ELIGIBILITY

Internship applicants must be advanced students in good standing in doctoral programs in clinical, counseling, or school psychology programs approved by the American Psychological Association. Applicants will have completed all coursework requirements, comprehensive evaluations, and will have met all requirements of their doctoral program making them eligible to apply for predoctoral internship. All candidates should have a substantial amount of prior practicum and other clinical experience. Applicants with strong backgrounds in child clinical or pediatric psychology are preferred. The internship program abides by Mount Washington Pediatric Hospital’s (MWPH) policy as an Equal Opportunity Employer.

FUNDING AND BENEFITS

Four internship positions will be available for 2016-2017, with stipends set at approximately $28,000 for 12 months. A full benefits package is provided (identical to that offered to MWPH staff), including different health insurance options and short-term disability insurance. Interns are provided with funding for continuing education to be used during the internship year. Benefits include hospital holidays, one floating holiday, two weeks paid vacation, ten sick days, and five paid continuing education days. If interns are in need of mental health services, they will be referred to the hospital contracted Employee Assistance Program. This program provides rapid mental health evaluations, short-term therapy, and referral to community therapists for ongoing treatment. This initial service is provided free of charge for MWPH employees, post doctoral fellows, and pediatric psychology interns.

APPLICATION PROCEDURE

Mt. Washington Pediatric Hospital abides by the APPIC policy of online submission of materials. The items listed below must be received by November 13, 2015.

1. APPIC Application for Psychology Internship (AAPI), available at the APPIC web site:

   http://www.appic.org
2. Current vita

3. All graduate transcripts. Please feel free to describe additional courses you expect to complete before internship.

4. At least three letters of recommendation from people who know your work.

5. The APPIC Academic Program’s Verification of Internship Eligibility and Readiness form.

Interviews are strongly encouraged. The primary reason for an interview is to permit both the internship program and the applicant to assess the degree to which the MWPH internship would be a good fit for an intern. We will hold interviews (by invitation) in January for this purpose. During the interviews, applicants will have an opportunity for a general orientation to the program, as well as personal interviews with internship faculty and current interns. The dates for this year’s interviews will be:

Tuesday January 5, 2016
Tuesday January 12, 2016
Tuesday January 19, 2016

Applications will be reviewed by members of the Internship Selection Committee, and invitations to attend one of the three interview dates will be extended by December 15. Only those applicants for whom the internship appears to be a good fit will be invited to attend an interview.

**INTERN SELECTION**

All applications are reviewed and discussed by the Internship Selection Committee. Telephone interviews may be conducted in lieu of in-person interviews when necessary for those applicants invited to attend one of the internship interview dates. Applicants will be ranked by the end of January, with preliminary decisions made concerning selection. Interns are selected according to the procedures set forth by APPIC. Written confirmation of all acceptances is required.

Interns will be evaluated based on their application, graduate academic training and practicum experience, and professional goals and aspirations. Particular attention will be paid to matching the experience and needs of the intern with the philosophy, goals, and strengths of the internship program. The internship program abides by all relevant MWPH Human Resources hiring and retention policies (Accessibility Policy, Equal Employment Opportunity Policy). The program is nondiscriminatory in nature and avoids actions that would restrict program access on grounds that are irrelevant to success in an internship or the profession of psychology.
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.

PHILOSOPHY AND GOALS

The Psychology Internship Program in the Division of Pediatric Psychology and Neuropsychology at Mount Washington Pediatric Hospital (MWPH) is designed to provide broad clinical, educational, and research experiences to interns who are dedicated to pursuing a career in psychology, particularly in the area of pediatric psychology.

Mount Washington Pediatric Hospital has a strong commitment to an interdisciplinary approach to training. We believe that training psychologists in the medical setting increases the interns’ understanding of medical culture, language, and issues. In addition, direct training in the medical setting teaches interns the skills necessary for effective collaboration and teamwork, as well as assisting in the development of familiarity and comfort with acute and chronic medical and developmental conditions. Our philosophy of training is reflected in the range of programs which serve as the core to our internship. These programs reflect the practitioner-scholar model, emphasizing the contributions of research findings to the practice of psychology.

