



**DOCTORAL INTERNSHIP IN PSYCHOLOGY
2016-2017**

**APPIC MATCH NUMBER: 232111
APPLICATION DEADLINE: NOVEMBER 15, 2016**

ACCREDITATION STATUS

The doctoral internship at **University Healthcare** is not currently accredited by the American Psychological Association (APA). As an emerging APA Grant-funded internship program, we have successfully obtained APPIC membership and are current working towards APA-accreditation.

Questions related to the program's accreditation status should be directed to the Commission on Accreditation:

Office of Program Consultation and Accreditation
American Psychological Association
750 1st Street, NE
Washington, DC 20002-4242
(202) 336-5979

APPLICATION PROCESS AND SELECTION CRITERIA

University Healthcare's Psychology Internship offers **two full-time positions** per academic year.

Applicant Qualifications

Interns are required to be advanced graduate students currently enrolled in a terminal Ph.D. or PsyD. program. Intern applicants should have completed a minimum of three years of graduate training. Applicants are also expected to have completed basic required academic coursework, successfully passed their doctoral comprehensive or qualifying examinations by the application deadline, have earned their master's degree by the application deadline, have their dissertation approved by the ranking deadline, and have the endorsement of their graduate program Director of Clinical Training.

While the program will base its selection process on the entire application package noted below, applicants who have met the following qualifications will be considered preferred:

1. A minimum of 350 intervention hours
2. A minimum of 50 assessment hours
3. Experience or special interest working in rural and/or integrated-care settings
4. Coursework in abnormal psychology, cognitive assessment, objective assessment, projective assessment, and test construction
5. Successful dissertation defense by the start of internship

Application Procedures

As a member in good standing of APPIC, this internship program maintains compliance with APPIC's guidelines on recruitment and selection. We participate in the National Match (NMS Match Number # 232111) and follow the APPIC Match Policies. We agree to abide by the APPIC policy that no person at this training site will solicit, accept, or use any ranking-related information from any internship applicant. Internship offers are made exclusively through the APPIC National matching program in compliance with the APPIC policy. University Healthcare is an equal opportunity employer and adheres to APPIC's policies on nondiscrimination.

As an APPIC-member, this program accepts the AAPI common application through the APPIC website (www.appic.org). A complete application consists of the following materials:

1. A completed on-line AAPI (APPIC's standard application)
2. An individualized cover letter that explicitly discusses your internship goals and how BMP is designed to meet those goals
3. A current Curriculum Vitae (as part of the on-line AAPI)
4. A minimum of three-letters of recommendation (at least two of which must be from individuals familiar with your clinical experience)
5. Official transcripts of all graduate coursework
6. Optional: One full integrated assessment report (please redact appropriately)

All application and associated materials must be received by November 15th.

Selection and Interview Process

Applicants who meet the basic requirements (see "Applicant Qualifications" section) and appear to be a good match for our program (e.g., training and/or experience in rural mental health/integrated primary care/behavioral medicine) will be selected for an on-site interview. If applicants are invited to interview, they will be notified on or before December 8th.

Interview days are a critical part of our selection process and provide a good opportunity for applicants and staff to get to know one another. Three interview days in early January will be offered to potential applicants. Interview days will consist of an individual interview with the Training Director and at least one additional interview with a staff psychologist. Applicants will have the opportunity to interact with current interns, whose verbal feedback will be elicited. Interview days will also include a lunch with staff and tour of the BMP facility and integrated primary care site (weather permitting). Our goal is for interview days to provide our training site and our applicants to assess our goodness of fit.

Background Checks/Drug Screening

Additionally, University Healthcare requires that matched interns meet agency-specific criteria to begin their training year. This includes a background check, physical examination, TB test, and drug screen. If a matched intern does not meet certain site-level criteria the match agreement will be terminated and the intern will not be allowed to complete this internship.

