



Doctoral Psychology Internship Brochure

8/1/2023



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Doctoral Internship Program

Internship Program

Western Youth Services is pleased to offer a one-year, full time Doctoral Internship Program that begins on the fourth Monday of August (08/19/24) and ends on the third Friday of August (08/15/25) the following year. Our model is that of a scholar-practitioner and emphasis is placed on learning evidence-based treatment programs (EBPs) that are effective with low resource, high risk, multiply challenged, ethnically diverse families, who often have experienced trauma, abuse, neglect, domestic violence, or other life challenges. The internship is a member program of the Association of Psychology Postdoctoral and Internship Centers (APPIC) and is accredited by the American Psychological Association (APA).

Population Served

Western Youth Services interns and clinicians work with a low resource, highly challenged ethnically diverse population. While the ethnic backgrounds of clients vary somewhat from region to region, overall agency percentages are made up predominantly of Asians and Pacific Islanders (6%), Caucasians (20%), African Americans (1%), multiethnic (8%), and Hispanics (63%). We serve a rising number of families at risk due to Adverse Childhood Experiences (ACEs), domestic violence, victimization, extreme stress, and poverty. In addition, we serve a large population of children in the foster care system that have suffered from sexual abuse, child abuse, or severe neglect and are now faced with adjusting to a new family, new home, and different expectations, while trying to cope with the loss of their family of origin. In our Education Related Mental Health Services Program (ERMHS) we also serve children with learning difficulties who are too emotionally distressed to benefit from educational services; or whose mental health conditions dysregulate them enough to prevent normal response to education.

Description of Agency

Western Youth Services is a private, non-profit human service agency with over 50 years of services to the communities of Orange County. WYS provides comprehensive mental health services to children, adolescents, and families at strategically located clinics throughout the county. WYS serves over 8,000 clients a year in our clinics and serves another 23,000 children through our Jump Start for Kids (JS4K) program in the Anaheim Elementary School District.

WYS is staffed by a dedicated team of mental health professionals who understand the unique concerns of children and adolescents. WYS staff includes highly diverse professionals from all mental health disciplines (psychiatrists, psychologists, social workers, marriage and family therapists, and mental health workers) and offers a high level of expertise to its clients. WYS is well respected and has built a reputation for excellent service and adherence to ethical standards and guidelines.

WYS' specialized mental health services include: therapeutic services for children, parenting education, child abuse prevention, family therapy, and in home therapeutic behavioral services (TBS). WYS also works within the Anaheim Elementary School District, one of the largest school districts in Orange County, to provide conflict resolution and self-regulation skills to children in order to make the education within the district safer for all children. The majority of our parents have experienced trauma or suffered great loss, but continue to work to provide the best care for their children in less than ideal circumstances.



Our Mission

Advancing awareness, cultivating success, and strengthening communities through integrated mental health services for children, youth, and families. We pursue our purpose on three fronts:

Advancing awareness. Because our expert team of mental health professionals specialize in working with youth and families, we help the community cut through the stigma preventing at-risk kids from getting the emotional and mental healthcare they deserve. Plus, we partner with government agencies, school districts and other youth-serving organizations. Together, we are fostering a generation of youth able to create and lead successful lives.

Cultivating success. We've redefined mental health services in Orange County to match the right program to suit every child, every family. We have proven, positive results to show the success of our programs – just look to our clients as evidence. After working with us, they emerge as stronger families and happier youth with the skills needed to thrive.

Strengthening communities. We work throughout the community and with youth-serving organizations that help children face their behavioral and emotional issues. Our integrated system ensures all youth in Orange County have access to preventative, early intervention and intensive therapies. We seek out and build upon the strengths of each client and bring out the best in every child, creating healthier and happier families contributing to their communities.

Our Vision

A society where youth and families are emotionally equipped and empowered to succeed.

Our Values

At Western Youth Services we value:

Honor. We honor all individuals. We treat clients with dignity regardless of circumstances. We honor our employees as high quality professionals motivated to help.

Ethics. In all endeavors, we conduct ourselves and our business with personal and professional integrity in accordance with ethical codes of conduct.

Excellence. We uphold the standard of excellence throughout the agency.

Efficiency. We have established and maintain effective and efficient ways and means of getting the job done without compromising quality.

Training. Serving as a training resource for students and interns in the mental health professions.

Doctoral Internship Mission

WYS Internship Training Program seeks to build current and future expertise in child (community) psychology by providing sequential scientifically informed training opportunities for deliberate practice with real time feedback, such that interns develop both extensive treatment and assessment knowledge, and mechanisms for continued evaluation and improvement of their services. Further, interns develop substantial cultural sensitivity and come to effectively treat a diverse population of children and their families.

We Provide (Activities available for intern participation):

- Individual, family and group therapy for children meeting Medi-Cal's definition of medical necessity criteria (medical necessity is defined as children who are suffering from an impairment in their daily living as a result of a mental health condition or who are likely to lack appropriate child development or even show regression without the help of psychotherapy)
- Evidence based care including Parent Child Interaction Therapy (PCIT), Functional Family Therapy (FFT), and Trauma Focused Cognitive Behavioral Therapy (TF-CBT)
- Seminar trainings on Evidence Based Treatments including: Acceptance and Commitment Therapy (ACT), Dialectical Behavioral Therapy (DBT) skills, Incredible Years (IY), Exposure Therapy and Motivational Interviewing (MI).
- Psycho-diagnostic, psychoeducational, and developmental assessments
- Consultation with teachers, social workers, and other mental health care professionals
- Crisis intervention
- Support/psycho-educational groups with opportunities to co-lead a group
- Case Management and linkage to services within the community
- Psychiatric Services with intern participation in psychiatry consultation
- Provision of consultation to other interns, clinicians, and practicum students from a variety of backgrounds (MFT, MSW)
- Supervision of practicum students from a variety of backgrounds (MFT, MSW)
- Assessments and psychotherapy conducted in Spanish or Vietnamese for children and families (for interns who are bilingual, as staffing permits, supervision of these cases may be conducted in the threshold language as well)
- Young child development and developmental disabilities evaluation, consultation and treatment

The Clinic Training Program

Overview

Western Youth Services currently has a diverse group of licensed psychologists who all participate in one or more aspects of the training program (e.g. teaching, supervision, co-therapy) and postdoctoral fellows who serve as educators and mentors for our interns. Our training program exists in one agency, but also within four different regions that vary in location across Orange County. Interns are placed in Anaheim, Fountain Valley, or one of two clinics in Santa Ana. Interns are required to have transportation during their work hours as seminars occur in several of our clinics and interns may occasionally travel between clinics to conduct psychological testing. All regions provide the same services and have licensed psychologists and supervisors, with minor differences in client demographics and based on clinic needs.