The major goal of our internship program is to contribute to the development of well-rounded and competent psychologists. It is our belief that this is best achieved both by developing a solid base of skills in the areas of assessment, intervention, and consultation, as well as by acquiring specialized skills with a wide range of pediatric populations. We have designed our program to achieve this goal, and we have developed site-specific goals and objectives for our interns that are consistent with our training mission. Our intent is that clear site-specific goals and objectives enable interns to understand program expectations as well as what is required to become effective and capable psychologists. Our training model places a strong emphasis on the development of knowledgeable psychologists who integrate current theories and research into the practice of psychology. We expect our trainees to demonstrate an understanding of the ethical and professional responsibilities of practicing professional psychology and to show respect for diversity and demonstrate multicultural competence in their work with children and families.

Our psychology internship program is designed so that upon completion of the training year the intern will:

- Integrate current theories and research in the field of psychology with the practice of professional psychology
- Possess strong diagnostic skills with a range of assessment procedures that can be applied to a wide variety of problems and populations
- Demonstrate competence with different psychotherapeutic orientations and techniques for intervention
• Acknowledge and respect ethical and professional issues, including issues of diversity and multi-cultural factors
• Acquire the knowledge and competence to function as a pediatric psychologist in a variety of settings
• Appreciate the roles of other disciplines within medical settings, communicate meaningfully, and work constructively on an interdisciplinary or multidisciplinary team
• Be sensitive to the unique aspects of research with specific pediatric populations

PROGRAM HISTORY

From the early 1990’s until 2002, MWPH had a formal and contractual relationship with the Pediatric Psychology Internship Training Program at the University of Maryland Medical System. University of Maryland Pediatric Psychology interns trained for required 6 month rotations at MWPH in the Division of Pediatric Psychology and Neuropsychology, and faculty from the Division have been adjunct faculty at UMMS, participating in all aspects of the internship program. Since the pediatric psychology internship program at the University of Maryland was put on inactive status beginning in 2002, MWPH has expanded its own training program, including extern and post doctoral training in both pediatric psychology and pediatric neuropsychology. In July 2010, the program was informed by the American Psychological Association that we are accredited retroactive to July 2008.

MOUNT WASHINGTON PEDIATRIC HOSPITAL (DIVISION OF PEDIATRIC PSYCHOLOGY AND NEUROPSYCHOLOGY)

The internship is sponsored by and housed in the Division of Pediatric Psychology and Neuropsychology at Mount Washington Pediatric Hospital. MWPH is jointly owned by the University of Maryland Medical System and Johns Hopkins University. The internship program is fully supported (both financially and in terms of resource allocation) by the administration at MWPH. Consistent with the mission of MWPH, the highest quality of care is provided to children and their families. Mount Washington Pediatric Hospital provides assessment, consultation, and treatment services to infants, children, adolescents, young adults, and their families through several different inpatient, outpatient, and day treatment programs. At MWPH, pediatric psychological and neuropsychological services are provided through the three major inpatient programs (Pulmonary, Physical Rehabilitation, Chronic Illness), day treatment programs (Rehabilitation, Feeding), outpatient clinics (Feeding Disorders Clinic, Obesity Clinic, Diabetes Clinic, Autism Clinic, Neuropsychology Clinic), and outpatient services (psychological and neuropsychological evaluations and therapy). Most of the inpatient, day treatment, and outpatient clinic programs are either interdisciplinary or multidisciplinary in nature, and interns have opportunities to train in most of these programs. The faculty and trainees at MWPH are involved in numerous service, training, and research projects. In addition to the internship, fellowships are offered in pediatric psychology and pediatric neuropsychology at MWPH.
FACILITIES

Mount Washington Pediatric Hospital, a 64 bed pediatric rehabilitation and specialty hospital, has been providing care for infants, children, adolescents and young adults with chronic medical and developmental conditions, and their families for over 80 years. The hospital has three primary inpatient programs (Physical Rehabilitation, Pulmonary, Chronic Illness), two day treatment programs (Rehabilitation, Feeding), numerous outpatient clinics and a broad array of outpatient services. The hospital also operates an inpatient and outpatient unit at Prince George’s Hospital in Laurel, Maryland. Inpatients are generally referred from acute care settings (a small number of inpatient programs accept referrals directly from home), while day treatment and outpatients programs receive referrals from a variety of sources.

STUDENT FACILITIES

The facilities available for interns include office space with personal computers and telephones in the student office. Each intern will have their own desk, phone, and computer. The computers are part of a local area network with access to Division and hospital-wide shared drives and files and internet access. The Division has its own suite, including individual clinical rooms for assessment and therapy. There is a full range of audio and video equipment available, and the psychology clinical rooms have observation windows (one way mirror) and sound system, facilitating supervision and training. The interns have access to the medical library at MWPH, and some research support is available.

