CALIFORNIA MEDICAL FACILITY | PSYCHIATRIC INPATIENT PROGRAM

PSYCHOLOGY INTERNSHIP HANDBOOK

APA – ACCREDITED DOCTORAL PSYCHOLOGY INTERNSHIP PROGRAM

CALIFORNIA CORRECTIONAL HEALTH CARE SERVICES

2019 - 2020 TRAINING YEAR
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Description of the Vacaville Psychiatric Program

The California Medical Facility – Psychiatric Inpatient Program (formerly the California Department of State Hospitals-Vacaville) is a licensed psychiatric treatment facility located within a California Department of Corrections and Rehabilitation (CDCR) facility. In 1988, the then entitled Department of Mental Health--Vacaville Psychiatric Program was established to provide acute and intermediate (sub-acute) mental health treatment to patients from all of California’s male prisons. These patients are typically experiencing symptoms of a major mental disorder that prevents them from functioning adequately and safely within the larger general prison population. The most common reason for referral to the California Medical Facility – Psychiatric Inpatient Program (CMF-PIP) is suicidal behavior (ideation, behaviors, or attempts); other common reasons include deterioration in functioning, need for diagnostic clarification, or increase in psychotic symptoms. There are currently 218 beds in the Acute Psychiatric Program and 178 beds in the Intermediate Care Facility Program. Treatment in both programs is provided by an interdisciplinary treatment team comprised of psychiatrists, psychologists, clinical social workers, rehabilitation therapists, registered nurses, medical technical assistants, and custody officers.

Description of Population Served

The population served is incarcerated males referred for acute or intermediate inpatient mental health care. Between 2004 and 2011, the population has been characterized as younger (Mean Age=37 years), poorly educated (Mean Education=10 years), and predominantly from low socio-economic groups (SES) (Lowest SES Group=77%). Caucasians (33%) and African Americans (33%) comprise the largest ethnic groups, followed by Latino (25%), and Other (Asian, Native American, Bi-Racial, etc., 8%). As Latinos make up more than 40% of new intakes to the CDCR, there may be a shift over time in the racial, ethnic, and linguistic composition of admissions to the CMF-PIP. The majority of patients coming into the CMF-PIP are found to have a major mental disorder (Schizophrenia Spectrum Disorders=46%, Major Affective Disorders=30%) as well as a co-morbid substance abuse disorder (61%). Most patients (74%) also have either a primary or co-existing severe Axis II personality disorder, typically of the Cluster B (Borderline, Narcissistic, and/or Antisocial) variant.

Myla Young, Ph.D. identified that approximately 24% of patients admitted to the CMF-PIP met criteria for psychopathy. Her study and current investigations note that in this population there is a high incidence of cognitive disorders (60-64%), a history of special education (46%), a high incidence of polysubstance use (76%), and a high incidence of severe violence (79% have offenses involving serious physical harm or murder of another person). More recent research at the CMF-PIP has additionally found that the typical patient at this facility has made multiple past suicide attempts (Mean # of Attempts=4.3), with no significant difference in race or ethnicity in the number of attempts. A history of institutional violence is high towards both peers (56%) and staff (19%).

Mission, Vision, and Core Values

The mission of CMF-PIP is to provide quality mental health evaluation and treatment to patients. This is accomplished in a safe and therapeutic environment, and as part of a continuum of care. Core values include teamwork, innovation, professionalism, dignity and respect, quality of care, and safety and security of the institution.
The vision of CMF-PIP is to meet present and future challenges in the provision of quality patient care through professional training, clinical research, and the development, evaluation, and continuous improvement of innovative treatment programs. Professional services are provided with consideration for the complex and diverse needs of the patient population, as well as consideration of the concerns of the community, in a manner consistent with this vision.