Additional Information

For any additional information that may be required to assist you in this application process, please contact: Stephanie McGraw, Psy.D

StMcGraw@wvumedicine.org

WVU Medicine: University Healthcare Physicians

WVU School of Medicine – Eastern Division

2004 Professional Court

Martinsburg, WV 25401

(304) 596-5780

TRAINING PROGRAM PHILOSOPHY

University Healthcare’s Department of Behavioral Medicine and Psychiatry (BMP) is dedicated to its doctoral internship in psychology. The overarching goal of BMP’s internship program is to increase the access of West Virginia residents to highly trained mental health professionals by ensuring that future generations of psychologists receive quality education and training experiences. Specifically, we seek to train entry-level clinicians in how to integrate the discipline and practice of professional psychology within both community and integrated care settings. We do this by employing an empirically informed, competency-based, practitioner-scholar model.

Our doctoral internship program in psychology is first and foremost a training program that includes planned, programmed sequences of training experiences. The title of “psychology intern” is used to designate trainee status. Training at BMP has been deliberately designed to offer an experience-near, closely supervised, and developmentally appropriate sequence over the course of twelve consecutive months for two interns each academic year. Psychology interns will be exposed to a variety of types of psychological services and consumers. The doctoral internship in psychology is a 2000-hour, full-time appointment, which requires psychology interns to provide no fewer than 500 face-to-face direct service hours.

We work closely with each psychology intern to tailor an individualized plan for his or her internship year. These plans are designed to build upon each trainee’s unique strengths to blend scientific knowledge with increasingly challenging professional experiences. Psychology interns are supported as they further integrate their identities as practitioners and scholars, thus consolidating their unique therapeutic voice and professional identity. We guide psychology interns through this process by providing opportunities for continued growth via regularly scheduled didactics, trainings, supervision, and consultation. It is our goal to support the entire intern through this transitional year by creating a warm and stimulating environment that provides opportunity for both personal and professional growth.

By the end of the internship year, psychology interns at BMP will have received a generalist training and are expected to possess the capacity to function independently as an entry-level professional. They will demonstrate an understanding of the empirical basis for their interventions and possess the skills to intervene with a wide array of presenting problems. They will exhibit respect and appreciation for both visible and invisible diversity factors, including the resilience that is often found in individuals living in underserved areas. In order to also meet the growing need for psychologists who are competent to function in integrated healthcare settings, they will demonstrate capability to effectively work in primary care settings. The totality of training experiences at BMP will provide a capstone training experience.

AGENCY OVERVIEW

Introduced on January 1, 2015, University Healthcare brings together Berkeley Medical Center, Jefferson Medical Center, and West Virginia University Hospitals to form a new not-for-profit healthcare delivery system for the Eastern Panhandle. The Department of Behavioral Medicine and Psychiatry (BMP) is physically housed on the Berkeley Medical Center campus, in Martinsburg, West Virginia. BMP is a freestanding outpatient clinic and offers services primarily to residents of the tri-state area (West Virginia, Virginia, and Maryland). We are staffed by a team of psychologists, psychiatrists, crisis workers, and medical assistants who work in conjunction with patient primary care and other medical providers.

BMP provides clinical services at two separate locations. Psychology interns and clinical staff are primarily housed in BMP's outpatient clinic on the Berkeley Medical Center campus in Martinsburg, WV. Each psychology intern has their own office with furnishings, a computer, and video recording equipment. Clinical records and schedules are maintained in EPIC electronic records. Training resources, including a training room with literary and electronic resources, are also available at BMP.

Psychology interns will also spend their primary care major rotation (which equates to approximately four months) dividing their time between BMP's clinic and Harpers Ferry Family Medicine (HFFM). HFFM is a family practice office within University Healthcare, located in Harpers Ferry, WV housed in a 10,000 square foot state-of-the-art facility that current accommodates more than 30,000 patient visits per year. The staff includes full and part-time Family Medicine and Pediatric faculty physicians, psychologists, resident physicians, physicians' assistants, pharmacists, medical students, clinical nursing staff, and administrative support staff. During this rotation, psychology interns will spend approximately two days per week at HFFM. Clinical staff will be on-site with the psychology interns during this time to provide formal supervision and consultation as necessary. Interns will have access to all of the resources available to clinical staff and family medicine residents, including a training room, computer lounge, electronics, and consultation rooms.

University Healthcare's overarching mission is to improve the health status of Eastern Panhandle residents by providing excellence in health and wellness services, expanding access to care, and participating in the education of healthcare professionals. The University Healthcare values of

respect, teamwork, integrity, excellence, quality, and stewardship are reflected in the internship training program offered through BMP. These values form the foundation of the services that we provide to the residents of the Eastern Panhandle and inform not only our work with patients but also with our interactions with trainees, staff, and the larger community.