Intern Activities and Expectations

- Carry a client caseload of 12 to 20 clients, depending on intern abilities and client needs.
- Spend a minimum of 25% of their time in direct client contact, with almost 50% of their time spent engaging in activities that directly benefit our clients.
- Provide at least 65 client service hours per month (including therapy, assessment, consultation, report writing and other relevant documentation).
- Complete a minimum of six Assessment Batteries and Assessment Reports which may be psycho-diagnostic, psycho-educational, or developmental in nature. Occasional neuropsychological screenings may also be available for intern participation.
- Actively prepare for and participate in four or more hours of individual and group supervision per week.
- Actively prepare for and participate in both the Weekly Psychology Seminar (2 hours/week) and

other WYS trainings.

- In accordance with County requirements, WYS Staff, including Doctoral Interns, are required to utilize DMH documentation standards. These standards require the Doctoral Intern to have strong time-management skills, as well as the ability to quickly incorporate feedback. Deadlines include a 48-hour turnaround for notes. While this task is challenging for individuals who struggle with organization and time-management, this skill is extremely helpful in learning clinical oversight, appropriate treatment planning, tracking of progress, and reflective practice.
- Provide many of the following services to WYS clients:
 - Developmental evaluation, consultation, and treatment
 - Differential diagnostic evaluations
 - Individual, family, and group therapy with children meeting Medi-Cal medical necessity
 - Consultation and liaison with teachers, social workers, psychiatrists, and other mental health care professionals
 - Crisis intervention
 - Parent Education
 - Support/psycho-educational groups with opportunities to co-lead a group
 - Case Management and Linkage to services within the community
 - Provision of consultation to other interns, practicum students, and staff from a variety of mental health backgrounds (e.g., MFT, LMFT, LPCC)
 - Assessments and psychotherapy conducted in Spanish or Vietnamese for children and families (for interns who are bilingual, as staffing permits, supervision of these cases may be conducted in the threshold language, as well)

All Clinics Will Include The Following

Supervision. A minimum of four hours of weekly supervision is provided to all full time interns. Two of those hours will be individual face-to-face supervision with a licensed psychologist. All interns will also receive a minimum of two hours of weekly group supervision with a licensed psychologist. Additional individual and group supervision may be provided with a licensed social worker or licensed marriage and family therapist, in order to expand the training of the intern and to permit greater exposure to working within a multidisciplinary team. Additional multidisciplinary group supervision will be provided within the clinic where the intern is working. This supervision will be client focused and will often include Master's degree level clinicians (MSW and MFTI) as well as doctoral interns. Another hour of group supervision is focused specifically on psychological assessment and will occur at least two times per month.

As the WYS training program exists across multiple different sites within one agency, the internship program may utilize some telesupervision to provide interns with diverse supervisory experiences and reduce the time and expense associated with traveling between clinics.

Seminars. We offer weekly seminars in Psychological Assessment and Child Psychotherapy (at least 8 hours in a given month). In addition, Western Youth Services offers several in-service seminars per year. These in-service seminars are designed to review important ongoing clinical issues, such as legal and ethical concerns, cultural diversity, provide training in evidence-based therapy such as PCIT, FFT, and TF-CBT, as well as update clinician skills in areas for frequently served diagnoses. All of these in-service trainings have been approved by the California Board of Psychology Office of Professional Development (OPD) since becoming an OPD provider.

Multi-disciplinary teams. All clinics are made up of marriage and family therapists, clinical social workers, professional counselors, and psychiatrists. All clinics have access to behavioral coaches

and a parent partner to develop and practice skills in our clients or caregivers as needed.

Training model. Our training model is that of scholar-practitioner. We strive to provide interns with a breadth and depth of training experience in the context of utilizing both evidence-based and theory-based information to guide their treatment planning, conceptualization, and service delivery. All staff members remain actively involved in professional associations, continuing education, and reviewing the relevant literature, in order to constantly improve the quality of their work and supervision.

We work to train psychologists who will be entering the field and working within child assessment and/or treatment settings. We view the training year as a time for intensive clinical experience. Although interns do not have the time to complete additional research projects during their internship year, we do require ongoing scholarly activity, such as literature review, critical thinking, and the appropriate application of learning.

In order to facilitate the intern's progress toward the ultimate goal of autonomous and responsible professional functioning, a developmental model of supervision is used. In this approach, the supervisor facilitates the intern's movement from relative dependency to increasing autonomy and responsibility in service planning and delivery over time. Training is personalized and adapted to the trainee's level of functioning as new professional challenges are encountered. We use the developmental approach with all theoretical orientations and find this leads to a richer dialogue and excellent exchange between interns. The exchanges that take place in a gathering of heterogeneous interns can then serve to maximize exposure to, and understanding of, similarities and differences between a variety of therapeutic conceptualizations and methods in group supervision, didactics, and group interactive activities.

Training experiences help interns meet both knowledge and competency objectives. The development of knowledge is expected to occur through exposure, modeling, and didactic training. The development of competency is facilitated through exposure, modeling, didactic training, rehearsal, self and supervisory evaluation, practice, and the provision of feedback through mentoring, coaching, and in vivo supervision.