The CMF-PIP Psychology Internship Program follows a practitioner-scholar model of training and is structured in accordance with American Psychological Association (APA) accreditation guidelines and with APA Ethical Principles. The Internship strives to provide competency-based training in psychological assessment and in evidenced-based clinical interventions with correctional mental health patients. Interns receive extensive training in a number of areas of psychological assessment: cognitive, personality, neuropsychological, behavioral, violence risk, suicide risk, and sexual offending risk. Interns participate in research to further learning in (1) suicide and violence risk assessment, (2) competencies in program evaluation, and (3) proctoring/peer consultation. Training in the culturally-competent assessment of patients is also emphasized. The internship provides an excellent training basis for candidates with career goals that involve correctional, forensic, and/or assessment-based clinical or consultative work.

CMF-PIP also offers postdoctoral training, which offers advanced training in assessment and consultation within a correctional setting. Pre-doctoral interns who would like to compete for the site's Postdoctoral Training program are free to do so through the regular application process.

**Description of the Psychology Service within the CMF-PIP**

The Psychology Service is comprised of one Chief Psychologist, two Senior Psychologist Supervisors, three Senior Psychologist Specialists, 24 Clinical Psychologists, and both pre-doctoral and postdoctoral trainees. Individual staff biographies are available upon request.

The standards of practice for psychologists in the service include competence in the following areas: psychological and neuropsychological assessment, psychological treatment interventions, suicide and violence risk assessment, behavioral planning, and treatment team participation and coordination. All psychology service members participate in the internship training program, with a variety of roles in supervising, teaching, mentoring, or training pre-and postdoctoral psychology interns and fellows.

In the past, several research projects have been conducted by the psychology service of this facility, including a comprehensive neuropsychological-psychological description of the population, reviews of treatment outcome measures, and evaluations of community violence, prison violence, psychopathy, recidivism, and suicide and self-harm within the population. Dissertation and independent research has been conducted in the past with archival data and may be available for future use.

Data collection for a research study titled, “Predictors of Violence and Suicide Risk in Psychiatrically Hospitalized Inmate/Patients” was completed in March 2015. This was a very broad study with multiple assessment measures, which concluded with over 600 participants. Study findings can be reviewed with pre-doctoral interns, and motivated interns may have opportunities to help present or write up study results. There are two new projects in the data collection stage through the testing service and through the Positive Behavior Support Team (PBST) service. The correctional norms project is aimed at establishing normative data on the most commonly administered psychological and cognitive assessment measures for our patient population. Participants are recruited through a routine clinical
referral process as well as by random selection. Data is also being collected from existing databases containing previously tested patients admitted to CMF-PIP from May 2007 to May 2017. This study intends to collect data on 500 participants over a three year period. The second project is with our PBST and is an archival study with the goal of establishing the extent to which positive behavioral support interventions are effective with different types of maladaptive behaviors in the CMF-PIP. Interns are expected to assist with data collection, entry and analysis on these projects, and have the opportunity to develop poster presentations and manuscripts.

**Description of Psychology Internship Program**

The CMF-PIP Internship Program was initiated in 1995. It has been continuously APA-accredited since 2000. The last APA Site Visit of this program was in April 2017. Psychology internship training is for 12 months, beginning in the first week of September and ending the last week of August. Three full-time pre-doctoral psychology interns are selected each year and interns work 40 hours/week. Interns are required to attend 2,000 hours of training to successfully complete the program. An annual stipend of $41,976 is set for internship. Benefits available to California State Employees are also available to interns, specifically, medical, dental, and vision insurance, vacation and sick leave, and 10 paid holidays.

Pre-doctoral interns are required to conduct psychological assessments and research assessments, participate in interdisciplinary treatment team activities and group therapies, and attend case conferences and didactic seminars. Interns are also required to present a set number of cases in case conference along with several presentations in didactic and assessment seminars. Interns conduct full test batteries, including administering, scoring, and interpreting a wide range of standard psychological tests, preparing reports, and providing feedback to the patient and to the treatment team. Culturally competent test selection, administration, and interpretation are stressed. Neuropsychological, psychological, and risk assessment results are valued products that CMF-PIP treatment teams use for diagnostic clarification, treatment planning, and safety planning. Group therapy is the primary therapeutic intervention modality. A number of group therapies are used, but predominantly cognitive behavioral and relapse prevention models are employed (training in these models is provided). Individual therapy supervision is provided as part of an intern’s clinical rotations, supplemented by a biweekly individual therapy supervision group run by two clinical psychologists.