INTERNSHIP PROGRAM

The Mount Washington Pediatric Hospital Internship in Psychology prepares interns for the practice of professional psychology. Training includes experiences in the psychological assessment, evaluation, consultation, and treatment of children, adolescents, and their families in pediatric inpatient, day treatment, and outpatient settings. Training and supervision are provided for psychological evaluations, therapy, and consultation. In addition to working with children and adolescents, the interns gain experience with adults by conducting family therapy and parent training. There are occasional opportunities to work with young adults as well. Interns work together with trainees in other specialties, including residents in pediatrics, and trainees in social work, occupational therapy, physical therapy, and speech pathology.

The internship year begins August 26, 2016 and ends August 25, 2017. The year begins with an orientation week, when faculty members present a description of the activities and requirements of each training setting. In consultation with the faculty, each intern develops his/her individual schedule for the year, including elective rotations. The internship director is responsible for making the necessary logistical arrangements in order to accommodate each intern’s individual training needs. Intern training programs may be modified when necessary, as the training needs of the intern may change.
The psychology internship core training program consists of required activities for all interns. The program is composed of three required elements and electives chosen by the intern.

The first required element involves direct clinical activities. Clinical training activities are organized so that interns acquire and refine basic skills in assessment, consultation, and intervention with a variety of pediatric populations in the core clinical training settings. Core clinical training settings include testing (psychological and neuropsychological testing through MWPH Outpatient Center), outpatient therapy (through MWPH Outpatient Center, Feeding Day Treatment Program, and Childhood Obesity Program), consultation (through inpatient and day treatment programs), and inpatient intervention (through inpatient Consultation and Liaison Program).

The second element of the core training program is attendance and participation in the required seminars and rounds. The final core element of the program is supervision. This includes at least four hours of supervision a week, at least two of which are direct one-to-one supervision. The remainder of the intern’s training time is devoted to elective experiences. Four elective experiences are offered at MWPH, as described below. Interns will participate in three of these experiences for four months each. The interns will meet with the training director at the beginning of the training year to discuss their preferences.

CORE EXPERIENCES

Outpatient Psychological / Neuropsychological Evaluation

Psychological testing through MWPH Outpatient Center (6 months)
Neuropsychological evaluation through MWPH Outpatient Center (6 months)

Outpatient Therapy

Weekly outpatient therapy cases through MWPH Outpatient Center (12 months)

Inpatient Consultation and Liaison

Assessment, consultation, and intervention involving inpatients with medical diagnoses (12 months)

ROTATIONS

ROTATION A (Six months):

Feeding Disorders Program
Assessment, consultation, and behavioral intervention with children with behavioral feeding disorders

**Autism Evaluation Program**

Assessment of young children for autism spectrum disorders / developmental disabilities

**ROTATION B (Six Months)**

**Obesity Program**

Assessment, consultation, and behavioral intervention with children with obesity and their caregivers

**Diabetes Program**

Consultation and treatment of children in our outpatient diabetes program.

**REQUIRED SEMINARS**

Applied Pediatric Psychology Seminar  
Pediatric Psychology Didactic Seminar  
Pediatric Psychology Therapy Seminar  
Psychological Assessment Seminar  
Director’s Meeting

**SUPERVISION**

Training and supervision by licensed psychologists is provided for all of the professional activities performed by the interns. Specifically, supervision is provided for all clinical, research, and teaching activities. Interns receive individual face to face supervision by a licensed psychologist (for core areas), in addition to group supervision and supervision for rotational experiences (by licensed psychologists) and individual and group supervision by post doctoral fellows (under the supervision of a licensed psychologist). More intensive supervision is offered at the beginning of the training year and is tapered as the interns’ skills are solidified. However, the minimum hours of supervision (as described above) is always maintained, with interns receiving at least 4 hours of supervision by licensed psychologists a week. The Division is involved in training doctoral students in the region for practicum experience, and interns also will provide some supervision to these trainees (under the supervision of licensed faculty members).

Many of the experiences that are offered by our program are unique to the pediatric setting, and in-vivo modeling and training are often used to orient the interns to these specialized services. Our program utilizes multiple forms of supervision. We have
resources that enable interns to videotape sessions and use one-way mirror facilities so direct observations are possible. There are ample opportunities for interns to directly observe faculty members doing clinical work.