Martinsburg, with a population of 17,000 residents, is the fastest growing city in the state of West Virginia. Located in the heart of the Eastern Panhandle, Martinsburg is often referred to as the “gateway to the Shenandoah Valley.” Approximately 75 miles outside of Washington, DC and 90 miles outside of Baltimore, MD, Martinsburg balances the proximal benefits of being close to a major metropolitan area with the relaxed nature and beauty of a small town. It offers breathtaking views and beautiful scenery. Martinsburg is conveniently located between Maryland and Virginia, offering the ability to travel into all three states within 30 minutes. The Eastern Panhandle of WV is located in a rich historical area, with easy access to the C&O Canal, Appalachian Trail, and Antietam National Battlefield. Further, the area is home to several recreational, cultural, and arts festivals each year, including the Apple Harvest Festival and the Leitersburg Peach Festival.

DOCTORAL INTERNSHIP DIVERSITY STATEMENT

University Healthcare’s Doctoral Internship in Psychology strongly values diversity and believes in creating an equitable, hospitable, appreciative, safe, and inclusive learning environment for its interns. Diversity among interns and supervisors enriches the educational experience, promotes personal growth, and strengthens communities and the workplace. Every effort is made by the program to create a climate in which all staff and interns feel respected, comfortable, and in which success is possible and obtainable. The program strives to make every effort to dispel ignorance or anxiety associated with multicultural experiences. The training program includes expected competencies in diversity, and multiple experiences are provided to be sure that interns are both personally supported and well-trained in this area.

The University Healthcare BMP Doctoral Internship welcomes applicants from diverse backgrounds. The program believes that a diverse training environment contributes to the overall quality of the program. The internship provides equal opportunity to all prospective interns and does not discriminate because of a person’s race, color, religion, sex, national origin, age, disability, or any other factor that is irrelevant to success as a psychology intern. Applicants are individually evaluated in terms of quality of previous training, practicum experiences, and fit with the internship.

PROGRAM OVERVIEW

University Healthcare trains entry-level clinicians how to integrate the discipline and practice of professional psychology by employing an empirically informed, competency-based, practitioner-scholar model. The program provides experiences in clinical learning environments that are responsive to the diverse and changing needs of the rural West Virginia community. Training at BMP has been deliberately designed to offer an experience-near, closely supervised, and developmentally appropriate sequence over the course of twelve consecutive months for two interns each academic year. The internship year begins with a week-long orientation, which

focuses on acquainting the interns with the procedures and policies of this office, assessing their current abilities, and developing an individualized plan for their internship year. In order to accomplish these goals, interns will meet individually with the Training Director to discuss their areas of interest and goals for internship. This information will be combined with data obtained through self-evaluation of competencies outlined in the Fouad et al. (2009) article as well as through in-room observation of direct intervention (most likely during a psychodiagnostic interview). Once interns have been approved by the Training Committee to begin individual work, co-therapy will no longer be required as the primary model of service provision. Interns will then be allowed to provide direct clinical services, which is reviewed via videotape. Interns are provided feedback on their direct services during weekly individual and group supervision.

Training staff review all new patient intake paperwork and recommend assignment based on presenting problem, treatment needs, case complexity, level of risk, and intern's current major and minor rotations. As interns demonstrate competence in a variety of areas, they are awarded the opportunity to see increasingly complex therapy and assessment cases.

Group and individual supervision is the primary vehicle used to monitor the intern's progress towards their individual goals as well as the overarching internship goals, competencies, and objectives. Throughout the course of this training year, interns will receive supervision from each of the three staff psychologists. As the program firmly believes that competent, evidence-based practice of psychology requires an integration of both scientific and professional knowledge, skills and attitudes, interns will be provided a minimum of 3-hours of individual, face-to-face supervision, 1-hour of group supervision of assessment, and 2- to 3-hours of didactic activities each week of their internship year. Interns will be provided additional individual supervision, as necessary. Additionally, interns will be encouraged to participate in Grand Rounds and didactic trainings with medical students and medical residents throughout the academic year.