**Internship Program Goals**

The main goal of the Psychology Internship is to prepare trainees for post-doctoral training and/or for entry-level practice in professional psychology. In service of this goal, the program strives to help trainees develop competency in seven areas:

1. Performing professional duties in accordance with APA Ethical Principles for Psychologists, and understand and apply ethics related to treating patients in correctional settings.
2. Performing professional duties in a culturally-competent manner. This includes demonstrating a respectful sensitivity to cultural diversity within the correctional setting and understanding the impact of personal cultural and ethnic background on clinical care.
3. Comprehensive psychological assessment and diagnosis of incarcerated psychiatric patients.
4. Providing clinical treatment to incarcerated psychiatric patients, using various evidenced-based treatment methods and multi-disciplinary treatment planning.
5. Scholarly inquiry and professional consultation, including in executing research and/or program evaluation within a correctional setting, consulting with treatment teams regarding individual cases, and participating with psychological/behavioral consulting services.

6. Demonstrating knowledge of major mental illnesses and personality disorders as they manifest in incarcerated individuals.

Training Goals are accomplished through the following means:

- Two clinical rotations whereby trainees are integrated into a Interdisciplinary Treatment Team
- Individual supervision (2 hours/week)
- Group supervision (3-4 hours/week)
- Formal didactic seminars
- External training in special topics

Supervision

The internship offers rich supervision opportunities. Psychology interns receive two hours of individual supervision per week with their primary supervisor and 3-4 hours of group supervision per week. One hour of group supervision covers issues such as: ethics, adjustment to a correctional environment, observation/interviewing skills, diagnostic and differential diagnostic issues, providing psychological information to patients and treatment teams, treatment planning, goal setting, and treatment implementation. Other group supervisory experiences occur through the Case Conference Seminar, Neuropsychology, and Personality Assessment Seminars, and through the Individual Therapy Supervision group. Supervision is provided by California Licensed Psychologists who have completed California continuing education training requirements in supervision. Each supervisor is a credentialed staff member with privileges in supervision and in clinical treatment and assessment.

Rotations

There are two required rotations during the pre-doctoral internship year, each lasting six months: (1) Acute Psychiatric Program, and (2) Intermediate Care Program. During these rotations, interns are required to participate in all unit-related clinical activities such as admissions/discharges, interdisciplinary treatment team conferences, and other unit meetings/conferences. Psychological assessments and (if applicable) group/individual therapy are typically conducted on the intern’s unit rotation. This allows interns experience in consulting with a treatment team and making treatment recommendations based on testing findings.

Seminar Trainings

All interns participate in the following seminars: Neuropsychological Assessment, Clinical Issues, Case Conference (bi-monthly), Personality Assessment, and Violence Risk (bi-monthly). The Clinical Issues seminar is a formal didactic training series, whereas the other seminars combine teaching and group supervision. Additional external didactic training opportunities are generally available throughout the academic year. Seminars are facilitated primarily by psychologists, but may also include presentations by Interdisciplinary Treatment Team members (physicians, social workers, rehabilitation therapists, and
nursing staff), postdoctoral fellows, and community experts. Psychology Interns participate in all seminar discussions and facilitate one Clinical Issues seminar, one Case Conference presentation, one professional presentation, and typically 1-2 assessment seminar presentations per year.

**Neuropsychology Seminar (weekly one-hour seminar):** Topics covered include administration, scoring, and interpretation of neuropsychological tests, report writing, structural neuroanatomy, behavioral neuroanatomy, and psychopharmacology. Additional topics include neuropsychology of psychiatric disorders, seizure disorders, traumatic brain injury, substance abuse, violence, and psychopathy. Cultural differences as they relate to neuropsychological assessment are also discussed. Students are expected to take neuropsychological assessment cases, present on a topic or current research in neuropsychology, and present a neuropsychological testing case. Postdoctoral fellows may also present cases within this seminar.

