatrists, and social workers who are affiliated with other institutions in New York City.

All interns attend the weekly *Seminar Series*, which builds upon the interns' existing academic training and clinical experience. Topics include ethical considerations, cultural competency, psychopharmacology, treatment, and professional development, as well as topics of interest to the internship class. Throughout the series, a core set of skills is consistently addressed, informed by APA's core competencies, as well as the challenges and opportunities associated with practice in a large academic medical center and public hospital.

In addition, all psychology interns participate in the weekly *Multipurpose Hour Seminar*, which includes clinical didactics related to patient care and resources, lectures on development as a supervisor, class meetings, and a clinical skills case conference where each intern presents an individual outpatient case to their peers for consultation and feedback.

All interns participate in didactics and case conferences specific to their rotations and electives. Adult Track interns also attend NYU Psychiatry Grand Rounds and the Bellevue

Case Conference. Child and Adolescent Track interns participate in didactics at the NYU Child Study Center, including a series of child-focused didactics at the beginning of the training year and weekly Child and Adolescent Psychiatry Grand Rounds. Forensic Track interns participate in additional forensic-focused didactics and case conferences at Kirby Forensic Psychiatric Center. Neuropsychological Assessment Track intern participates in a neuropsychological case conference and didactic seminar.

Research and Teaching

Because research provides the knowledge base of clinical psychology, interns are expected to be conversant with the processes and products of contemporary clinical investigation. Current research knowledge and methods are important components of the didactic seminars. Research is also incorporated into clinical supervision with particular emphasis on theoretical orientations, treatment modalities, and particular interventions.

The program structure does not designate specific time for research over the course of the year, but the program works to help facilitate the completion and defense of interns' dissertation prior to graduation from internship. The program also values the continued development of evaluation and the dissemination skills of research. As such, each intern is asked to critically evaluate and demonstrate proficiency in reviewing and critiquing an article that is consistent with the CONSORT Checklist.

In addition, interns present on a topic of clinical interest and knowledge to their peers in a formal case conference. During inpatient rotation, interns present a clinical in-service to members of the multidisciplinary team on a topic relevant to the psychiatric inpatient population. Interns also make a formal presentation once during the internship year at either the Bellevue Case Conference, Child and Adolescent Psychiatry Grand Rounds, or Kirby Forensic Case Conference.

Supervision

Interns receive a minimum of five hours of supervision per week, conducted according to numerous theoretical orientations including cognitive, behavioral, family systems, psychodynamic, and integrative. Interns are assigned individual supervisors for each rotation and elective experience, each outpatient psychotherapy case, and each psychological assessment case. In addition, interns meet individually with the training director bi-monthly.

Interns participate in didactic lectures on supervision, focusing on furthering their development as a supervisor. These topics include the supervisory relationship, issues of diversity in supervision, giving feedback, and critical issues in supervision.

Interns also have the opportunity to supervise/debrief psychology externs, medical students, or other trainees while on inpatient rotation. Supervision of the supervisory experience is part of weekly supervision with the intern's inpatient rotation supervisor. In

addition, interns on the Forensic Track have the opportunity to supervise psychology externs at Kirby Forensic Psychiatric Center. The Neuropsychological Assessment Track intern also has the opportunity to supervise neuropsychological externs on their assessments.

Well-Being: Intern Support Group

Interns attend a weekly support group facilitated by a psychologist who comes from outside the NYU-Bellevue system and is not involved in the supervision or evaluation of interns. This group provides interns an opportunity to discuss issues related to internship, problem-solve, receive support and validation of their experiences, and continue to form meaningful connections with one another.

Policies and Procedures

Evaluations

Evaluation Process

At the end of each rotation period, interns receive formal written evaluations from each of their supervisors. As part of this written evaluation, supervisors will observe the intern's clinical work in person, virtually, or behind a one-way-mirror. Interns are evaluated based on the APA profession-wide competencies, which are required of all interns who graduate from programs accredited in health service psychology (Research; Ethical and Legal Standards; Individual and Cultural Diversity; Professional Values, Attitudes, and Behaviors; Communication and Interpersonal Skills; Assessment; Intervention; Supervision; and Consultation and Interprofessional/Interdisciplinary Skills).

In addition, interns are evaluated on specific objectives for each rotation, elective, or service. Areas of profession-wide competencies and specific objectives are essential to successful completion of the internship and progress towards unsupervised practice as a psychologist. As such, it is expected that interns will perform at or above the expected level of competency (e.g., ratings of 3 or higher) in each of these domains for each evaluation period. The following rating scale is used for performance evaluation of the intern's progress related to goals and competencies. See example in the Appendix.

- 1 – Significant Deficits. Functions well below what one would expect at this level of training
- 2 – Somewhat Below Average. Functions below what one would expect at this level of training
- 3 – Average. Adequate skill typical of interns at this level of training
- 4 – Above Average. Functions well with routine supervisory input
- 5 – Superior. Demonstrates outstanding skill and can function independently with minimal supervisory input

Interns receive ongoing verbal feedback based upon expected performance throughout each evaluation period. Upon formal, written evaluation, interns meet with their supervisors to understand the assessment of their strengths and areas in need of further development, and to formulate an individualized plan with supervisors for meeting any identified training goals. Interns also have the opportunity to respond to their evaluation in writing. Evaluation forms are signed by the intern and the supervisor and reviewed by the internship director. All evaluations become part of the intern's permanent file.

Interns also provide written evaluations of their supervisors. These evaluations are confidential. All feedback provided to supervisors is anonymous and is not shared with the supervisor while the intern is on internship.

Once all evaluation forms are completed, the internship director will meet with the intern to review the overall feedback from their supervisors and to give overall feedback of their performance on internship. Particular attention is paid to any significant areas of concern noted by supervisors. If any such significant areas of concern are noted, a formal remediation plan will be instituted.

Remediation Policy and Procedures

Remediation procedures address problematic intern behaviors that disrupt the intern's professional role development and their ability to perform required job-related duties. Such procedures are implemented when an intern:

1. Receives a rating of "1" or "2," on the Overall Score for a Competency or a "2" or lower on any of the individual domains within Competency regarding Ethical and Legal Standards.
2. Fails to adhere to the policies and procedures of New York City Health & Hospitals/Bellevue, the NYU Grossman School of Medicine, or our other affiliated training sites (e.g. repeated failure to complete time sheets; failure to follow HIPAA guidelines on Protected Health Information).
3. Exhibits problematic behaviors that may be the result of the intern's inability or unwillingness to:
 - i. follow professional standards or fail to demonstrate skills that reach an acceptable level of competency
 - ii. control personal issues or stress such that performance of any assigned duties is disrupted
4. Repeatedly fails to complete clinical documentation within the required timeframe.

5. Exhibits behaviors that raise any significant concerns about the intern's clinical or professional development that could hinder their progress towards unsupervised practice.

The first step in the remediation process is for the supervisor(s) to meet with the internship director, the relevant Director of Psychology and/or the full Internship Training Committee to assess the seriousness of intern's deficient performance, its probable causes, and actions to be taken. Prior evaluations are reviewed and the intern's other supervisors may also be consulted. The internship director and Training Committee may determine that the problem is best addressed through an informal remediation in ongoing supervision, or they may determine that Formal Remediation, including a written remediation plan is required. Such plans include a description of the problematic behavior(s), documentation of what has previously been discussed with the intern regarding the deficiency(ies), and a concrete remediation plan that details clear objectives to address the problem(s) within a specified time frame.