**TRAINING OPPORTUNITIES**

Activities, methods of assessment, and outcome measures to achieve these goals and objectives will be presented to the interns at the beginning of their internship year.

I. **Required Experiences**

A. **Outpatient Psychological Evaluation – 6 months of Psychological Evaluation/ 6 months of Neuropsychological Evaluation**

Through the Outpatient Center, interns are responsible for the entire process of psychological and neuropsychological evaluation for outpatients and day patients, including preparation of treatment plans, interviewing, testing, data interpretation, report writing, and feedback. Referrals come from physicians, schools, state agencies, community mental health centers, social workers, parents, and other professionals at MWPH. Supervision is provided by pediatric psychology and faculty.

**Rotation Goals and Objectives**

**Psychological Testing**

**Goal:** The intern will demonstrate knowledge and competence in administering and scoring psychological tests for children, writing detailed and accurate reports of findings, formulating effective recommendations based on evaluation results, and providing appropriate feedback to families and caregivers.

**Objective #1:** The intern will be aware of relevant theory and testing issues as they pertain to psychological testing (e.g., reliability, validity, normative sampling)

**Objective #2:** The intern will successfully administer and score psychological tests assessing intelligence, achievement, cognitive functioning, and emotional functioning

**Objective #3:** The intern will demonstrate competence in generating a comprehensive report of psychological functioning, incorporating patient history, behavioral observations, test results, clinical impressions, diagnoses, and recommendations

**Objective #4:** The intern will demonstrate competence in providing accurate and helpful feedback to families and/or caregivers based on results of psychological testing

Activities, methods of assessment, and outcome measures to achieve these goals and objectives will be presented to the interns at the beginning of their internship year.

**Neuropsychological Testing**
Goal: The intern will develop an understanding of neuropsychological functioning (brain-behavior relationships) as it relates to neurological disorders (e.g., epilepsy, cerebral palsy, lead poisoning or other neurotoxic states, stroke, tumors, head injury, HIV infection, respiratory disorders, genetic disorders, in utero drug/alcohol exposure, metabolic conditions, cardiac conditions affecting CNS, endocrine dysfunction, etc). The intern will receive training and experience in the utilization of standardized measures of neuropsychological functioning in both outpatient and inpatient settings. The intern will be expected to administer appropriate tests, score administered measures, make behavioral observations, determine appropriate diagnoses, and write an integrated report with appropriate recommendations. Interns will have the ability to observe feedback sessions with families as well as initial intake sessions.

Objective #1: The intern will develop understanding of the reciprocal nature of neurological disorders and neuropsychological functioning.
Objective #2: The intern will be aware of relevant neuropsychological theories and testing issues as they pertain to neuropsychological evaluation (e.g., reliability, validity, normative sampling).
Objective #3: The intern will develop the ability to generate an evaluation battery based upon patient symptoms, relevant medical history, and referral questions.
Objective #4: The intern will be able to administer and score standardized neuropsychological measures and make relevant behavioral observations.
Objective #5: The intern will be able to generate an integrated report including all relevant information, diagnosis, and recommendations.
Objective #6: The intern will be able to apply assessment skills flexibly across settings: outpatient and inpatient.

Activities, methods of assessment, and outcome measures to achieve these goals and objectives will be presented to the interns at the beginning of their internship year.

B. Outpatient Therapy

Through the Outpatient Center, interns carry a caseload of child and family outpatient therapy cases. Referrals come from physicians, schools, state agencies, social workers, parents, and other professionals at MWPH. Children and families are referred because of problems in emotional and behavioral functioning. Supervision is provided by pediatric psychology faculty.

Rotation Goals and Objectives

Goal: The intern will demonstrate the knowledge and competence to function independently as a diagnostician and therapist. The intern will demonstrate competence in developing effective rapport with a diverse population of children and families, diagnosing a wide range of disorders of childhood, developing effective treatment plans with families and caregivers, and implementing these treatments in effective ways.
Objective #1: The intern will demonstrate competence in performing a comprehensive diagnostic interview

Objective #2: The intern will demonstrate the ability to develop effective rapport with a diverse population of patients and caregivers

Objective #3: The intern will demonstrate competence in formulating an effective treatment plan for patients, based on diagnosis and report of symptoms

Objective #4: The intern will demonstrate competence in implementing and carrying out treatment plans in a manner that is clear and understandable to children and their caregivers

Objective #5: The intern will demonstrate competence in case management skills relevant to specific cases

Activities, methods of assessment, and outcome measures to achieve these goals and objectives will be presented to the interns at the beginning of their internship year.