**Clinical Issues (bi-weekly one-hour seminar):** Topics include the major internship curricula areas required for APA accreditation. These curricula areas include: theories and methods of assessment and diagnosis, theories and methods of empirically-supported treatments, theories and methods of consultation, theories and methods of evaluation, theories and methods of supervision, strategies of scholarly inquiry, and issues of cultural and individual diversity. Sample topics for this seminar consist of: introduction and overview of testing issues, including test proficiency, integrating data, report writing, implications for treatment/feedback to patients, and diagnostic formulation; issues related to institutionalized patients, overview of the correctional system, and prison culture; stabilization and treatment of psychiatric inpatients; treatment of head-injured populations; treatment modalities targeting criminal thinking and behaviors, including the Relapse Prevention Model; professional development and professional ethics; cultural competency with incarcerated populations; and competency evaluation in supervision. When possible, speakers from within the facility and from the community are invited to present on relevant topics. Cultural differences, and the impact of these differences in treatment and assessment, are emphasized additionally through the Multi-Cultural Task Force, an on-going committee that is open to interns.

**Case Conference (bi-monthly one and a half-hour seminar):** This seminar focuses on interpreting and examining difficult and/or unusual assessment results and on clinical case formulation. During the conference, the first half of the presentation focuses on assessment data while the second half examines diagnoses, case conceptualization, and intervention planning. Clinical psychologists and fellows attend Case Conference and provide clinical feedback regarding cases. Special consideration of multicultural issues is included in case discussions. Interns present one to two cases at this seminar during the year. Case Conference accounts for three hours of group supervision per month.

**Personality Assessment (weekly one-hour seminar):** This seminar focuses on the administration, scoring, and interpretation of psychological measures of emotional functioning, including, but not limited to: Rorschach Inkblot Method (R-PAS); PAI; MCMI-III; and MMPI-2. Issues related to clarifying Axis I and Axis II disorders in relation to test results are discussed. Personality Assessment Seminar accounts for one hour per week of group supervision.

**Violence Risk:** This seminar focuses on violence risk within the correctional inpatient population, including review of relevant literature, violence risk assessment, interpretation of measures, and intervention implementation.
Intern Group Supervision (weekly one-hour group): Pre-doctoral interns meet with a licensed clinical psychologist for formal group supervision for one hour per week.

Trainee Group (weekly one-hour group): Fellows and the pre-doctoral interns meet together for this group. The purpose of the group is to examine group dynamics, the effect of one’s professional voice/behavior on others, and the effect of other’s behavior on one’s professional identity. At the onset of the group, a staff liaison meets with the group to discuss the rules of the group and the monthly tasks the group will be expected to complete. In addition to the staff liaison, individual and group supervisors are available for support and consultation as needed.

Individual Therapy Group Supervision (bi-monthly one-hour seminar): Interns meet with two licensed clinical psychologists for formal group supervision on individual therapy cases, including discussion of evidence-based treatment of correctional patients.

Other training opportunities: Interns are fully integrated into the Psychology Service and may also attend administrative meetings such as Program Meetings, Psychology Service Meetings, and Medical Staff Meetings. Additional training may be offered throughout the year, including a two full-day Rorschach Workshop with Dr. Phil Erdberg, a member of the Rorschach Research Council. Interns may also attend trainings of particular relevance at other CDCR facilities, and/or of specific interest to the intern’s career goals.

Intern Supports

Interns have independent workstations as well as access to shared workstations for employment-related use. Each computer workstation has multiple applications, including online access to the internet, email, and to a database of books and journal articles run by the State of California Library. The Psychology Service has a shared drive with access to relevant forms, articles, policies, manuals, etc. This shared drive also contains a library of scanned, completed psychological testing reports. There are shared computer workstations with psychological test scoring and interpretation software, and workstations with statistical database capabilities. The institution has full time Informational Technology staff. Clerical supports are not available. Resources for presentations (e.g., PowerPoint presentations, LCD projectors) are available. Interns receive a large Intern Manual prior to the start of internship, and a Research Manual is present for intern use.