Evidence based treatment (EBT) experience. All interns will chose to focus on at least one of the following evidence based treatment programs during the internship year. While interns may on occasion chose a second simultaneous EBT, it is important that each intern gain sufficient experience in their first EBT to gain competence, if not mastery.

- **Functional Family Therapy (FFT).** FFT is a family intervention for at-risk youth ages 10 to 18 whose problems range from acting out to conduct disorders to alcohol and/or substance abuse. Often these families tend to have limited resources, histories of treatment failure, a range of diagnoses, and multi-system exposure. FFT is a short-term intervention program with an average of 18 to 24 sessions over a 2-8 month period. Services are conducted in both clinic and home settings, and can also be provided in a variety of settings including schools, child welfare facilities, and mental health facilities. FFT is a strength-based model. At its core it is a focus on and an assessment of those risk and the protective factors that impact the adolescent and his or her environment. Specific attention is paid to both intra-familial and extra-familial factors, and how they present within, and influence, the therapeutic process.
- **Parent Child Interaction Therapy (PCIT).** PCIT was developed for families with young children experiencing behavioral and emotional problems. Therapists coach parents across a

one way mirror during interactions with their child to teach new parenting skills. These skills are designed to strengthen the parent-child bond; decrease harsh and ineffective discipline control tactics; improve child social skills and cooperation; and reduce child negative or maladaptive behaviors. PCIT is an empirically supported treatment for child disruptive behavior as well as trauma, and is a recommended treatment for physically abusive parents.

- **Trauma Focused-Cognitive Behavioral Therapy (TF-CBT).** TF-CBT is a conjoint child and parent psychotherapy approach for children and adolescents who are experiencing significant emotional and behavioral difficulties related to traumatic life events. It is a components-based treatment model that incorporates trauma-sensitive interventions with cognitive behavioral, family, and humanistic principles and techniques. Children and parents learn new skills to help process thoughts and feelings related to traumatic life events; manage and resolve distressing thoughts, feelings, and behaviors related to traumatic life events; and enhance safety, growth, parenting skills, and family communication. TF-CBT is designed to be a relatively short-term treatment, typically lasting 12 to 28 sessions during which period over 80 percent of these children experience significant improvement.

Training on other Evidence Based Treatments (EBTs) will be provided either during intern seminars or during staff training days. Supervised experience on these EBTs may be available in your region. Interns are encouraged to prioritize gaining competence in FFT, PCIT, or TF-CBT as part of their internship training, but will also have the opportunity to implement other EBTs. Some of the EBT trainings offered are listed below:

- **Acceptance and Commitment Therapy (ACT).** ACT is an empirically based intervention that uses acceptance and mindfulness strategies mixed with commitment and behavior change strategies to increase psychological flexibility. The objective of ACT is not to eliminate difficult feelings, but to be present with what life brings and to move toward personally valued behavior. ACT invites people to open up to unpleasant feelings, face situations where they are provoked and not overreact to these feelings or situations.
- **Motivational Interviewing (MI).** Motivational Interviewing is a directive, client-centered counseling style for eliciting behavioral change by helping clients to explore and resolve ambivalence. Compared with nondirective counseling, it is more focused and goal-directed. The examination and resolution of ambivalence is its central purpose, and the clinician is intentionally directive in pursuing this goal through the use of Open-ended Questions, Affirmations, Reflections, and Summaries (OARS).
- **Dialectical Behavior Therapy Skills Groups (DBT).** DBT Skills Groups generally consist of a group of individuals who meet once a week (length of group determined by facilitator). Group members learn skills based on the four modules of DBT: Core Mindfulness, Interpersonal Effectiveness, Emotion Regulation and Distress Tolerance.
- **Incredible Years (IY).** The Incredible Years® evidence based parenting programs focus on strengthening parenting competencies and fostering parent involvement in children's school experiences to promote children's academic, social, and emotional skills and reduce conduct problems. The parenting programs are grouped according to age: preschoolers (3-6 years), and school age (6-12 years) and may be conducted in English or Spanish. Groups typically meet for 10 to 12 weeks.

Planned Programmed Sequence of Training



Interns begin the year with orientation in which they are trained to work within our system, including how to conduct clinical intakes, write intake reports, master treatment plans, and client service plans as well as how to follow APA Ethics Code within our setting and begin to use a number of evidence-based treatment models. Interns are initially assigned more straightforward clients (e.g. those who do not require social service or court involvement). The intern's initial intake session may be scheduled with his or her co-worker or supervisor, depending on the intern's experience and comfort level. Initial intake reports and treatment plans are highly supervised and may be co-constructed with the supervisor. However, all documents created by the intern are co-signed during an initial training period (typically 3 months) to determine their compliance with Medi-Cal paperwork requirements. Once interns become more comfortable working within the Medi-Cal system, they are encouraged to take cases with other system involvement (e.g. schools, foster care, social service involvement), as well as engagement in other modalities of treatment (e.g. family therapy and group therapy). Seminars are initially highly didactic and pragmatic but move toward more group discussions and debates as the year progresses. Generally, supervision is initially more specific and instructive, but moves toward more joint processing of the client and intern's experience, barriers to treatment, and issues in therapeutic alliance.

Training Purpose and Aims

The purpose of our Psychology Internship Program is to provide a training experience to advanced graduate psychology students within a multi-disciplinary setting that meets the qualifications of field experience in Ph.D./Psy.D. Programs, as well as licensing requirements for the Board of Psychology of the State of California (in addition to those of other states).

Our program is designed to provide more structure at the beginning of the year, and for interns to play an increasingly independent role towards the end of the year. Through our program, interns will learn to assess the psychosocial impact of acute and chronic stress and deprivation in children and their families. Interns will become proficient in psycho-diagnostic screening and testing and will gain some experience in learning disability assessments. They will also be exposed to neuropsychological testing and know how to determine the need for further cognitive assessment for their own clients. Interns will gain significant experience in community consultation skills, which include screening for the need for further psychological testing, making community referrals, coordinating care with outside agencies, and giving feedback to other mental health and social service professionals. Interns will also gain experience in working with culturally diverse individuals and have the opportunity to gain competency in this area.