C. Inpatient Consultation and Liaison Service

Interns will have a caseload of inpatients throughout the internship year. Consultation requests involve evaluating and providing service to help children and their families adapt to acute and chronic medical conditions, medical regimens, separation from family, home, and friends, and pain management. Patients have a variety of conditions, including orthopedic anomalies and injuries, burns, brain injuries, and neurological conditions, diabetes, asthma and other pulmonary conditions, cardiac problems, AIDS, feeding and related food and GI disorders, and lead poisoning. Although the majority of consultations involve patients over 2 years of age, pediatric psychology is occasionally consulted on cases in the neonatal unit. Interns are responsible for reviewing medical records, consulting with staff, observing rehab sessions, interviewing child and family, and completing consultation reports. Interns are also responsible for communicating findings to both the family and to the clinical team (typically by attending the appropriate rounds). They develop goals and objectives, communicate these to the clinical team (the interdisciplinary team working with that child), and develop an appropriate treatment plan. The intern continues to provide consultation and therapy services to that child and family throughout their admission to the hospital. Supervision is provided by pediatric psychology faculty.

Rotation Goals and Objectives

Goal: The intern will demonstrate the knowledge and competence to function independently as a consultant to pediatric inpatient and outpatient populations. The intern will be able to write a complete and concise consultation report/evaluation. The intern will be able to communicate the results of the consultation to the medical team and the patient’s family.

Objective #1: The intern will be able to assess the reason for referral
Objective #2: The intern will understand the role of the consultant on the Consultation Liaison Service

Objective #3: The intern will demonstrate the skills to work effectively and collaboratively within the context of a multi-disciplinary team

Objective #4: The intern will demonstrate competence in conducting a mental status exam with children and adolescents

Objective #5: The intern will demonstrate competence in general clinical interview skills

Objective #6: The intern will demonstrate competence in presenting the case conceptualization, including integration of medical, psychological, and psychosocial factors

Objective #7: The intern will demonstrate competence in using the multi-axial diagnostic system (DSM-IV)

Objective #8: The intern will demonstrate the ability to develop appropriate recommendations and discharge plans for the patient

Objective #9: The intern will be able to summarize all relevant data in a written diagnostic assessment and provide detailed information about treatment and progress in a written discharge summary

Objective #10: The intern will integrate clinical experiences with cases into ongoing seminars

Activities, methods of assessment, and outcome measures to achieve these goals and objectives will be presented to the interns at the beginning of their internship year.

ROTATIONS:

Each intern will spend six months in Rotation A (Feeding / Autism) and six months in Rotation B (obesity / diabetes) during their training year.

Feeding Disorders Program

The Feeding Disorders Program serves infants, toddlers and children with a variety of feeding or eating problems. The primary role for interns is attending the Feeding Day Treatment Program (FDTP). However, interns will also be responsible for following inpatient and outpatient cases involving feeding disorders. The FDTP is a six-week intensive outpatient program involving multiple disciplines, including medicine, nursing, pediatric psychology, social work, nutrition, occupational therapy, and speech pathology. Interns are involved in several of the functions of pediatric psychology, including behavioral feeding evaluations, team consultation, development of feeding protocols, development of patient short and long term goals, implementation of feeding treatment plan, and caregiver training. Issues addressed include inappropriate mealtime behaviors, premature termination of meals, selective diet, food refusal, anxiety, caregiver-child interaction, and caregiver training. Supervision is provided by pediatric psychology faculty.
Rotation Goals and Objectives

**Goal:** The intern will develop an understanding of feeding disorders and the relationship between the feeding disorder and family functioning. The intern will conduct intakes and assessments of a variety of patients with feeding disorders across multiple settings. The intern will use behavioral observations and interviews to develop effective mealtime interventions. The intern will provide parent training to caregivers to promote generalization of progress to the home setting.