Location

Vacaville is a family community of approximately 98,000 people located 52 miles east of San Francisco and 35 miles west of Sacramento. Vacaville is additionally situated approximately 20 miles from the University of California at Davis and 30 miles from Napa. It is approximately a 2-1/2 hour drive to Lake Tahoe. Vacaville is known to have mild winters and hot summers. Many people come to visit and shop at the Factory Outlets in Vacaville. Downtown Vacaville is rustic with quaint shops and restaurants while other areas of town are more modern.
**Information and Application Materials**

The CMF-PIP Internship Program follows all APPIC universal matching policies in the selection of interns. The internship program is fully accredited by the APA. Questions regarding accreditation can be directed to the Commission on Accreditation:

Office of Program Consultation and Accreditation  
American Psychological Association  
750 1st Street, NE, Washington, DC 20002  
Phone: (202) 336-5979 / E-mail: apaaccred@apa.org  
Web: [www.apa.org/ed/accreditation](http://www.apa.org/ed/accreditation)

Applications are due on **November 12, 2018**, and the interview notification day is **December 14, 2018**.

The following documents are required:

- APPIC Application (‘APPI Online’), including: Letter of Intent, Vita, Graduate School Transcripts(s), Verification of Internship eligibility, and three (3) Letters of Recommendation
- A de-identified sample testing report must be uploaded onto the APPI. Please ensure that the sample testing report reflects administration of no fewer than three (3) testing measures, and please submit reports of no more than 15 pages.
- The State of California requires that a Standard State of California Application (STD 678) be submitted prior to the date applications are due (11/12/18). APPIC has approved the use of the STD 678 as an additional document for the internship. This application can be completed online at: [https://jobs.ca.gov/pdf/std678.pdf](https://jobs.ca.gov/pdf/std678.pdf). This supplemental document should not be uploaded on the APPI. Instead, please send a completed STD 678 by email to Kathryn.Langley@cdcr.ca.gov.

Prospective interns are eligible to apply for selection when they have:

- Completed at least three years of graduate training in clinical or counseling psychology in an APA accredited doctoral program.
- Remained enrolled and in good standing with their graduate program.
- Completed at least two clinical practica and a minimum of 500 hours of supervised experience (150 in assessment).
- Successfully completed comprehensive examinations at their educational institution.
- Successfully completed a dissertation proposal.

In addition, please be aware that:

- A thorough background check, including ‘Livescan’ fingerprinting will be conducted if you are selected.
- All applicants are required to complete and pass a pre-employment physical, including a comprehensive screening for illegal and unauthorized substances. Illegal substances include: marijuana, heroin, cocaine, amphetamines, opiates, PCP, barbiturates, and methaqualone. Prescription substances that do not fall under the illegal substances listed should only be used as prescribed (e.g., Valium used more often or in greater quantities than prescribed). Medical determination of a person’s suitability for hire shall be based on an appraisal of the applicant’s
ability to safely and efficiently perform the essential functions of the position for which the applicant has applied.

Inquiries about the program can be addressed to:

Kathryn Langley, Psy.D., Staff Psychologist/Training Coordinator
California Medical Facility – Psychiatric Inpatient Program
1600 California Drive
Vacaville, CA 95696
(707) 448-6841 ext. 2130
Kathryn.Langley@cdcr.ca.gov

Tamara Sanchez-Barker, Psy.D., Chief Psychologist/Training Director
California Medical Facility – Psychiatric Inpatient Program
1600 California Drive
Vacaville, CA 95696
(707) 448-6841 ext. 2149
Tamara.Sanchez-Barker@cdcr.ca.gov

Please address requests for staff biographies to:

Tamara Sanchez-Barker, Psy.D., Chief Psychologist/Training Director
Tamara.Sanchez-Barker@cdcr.ca.gov

STATE OF CALIFORNIA HIRING PRACTICES

Please also note State examination and hiring practices, as found in the website: http://www.cphcs.ca.gov/careers.aspx.