The intern is also invited to provide a written statement regarding the identified problems. As part of this process, the internship director contacts the intern's graduate program director of training to notify them that the intern requires a remediation plan and to seek the program's input to the plan. The internship director documents the outcome and shares written notification with the intern and supervisor(s). The final document is reviewed with the intern and the intern's graduate program director of training, signed by the intern and internship director, a copy is given to the intern and the intern's graduate program director of training, and the original is placed in the intern's permanent record.

The remediation plan is reviewed at the end of the specified time frame. If the concerns have been satisfactorily addressed and sufficient improvement has been made, the remediation period will end. The director of training of the intern's graduate program will be notified, as will the intern's supervisors. The intern will be asked to sign the remediation plan, indicating that it has been completed. It is also signed by the internship director and placed in the intern's permanent record.

If the problems are deemed to be more serious and/or repeated efforts at remediation have not resolved the issue, the intern will be given a written Probation Notice that includes a description of previous efforts to rectify the problem(s), notification of and/or consultation with the intern's graduate program director of training regarding further course of action, specific recommendations for resolving the problem(s), and a specified time frame for the probation during which the problem is expected to be rectified and explicit procedures for assessing progress. Again, as part of this process, the intern is invited to provide a written statement regarding the identified problem(s). The Probation Notice is reviewed with the intern and the intern's graduate program director of training, signed by the intern and internship director, a copy is given to the intern and the intern's graduate program director of training, and the original is placed in the intern's permanent record.

If an intern on Probation has not improved sufficiently under the conditions specified in the Probation Notice, termination will be discussed by the full Training Committee and with the intern's graduate program director of training. The final decision regarding the intern's graduation is made by the internship director, based on the input of the Training Committee, the relevant Human Resource Departments, and all written evaluations and other documentation assessing the intern's performance. This determination will occur no later than the May Training Committee meeting.

If it is decided to terminate the intern from their internship, the intern will be informed in writing by the internship director that they will not successfully complete the internship. The intern and his/her graduate program director of training will be informed of the decision in writing no later than May 30th. At any stage of the process, the intern may request assistance and/or consultation from outside of the program. Outside resources include: the New York Health+Hospitals/Bellevue and the NYU Grossman School of Medicine Human Resource Departments; APPIC's Informal and Formal Problem Consultation Office (<https://appic.org/Problem-Consultation>); and the APA CoA (<https://accreditation.apa.org/>).

Grievance Procedures

The NYU-Bellevue Clinical Psychology Internship Program is committed to the fair and impartial review of all intern concerns, complaints and grievances. In general, it is the belief of the training program that the overwhelming majority of interns' concerns can be expeditiously and successfully resolved informally, obviating the need for review, adjudication, and disposition via the formal grievance process.

Informal Process

The following specific steps may be initiated by an intern if there is a problem with one of the supervisors and/or affiliated sites.

1. The intern will contact the internship director to discuss the complaint. Together, they will review the situation and any attempts that have been made towards resolution. If deemed necessary, the internship director will contact the supervisor/site involved and discuss the matter with the Internship Training Committee, and other members of the training faculty.
2. The supervisor/site will have a chance to respond to the complaint, and an attempt at resolution will be initiated.

If this informal procedure does not yield results that are satisfactory to the intern, submission of a formal grievance may be undertaken.

Formal Process

If informal measures such as these have been undertaken to remedy difficulties directly with the supervisor/site involved and with the Internship Director without satisfaction, a formal grievance may be filed for review via the formal grievance process outlined below.

The formal grievance should be communicated in writing and should be signed and dated by the intern. The intern should then confidentially forward the memorandum to the internship director or the Grievance Committee. The following elements should be included in a formal grievance memorandum:

1. A description of the grievance with supporting facts.
2. Description of the informal remedies attempted (if any) and the outcome of each.
3. Actions requested or remedies suggested (if any).

Upon receipt of the formal grievance, the internship director or the Grievance Committee will, via interviews and other fact-finding methods, obtain the information necessary to undertake a full and impartial review of the situation. The intern will be notified within two weeks of the receipt of the formal grievance of any actions planned or taken. If the internship director is the *adjudicating official* for the grievance then he/she will determine whether the grievance is deemed valid.

The intern may formally appeal the decision/action of the internship director to the Grievance Committee within seven days of receipt of the director's notice of findings. ***In all instances, however, the Grievance Committee's findings and actions will be final and will exhaust the formal psychology internship review/appeal options at the departmental level.*** This does not, however, preclude an intern from pursuing other grievance options afforded them through appropriate hospital, local, state, or national professional or regulatory bodies such as APPIC (<https://appic.org/Problem-Consultation>).

At any phase of the formal grievance process, the intern may choose to have an appropriate person or professional assist or represent them in the review process.

Submission of a formal or informal grievance will not be judged as cause for punitive action or alleged deficiencies in intern/trainee conduct, performance, or problem-solving skills. Substantiated acts of harassment or retaliation by Departmental faculty are emphatically unacceptable and will be aggressively pursued by appropriate departmental supervisory faculty for corrective or disciplinary action.

Termination Policy

The NYU-Bellevue Clinical Psychology Internship Program abides by the policies and procedures of its host institutions and affiliated sites: New York City Health and

Hospitals/Bellevue, New York University Grossman School of Medicine, Hassenfeld Children's Hospital at NYU Langone Child Study Center, and Kirby Forensic Psychiatric Center. Any violation of these institutions' policies that would be considered grounds for termination from the host institution shall also constitute grounds for termination from the internship.

The internship also abides by the American Psychological Association's Ethical Principles of Psychologists and Code of Conduct. Violations of the tenets of the Ethics Code may lead to an intern being placed on probation or, after appropriate consultation with the APA CoA and APPIC, termination of the intern from the internship. An intern may also be terminated from the internship if, after a suitable period of probation and remediation, he or she continues to demonstrate significant deficits in the core skills and competencies required for successful completion of the internship as outlined in detail above.

Communication with Doctoral Programs

On Match Day in February, incoming interns are contacted and congratulated via phone by the internship director. They are then sent an acceptance letter providing details about the program and the on-boarding process for new employees. Directors of training from the incoming interns' doctoral programs are cc'ed on the email, which is required by APPIC Guidelines. A second email is sent in the spring with the intern's signed Internship Attendance Policy form attached.

In January of the internship year, letters are sent to the intern's doctoral programs' directors of training indicating how the intern is progressing at mid-year, detailing the intern's progress through the program up to that point. A letter of completion is sent once the intern has completed the program at end of year.

The internship director communicates with doctoral programs about each intern's progress while on internship as needed, such as if problems arise requiring remediation. Some graduate programs require their own evaluation forms at select points during the training year, and these are completed upon request.

Interns are asked to notify the internship director of any changes in their program's director of training to insure successful communication between the internship director and the intern's doctoral program.

Record Retention Policy

Interns' permanent files are kept and maintained by the internship director and contain pre-employment paperwork, APPIC Application, CV, correspondence with the intern's graduate, certificate of completion, evaluations, any formal complaints or grievances, and licensure paperwork. All records are confidential, maintained digitally in password-protected folders and can only be accessed with the approval of the internship director. This information is kept indefinitely.