**Objective #1:** The intern will be able to collect data when observing and during therapy at 80% accuracy
**Objective #2:** The intern will calculate data and make appropriate interpretations of the data
**Objective #3:** The intern will use data to make treatment decisions
**Objective #4:** The intern will be able to feed patients independently
**Objective #5:** The intern will use behavioral observations to guide treatment decisions
**Objective #6:** The intern will be able to complete a behavioral feeding intake and evaluation
**Objective #7:** The intern will gain an understanding of diagnoses relating to children with feeding disorders
**Objective #8:** The intern will use appropriate documentation via chart notes, mealtime protocols, feeding evaluations, and outpatient treatment summaries
**Objective #9:** The intern will display appropriate interactions with the multidisciplinary team

Activities, methods of assessment, and outcome measures to achieve these goals and objectives will be presented to the interns at the beginning of their internship year.

**Autism Evaluation Program**

The Autism and Developmental Disabilities Evaluation program at MWPH was established to help provide families of young children with psychological evaluations to consider the possibility of an autism spectrum disorder or other related concern. These evaluations typically involve experience with a number of measures not typically utilized in the psychological evaluation clinic. The clinic uses observational measures, as well as other traditional assessments of language, nonverbal intelligence, and autism interviews.

**Goal:** The intern will receive training and experience in the utilization of observational measures of assessment, such as the Autism Diagnostic Observation System – 2. The intern will be expected to administer appropriate tests, determine appropriate diagnoses, and write an integrated report with appropriate recommendations. The intern will provide feedback to the families, and make appropriate recommendations for ongoing care.
Objective #1: The intern will understand the diagnostic criteria for autism, autism spectrum disorders, and common developmental disabilities.
Objective #2: The intern will be able to administer and score observational measures used to diagnose autism spectrum disorders.
Objective #3: The intern will be able to administer a structured autism interview with a parent / guardian.
Objective #4: The intern will be able to generate an integrated report including all relevant information, diagnosis and recommendations.
Objective #5: The intern will be able to provide feedback to family about the child’s diagnosis and appropriate recommendations for care.

Activities, methods of assessment, and outcome measures to achieve these goals and objectives will be presented to the interns at the beginning of their internship year.

Obesity Program

The obesity program is a multidisciplinary program designed to assist children and their families in enacting positive lifestyle changes. The program includes medical and nutrition education, exercise, and behavior management. Pediatric psychology plays a major role in meeting with the patients and their families in a group format, helping them enact positive changes in eating habits and exercise. Interns are involved in the obesity screening clinic and in facilitating group therapy sessions. Supervision is provided by pediatric psychology faculty.

Rotation Goals and Objectives

Goal: The intern will be able to participate in the assessment and treatment of children and adolescents defined as overweight or obese by their physicians. The intern will be able to develop and implement effective treatments for children and families, including the dissemination of information, combining nutrition, exercise and behavioral theory in both individual and group format.

Objective #1: The intern will be able to perform an effective diagnostic interview with the family of a child who is obese or overweight
Objective #2: The intern will participate in the process of team decision making regarding the most effective course of treatment for children who are obese or overweight
Objective #3: The intern will participate in the individual treatment of families of children who are obese or overweight
Objective #4: The intern will participate in interdisciplinary group treatment of families of children who are obese or overweight
Activities, methods of assessment, and outcome measures to achieve these goals and objectives will be presented to the interns at the beginning of their internship year.

**Diabetes Program**

The diabetes clinic at MWPH is staffed by five pediatric endocrinologists, two nurse-practitioners, and pediatric nutrition. Psychology provides support to the outpatient clinic via the provision of direct services to the children as part of the multidisciplinary treatment team. Psychology will typically meet with newly diagnosed children to discuss any concerns related to the impact of diabetes in their life, and then will be consulted when needed during clinic to help address ongoing concerns. Children and families with significant concerns are often referred for ongoing psychological care outside of the clinic, which is often managed by the intern.

**Rotation Goals and Objectives**

**Goal:** The intern will participate in diabetes clinic as a member of the outpatient diabetes team. The intern will be asked to consult with families who are having difficulties managing their diabetes, and to follow up in behavioral therapy. The intern will also participate in giving feedback to the diabetes team to help guide the care of the child.

- **Objective #1:** The intern will be aware of the biology, symptoms, and appropriate medical treatment of Type 1 and Type 2 diabetes.
- **Objective #2:** The intern will be aware of the potential psychosocial variables that interfere with appropriate medical care of diabetes.
- **Objective #3:** The intern will be able to incorporate relevant diabetes information into their clinical intake.
- **Objective #4:** The intern will serve as an active part of the multidisciplinary treatment team by sharing information and making recommendations.
- **Objective #5:** The intern will make appropriate psychological recommendations for managing the social, emotional and behavioral aspects of diabetes care, and participate in implementing treatment as needed.