With regard to direct service delivery, interns are expected to have 19 hours each week devoted to intervention and consultation, which includes individual/family psychotherapy, psychodiagnostic consultations, crisis interventions, and behavioral health consultations depending on one's major and minor rotation at the time.

Goals and Objectives

The overarching goal of the Psychology Internship at University Healthcare is to train entry-level clinicians in how to integrate the discipline and practice of professional psychology within both community and integrated care settings, as measured by the following:

Goal #1: Ethics/Professional Behavior - Interns will demonstrate an intermediate to advanced level of competence, appropriate to their professional developmental level, in the area of ethics and professional behavior.

- Objective 1: Demonstrates knowledge of the APA Ethical Principles of Psychologists and Code of Conduct.
- Objective 2: Demonstrates the ability to conduct oneself in accordance with the principles and code of conduct of psychologists.

- Objective 3: Demonstrates professional identity and investment in professional development.
- Objective 4: Demonstrates ability to establish and maintain professional relationships with supervisors and colleagues.
- Objective 5: Demonstrates personal and professional self-awareness and self-reflection.
- Objective 6: Demonstrates knowledge of theories and models of supervision.
- Objective 7: Demonstrates knowledge of program evaluation.

Goal #2: Evidence-Based Psychological Assessment - Interns will demonstrate an intermediate to advanced level of competence, appropriate to their professional developmental level, in the area of psychological assessment.

- Objective 1: Demonstrates the ability to select an appropriate battery of tests to answer specific referral questions.
- Objective 2: Demonstrates the ability to establish and maintain rapport with examinee and to administer assessment instruments in a standardized fashion.
- Objective 3: Demonstrates the ability to accurately score and interpret assessment cases based on knowledge of instruments, criteria, and research.
- Objective 4: Demonstrates the ability to use assessment-writing skills to efficiently produce accurate, high quality, and useful reports.
- Objective 5: Demonstrates the ability to provide accurate and specific feedback regarding test performance and findings to examinees within specific time frames.
- Objective 6: Demonstrates the ability to infuse diversity awareness in the meeting of all other objectives in this competency area.

Goal #3: Evidence-Based Treatment - Interns will demonstrate an intermediate to advanced level of competence, appropriate to their professional developmental level, in the area of evidence-based treatment.

- Objective 1: Demonstrates understanding of and ability to communicate the principles of evidence-based treatment.
- Objective 2: Demonstrates the ability to design effective treatment plans.
- Objective 3: Demonstrates the ability to implement tailored treatment plans based on an individualized conceptualization of each patient.
- Objective 4: Demonstrates the ability to coordinate care with families and collateral resources.
- Objective 5: Demonstrates the ability to effectively communicate relevant diagnostic and clinical material via case conceptualization to a range of providers.
- Objective 6: Demonstrates the ability to identify and adequately address obstacles to treatment.
- Objective 7: Demonstrates the ability to infuse diversity awareness in the meeting of all other objectives in this competency area.

Goal #4: Intake/Crisis Intervention - Interns will demonstrate an intermediate to advanced level of competence, appropriate to their professional developmental level, in the area of intake/crisis intervention.

- Objective 1: Demonstrates knowledge of interviewing skills appropriate for initial contact with clients.
- Objective 2: Demonstrates the ability to make accurate diagnoses and to assess client needs based on the integration of clinical interview data with other available information (e.g. medical records, intake forms, assessment instruments).
- Objective 3: Demonstrates competence effectively and efficiently assessing for risk of harm to self or others.
- Objective 4: Demonstrates the ability to accurately communicate results of interviews and crisis interventions both orally and in writing.
- Objective 5: Demonstrates the ability to infuse diversity awareness in the meeting of all other objectives in this competency area.

Goal #5: Integrated Consultation - Interns will demonstrate an intermediate to advanced level of competence, appropriate to their professional developmental level, in the area of integrated consultation.

- Objective 1: Demonstrates the ability to effectively coordinate care with multidisciplinary teams.
- Objective 2: Demonstrates the ability to accurately assess patients' presenting concerns and developing efficient treatment plans.
- Objective 3: Demonstrates the ability to utilize time-limited, effective interventions through consultation.
- Objective 4: Demonstrates the ability to engage in explicit, concise, and helpful consultations with professionals from other disciplines.
- Objective 5: Demonstrates the ability to assist patients in initiating psychological services.