We fully anticipate that interns graduating from our program will be prepared to function as entry-level child psychologists. Many of our graduates go onto a post-doctoral fellowships to further specialize in a particular area (e.g. Trauma, Autism, Young Children, Neuropsychology), while others accept psychology positions within community mental health agencies and hospitals, and some become private practitioners and/or graduate school teachers.

Satisfactory completion of the doctoral internship at Western Youth Services exceeds the California requirement for Supervised Professional Experience (SPE) and provides 2000 hours of Doctoral (pre-graduation) supervised practice in a one year period. Interns will need to thoughtfully plan use of vacation, educational, or sick time in order to meet this number of hours. Our interns can anticipate that their weekly responsibilities will be approximately 40 hours per week. This time estimate includes clinical service, paperwork, supervision, seminars, administration, test scoring, and write-ups of psychological assessments with and without psychological testing.

Specific Training Aims for Interns

Research.

- Seek out research on, and apply cultural adaptations used with, the Evidence Based Programs that we teach for the intern's current caseload.
- Develop extensive knowledge of trauma, its impact on children and families, and how to treat it.
- Apply neurodevelopmental impact of abuse, neglect, and deprivation findings to assessment and treatment knowledge.
- Learn how to stay abreast of developments and trends in the field of child and family psychology.

Ethical and Legal Standards.

- Demonstrate good judgment when faced with ethical decisions; know to seek information and/or consultation to behave consistently with APA ethical principles, California laws and regulations.
- Know and follow specific and appropriate procedures for assessing danger to self or others, managing aggressive clients, reporting child, elder, dependent adult, and/or spousal abuse.
- Accurately assess Adverse Childhood Experiences and their impact on clients, while simultaneously communicating these experiences to the required agencies and maintaining and protecting the therapeutic relationship to the extent possible.
- Apply and document using legal and ethical standards to clients and cohort's clients in increasingly complex situations.
- Consider cultural and legal implications of ethical dilemmas.

Individual and Cultural Diversity.

- Understand the intersection of poverty, race, class, and language barriers that impact clients' experiences and challenges with mental illness.
- Demonstrate awareness and display sensitivity to and respect for cultural, ethnic, religious, gender, sexuality, disability status, and socioeconomic diversity. Consider all such diversity in selecting and interpreting test data, selecting appropriate diagnoses, selecting appropriate treatments, and in making referrals to the community.
- Demonstrate awareness of the impact of individual culture and diversity on the client's view of therapy and identify unique strengths and perspectives that the client can benefit from.
- Provide therapy that is culturally inclusive and utilizes multicultural competence to effectively work with client flexibly, and to lead to effective change and goal attainment.
- Fine-tune awareness and resolution of situations where intern's own background and diversity membership negatively affects client interactions, expectations, or progress in treatment.
- Increase awareness of diversity and its impact on development, resources, stigma toward mental health, therapeutic relationship, and response to treatment.
- Learn to advocate for disempowered and culturally disadvantaged families.

Professional Values, Attitudes, and Behaviors.

- Challenge self and demonstrate a sincere desire to learn by engaging in reflective practice, participating in trainings, seeking out additional input and knowledge, and actively applying learning from both supervision and seminars.
- Resolve conflict quickly and appropriately with staff, peers, and supervisors and work well as a team.
- Engage in and strengthen appropriate self-care.
- Gain professionalism through increasingly more challenging and potentially emotional situations.
- Demonstrate professionalism in a culturally sensitive and non-authoritarian manner to build trust in the intern, the agency, and the profession.
- Learn to recognize needed supports to maintain efficacy as a therapist.
- Produce high-quality work which is prompt, thoughtful, conscientious, and consistent with professional standards and agency policies.

Communication and Interpersonal Skills.

- Learn to be a clear, effective, inspiring agent of change both in writing and orally with clients, co-workers, and other professionals outside of the agency.
- Learn to repair ruptures and/or conflicts in an effective and timely manner.

Assessment.

- Select, administer, and score a battery of age appropriate tests selected to lend clarity to the referral question and assist in differential diagnosis using the DSM-5 with minimal feedback from supervisor.
- Write a sufficient number of integrated psychological assessment reports (minimum of 6) in a timely fashion to demonstrate ability to synthesize testing data and developmental knowledge with patient history, family socioeconomic status (SES), and cultural background, and lead to a clear conceptualization and thoughtful treatment recommendations.
- Consider relevant psychotherapy research to formulate a descriptive conceptualization, in an appropriate evidence based framework, to lead to relevant options that include more than one modality (e.g. individual, group, family).
- Identify barriers to clients' and families' success in solving their own problems and/or preparing for their coming future and pinpoint pivotal leverage points (e.g. changes in understanding, expectation, responses, skills) that will affect and encourage meaningful positive change.

Intervention.

- After identifying those pivotal leverage points (described above), practice affecting that change with clients and families.
- Document effective treatment in a manner compliant with funding source requirements in a timely fashion.

Supervision.

- Facilitate interns' ability to identify barriers to supervisees' accurate and helpful clinical observation, motivation, creativity and implementation of known interventions.

Consultation and Inter-professional/Interdisciplinary Skills.

- Teach interns how to demonstrate the additional value of hiring a psychologist over Master's degree level staff through strong consultation skills.
- Teach interns how to become invaluable to their colleagues in consultation.
- Teach interns how to act with extreme respect to maximize the potential of the consultee.