THE EXAMINATION PROCESS

Before you can be appointed to a permanent position, you must first take an examination to obtain list eligibility. Permanent hires are made from the eligibility lists created by examining. Examination bulletins contain broad information which you will need to review to make sure you meet the minimum qualifications so you can apply to take the exam. If you meet the requirements on an examination bulletin, you may take the examination, which is competitive. Possession of the entrance requirements does not assure a place on the eligible list.

OBTAINING LIST ELIGIBILITY

There are different types of exams. Depending on the classification, you can either take a written exam, oral interview exam, supplemental exam, education and experience exam or a combination exam having more than one exam plan. Your performance in the required examination will be compared with the performance of the others who take this test, and all candidates who pass will be ranked according to their scores. You will need to be successful in all parts of the exam to obtain list eligibility. The exam bulletin will indicate which type of exam is being administered.  

Note: Intern applicants have an exam
based on written responses to the APPI online application and Supplemental STD 678; see the APPIC listing on this site for more information.

**ONCE YOU HAVE OBTAINED LIST ELIGIBILITY**

Successful candidates are divided into ranks by score. Only those in the top three ranks are "reachable" and ready for appointment. As the ranks are cleared, the next lowest rank becomes reachable. Why wait? Your new State Job is just a click away!

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

**STATEMENT OF NONDISCRIMINATION**

The State of California is an Equal Opportunity Employer to all, regardless of age, ancestry, color, disability (mental and physical), exercising the right to family care and medical leave, gender, gender expression, gender identity, genetic information, marital status, medical condition, military or veteran status, national origin, political affiliation race, religious creed, sex (includes pregnancy, childbirth, breastfeeding and related medical conditions) and sexual orientation.

Please also see California State laws and regulations regarding nondiscrimination at: [http://www.spb.ca.gov/laws/lawbook.aspx](http://www.spb.ca.gov/laws/lawbook.aspx). Also note that the CMF-PIP maintains an Equal Employment Officer for the protection of all employees.

This Department provides reasonable accommodations to applicants with disabilities. If you need a reasonable accommodation for any part of the application and hiring process, please notify the Human Resources Office. It is an objective of the State of California to achieve a drug-free workplace. Any applicant for state employment will be expected to behave in accordance with this objective because the use of illegal drugs is inconsistent with the law of the State, the rules governing civil service, and the special trust placed in public servants.

**CONTACT INFORMATION:**

For information pertaining to employment opportunities at the CMF-PIP, please contact:

California Medical Facility - Psychiatric Inpatient Program
Selection Services
P.O. Box 2297, Vacaville, CA 94696-2297
Phone: (707) 448-6841, x6514
Fax: (707) 453-7045
Hiring Examination Coordinator Onna.Kingi@cdcr.ca.gov
Briefly describe in narrative form important information to assist potential applicants in assessing their likely fit with your program. This description must be consistent with the program's policies on intern selection and practicum and academic preparation requirements:

The CMF – PIP is a licensed psychiatric treatment facility located within a CDCR facility (CMF). The population served is incarcerated males referred for acute or intermediate inpatient mental health care. The CMF-PIP Psychology Internship follows a practitioner-scholar model of training and is structured in accordance with the APA accreditation guidelines and with the APA Ethical Principles.

The main goal of the Psychology Internship is to prepare trainees well for post-doctoral training and/or for entry level practice in professional psychology. In service of this goal, the program strives to help trainees develop competency in seven areas: (1) Interns perform professional duties in accordance with APA Ethical Principles for Psychologists, and understand and apply ethics related to treating patients in correctional settings. (2) Interns will perform all professional duties in a culturally competent manner. This includes demonstrating a respectful sensitivity to cultural diversity within the correctional setting and understanding the impact of personal cultural and ethnic background on clinical care. (3) To be competent in the comprehensive psychological assessment and diagnosis of incarcerated psychiatric patients. (4) To be competent in providing clinical treatment to incarcerated psychiatric patients, using various evidenced-based treatment methods and multi-disciplinary treatment planning. (5) To be competent in scholarly inquiry and professional consultation, including in executing research and/or program evaluation within a correctional setting, consulting with treatment teams regarding individual cases, and participating with psychological/behavioral consulting services. (6) To demonstrate knowledge of major mental illnesses and personality disorders as they manifest in incarcerated individuals.