Internship Admissions, Support, and Initial Placement Data

Date Program Tables are updated: **July 2024**

Program Disclosures

Does the program or institution require students, trainees, and/or staff (faculty) to comply with specific policies or practices related to the institution's affiliation or purpose? Such policies or practices may include, but are not limited to, admissions, hiring, retention policies, and/or requirements for completion that express mission and values?	<input checked="checked" type="checkbox"/> Yes <input type="checkbox"/> No
If yes, provide website link (or content from brochure) where this specific information is presented:	
<p>In accordance with New York State Governor's executive order, all NYC Health + Hospitals staff, including contractors, vendors, students, partners, employees, and affiliates, who work, volunteer, train or provide services in-person at any NYC Health + Hospitals facility, site or workplace, are required to be vaccinated for Covid-19.</p> <p>In accordance with NYU Langone Health policy, and New York State Governor's executive order, the Covid-19 vaccination is required for all faculty, staff, voluntary attending physicians, HHMI employees who are on-site, non-compensated faculty, students, clinical or academic observers, and volunteers.</p> <p>Psychology interns across all tracks are required to provide proof of COVID-19 vaccination as part of the onboarding process.</p> <p>This information can be found on p. 7 of this brochure under <i>Personnel Processing</i>.</p>	

Internship Program Admissions

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:
<p>The NYU-Bellevue Clinical Psychology Internship Program, accredited by the American Psychological Association, is based in the Departments of Psychiatry and Child and Adolescent Psychiatry of New York City Health and Hospitals/Bellevue (NYU H+H/Bellevue) and is affiliated with the New York University Grossman School of Medicine. Psychology interns receive training at NYC H+H/Bellevue, the Hassenfeld Children's Hospital at NYU Langone Child Study Center, and Kirby Forensic Psychiatric Center. Our mission is to prepare doctoral candidates for careers as psychologists in a variety of academic, clinical, and research settings in both the public and private sectors.</p> <p>The NYU-Bellevue clinical population is extremely diverse, including individuals from an array of cultures, ethnicities, religions, sexual orientations, gender identities, and socio-economic levels. The program deeply respects and attends to the many cultural issues that come into play when working with such a broad population.</p> <p>Designed in the Scholar-Practitioner Model, the program consists of four tracks and aims to facilitate a smooth transition from doctoral study to professional functioning, through acquisition of advanced clinical skills that integrate theory and practice. The program accepts 14 interns a year, 6 in the Adult</p>

Psychology Track, 4 in the Child and Adolescent Psychology Track, 3 in the Forensic Psychology Track and 1 in the Neuropsychological Assessment Track. Applicants to the internship program may apply to only one of the four tracks and must indicate their choice in the cover letter that accompanies their online AAPI.

Each application is carefully reviewed by our faculty with an eye toward identifying candidates who have prior experience or demonstrated interest in working as part of a multidisciplinary team and in settings that serve populations similar to those of NYU-Bellevue and our affiliated sites. Specifically, applications are reviewed based on overall goodness of fit to our program, which includes previous clinical experience, recommendation letters, personal statement, academic performance, and overall ability to articulate internship goals that are a fit with the program.

Based on this review, applicants are invited for virtual interviews, which are conducted in late November through December. The interview is a chance for applicants to meet our faculty and current interns, to learn more about the program and to ask questions. In addition, the interview process allows faculty to get a sense of the fit of an applicant for the program, including an applicant's interests, personality, and clinical and supervision style.

Internship appointments are for one-year and begin on July 1st and end on June 30th of the following year. The program abides by the guidelines and policies of the Association of Psychology Postdoctoral and Internship Centers (APPIC). The deadline to apply is November 1, 2024 at 11:59 pm EST.

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 checked="" type="checkbox"/> No	<input type="checkbox"/> Yes	Amount:
Total Direct Contact Assessment Hours	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes	Amount:

Describe any other required minimum criteria used to screen applicants:

1. Completion of a minimum of three years' experience in a professional psychology doctoral program, which must include experience in psychotherapy and psychological assessment
2. Doctoral student in good standing at an APA-accredited clinical or counseling doctoral psychology program
3. Approval for internship by the applicant's doctoral program's director of clinical training
4. Completion of coursework and comprehensive exams prior to beginning internship
5. Defense of dissertation proposal prior to beginning internship

Financial and Other Benefit Support for Upcoming Training Year 2023-2024

Annual Stipend/Salary for Full-time Interns	\$50,000	
Annual Stipend/Salary for Half-time Interns	NA	
Program provides access to medical insurance for intern?	<input checked="" type="checkbox"/> Yes	<input 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)	15 days; 105 hrs.	
Hours of Annual Paid Sick Leave	5 days; 35 hrs.	
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?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Other Benefits (please describe): Interns have 9 to 12 paid federal holidays. Health insurance becomes active July 1 st . Interns have access to the NYU Health Services Library. Access to a variety of discounts for goods, services and entertainment.		

*Note. Programs are not required by the Commission on Accreditation to provide all benefits listed in this table.

Initial Post-Internship Positions

(Provide an Aggregated Tally for the Preceding 3 Cohorts)

	2021-2023	
Total # of interns who were in the 3 cohorts	42	
Total # of interns who did not seek employment because they returned to their doctoral program/are completing doctoral degree	2	
	PD	EP
Academic teaching	0	0
Community mental health center	2	1
Consortium	0	0
University Counseling Center	1	0
Hospital/Medical Center	18	1
Veterans Affairs Health Care System	2	0
Psychiatric facility	2	1
Correctional facility	0	1
Health maintenance organization	0	0
School district/system	0	0
Independent practice setting	9	0
Other	1	1

*Note: "PD" = Post-doctoral residency position; "EP" = Employed Position. Each individual represented in this table should be counted only one time. For former trainees working in more than one setting, select the setting that represents their primary position.

Program Faculty

Internship Director

Anna E. Odom, Ph.D. (The New School for Social Research, 2005) Clinical Associate Professor, Department of Psychiatry, NYU Grossman School of Medicine. Director, NYU/Bellevue Clinical Psychology Internship Program; Chief Psychologist, Adult Outpatient Psychiatry Clinic, NYC Health & Hospitals/Bellevue

Internship Training Committee

James Beacher, Psy.D. (Forest Institute, 1996) Clinical Instructor, Department of Psychiatry, NYU Grossman School of Medicine. Director of Psychology, Kirby Forensic Psychiatric Center

Sonia Bernal, Ph.D., ABPP-CN (City University of New York, 2010) Clinical Associate Professor, Department of Psychiatry, NYU Grossman School of Medicine. Director, Neuropsychological/Psychological Assessment Service, NYC Health & Hospitals/Bellevue

Alan S. Elliot, Ph.D. (Yeshiva University, 1991) Clinical Associate Professor, Departments of Psychiatry and Child and Adolescent Psychiatry, NYU Grossman School of Medicine. Director, Division of Psychology, NYC Health & Hospitals/Bellevue

Lori Evans, Ph.D. (St. John's University, 1992) Clinical Assistant Professor, Department of Child and Adolescent Psychiatry, NYU Grossman School of Medicine. Director of Psychology Training & Director of Psychology, Hassenfeld Children's Hospital at NYU Langone Child Study Center Faculty Group Practice