Evaluations and Communication with Interns' Home Graduate Programs

Evaluation Plan

Western Youth Services has 33 competency rating areas that consist of five non-mandatory competencies marked in blue and 28 mandatory competencies marked in light green. Doctoral interns must receive an evaluation rating of three or higher on the final evaluation in *all* mandatory competency rating areas in order to complete and graduate from the Internship Program. All of these areas fall within the nine core Profession Wide Competencies (PWC) established by the APA Competency Benchmark which include: 1. Research, 2. Ethical and legal standards, 3. Individual and cultural diversity, 4. Professional values, attitudes, and behaviors, 5. Communication and interpersonal skills, 6. Assessment, 7. Intervention, 8. Supervision, and 9. Consultation and Inter-professional/interdisciplinary skills. The list below identifies which competency rating areas fall under which PWC.

Interns are aided in reaching these final required competencies through several feedback mechanisms in addition to training and supervised experience. Supervisors provide a first quarter evaluation without numerical ratings by marking the checkboxes in each section to indicate which behaviors they have seen demonstrated. While no checkboxes are mandatory for graduation in any evaluation period, they serve as a useful indicator that an intern's progress is on target if he/she demonstrates most skills during the quarter where they are highlighted. Interns first receive numerical ratings at the mid-year evaluation period. Any intern ratings below three at the mid-year evaluation period will be targeted for development by the intern and their primary supervisors. The Corrective Supervision Tool in the [Appendix](#) is used to structure and document this conversation and to set clear expectations, responsibilities, and timelines for both parties to maximize success. Interns are again rated at the end of the year, where all ratings must be at or above a rating of three in all starred (*) areas.

Each intern must reach at least a 3 in each mandatory (*) area by the end of the internship year. Skills must be solidly displayed in normal or typical situations but may not yet be fully demonstrated with a wide range of diverse clients or when the doctoral intern is triggered or emotional.

Interns evaluate their supervisors and the training program twice annually and the seminars on a weekly basis. A summary of the mid-year data is provided by the Director of Training to the Psychology Training Committee to reinforce training activities that are working well and to make helpful adjustments to the training program to further intern growth as needed. Evaluation forms are not shared to protect intern confidentiality. However, interns are encouraged to share their written feedback in preparation for doing so in supervision.

Core Professional Competencies

1. Research (2)
 - a. Science Mindedness
 - b. Scientific Foundations of Professional Practice
2. Ethical and legal standards (2)
 - a. Knowledge and Application of Ethical, Legal, and Professional Standards and Guidelines
 - b. Ethical Conduct

3. Individual and cultural diversity (2)
 - a. Interactions of Self and Others as Shaped by Individual and Cultural Diversity
 - b. Applications Based on Individual and Cultural Context
4. Professional values, attitudes, and behaviors (8)
 - a. Integrity
 - b. Deportment
 - c. Accountability
 - d. Concern for the Welfare of Others
 - e. Professional Identity
 - f. Reflective Practice
 - i. Reflective Practice
 - ii. Self-Assessment
 - iii. Self-Care
5. Communication and Interpersonal skills/Relationships (3)
 - a. Interpersonal Relationships
 - b. Affective Skills
 - c. Expressive Skills
6. Assessment (5)
 - a. Measurement and Psychometrics
 - b. Evaluation Methods
 - c. Application of Methods
 - d. Diagnosis and Conceptualization
 - e. Communication of Findings
7. Intervention (4)
 - a. Knowledge of Interventions
 - b. Intervention Planning
 - c. Skills and Implementation
 - d. Application of Scientific Method of Practice
8. Supervision (1)
 - a. Roles, Process, and Procedures
9. Consultation and Inter-professional/Interdisciplinary skills (1)
 - a. Addressing Consultation Needs

PROFESSIONALISM				
GOAL: INTEGRITY*				
<input type="checkbox"/> N/A OBJECTIVE: Continually monitors and independently resolves situations that challenge professional values and integrity				
	Q1	Q2	Q4	
E				Takes independent action to correct situations that are in conflict with professional values. Relates well to those seeking input, is
E				Articulates professional values
I				Demonstrated adherence to professional values
I				Demonstrates knowledge of professional values
I				Identifies situations that challenge professional values and keeps supervisor guidance as needed
I				Demonstrates ability to share, discuss and address failures and lapses in adherence to professional values with supervisors as
R				Resists personal responsibility, honest delivery, or core professional values
Mid-Year Overall Rating:				End of Year Overall Rating:
GOAL: DEPARTMENT*				
<input type="checkbox"/> N/A OBJECTIVE: Consistently conducts self in a professional manner across all settings and situations				
	Q1	Q2	Q4	
E				Verbal and nonverbal communications are appropriate to the professional context including in challenging interactions
I				Demonstrates awareness of the impact behavior has on client, public and profession
I				Utilizes appropriate language and demeanor in professional communications
I				Demonstrates appropriate physical conduct, including attire, consistent with context
R				Presents self in less than professional attire, speech, conduct, hygiene, or demeanor
Mid-Year Overall Rating:				End of Year Overall Rating:

SUPERVISION				
GOAL: PROVIDING SUPERVISION				
<input type="checkbox"/> N/A OBJECTIVE: Understands complexity of the supervisor role including ethical, legal, and contextual issues				
	Q1	Q2	Q4	
E				Provides supervision to less advanced trainees, peers or other service providers in typical cases appropriate to the service setting
I				Identifies roles and responsibilities of the supervisor and supervisee in the supervision process
I				Reflects on supervision process, areas of strength and those needing improvement
R				Does not comprehend the process of supervision or supervisor's roles
Mid-Year Overall Rating:				End of Year Overall Rating:



Communication with Interns’ Home Graduate Programs

A summary letter, along with a copy of the most recent WYS evaluation, can be sent to the intern’s graduate program, when required, at the mid-year point. WYS staff are no longer able to complete school-specific training contracts or evaluations.

At the end of the internship year, the home graduate program receives a brief summary evaluation indicating whether the intern has successfully completed the internship. At any time, if problems arise that cast doubt on an intern's ability to successfully complete the internship program; the Director of Training will inform the sponsoring graduate program. The home program will be encouraged to provide input to assist in resolving the problems according to our Due Process procedure.