Activities, methods of assessment, and outcome measures to achieve these goals and objectives will be presented to the interns at the beginning of their internship year.

**SEMINARS**

Required seminars address basic and advanced assessment, intervention, and consultation issues in pediatric psychology, professional and ethical issues, issues of diversity and multicultural issues, research, and special topics. Seminars are typically one hour long, meet weekly, and are led primarily by Division faculty, along with guest speakers.
Interns are also encouraged to participate in a wide variety of hospital-wide training opportunities (e.g., clinical forum, lunch and learn, rehabilitation lectures and speakers, computer classes).

**Assessment Seminar**

The Assessment Seminar is a once a week interactive case presentation of an assessment case by a trainee. Each week, two or three trainees will present the relevant history of an assessment case to the group, as well as the results from their testing. The group will then use this information to discuss the case, including appropriate diagnoses and recommendations for care. The seminar is very informal, and designed to solicit discussion amongst trainees about patterns of test results that tend to accompany certain diagnoses, and the role of testing data in determine appropriate patient care.

**Pediatric Psychology Didactic Seminar**

The Pediatric Psychology Didactic Seminar provides interns with basic and advanced education regarding the primary professional and clinical issues facing pediatric psychologists. This seminar is a formal didactic presentation in lecture format. The lectures are organized in such a manner that the interns progress from more basic issues relevant to clinical work with children, adolescents and families (e.g., conducting interviews, pediatric psychology consultation, behavioral assessment, testing, DSM-IV diagnoses) to lectures focusing on more advanced topics and special populations (e.g., gastrointestinal and feeding disorder, pediatric oncology, HIV, traumatic brain injury). The seminar also focuses on issues related to ethics and professional development, including evidence based interventions, ethics, issues of diversity and multicultural factors, working with other disciplines, working with difficult families, and termination. Interns will be provided with supportive reading material and/or directed to outside educational materials.

**Therapy Seminar**

Every week, the interns will participate in an interactive case discussion of a therapy case. Only interns and fellows are invited to ensure a higher level of discussion, and each takes turns presenting a challenging and unique case. As with the assessment seminar, the structure is informal, and the presentation is designed to inspire discussion and learning. Presenting individuals are asked to bring a research article to the seminar to help the group remain current on treatment issues.

**Applied Pediatric Psychology Seminar**

Led by the director of the consultation rotation, the applied pediatric psychology seminar is a one hour discussion of topics relevant to the care of the children and adolescents on the consultation/liaison rotation. Case presentations, didactic presentations on relevant topics, and group discussion are used to help the group remain aware of the relevant
psychological and medical issues that these children face, and the available forms of assistance.

**Director’s Meeting**

Interns meet with the Director of Internship Training as a group to discuss issues related to the internship experience. Discussions focus on intern progress, intern problems or concerns, and shared experiences, as well as professional issues, such as preparation for future training or jobs. The meeting also serves as an opportunity for the interns to meet in an informal manner with no set didactic agenda. Meetings take place on a biweekly basis.

**INTERNSHIP PROGRAM REQUIREMENTS AND EXPECTATIONS**

It is important that interns have a clear and thorough understanding of the expectations for their performance, including expectations for continuing in and completing the internship program and conditions and procedures for termination. It is expected that interns will:

1. Complete all goals and objectives for the required and elective rotations as indicated.
2. Attend didactic seminars and supervision sessions as indicated.
3. Become familiar with and follow all Division and internship policies and procedures.
4. Become familiar with and follow all relevant hospital-wide policies as discussed during orientation and with their supervisors.
5. Adhere to all relevant codes of ethical conduct as discussed during orientation and with their supervisors.
6. Maintain appropriate caseloads for all rotations (as discussed at orientation and with their supervisors on each rotation). Interns typically do one psychological or neuropsychological evaluation per week (six months of each), follow two to three inpatients at a time as part of their consultation and liaison experience (throughout the 12 months), and follow five to ten outpatients at a time throughout the year. Interns spend one to two mornings a week in the Feeding Day Treatment Program. During the obesity rotation, interns participate in the obesity screening clinic one morning a week and attend obesity team rounds. Interns typically attend and help facilitate one of the obesity groups on a weekly basis (10 weeks). They are also able to follow obesity patients on an outpatient basis. During the diabetes rotation, interns are expected to carry a caseload of diabetes patients, as well as participating in consultation with the diabetes treatment team on an active clinic day. On the autism evaluation rotation, once trained, interns will be participating in autism evaluations biweekly. Caseloads for elective rotations are variable and are discussed at orientation and with their supervisors throughout the rotations. Completion of the internship requires a minimum of 2000 hours of supervised clinical experience and participation in the
internship on a full-time basis for one full calendar year. If illness or other circumstances make it impossible for the intern to meet the 2000 hour minimum by the official ending date, special arrangements will be made.