Beryl Filton, Ph.D. (St. John's University, 2011) Clinical Associate Professor, Department of Child and Adolescent Psychiatry, NYU Grossman School of Medicine. Director, Division of Child & Adolescent Psychology; NYC Health & Hospitals/Bellevue

Peter T. Haugen, Ph.D. (University of Tennessee, 2006) Clinical Instructor, Department of Psychiatry, NYU Grossman School of Medicine. Mental Health Director, World Trade Center First Responders Program, NYU Grossman School of Medicine

Glen E. Heiss, Ph.D. (Fordham University, 2000) Clinical Assistant Professor, Department of Psychiatry, NYU Grossman School of Medicine. Director, Adult Inpatient Psychology, NYC Health & Hospitals/Bellevue

Lauren Latella, Ph.D. (Fordham University, 2019) Clinical Assistant Professor, Department of Child and Adolescent Psychiatry, NYU Grossman School of Medicine. Clinic Director, Child and Adolescent Outpatient Clinic, NYC Health & Hospitals/Bellevue

Jennifer A. Mathur, Ph.D. (Adelphi University, 2002) Clinical Assistant Professor, Department of Psychiatry, NYU Grossman School of Medicine. Clinical Director, Comprehensive Psychiatric Emergency Program Forensic Evaluation Service, NYC Health & Hospitals/Bellevue

Program Supervisors

NYC Health & Hospitals/Bellevue

Leigh Andrews, Ph.D. (University of Delaware, 2023). Psychologist, World Trade Center Environmental Health Center, NYC Health & Hospitals/Bellevue

Anthony P. Bossis, Ph.D. (Adelphi University, 1999) Clinical Assistant Professor, Department of Psychiatry, NYU Grossman School of Medicine

Caroline Brachfeld, Ph.D. (Fordham University, 2019). Clinical Instructor, Department of Psychiatry, NYU Grossman School of Medicine. Psychologist, Adult Psychiatry Inpatient Service, Co-Director, NYC H+H/Bellevue Psychology Externship Program, NYC Health & Hospitals/Bellevue

Marie Brown, Ph.D. (Long Island University-Brooklyn, 2019) Clinical Instructor, Department of Psychiatry, NYU Grossman School of Medicine. Psychologist, Adult Outpatient Psychiatry Clinic, NYC Health & Hospitals/Bellevue

Sharlene Bird, Psy.D. (Yeshiva University, 1992) Clinical Instructor, Department of Psychiatry, NYU Grossman School of Medicine

Beatrice Caan, Ph.D. (Yeshiva University, 2003) Clinical Instructor, Department of Psychiatry, NYU Grossman School of Medicine. Psychologist, Rehabilitation Medicine, NYC Health & Hospitals/Bellevue

Arielle Carmel, Psy.D. (Midwestern University, 2022) Clinical Assistant Professor, Department of Child and Adolescent Psychiatry, NYU Grossman School of Medicine. Psychologist, Child and Adolescent Outpatient Clinic, NYC Health & Hospitals/Bellevue

Ian Carroll, Ph.D. (University of Wisconsin at Madison, 2021) Clinical Assistant Professor, Department of Child and Adolescent Psychiatry, NYU Grossman School of Medicine. Psychologist, Child and Adolescent Outpatient Clinic, NYC Health & Hospitals/Bellevue

Hannah Esan, Ph.D. (Yeshiva University, 2019) Clinical Instructor, Department of Psychiatry, NYU Grossman School of Medicine. Psychologist, Adult Psychiatry Inpatient Service, Co-Director, NYC H+H/Bellevue Psychology Externship Program, NYC Health & Hospitals/Bellevue

Melanie Farkas, Ph.D. (Fordham University, 2008) Clinical Assistant Professor, Department of Psychiatry, NYU Grossman School of Medicine. Unit Chief, Forensic Psychiatry Inpatient Service, NYC Health & Hospitals/Bellevue

Madeline Gross, Psy.D. (Yeshiva University, 2015) Clinical Instructor, Department of Psychiatry, NYU Grossman School of Medicine. Assistant Mental Health Director, World Trade Center Environmental Health Center, NYC Health & Hospitals/Bellevue

Christian Haase, Psy.D. (James Madison University, 2021) Clinical Instructor, Department of Psychiatry, NYU Grossman School of Medicine. Psychologist, World Trade Center Environmental Health Center, NYC Health & Hospitals/Bellevue

Kristy-Lee Jean Pierre, Ph.D. (St. John's University, 2016) Clinical Assistant Professor, Department of Child and Adolescent Psychiatry, NYU Grossman School of Medicine.

Juhee Jhalani, Ph.D. (St. John's University, 2013) Clinical Instructor, Department of Psychiatry, NYU Grossman School of Medicine. Psychologist, Adult Outpatient Psychiatry Clinic, NYC Health & Hospitals/Bellevue

Elissa Kirtzman, L.C.S.W. Clinical Instructor, Department of Child and Adolescent Psychiatry, NYU Grossman School of Medicine. NYU Family Studies Program.

Cathy Kondas, MD (Rutgers Medical School) Clinical Associate Professor, Department of Child and Adolescent Psychiatry, NYU Grossman School of Medicine. Director, Consultation-Liaison Psychiatry, NYC Health & Hospitals/Bellevue

Jake Lackow, Ph.D. (Hofstra University, 2018) Clinical Assistant Professor, Department of Child and Adolescent Psychiatry, NYU Grossman School of Medicine. Psychologist, Child and Adolescent Comprehensive Psychiatric Emergency Program and Administration of Children's Services Pre-Placement Center, NYC Health & Hospitals/Bellevue

Victoria Lewis, Psy.D. (Pace University, 2024) Clinical Instructor, Department of Psychiatry, NYU Grossman School of Medicine. Psychologist, Chemical Dependency Outpatient Program, NYC Health & Hospitals/Bellevue

Kai-Siang (Douglas) Low, Ph.D. (University of Illinois, 2006) Clinical Assistant Professor, Department of Psychiatry, NYU Grossman School of Medicine. Unit Chief, Adult Psychiatry Inpatient Service, NYC Health & Hospitals/Bellevue

Dara Mahler-Kocaoglu, Ph.D. (The New School for Social Research, 2014) Clinical Instructor, Department of Psychiatry, NYU Grossman School of Medicine. Psychologist, Forensic Psychiatry Inpatient Service, NYC Health & Hospitals/Bellevue

Sarah Mann, Ph.D. (Rutgers University, 2018) Clinical Assistant Professor, Department of Psychiatry, NYU Grossman School of Medicine. Psychologist, Adult Outpatient Psychiatry Clinic, NYC Health & Hospitals/Bellevue

Jenna Marshall, Ph.D. (University of Virginia, 2014) Clinical Assistant Professor, Department of Psychiatry, NYU Grossman School of Medicine. Psychologist, OnTrackNY, NYC Health & Hospitals/Bellevue

Tom Mounsey, Ph.D. (Long Island University-Brooklyn, 2018) Clinical Instructor, Department of Psychiatry, NYU Grossman School of Medicine. Psychologist, World Trade Center Environmental Health Center, NYC Health & Hospitals/Bellevue