Intern Title

WYS doctoral interns are all given the title of Doctoral Intern. Prior interns have typically come from Southern California APA-accredited graduate programs in Clinical Psychology, with a growing group from outside of California. We have matched with applicants from:

Adler University	University/American	Phillips Graduate University
Alliant International	School of Professional	Roosevelt University
University/California	Psychology - Orange	Texas A&M University
School of Professional	County)	University of Denver
Psychology (Fresno, Los	Florida Institute of	University of Hartford
Angeles, San Diego, San	Technology	University of Houston
Francisco)	Georgia State University	University of Indianapolis
Antioch University	Loma Linda University	University of La Verne
Azusa Pacific University	McGill University	University of North Texas
Biola University (Rosemead	Midwestern University	University of Oregon
School of Psychology)	Pacific Graduate School of	Rutgers University
Bowling Green State	Psychology/Stanford	Spalding University
University	University Doctor of	Suffolk University
Central Michigan University	Psychology Consortium	Virginia Tech
The Chicago School -	Pepperdine University	William James College
Chicago	Northeastern University	Xavier University
The Chicago School -	Midwestern University	
Orange County	Pacific University	
(previously Argosy		

Some have stayed at Western Youth Services for fellowship. Many have gone on to Postdoctoral Fellowships in Child Psychology typically within California or gone on to a combination of part-time private practice and part-time teaching within Professional Schools. WYS currently has six full time interns.



APA Accreditation

Our internship program is currently APA accredited and will be reviewed again in 2027. For further information, please feel free to contact the Commission on Accreditation (CoA) of the American Psychological Association (APA) at:

Office of Program Consultation and Accreditation
750 First Street, NE • Washington, DC • 20002-4242
Phone: 202-336-5979 • TDD/TTY: 202-336-6123
Fax: 202-336-5978 • [Email \(apaaccred@apa.org\)](mailto:apaaccred@apa.org)

Resources

All interns have their own offices, computers, extensions and e-mail addresses, as well as printer access at work. Interns also have access to a large variety of psychological tests and computer scoring programs. PCIT rooms are available for either live or video supervision of intern activities and GoPro type cameras are available for video supervision of all intern activities.

Administrative Assistance

Administrative assistants are employed in all clinics that house doctoral interns. These staff assist interns by greeting and orienting clients, providing paperwork for client completion, taking messages, answering and transferring calls, taking referrals, distributing periodic outcome measures for client completion, pulling needed reports, and entering data for billing purposes. Administrative assistants do not take dictation or transcribe reports. For this reason, all doctoral interns must have a basic familiarity and comfort level with computers and Microsoft Word.

The Director of Training will collect and monitor monthly training logs to ensure that adequate supervision, didactics, and client contact are occurring to reach all APA, APPIC, and California Board of Psychology requirements. For this reason, all interns must have some limited familiarity with using Microsoft Excel.

Maintenance of Records

Intern records are kept for an indefinite amount of time. Intern records are kept on site at WYS in a locked and secure cabinet for 10 years. After 10 years, intern records are maintained in an off-site secure location. Records in long term storage can be retrieved with 48 hours' notice.

Location of Internship

The Internship is located in several parts of Orange County, specifically, Anaheim, Santa Ana, and Fountain Valley. Orange County is located within Southern California, between San Diego and Los Angeles. Orange County boasts access to both of these great cities, as well as proximity to Disneyland, mountains, desert, and the Pacific Ocean. Temperatures are warm to moderate all year. Housing is easily available, but relatively expensive. For more information on the area, please see the Orange County web site at <https://www.ocgov.com>.

Distance Learning

WYS does not utilize distance learning except under rare circumstances in which an intern is unable to attend a primary training and requests that it be recorded for them. In these pre-approved instances, interns can access select trainings on a password-protected online portal (i.e., Zoom or Vimeo).

Salary, Benefits, and Financial Assistance

- Salary is \$37,066 per year for monolingual interns and \$38,919 for bilingual Spanish or Vietnamese speaking interns.
- Vacation time is accrued at the rate of 5 hours per pay period** starting on the first day of the month following completion of 90 days of the internship year (e.g. December 1st) up to a total of 90 hours or 11.25 days.
- Sick leave will begin to accrue at the rate of 3.33 hours per pay period starting on the first day of the month following completion of 90 days of the internship year up to a total of 79.92 hours or 9.99 days.
- Education leave for dissertation or fellowship activities up to 24 hours or 3 days.
- 14 paid Holidays (includes 2 WYS floating holidays).
- 2000 hours of Pre-doctoral Internship level Supervised Professional Experience (SPE).

* WYS's 40 hour work week is structured to support Doctoral Interns in obtaining 2000 hours over the course of the year. While the State of California only requires 1500 hours, WYS has created a structure to expand the Doctoral Intern's opportunities for future endeavors (e.g., moving to another state which may have different requirements). California requirements for maternity/paternity leave require that the individual be employed at the specific agency for at least one year, and given that the internship training program is only one year, this specific type of leave is not offered to Doctoral Interns. Arrangements to use one's vacation and sick leave for maternity/paternity leave can be arranged through the Human Resources Department.

** From 1st to 15th day of month = 1 pay period, and from 16th to last day of month = 1 pay period.

Intern Selection

Nondiscrimination

It is the policy and practice of Western Youth Services to seek, encourage, and support cultural and ethnic diversity. This diversity is sought to meet clients' needs, to expand the sensitivity and awareness of all staff, and engage in the richness of culture. Intern diversity is sought through building and maintaining a diverse group of supervisors, encouraging applicants from all backgrounds, and treating all applicants, doctoral interns, and staff with dignity and respect. WYS is committed to attracting and training a diverse group of interns who are supported through training, discussions in clinical supervision, and activities in seminars.