Goal #6: Group Therapy - Interns will demonstrate an intermediate to advanced level of competence, appropriate to their professional developmental level, in the area of group therapy.

- Objective 1: Demonstrates the knowledge of theories, techniques, clinical skills and judgment, and research relevant to the provision of group therapy.
- Objective 2: Demonstrates the ability to plan and develop a group.
- Objective 3: Demonstrates knowledge of and ability positively influence group cohesion.
- Objective 4: Demonstrates the ability to effectively intervene with patients in a group setting.
- Objective 5: Demonstrates the ability to infuse diversity awareness in the meeting of all other objectives in this competency area.

Required Direct Service Experiences

Individual/Family Therapy

Interns will work in an outpatient setting to provide individual, family and/or couples therapy to people from a diverse range of age groups (children, adolescents and adults), sociocultural groups, and socioeconomic levels. Interns will conduct approximately 19 hours weekly of therapy with variety patients who are experiencing presenting problems that span from developmental issues to serious mental illness and comorbid medical diagnoses. Interns may have to schedule more hours of therapy in some weeks to ensure they meet the 500-hour requirement for internship completion.

Group Therapy

In addition to individual therapy, interns will also be expected to participate in BMP's growing group therapy program. Interns will develop, recruit, plan, and run at least one group that runs for a minimum of 8-weeks throughout the internship year. While not actively conducting a group session, interns will use this time to learn about the other areas involved in developing, recruiting, and planning psychotherapy groups. Groups include both process oriented to structured modalities, with topics ranging from substance abuse to mindfulness. Group topics are based on patient needs and intern interests. Interns usually co-lead a group with a more experienced staff member, who provides supervision for the intern's work.

Psychodiagnostic Consultation/Crisis Intervention

Throughout the year, interns will have the opportunity to conduct brief, initial assessments with patients, form and document clinical impressions, and then route patients to the appropriate services (e.g. individual therapy, psychiatric consultation, follow-up with PCP). Further, throughout the year interns will have increasing opportunities to manage crises that may be encountered while conducting intake assessments or through their work with ongoing patients. Interns are provided close support and supervision throughout all crises.

Psychological Assessment

Interns will be expected to administer, interpret, and provide written synthesis of psychological test batteries. Interns will be expected to engage in a minimum of six-hours of assessment related activities weekly throughout the course of the year. Psychological assessments may include intellectual, achievement, personality, neuropsychological and competency-based measures. Interns will also have opportunities to write reports and make recommendations that convey meaningful information to patients and referring agencies. Therapeutic feedback skills will be taught, modeled, and honed over the course of the Internship.

While interns are expected to engage in some form of psychology assessment over the course of the training year, one of their minor rotations is required to be in learning disability/ADHD assessment. This rotation is usually their first minor rotation and provides an opportunity for psychology interns to receive more formalized instruction to ensure they have adequate training to provide these services.

Training Methods

Required Major Rotations

Every intern will complete each of the three following four-month rotations at differing times throughout their training year as decided by the Training Director. The order of assignments will take into account previous training, personal preference, and chosen minor rotations. Interns dedicate approximately two days per work in activities related to their major rotation. Interns will be expected to engage in shadowing and other learning activities, and may engage in clinical service provision during these rotations. These rotations are intended to provide exposure to special populations and/or treatment modalities.

1. **Child and Family Services** – During the Child and Family Services rotation, which is housed within BMP's outpatient clinic, interns will gain additional experience working

directly with children/adolescents and their families. Patients will present with a variety of chief complaints including, but not limited to, behavioral concerns, attentional impairment, trauma, anxiety, OCD, and mood disorders. Activities may include individual psychotherapy, family therapy, parent-child interaction therapy, parenting consultations, and community/school advocacy. Emphasis is placed on the development of diagnostic and treatment skills, service delivery, and conceptualization.