Patrick Roebke, Psy.D. (George Washington University, 2017) Clinical Instructor, Department of Psychiatry, NYU Grossman School of Medicine. Psychologist, Chemical Dependency Outpatient Program, NYC Health & Hospitals/Bellevue

Ashley Rodriguez, Ph.D. (Fordham University, 2020) Clinical Assistant Professor, Department of Child and Adolescent Psychiatry, NYU Grossman School of Medicine. Psychologist/HealthySteps Specialist, 3-2-1 IMPACT Program, NYC Health & Hospitals/Bellevue

Rebecca Rosen, Ph.D. (The New School for Social Research, 2011) Clinical Associate Professor, Department of Psychiatry, NYU Grossman School of Medicine. Mental Health Director, World Trade Center Environmental Health Center, NYC Health & Hospitals/Bellevue

Michelle Santiago-Medina, Ph.D. (Ponce Health Sciences University, 2016) Clinical Instructor, Department of Psychiatry, NYU Grossman School of Medicine. Psychologist, Adult Psychiatry Inpatient Service, NYC Health & Hospitals/Bellevue

Lily Schwartz, Ph.D. (Farleigh Dickinson University, 2018) Clinical Assistant Professor, Department of Child and Adolescent Psychiatry, NYU Grossman School of Medicine. Psychologist, Adolescent Inpatient Service and Administration of Children's Services Pre-Placement Center, NYC Health & Hospitals/Bellevue

Hawthorne Smith, Ph.D. (Columbia University, 1999) Clinical Associate Professor, Department of Psychiatry, NYU Grossman School of Medicine. Director, Bellevue/NYU Program for Survivors of Torture, NYC Health & Hospitals/Bellevue

Patricia Stegman, L.C.S.W. Clinical Instructor, Department of Child and Adolescent Psychiatry, NYU Grossman School of Medicine, NYU Family Studies Program

Paul Sullivan, Ph.D. (PGSP-Stanford Psy.D. Consortium, 2017) Clinical Assistant Professor, Department of Child and Adolescent Psychiatry, NYU Grossman School of Medicine. Unit Chief, Adolescent Inpatient Service, NYC Health & Hospitals/Bellevue

Michael Surko, Ph.D. (Miami University, 1999) Clinical Assistant Professor, Department of Child and Adolescent Psychiatry, NYU Grossman School of Medicine. Psychologist,

Administration of Children's Services Pre-Placement Center and Home-Based Crisis Intervention (HBCI), NYC Health & Hospitals/Bellevue

Halle Thurnauer, Ph.D. (Long Island University-Brooklyn, 2020). Clinical Assistant Professor, Department of Child and Adolescent Psychiatry, NYU Grossman School of Medicine. Psychologist, Child and Adolescent Partial Hospital Program, NYC Health & Hospitals/Bellevue

Adrienne Todd, Psy.D. (Chicago School of Professional Psychology, 2007) Clinical Instructor, Department of Psychiatry, NYU Grossman School of Medicine. Psychologist, Adult Psychiatry Inpatient Service, NYC Health & Hospitals/Bellevue

Jonathan Vogelman, Ph.D. (Farleigh Dickenson University, 2020) Clinical Assistant Professor, Department of Psychiatry, NYU Grossman School of Medicine. Program Director, Adult Psychiatry Inpatient Service, NYC Health & Hospitals/Bellevue

Ellen Katz Westrich, Ph.D. (Adelphi University, 1997) Clinical Instructor, Department of Psychiatry, NYU Grossman School of Medicine

[Kirby Forensic Psychiatric Center](#)

Jessica Batinjane, Psy.D. (Loyola University Maryland, 2016) Clinical Instructor, Department of Psychiatry, NYU Grossman School of Medicine

Brian J. Belfi, Psy.D. (Carlos Albizu University, 2002) Clinical Instructor, Department of Psychiatry, NYU Grossman School of Medicine. Executive Director, Kirby Forensic Psychiatric Center and Manhattan Psychiatric Center

Amanda Beltrani, Ph.D. (Farleigh Dickinson University) Clinical Instructor, Department of Psychiatry, NYU Grossman School of Medicine

Jonathan Kanegson, Psy.D., JD (The Wright Institute, 2005; Brooklyn Law School, 2021) Clinical Instructor, Department of Psychiatry, NYU Grossman School of Medicine

Jonathan J. Lam, Ph.D. (Fordham University, 2014) Clinical Instructor, Department of Psychiatry, NYU Grossman School of Medicine

Patricia Lee, Psy.D. (Yeshiva University, 2018)

Doreena Lesanics, Ph.D. (St. John's University, 2004)

Catherine Mortiere, Ph.D. (University of Detroit, 2002) Clinical Instructor, Department of Psychiatry, NYU Grossman School of Medicine

Aleta Angelosante, Ph.D. (Temple University, 2006) Clinical Assistant Professor, Department of Child and Adolescent Psychiatry, NYU Grossman School of Medicine. Clinical Director, Anita Saltz Institute for Anxiety and Mood Disorders

Randi Bennett, Ph.D. (Fordham, 2018) Clinical Assistant Professor, Department of Child and Adolescent Psychiatry, NYU Grossman School of Medicine.

Samantha Busa, Psy.D. (Yeshiva University, 2016) Clinical Associate Professor, Department of Child and Adolescent Psychiatry, NYU Grossman School of Medicine. Clinical Director, Gender and Sexuality Service. Lead, Psychology Externship Training Program, Department of Child and Adolescent Psychiatry.

Jordan Davis, Ph.D. (Temple University, 2021) Clinical Assistant Professor, Department of Child and Adolescent Psychiatry, NYU Grossman School of Medicine. Psychologist, Anita Saltz Institute for Anxiety and Mood Disorders

Yamalis Diaz, Ph.D. (University of Maryland, 2009) Clinical Associate Professor, Department of Child and Adolescent Psychiatry, NYU Grossman School of Medicine

Lauren Donnelly, Ph.D. (Columbia University, 2015) Clinical Associate Professor, Department of Child and Adolescent Psychiatry, NYU Grossman School of Medicine. Clinical Director, Autism Spectrum Disorder Service.

Caitlin Gasperetti, Ph.D. (University of California - Berkeley, 2022) Clinical Assistant Professor, Department of Child and Adolescent Psychiatry, NYU Grossman School of Medicine.

Kaitlin Happer, Ph.D. (St. John's University, 2019) Clinical Assistant Professor, Department of Child and Adolescent Psychiatry, NYU Grossman School of Medicine. Psychologist, Anita Saltz Institute for Anxiety and Mood Disorders

Emily Hu, Ph.D. (Seattle Pacific University, 2017) Clinical Assistant Professor, Department of Child and Adolescent Psychiatry, NYU Grossman School of Medicine.

Mark Knepley, Ph.D. (Temple University, 2020) Clinical Assistant Professor, Department of Child and Adolescent Psychiatry, NYU Grossman School of Medicine. Director, Tics, Tourette's Disorder, and Trichotillomania Program

Rachel Kupferberg, Psy.D. (Long Island University-Post, 2021) Clinical Assistant Professor, Department of Child and Adolescent Psychiatry, NYU Grossman School of Medicine. Director, Selective Mutism Program.

Christopher La Lima, Ph.D. (Hofstra University, 2017) Clinical Assistant Professor, Department of Child and Adolescent Psychiatry, NYU Grossman School of Medicine.