Qualified Applicants Will Have:

1. Clinical experience with children in group or family and individual child therapy.
2. Strong desire to work with children and/or families in the future.
3. Good understanding of normal child development and healthy family functioning.
4. Solid conceptualization and writing skills.
5. Strong desire to learn.
6. Strong time-management and organizational skills.
7. Willingness to accept additional information and corrective feedback.
8. Exposure to both individual and family/systems coursework.
9. A minimum of 400 hours of supervised clinical treatment experience.
10. Completed 2 clinical practicums in which the student provided therapy and some psychological assessments.
11. Completed a minimum of two full psychological assessment batteries with report.

12. Completed minimal child testing prior to internship (e.g. 2-4 intelligence tests, 1-2 projective tests, 1-2 academic scales).
13. A basic knowledge and comfort with Microsoft Word and Outlook and some ability to fill out forms in Excel.
14. Advanced candidacy and good standing in an APA approved program in clinical, counseling, school psychology, or a combination of the three.
15. A clean fingerprint and criminal record, as assessed by a Live Scan with the Department of Justice prior to hire.
16. Interest in expanding knowledge beyond psychologists own private clients (e.g. community, prevention, training, research).

Application Procedure

Applications are due on November 1st. With the exception of letters of recommendation, no materials will be reviewed late without prior permission and a clear rationale.

1. Please complete the APPIC Application for Doctoral interns (AAPI) Online. Instructions and registration information can be found at <https://www.appic.org/Internships/AAPI>. The AAPI Online application packet will include:
 - a. Resume/Vitae
 - b. Cover letter/letter of interest in our program
 - c. Copy of all graduate transcripts
 - d. Three letters of recommendation
 - e. Verification of Internship Eligibility and Readiness from your graduate program's Director of Training
2. In order to have a complete application, you will also need to include one psychological testing report preferably on a child (please remove all identifying information) in the supplemental materials section of the AAPI Online.
3. Please do not submit any application materials by mail.

Applications will be reviewed and rated by the Psychology Training Committee. All applications will be evaluated based on their compatibility with available programs and training interests, as well as their experience, insight, training and writing ability. Strong applicants will be invited in December to come to interview in January.

After completion of interviews, applicants' materials and interview responses are reviewed in order to rank order all remaining applicants for the NMS Match. 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.

Matched interns are required to be fingerprinted and successfully pass a criminal background check before being placed in a WYS clinic or school program. Applicants who are unlikely to pass this evaluation should refrain from applying.

Questions

Programmatic questions should be directed to Shannon Wilson, PsyD, who can be reached by email at shannon.wilson@wysoc.org, or by phone at (949) 855-1556.



Internship Admissions, Support, and Initial Placement Data

Date Program Tables are updated: 07/01/2023

Program Disclosures

Does the program or institution require students, trainees, and/or staff (faculty) to comply with specific policies or practices related to the institution's affiliation or purpose? Such policies or practices may include, but are not limited to, admissions, hiring, retention policies, and/or requirements for completion that express mission and values.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
If yes, please provide website link (or content from brochure) where this specific information is presented: N/A	

Internship Program Admissions

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

WYS is a child and family community mental health agency serving the needs of vulnerable children in Orange County. Interns provide and are trained in evidence-based family therapy (including FFT), evidence-based child therapy (including PCIT), trauma therapy (including TF-CBT), psychological testing, and consultation with school and social services staff. Western Youth Services currently has 8 licensed psychologists who all participate in one or more aspects of the training program (e.g. teaching, supervision, co-therapy) and 3 postdoctoral fellows who will serve as mentors for our interns. Our training program exists in 1 agency, but within 4 different clinics. Intern positions are located in 1 of 4 clinics in Orange County including Anaheim, Fountain Valley, and 2 clinics in Santa Ana. Interns are required to have transportation during work hours as seminars occur in several of our clinics, and interns may occasionally travel between clinics to conduct psychological testing. All clinics provide opportunities for evidence-based trainings to include Parent-Child Interaction Training (PCIT), Functional Family Therapy (FFT), and Trauma-Focused CBT (TF-CBT).

In a typical internship year, interns work 40 hours per week with Monday, Tuesdays, and Thursday as 9-hour Clinic days and Wednesday as an 8-hour Clinic day to allow for some early evening time with families and Friday as a 5-hour training day. Clinic days typically include 4-5 hours of therapy or testing, with balance of day for supervision (receiving and providing), staff meetings, and time to consult and document.

Does the program require that applicants have received a minimum number of hours of the following at time of application? If Yes, indicate how many:

Total Direct Contact Intervention Hours	N	<u>Y</u>	Amount: 400
Total Direct Contact Assessment Hours	N	<u>Y</u>	Amount: 75

Describe any other required minimum criteria used to screen applicants:

- Interest in working with children and families.
- Comprehensive exams passed by application deadline.
- Dissertation proposal approved by rank order deadline.
- Sample testing report required in application.



Financial and Other Benefit Support for Upcoming Training Year*

Annual Stipend/Salary for Full-time Interns	\$37,066 (for monolingual interns) or \$38,919 (for bilingual Spanish or Vietnamese speaking interns)	
Annual Stipend/Salary for Half-time Interns	No half-time intern positions available.	
Program provides access to medical insurance for intern?	Yes	No
If access to medical insurance is provided:		
Trainee contribution to cost required?	Yes	No
Coverage of family member(s) available?	Yes	No
Coverage of legally married partner available?	Yes	No
Coverage of domestic partner available?	Yes	No
Hours of Annual Paid Personal Time Off (PTO and/or Vacation)	Up to 90*	
Hours of Annual Paid Sick Leave	Up to 79.92*	
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	No
<p>Other Benefits (please describe): 14 paid holidays, employee assistance program, 403(b) retirement plan, vision, dental, up to 24 hours of education leave or fellowship application activities</p> <p>*The eligibility to accrue vacation hours on the first day of the month following the completion of ninety (90) days of the internship year. Vacation is accrued at the rate of five (5) hours per pay period, up to 90 hours or 11.25 days. The eligibility to accrue sick leave on the first of the month follow ninety (90) days of the internship year. Sick leave is accrued at 3.33 per pay period, up to 79.92 hours or 9.99 days.</p>		

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

Initial Post-Internship Positions

(Provide an Aggregated Tally for the Preceding 3 Cohorts)

	2019-2022	
Total # of interns who were in the 3 cohorts	18	
Total # of interns who did not seek employment because they returned to their doctoral program/are completing doctoral degree	0	
	PD	EP
Academic teaching	0	0
Community mental health center	4	1
Consortium	0	0
University Counseling Center	0	0
Hospital/Medical Center	6	0
Veterans Affairs Health Care System	0	0
Psychiatric facility	0	0
Correctional facility	0	0
Health maintenance organization	0	0
School district/system	0	0
Independent practice setting	1	0
Other	4*	2

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.