2. **Health Psychology/Behavioral Medicine** – During the Health Psychology/Behavioral Medicine rotation, which is housed primarily within BMP’s outpatient clinic, interns will receive more specialized training areas may include chronic pain, behavioral sleep medicine (e.g., CPAP compliance, insomnia), compliance with complicated or chronic medical regimens, weight loss, conversion disorder, and bariatric surgery evaluations. This rotation will consist of a combination of self-directed learning, didactics, co-therapy, individual therapy, and assessment.
3. **Integrated Primary Care** – During the Integrated Primary Care rotation interns will be providing a range of direct and support services to patients and providers at Harpers Ferry Family Medicine (HFFM). Activities may include conducting psychodiagnostic consultations, short-term behavioral medicine interventions, crisis interventions, curbside consultations, and warm-handoffs. At least one member of the training staff will accompany interns to HFFM to provide onsite supervision and consultation. Interns are also welcome to participate in resident physician development trainings and in-service programs hosted at HFFM.

Minor Rotations

In addition to the required experiences, interns will have the opportunity to help shape their training year to emphasize and further develop areas of particular interest. Approximately one-day per week will be allocated for interns to pursue an area of special emphasis. Interns will be provided the opportunity to pursue several different areas of special emphasis throughout the training year, during four-month rotations that mirror the interns’ major rotations. The only required minor rotation is Learning Disability/ADHD Assessment, which is typically the psychology intern’s first minor rotation (and the only rotation that interns complete simultaneously). While the majority of areas of special emphasis include clinical activities, interns will also be afforded the opportunity to engage in non-clinical activities, such as designing a research project or developing a grant application. Examples of minor rotations are included below:

- **Learning Disability/ADHD Assessment** – While interns will administer assessment throughout the year (which will likely continue to include at least some LD/ADHD evaluations), the first formal minor rotation is in LD/ADHD assessment. Initially, assessments are scheduled across two days, totaling approximately 14-hours bi-weekly, with every other week being reserved for report writing. Once interns acclimate to the fast-pace nature of this work and are able to demonstrate the fundamental skills underlying LD/ADHD assessments, they will be scheduled one assessment case per week. Training will be provided in every aspect of the assessment process, from designing a battery to recommendations and therapeutic feedback.
- **Neuropsychology** – The Neuropsychology minor rotation will expose interns to the world of neuropsychology so that they will be better prepared to understand and interpret

neuropsychological evaluations. Areas of emphasis will include a combination of self-directed learning, didactics, co-therapy, and assessment interpretation. Note: This rotation emphasizes teaching interns how to interpret and utilize neuropsychological data and reports obtained by licensed neuropsychologists.

- **Diversity** – The minor rotation in Diversity allows interns the opportunity to emphasize cultural competency with diverse populations in a traditionally rural and impoverished setting. Changes to the demographics of Martinsburg and the surrounding areas have and continue to broaden the sociocultural and socioeconomic diversity of this area. Areas of emphasis can include clinical work (individual/group therapy, assessment), outreach, research, and training.
- **Psycho-oncology** – The Psycho-oncology minor rotation involves learning about the unique issues facing patients and caregivers of those diagnosed with cancer. This rotation will consist primarily of a combination of self-directed learning, didactics, co-therapy, and individual/family therapy. Interns will be encouraged to attend the hospital’s weekly tumor board meetings as well as the oncology department’s weekly staffing meetings to increase exposure to interdisciplinary patient care.
- **Acute/Chronic Trauma** – The Acute/Chronic Trauma minor rotation involves opportunities to work with survivors of traumatic experiences as well as their families and loved ones. Emphasis is placed on the development of diagnostic and treatment skills, delivery of psychoeducational information, self-monitoring, and case conceptualization from a range of evidence-based treatment models.
- **Parent-Child Interaction Therapy** – The Parent-Child Interaction Therapy (PCIT) minor rotation will expose interns to the empirical basis of PCIT and provide an opportunity to gain experience with the clinical application of this treatment modality. PCIT strives to improve the quality of parent-child interactions and support parents as they provide consistent, predictable consequences in the home environment.
- **Other Specialization Opportunities** – BMP is inspired by the many areas of expertise within the much larger field of clinical psychology. As a result, we acknowledge and are excited by the individual areas of specialty and interest our interns bring with them. As we strive to be as accommodating as possible to an intern’s specific training needs, if an intern has an idea for an alternative minor rotation, they are encouraged to work alongside the Training Director to customize their training experience.