Michelle Lee, Ph.D. (Northwestern University, 2018) Clinical Assistant Professor, Department of Child and Adolescent Psychiatry, NYU Grossman School of Medicine. Director, PEERS Social Skills Program

Rebecca "Becky" Lois, Ph.D. (Fairleigh Dickinson University, 2011) Clinical Associate Professor, Department of Child and Adolescent Psychiatry, NYU Grossman School of Medicine. Director of Psychology, Hassenfeld Children's Hospital; Director, KiDS of NYU Integrated Behavioral Health Program

Daniela Montalto, Ph.D. (Fordham University, 2004) Clinical Associate Professor, Department of Child and Adolescent Psychiatry, NYU Grossman School of Medicine. Clinical Director, Neuropsychology and Learning Service

Randi D. Pochtar, Ph.D. (St. John's University, 2014) Clinical Assistant Professor, Department of Child and Adolescent Psychiatry, NYU Grossman School of Medicine

Andrew E. Roffman, L.C.S.W. (New York University, 1988) Clinical Assistant Professor, Department of Child and Adolescent Psychiatry, NYU Grossman School of Medicine. Director, Family Studies Program, Director, Social Work Post-Master's Fellowship

Gili Segall, Ph.D. (Bar-Ilan University, 2012) Clinical Assistant Professor, Department of Child and Adolescent Psychiatry, NYU Grossman School of Medicine

Rebecca Shalev, Ph.D., BCBA (University of Wisconsin-Madison, 2014) Clinical Assistant Professor, Department of Child and Adolescent Psychiatry, NYU Grossman School of Medicine. Psychologist, Autism Spectrum Disorder Service

Jacqueline Smith, Psy.D. (Rutgers GSAPP, 2021) Clinical Assistant Professor, Department of Child and Adolescent Psychiatry, NYU Grossman School of Medicine

David Sukiennik, Psy.D. (Arizona School of Professional Psychology, 2018) Clinical Assistant Professor, Department of Child and Adolescent Psychiatry, NYU Grossman School of Medicine

Timothy Verduin, Ph.D. (Temple University, 2006) Clinical Associate Professor, Department of Child and Adolescent Psychiatry, NYU Grossman School of Medicine. Clinical Director, ADHD and Behavior Disorder Service

Stephanie Wagner, Ph.D. (West Virginia University, 2011) Clinical Assistant Professor, Department of Child and Adolescent Psychiatry, NYU Grossman School of Medicine. Director, PCIT Program; Director, Early Childhood Service.

Bethany Watson, Ph.D. (University of Pennsylvania, 2020) Clinical Assistant Professor,
Department of Child and Adolescent Psychiatry, NYU Grossman School of Medicine.
Psychologist, Anita Saltz Institute for Anxiety and Mood Disorders

Jeremy Wernick, L.C.S.W. (Columbia University, 2017). Clinical Assistant Professor,
Department of Child and Adolescent Psychiatry, NYU Grossman School of Medicine.
Director, Adolescent Dialectical Behavior Therapy Program

Appendix: Sample Evaluation

NYU-Bellevue Clinical Psychology Internship Program Intern Evaluation Form – Adult Outpatient Clinic

Intern: _____ Supervisor: _____

Service/Rotation: _____ Evaluation Period: _____

How did you supervise the intern's work? (Circle all that apply)

- | | |
|----------------------------|--------------------------------------|
| 1. Intern Report | 2. Direct Observation |
| 3. Audio Recording | 4. Review of Charting/Documentation |
| 5. Video Recording | 6. Feedback from Others (i.e. staff) |
| 7. Other (please specify): | |

Date of Observation: _____

The following rating scale is used for performance evaluation of psychology intern progress related to goals and competencies. All Interns must demonstrate an intermediate to advanced level (e.g., ratings of 3 or higher) of professional psychological skills, abilities, proficiencies, competencies, and knowledge as stated in the goals below. If an intern receives a rating of "1" or "2," on an Overall Score for a Competency, remedial action is needed and a plan must be provided. Please provide comments and indicate a plan for remedial action.

1 – Significant Deficits. Functions well below what one would expect at this level of training

2 – Somewhat Below Average. Functions below what one would expect at this level of training

3 – Average. Adequate skill typical of interns at this level of training

4 – Above Average. Functions well with routine supervisory input

5 – Superior. Demonstrates outstanding skill and can function independently with minimal supervisory input

COMPETENCY 1: RESEARCH

Intern demonstrates the substantially independent ability to critically evaluate and disseminate research or other scholarly activities.

- | | | | | | | |
|--|---|---|---|---|---|----|
| 1. Intern demonstrates scholarly knowledge of current research and theory in the practice of psychotherapy. | 1 | 2 | 3 | 4 | 5 | NA |
| 2. Intern demonstrates scholarly knowledge of current research and theory in the practice of psychological assessment. | 1 | 2 | 3 | 4 | 5 | NA |
| 3. Intern demonstrates adequate knowledge and understanding of issues central to the profession of psychology, through attendance and active participation in seminars, didactic courses, and supervision and through presentations of cases and theory. | 1 | 2 | 3 | 4 | 5 | NA |
| 4. Intern demonstrates the ability to critically evaluate empirical research, including an understanding of research design issues such as validity, methods of sampling, and power, and knowledge of the statistical analyses commonly used in psychiatric research as measured on the CONSORT. | 1 | 2 | 3 | 4 | 5 | NA |
| 5. Intern demonstrates the ability to critically evaluate and disseminate empirical research in the context of a Case Conference Presentation. | 1 | 2 | 3 | 4 | 5 | NA |
| 6. Intern demonstrates the ability to critically evaluate and communicate APA Treatment Guidelines to others. | 1 | 2 | 3 | 4 | 5 | NA |
| OVERALL SCORE | 1 | 2 | 3 | 4 | 5 | NA |

COMPETENCY 2: ETHICAL AND LEGAL STANDARDS

Intern demonstrates an appropriate level of ethical and professional knowledge and conduct.

- | | | | | | | |
|--|---|---|---|---|---|----|
| 1. Intern demonstrates knowledge of and acts in accordance with the APA Ethical Principles of Psychologists and Code of Conduct. | 1 | 2 | 3 | 4 | 5 | NA |
| 2. Intern demonstrates knowledge of and acts in accordance with Health + Hospitals, New York City, New York State, and Federal laws, regulations, rules, and policies governing health service psychology. | 1 | 2 | 3 | 4 | 5 | NA |
| 3. Intern demonstrates knowledge of and acts in accordance with limits of confidentiality, procedures for mandated reporting, | 1 | 2 | 3 | 4 | 5 | NA |

assessment of suicidality and homicidality, and Tarasoff Duty to Warn.

- | | | |
|----|--|--------------|
| 4. | Intern demonstrates knowledge of relevant professional standards and guidelines. | 1 2 3 4 5 NA |
| 5. | Intern demonstrates the ability to recognize ethical dilemmas as they arise and to apply ethical decision-making processes in order to resolve them. | 1 2 3 4 5 NA |
| 6. | Intern demonstrates the ability to conduct self in an ethical manner in all professional activities. | 1 2 3 4 5 NA |

OVERALL SCORE

1 2 3 4 5 NA

(If any item on this competency is a 2 or lower, the overall score may not be greater than 2.)