The internship is structured so that each intern has experience with populations that vary in terms of age, gender, socioeconomic background, ethnic origin, and presenting problems.

Vacation time (Paid Time Off or PTO) consists of all hospital holidays (e.g., Memorial Day, Thanksgiving, Labor Day, New Year’s), in addition to 19 days of paid leave.

Interns will receive feedback quarterly from their year-long supervisors (in addition to all feedback provided through regular supervision). Formal written feedback will be completed at the end of 6 months, and again at the end of the internship year. Feedback will address the intern’s performance and progress in terms of professional conduct and psychological knowledge, skills and competencies in the areas of psychological assessment and testing, intervention, and consultation. Feedback will also include the extent to which the intern has met or is meeting the objectives as defined for each rotation. Feedback will include timely written notification of all problems that have been noted and the opportunity to discuss them, guidance involving steps to remediate noted problems, and written feedback addressing the extent to which steps or corrective actions are or are not successful in addressing the issues of concern. Written feedback will be sent to the intern’s graduate school program after 6 months and at the end of the internship year. The feedback process is the same for elective rotations, except that formal written feedback will be completed at the end of the rotation (4 months).

If an intern is not meeting the expectations of the internship program, the internship faculty will develop a remedial plan for the intern, and the intern’s primary supervisor will contact the intern’s graduate school chair. If, after consultation with the intern’s graduate school program, the internship faculty determines that the intern is not able to meet the internship expectations, the intern will be terminated. A termination plan will be developed and implemented, along with recommendations for continued remediation outside of the internship program.

At the beginning of the internship program, interns will be given written procedures to follow for complaints or grievances involving disagreements regarding supervisor feedback or other issues that arise during the internship year.

**CORE FACULTY**

Steven E. Band, Ph.D.  
Director, Division of Pediatric Psychology and Neuropsychology

Kenneth Gelfand, Ph.D.  
Training Director, Pediatric Psychology Internship Program  
Director of Psychology Services for West Rogers
Kendra Battaglia, Psy.D.
Coordinator of Inpatient Psychology Services

Joseph Cleary, Psy.D.
Neuropsychologist

Erica Etter, Ph.D.
Psychologist, Medical Clinics

Jill Gatzke, Psy.D.
Psychologist, Autism and Assessment Programs

Elizabeth Getzoff Testa, Ph.D.
Director of Psychology Services for the Weigh Smart Program

James Hyche, Ph.D.
Psychologist, Feeding Program

Kathleen Kane, Psy.D.
Clinical Director, Autism and Related Disorders Program

Erica Lee, Psy.D.
Psychologist, Outpatient Programs

Stacey LeFevre, Psy.D.
Coordinator of Feeding Services for Psychology

Sean Logie, Ph.D.
Psychologist, Feeding Program

Allison Maletsky, Psy.D.
Psychologist, Autism and Assessment Programs

Elizabeth Monk, Psy.D.
Neuropsychologist

Danielle Raines, Psy.D.
Neuropsychologist

Bradley Schwimmer, Psy.D.
Psychologist, Weigh Smart and Outpatient Programs

**ADDITIONAL FACULTY**
Timothy Billings, Ph.D.
Pediatric Psychology

Kimberly Derrickson, Ph.D.
Pediatric Psychology

Jill Garfinkle, Psy.D.
Pediatric Psychology

Antonia Girard, Psy.D.
Pediatric Psychology

Harper Johnston, Ph.D.
Pediatric Psychology

Malynn Mignone, Psy.D.
Pediatric Psychology

Matthew Mychailyszyn, Ph.D.
Pediatric Psychology

Shannon Senefeld, Psy.D.
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Holly Vanderwalde, Ph.D.
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