Training Activities

Individual Supervision

Interns receive supervision from each of the three-licensed, staff psychologists. In total, psychology interns receive a minimum of three-hours of individual supervision each week from their supervisors. Additional individual supervision is provided as necessary and especially when an intern is actively running their group(s).

Supervision methods may include co-therapy, video/audio recording, live observation, and review of process notes. Supervision will focus on review of the intern’s clinical work and emphasize conceptualization, service provision, professional standards, and ethics. All individuals served by interns are the clinical responsibility of the doctoral-level psychologist who is providing supervision on the case.

Group Supervision

Additionally, one-hour weekly group supervision of assessment cases will be provided. Group supervision may focus on all aspects of the assessment process, including but not limited to designing a battery, administration, scoring, interpretation, report writing, and providing feedback. Additionally, interns will be provided additional information regarding test design and a range of assessment instruments to increase their ability to choose an assessment battery tailored to the individual referral question. Psychology interns will have the opportunity to not only receive feedback on their work but to also practice providing this feedback to others.

Intern Training Seminars

Interns attend weekly two- to three-hour training seminars that focus on various aspects of service provision, specialized topics, and professional development. Mental Health Seminar and Behavioral Medicine Seminars are held three weeks a month, one hour each. The fourth week of each month will include three one-hour didactics in the following areas: Professional Development, Diversity, and Supervision Seminars.

Clinical Case Conferences

Interns will meet with BMP for one-hour every month for clinical case conference. Interns and staff will take turns presenting clinical material to the group for consultation, support, and feedback. Interns will be required to complete two formal, hour-long presentations over the course of the training year.

Staff Meetings

Interns are required to attend regularly scheduled, monthly staff meetings. These meetings involve updates on WVU policies, updates on developments at WVU, and professional development topics.

WVU Grand Rounds

Additionally, several times a semester the hospital will host Grand Rounds, which interns are invited to attend.

West Virginia Psychological Associated (WVPA)

Interns will be encouraged to participate in training, research, and professional development by regular interactions with WVPA members and required attendance at the fall conference. University Healthcare will cover travel expenses for the interns to attend the fall WVPA conference.

TRAINING STAFF

The Training Committee

The Training Committee, chaired by the Training Director, consists of clinical staff and benefits from input from interns, as needed. The goal of the Training Committee is to support the doctoral internship program at BMP. The Training Committee is tasked with the following responsibilities:

1. To aid in the coordination of the training program

2. To recommend policy provisions of the training program
3. To monitor the training program
4. To participate in the ongoing planning and evaluation of the training program

Statement Regarding the Training Director

The Training Director is an experienced, licensed, doctoral-level psychologist who chairs The Training Committee. The Training Director bears overall responsibility for selecting interns, monitoring and evaluating intern performance, and maintaining documentation of intern records.

The Training Staff

Alison Krawiecki, Psy.D.

Director, Psychiatry Clerkship Co-Chair, Assistant Professor (Clinical), Psychology Intern Supervisor

Education: Psy.D. in Clinical Psychology, University of Denver, Graduate School of Professional Psychology (2004) Postdoctoral Clinical Fellowship in Neuropsychology and Behavioral Medicine, Colorado Neurological Institute

Licensure Status: Licensed Psychologist in West Virginia (#1100), Virginia, and Colorado

Orientation: Eclectic, heavily behavioral, ACT, Functional Contextual.

Emphasis: Behavioral Medicine and Neuropsychology, Assessment, Teaching.

Stephanie McGraw, Psy.D.

Training Director, Assistant Professor, Psychology Intern Supervisor

Education: Psy.D. in Clinical Psychology, George Washington University, Professional Psychology Program (2014)

Licensure Status: Licensed Psychologist West Virginia (#1117)

Orientation: Integrated with a foundation in psychodynamic and interpersonal theories within a developmental context.

Emphasis: Children, adolescents and adults; Individuals, couples, and groups;

Anxiety/Depression, interpersonal conflict, developmental issues, LGBTQ topics, and grief.

Brian Creasy, Ph.D.