<p>COMPETENCY 3: INDIVIDUAL AND CULTURAL DIVERSITY</p>

<p><i>Intern demonstrates knowledge, awareness, sensitivity, and skills when working with diverse individuals and communities.</i></p>
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|----|---|--------------|
| 1. | Intern demonstrates an understanding of how their own personal/cultural history, attitudes, and biases may affect how they understand and interact with people different from themselves. | 1 2 3 4 5 NA |
| 2. | Intern demonstrates knowledge of the current theoretical and empirical literature related to addressing diversity in all professional activities including research, training, supervision/consultation, and service provision. | 1 2 3 4 5 NA |
| 3. | Intern demonstrates the ability to integrate and use knowledge of individual and cultural differences in the conduct of professional roles (e.g., research, training, supervision/consultation, and service provision). | 1 2 3 4 5 NA |
| 4. | Intern demonstrates the ability to work effectively with individuals whose group membership, demographic characteristics, or worldviews create conflict with their own. | 1 2 3 4 5 NA |
| 5. | Intern demonstrates the ability to independently apply their knowledge and approach in working effectively with the range of diverse individuals and groups encountered at NYC Health + Hospitals/ Bellevue and affiliated sites. | 1 2 3 4 5 NA |

OVERALL SCORE**1 2 3 4 5 NA****COMPETENCY 4: PROFESSIONAL VALUES AND ATTITUDES***The intern demonstrates an appropriate level of professional values and attitudes.*

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|-----|--|----------|----------|----------|----------|----------|-----------|
| 1. | Intern demonstrates behavior that reflects integrity and concern for the welfare of others. | 1 | 2 | 3 | 4 | 5 | NA |
| 2. | Intern executes duties and responsibilities in a professional, conscientious manner. | 1 | 2 | 3 | 4 | 5 | NA |
| 3. | Intern demonstrates appropriate professional deportment with patients and collaterals. | 1 | 2 | 3 | 4 | 5 | NA |
| 4. | Intern demonstrates appropriate professional deportment with colleagues and staff. | 1 | 2 | 3 | 4 | 5 | NA |
| 5. | Intern demonstrates behavior that conveys accountability and personal/professional responsibility. | 1 | 2 | 3 | 4 | 5 | NA |
| 6. | Intern demonstrates behavior that conveys recognition of relevant ethical and legal issues in accordance with the ethical standards of psychologists. | 1 | 2 | 3 | 4 | 5 | NA |
| 7. | Intern demonstrates behavior that conveys recognition of and respect for the contributions of other professional disciplines. | 1 | 2 | 3 | 4 | 5 | NA |
| 8. | Intern demonstrates the ability to engage in self-reflection regarding one's personal and professional functioning. | 1 | 2 | 3 | 4 | 5 | NA |
| 9. | Intern demonstrates the ability to engage in activities to maintain and improve performance, well-being, and professional effectiveness. | 1 | 2 | 3 | 4 | 5 | NA |
| 10. | Intern actively seeks out feedback and supervision. | 1 | 2 | 3 | 4 | 5 | NA |
| 11. | Intern demonstrates openness and responsiveness to feedback and supervision. | 1 | 2 | 3 | 4 | 5 | NA |
| 12. | Intern demonstrates increased autonomy and independence over time (e.g. managing increasingly complex situations) and clearly moving toward independent functioning as a psychologist. | 1 | 2 | 3 | 4 | 5 | NA |

OVERALL SCORE**1 2 3 4 5 NA**

COMPETENCY 5: COMMUNICATION AND INTERPERSONAL SKILLS*Intern demonstrates appropriate levels of communication and interpersonal skills.*

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|---|---------------------|
| 1. Intern demonstrates the ability to develop and maintain effective relationships with patients and collaterals. | 1 2 3 4 5 NA |
| 2. Intern demonstrates the ability to develop and maintain effective relationships with colleagues and staff. | 1 2 3 4 5 NA |
| 3. Intern demonstrates the ability to develop and maintain effective relationships with supervisors. | 1 2 3 4 5 NA |
| 4. Intern demonstrates the ability to utilize oral communications that are informative and well-integrated with patients and collaterals. | 1 2 3 4 5 NA |
| 5. Intern demonstrates the ability to utilize oral communications that are informative and well-integrated with colleagues and staff. | 1 2 3 4 5 NA |
| 6. Intern demonstrates the ability to utilize oral communications that are informative and well-integrated with supervisors. | 1 2 3 4 5 NA |
| 7. Intern demonstrates an awareness of their own nonverbal communication and can manage these effectively with patients and collaterals. | 1 2 3 4 5 NA |
| 8. Intern demonstrates an awareness of their own nonverbal communication and can manage these effectively with colleagues and staff. | 1 2 3 4 5 NA |
| 9. Intern demonstrates an awareness of their own nonverbal communication and can manage these effectively with supervisors. | 1 2 3 4 5 NA |
| 10. Intern demonstrates the ability to produce written communications that are informative and well-integrated. | 1 2 3 4 5 NA |
| 11. Intern demonstrates a thorough grasp of professional language and concepts. | 1 2 3 4 5 NA |
| 12. Intern demonstrates effective interpersonal skills and the ability to manage difficult communications with patients and collaterals. | 1 2 3 4 5 NA |

13.	Intern demonstrates effective interpersonal skills and the ability to manage difficult communications with colleagues and staff.	1	2	3	4	5	NA
14.	Intern demonstrates effective interpersonal skills and the ability to manage difficult communications with supervisors.	1	2	3	4	5	NA
15.	Intern communicates and demonstrates empathy, warmth, genuineness, and respect toward patients and collaterals.	1	2	3	4	5	NA
16.	Intern communicates and demonstrates empathy, warmth, genuineness, and respect toward colleagues and staff.	1	2	3	4	5	NA
17.	Intern communicates and demonstrates empathy, warmth, genuineness, and respect toward supervisors.	1	2	3	4	5	NA
OVERALL SCORE		1	2	3	4	5	NA

COMPETENCY 6: ASSESSMENT

Intern demonstrates competence in conducting evidence-based assessment consistent with the scope of health service psychology.

1.	Intern demonstrates current knowledge of functional and dysfunctional behaviors, including consideration of patient strengths and psychopathology.	1	2	3	4	5	NA
2.	Intern demonstrates an understanding of human behavior and development within its contexts (e.g., family, social, societal and cultural).	1	2	3	4	5	NA
3.	Intern demonstrates the ability to apply the knowledge of functional and dysfunctional behaviors, including context, to the assessment and/or diagnostic process.	1	2	3	4	5	NA
4.	Intern demonstrates ability to conduct a comprehensive evaluation, including presenting problems, history of the problem, psychiatric history, medical history, and psychosocial history.	1	2	3	4	5	NA
5.	Intern demonstrates the ability to conduct a comprehensive mental status exam.	1	2	3	4	5	NA
6.	Intern demonstrates the ability to evaluate dangerousness.	1	2	3	4	5	NA
7.	Intern demonstrates the ability to evaluate suicidality.	1	2	3	4	5	NA