Prospective interns are eligible to apply for selection when they have completed at least three years of graduate training in clinical or counseling psychology in an APA accredited doctoral program, remained enrolled in and in good standing with their graduate program, completed at least two clinical practica and a minimum of 500 hours of supervised experience (150 in assessment), successfully completed comprehensive examinations at their educational institution, and successfully completed a dissertation proposal.

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:

<table>
<thead>
<tr>
<th></th>
<th>No</th>
<th>Yes</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Direct Contact Intervention Hours</td>
<td></td>
<td>✓</td>
<td>150</td>
</tr>
<tr>
<td>Total Direct Contact Assessment Hours</td>
<td></td>
<td>✓</td>
<td>150</td>
</tr>
</tbody>
</table>

Describe any other required minimum criteria used to screen applicants:

Prospective interns are eligible to apply for selection when they have completed at least three years of
graduate training in clinical or counseling psychology in an APA accredited doctoral program, remained enrolled in and in good standing with their graduate program, completed at least two clinical practica and a minimum of 500 hours of supervised experience (150 in assessment), successfully completed comprehensive examinations at their educational institution, and successfully completed a dissertation proposal.

Financial and Other Benefit Support for Upcoming Training Year

| Annual Stipend/Salary for Full-time Interns | $41,976 |
| Annual Stipend/Salary for Half-time Interns | No part-time internship positions are offered |
| Program provides access to medical insurance for intern? | Yes |

**If access to medical insurance is provided:**

| Trainee contribution to cost required? | No |
| Coverage of family member(s) available? | Yes |
| Coverage of legally married partner available? | Yes |
| Coverage of domestic partner available? | Yes |

**Hours of Annual Paid Personal Time Off (PTO and/or Vacation)**

Interns have option of enrolling in Annual Leave or Vacation /Sick Leave

*Annual Leave = 11 hours/month
*Vacation = 7 hours/month
*Professional Development = 16 hours/year
*Educational Leave = 40 hours/year

| Hours of Annual Paid Sick Leave | 8 hours/month |
| In the event of medical conditions and/or family needs that require extended leave, does the program allow reasonable unpaid leave to interns/residents in excess of personal time off and sick leave? | Yes |
| Other Benefits (please describe) | None |
## Initial Post-Internship Positions

<table>
<thead>
<tr>
<th></th>
<th>2014-2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total # of interns who were in the 3 cohorts</td>
<td>10</td>
</tr>
<tr>
<td>Total # of interns who did not seek employment because they returned to their doctoral program/are completing doctoral degree</td>
<td>0</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Setting</th>
<th>PD</th>
<th>EP</th>
</tr>
</thead>
<tbody>
<tr>
<td>Community mental health center</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Federally qualified health center</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Independent primary care facility/clinic</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>University counseling center</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Veterans Affairs medical center</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Military health center</td>
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<td>0</td>
</tr>
<tr>
<td>Academic health center</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Other medical center or hospital</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Psychiatric hospital</td>
<td>3</td>
<td>2</td>
</tr>
<tr>
<td>Academic university/department</td>
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<td>0</td>
</tr>
<tr>
<td>Community college or other teaching setting</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Independent research institution</td>
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<td>0</td>
</tr>
<tr>
<td>Correctional facility</td>
<td>1</td>
<td>4</td>
</tr>
<tr>
<td>School district/system</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Independent practice setting</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Not currently employed</td>
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<td>0</td>
</tr>
<tr>
<td>Changed to another field</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Other</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Unknown</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

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.