Assistant Professor (Clinical), Psychology Intern Supervisor

Education: Ph.D. in Clinical Psychology, West Virginia University (2012); Postdoctoral Fellowship, University of Texas Health Science Center at San Antonio (2012-2014)

Licensure Status: Licensed Psychologist in Texas (#36616) and West Virginia (#1123)

Orientation: Cognitive-Behavioral; Behavioral; Family Systems

Emphasis: Children and adults, Individual and families Behavioral Concerns, Parent-Child Interaction Therapy, Post-Traumatic Stress Disorder

INTERN WEEKLY SCHEDULE

Interns are expected to work no fewer than 40-hours per week in order to obtain enough hours in 12 consecutive months to obtain the required 2,000 for successful completion of internship. Interns keep the same schedule as BMP staff, working from 8:00 am to 5:00 pm, with an hour lunch, from Monday to Friday.

Interns meet with the Training Director prior to each rotation (every 4-months) to discuss training goals and scheduling changes. In addition to constructing the ongoing training goals, the Training Director assists interns in monitoring their progress toward meeting the requirement of 2,000 hours of on-site activities, including 500 hours of direct services, for successful completion of internship.

While interns are completing their integrated primary care major rotation (4 months), they will be expected to travel to Harpers Ferry Family Medicine (HFFM) two days per week. During this time, a significant portion of their intervention will take the form of consultations, crisis interventions, and psychodiagnostic interviews. They will also receive training in participating in warm handoffs with physicians and providing curbside consultations to other providers.

Training/Supervision

Individual Supervision	3 hours
Supervision of Group Therapy	0.5 hours
Group Supervision of Assessment	1 hour
Didactics	<u>2-3 hours</u>
	6.5-7.5 hours

Direct Service Delivery

Intervention/Consultation	19 hours
Psychological Assessment	3 hours
Group Therapy	<u>1.5 hours</u>
	23.5 hours

Documentation/Other

Assessment Report Writing	3 hours
Notes/Tape Review/Supervision Prep	<u>5 hours</u>
	9 hours

Total Number of Hours: 40 hours

SAMPLE WEEKLY SCHEDULE

	Mon	Tues	Wens	Thurs	Fri
800	Support & Prep	Support & Prep	Support & Prep	Support & Prep	Case Conference (1x/month) or Diversity Didactic (1x/month)
830	Intervention		Intervention	Intervention	
900	Intervention	Psychological Assessment	Intervention	Intervention	Behavioral Health (3x/month) or Supervision Didactics (1x/month)
930			Intervention	Intervention	
1000			Intervention	Intervention	
1030	Intervention		Intervention	Feedback Session	Mental Health (3x/month) or Professional Development Didactics (1x/month)
1100	Support & Prep		Support & Prep	Support & Prep	
1130	Support & Prep				Assessment Group Supervision
1200	Lunch	Lunch	Lunch	Lunch	Lunch
1230					
100	Support & Prep	Intervention	Individual Supervision	Individual Supervision	Individual Supervision
130	Intervention				
200	Intervention	Intervention	Intervention	Intervention	Support & Prep: Report Writing
230		Group Therapy Individual Supervision	Intervention	Intervention	
300					
330	Intervention	Intervention			
400	Intervention	Intervention			
430	Support & Prep				

INTERN BENEFITS

Stipend

The annual salary for interns during the 2016-2017 academic year is anticipated to be a \$27,500.00 stipend paid in 26 biweekly payments.

Insurance and Retirement Plan Benefits

Interns are eligible for health and other benefits as an employee of University Healthcare. They are offered the same plan that is made available to all full-time employees.

Vacation and Leave

Over the course of the academic year, interns will accrue 18 days of vacation and 12 days of sick leave.

West Virginia Psychological Association (WVPA) Fall Conference

University Healthcare will cover conference and travel expenses for psychology interns to attend the WVPA Fall Conference.

Professional Liability

While interns are covered for their internship training activities under University Healthcare's professional liability insurance, we recommend that interns also begin to explore the costs and benefits of purchasing their own professional liability insurance (www.trustinsurance.com).

PROGRAM CONTACT INFORMATION

Should you have any questions or require more information regarding our internship training program, please feel free to reach out to Stephanie McGraw, PsyD, Training Director, at (304) 596-5780 or StMcGraw@wvumedicine.org