8.	Intern demonstrates the ability to evaluate abuse and other reporting concerns.	1	2	3	4	5	NA
9.	Intern demonstrates current knowledge of diagnostic classification systems, including the DSM-5.	1	2	3	4	5	NA
10.	Intern demonstrates the ability to organize clinical material and formulate an accurate diagnosis.	1	2	3	4	5	NA
11.	Intern demonstrates the ability to select and apply assessment methods that draw from the best available empirical literature and reflect the science of measurement and psychometrics.	1	2	3	4	5	NA
12.	Intern demonstrates the ability to collect relevant data using multiple sources and methods appropriate to the identified goals and questions of the assessment as well as relevant diversity characteristics of the patient.	1	2	3	4	5	NA
13.	Intern demonstrates the ability to interpret assessment results, following current research and professional standards and guidelines.	1	2	3	4	5	NA
14.	Intern demonstrates the ability to use assessment results to inform case conceptualization, classification, and recommendations.	1	2	3	4	5	NA
15.	Intern demonstrates the ability to communicate orally the findings and implications of the assessment in an accurate and effective manner sensitive to a range of audiences.	1	2	3	4	5	NA
16.	Intern demonstrates the ability to communicate in written documents the findings and implications of the assessment in an accurate and effective manner sensitive to a range of audiences.	1	2	3	4	5	NA
OVERALL SCORE		1	2	3	4	5	NA

COMPETENCY 7: INTERVENTION

Intern demonstrates competence in evidence-based interventions consistent with the scope of health service psychology, including interventions derived from a variety of theoretical orientations or approaches directed at an individual, a family, a group, an organization, a community, a population or other systems.

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|--|---|---|---|---|---|----|
| 1. Intern demonstrates the ability to establish rapport and maintain a therapeutic alliance with the recipients of psychological services. | 1 | 2 | 3 | 4 | 5 | NA |
| 2. Intern demonstrates the ability to develop evidence-based intervention/treatment plans specific to the service-delivery goals. | 1 | 2 | 3 | 4 | 5 | NA |
| 3. Intern demonstrates the ability to implement interventions informed by assessment findings, diversity characteristics, and other contextual variables. | 1 | 2 | 3 | 4 | 5 | NA |
| 4. Intern demonstrates the ability to apply the relevant research literature to clinical decision-making. | 1 | 2 | 3 | 4 | 5 | NA |
| 5. Intern demonstrates the ability to evaluate intervention effectiveness, and adapt intervention goals and techniques consistent with ongoing evaluation. | 1 | 2 | 3 | 4 | 5 | NA |
| 6. Intern demonstrates appropriate professional boundaries with patients. | 1 | 2 | 3 | 4 | 5 | NA |
| 7. Intern performs effectively in a crisis situation. | 1 | 2 | 3 | 4 | 5 | NA |
| 8. Intern demonstrates the ability to terminate treatment effectively and appropriately. | 1 | 2 | 3 | 4 | 5 | NA |
| 9. Intern fulfills administrative duties effectively. | 1 | 2 | 3 | 4 | 5 | NA |
| OVERALL SCORE | 1 | 2 | 3 | 4 | 5 | NA |

COMPETENCY 8: SUPERVISION

Intern demonstrates the ability to apply knowledge of supervision (in direct or simulated practice with psychology trainees or other health professionals, including but not limited to role-played supervision with others, and peer supervision with other trainees).

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|--|---|---|---|---|---|----|
| 1. Intern demonstrates knowledge and understanding of the theory and practice of clinical supervision. | 1 | 2 | 3 | 4 | 5 | NA |
|--|---|---|---|---|---|----|

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|--|---|---|---|---|---|----|
| 2. Intern demonstrates understanding of the importance of boundaries in clinical supervision. | 1 | 2 | 3 | 4 | 5 | NA |
| 3. Intern demonstrates understanding of ways to manage conflict in clinical supervision. | 1 | 2 | 3 | 4 | 5 | NA |
| 4. Intern demonstrates the ability to provide peer supervision to other psychology trainees. | 1 | 2 | 3 | 4 | 5 | NA |
| 5. Intern demonstrates the ability to provide peer supervision to trainees of other disciplines. | 1 | 2 | 3 | 4 | 5 | NA |

OVERALL SCORE

1 2 3 4 5 NA

COMPETENCY 9: CONSULTATION AND INTERPROFESSIONAL/INTERDISCIPLINARY SKILLS
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<i>Intern demonstrates and applies knowledge of consultation and interprofessional/interdisciplinary skills (in direct or simulated consultation with individuals and their families, other health care professionals, interprofessional groups, or systems related to health and behavior).</i>
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|--|---|---|---|---|---|----|
| 1. Intern demonstrates knowledge and respect for the roles and perspectives of other professions. | 1 | 2 | 3 | 4 | 5 | NA |
| 2. Intern demonstrates knowledge and utilization of methods of consultation as they apply to work with the interdisciplinary team and other health care professionals and related systems. | 1 | 2 | 3 | 4 | 5 | NA |
| 3. Intern demonstrates knowledge and utilization of methods of consultation as they apply to work with individuals and their families. | 1 | 2 | 3 | 4 | 5 | NA |
| 4. Intern demonstrates awareness of the appropriate use of consultation in emergency situations. | 1 | 2 | 3 | 4 | 5 | NA |
| 5. Intern demonstrates the ability to provide peer consultation to other interns. | 1 | 2 | 3 | 4 | 5 | NA |
| 6. Intern demonstrates the ability to provide peer consultation to trainees of other disciplines. | 1 | 2 | 3 | 4 | 5 | NA |

OVERALL SCORE

1 2 3 4 5 NA

SERVICE SPECIFIC COMPETENCIES

Please complete the following item(s) as it relates to the competencies for this specific service.

Adult OPC Individual Psychotherapy Competencies

- To gain experience in the evaluation and treatment of patients across the age range in a community psychiatry, outpatient setting
- To conduct a thorough diagnostic assessment, including differential diagnosis, risk assessment, and Mental Status Exam
- To continue to develop conceptualization abilities in the theoretic orientation (i.e. psychodynamic, cognitive, behavioral, eclectic, integrative) in which you and your supervisor are working with a particular patient, as well as consideration of psychosocial, development, and cultural factors
- To formulate appropriate interventions based on case conceptualization
- To develop realistic treatment plans and goals with patients and provide ongoing assessment of those goals
- To gain experience in assessment and management of high-risk situations (i.e. suicidal ideation)
- To effectively establishing rapport with a patient
- To effectively manage feelings and reactions brought up by the patient and use those experiences in treatment
- To be present and attend to the process and content of the patient's verbal and non-verbal interactions
- To gain experience utilizing case management and making referrals as needed
- To document in a timely and clinically appropriate manner
- To effectively work on and communicate with a multidisciplinary team
- To effectively manage termination and discharge
- To effectively use supervision

The intern has made appropriate progress toward these specific competencies (1=yes, 0=no). If no, please explain:

Rating

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Overall Evaluation of Strengths and Areas for Improvement:

What strengths does the intern bring to her/his work? Where has the intern demonstrated growth during this evaluation period? What areas need improvement and further development? Please note any specific concerns about the intern advancing toward unsupervised practice. If an intern received a rating of "1" or "2," please provide comments and indicate a plan for remedial action.

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Supervisor's Signature: _____ **Date:** _____

Intern's response to the above evaluation:

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Intern's Signature: _____ **Date:** _____