*Initial Post-Internship Positions for 4 interns from preceding 3 cohorts are unknown and listed as "Other"



Commitment to Diversity, Equity, and Inclusion

WYS is committed to creating and maintaining a workplace in which all employees have an opportunity to participate, contribute, and thrive. We value a diverse workforce with a culture of inclusivity and belonging that embraces the contributions of all employees and staff.

We believe diversity enhances our work environment and seek to recruit and retain a diverse workforce to maintain the excellence of Agency service to the community and to offer richly varied disciplines and perspectives. We welcome and embrace diversity in race, religion, ethnicity, ancestry, color, age, sex, gender identity and/or gender expression, sexual orientation, national origin, marital status, medical condition, physical or mental disability, U.S. military and veteran status, pregnancy, childbirth and related medical conditions, political affiliation, genetic information, reproductive health decision making, and other characteristics that make our employees unique. We are committed to fostering, cultivating, and preserving an environment that values diversity, promotes equity, and maintains an inclusive culture, and creates a deepened sense of belonging for each member of our community.

Our employees are the most valuable asset we have. The collective sum of our individual differences, life experiences, knowledge, inventiveness, innovation, self-expression, unique capabilities, and talent that our employees invest in their work represents a significant part of not only our culture, but our reputation and the Agency's achievements as well. Our commitment to diversity supports us in maintaining excellence in Agency services and optimal responsiveness to the communities served. Our commitment to diversity opens opportunities for us to increase our understanding of each other and work more effectively together as we identify challenges and co-develop solutions. This commitment is embodied in Agency policy and the way we do business at WYS and is an important principle of sound Agency management.

WYS' diversity initiatives are applicable—but not limited—to our practices and policies on recruitment and selection, compensation and benefits, professional development and training, promotions, transfers, social and recreational programs, layoffs, terminations, and the ongoing development of a work environment built on the premise of equity and inclusion in all forms that encourages and enforces:

- Respectful communication and cooperation between all employees.
- Teamwork and employee participation, permitting the representation of all groups and employee perspectives.
- Work/life balance through flexible work schedules to accommodate employees' varying needs, including religious and spiritual needs.
- Employer and employee contributions to the communities we serve to promote a greater understanding and respect for diversity, equity, and inclusion.

All employees of WYS have a responsibility to always treat others with dignity and respect. All employees are expected to exhibit conduct that reflects inclusion during work, at work functions on or off the work site, and at all other agency-sponsored and participative events. WYS' commitment to diversity is reflected in our proactive efforts of continuous education, training, and development in the areas of diversity, equity and inclusion, and an expectation of WYS' leadership and employees modeling inclusivity, acceptance, and respect.



Internship Program Diversity Principles and Practices

It is the policy and practice of Western Youth Services (WYS) to seek, encourage, and support cultural and ethnic diversity. This diversity is sought to meet clients' needs, to expand the sensitivity and awareness of all staff, and engage in the richness of culture. Intern diversity is sought through building and maintaining a diverse group of supervisors, encouraging applicants from all backgrounds, and treating all applicants, doctoral interns, and staff with dignity and respect. WYS is committed to attracting and training a diverse group of interns who are supported through training, discussions in clinical supervision, and activities in seminars.

To optimize the richness of diversity and the quality of our training program, individual and cultural differences are honored, and every intern is valued for the diverseness of identities, thought, and experiences that they bring to the team. Our doctoral internship culture welcomes and embraces diversity in all forms. Diversity includes but is not limited to race, religion, ethnicity, ancestry, color, age, sex, gender identity and/or gender expression, sexual orientation, national origin, marital status, medical condition, physical or mental disability, U.S. military and veteran status, pregnancy, childbirth and related medical conditions, political affiliation, genetic information, reproductive health decision making, and other characteristics that make our doctoral interns unique.

We recognize that power and privilege is inherent across interactions, including social and clinical relationships. As a standard of best practice, we welcome and encourage discussions that center around power and privilege and hold that interns and staff be invested in self-reflective practice to examine their own values, beliefs, behaviors, assumptions, and biases as they relate to cultural and individual differences. We see this as an essential step toward developing cultural competency and humility while facilitating professional and personal development.

Fundamental to the WYS organizational principles of embracing diversity, equity, and inclusion (DEI), our doctoral internship takes steps to ensure exposure, appreciation, and respect of cultural and individual differences as it pertains to the practice of psychology. Attention to diversity is emphasized across training activities, supervision, case conferences, and in clinical services provided. Interns have opportunities to participate in agency-wide DEI activities, such as bi-weekly/monthly DEI discussion spaces within their assigned clinic regions, all agency trainings, and agency committees (e.g., DEI Committee and LGBTQIA+ Committee). Many previous interns have opted to participate in the beforementioned committees and have expressed appreciation and fulfillment in doing so.

Interns and clinicians at WYS work with underserved and ethnically diverse children, adolescents, and families. Many clients and their families are at risk due to Adverse Childhood Experiences (ACEs), domestic violence, victimization, extreme stress, poverty, and with many children who are also involved in the foster care system. Intern caseloads are built to reflect a balance of diversity in cases to widen exposure to varying social identities (e.g., diagnostic presentation; ethnicity; sexual orientation; gender identity; age; disability; etc). While the ethnic backgrounds of clients vary somewhat from region to region, overall agency percentages are made up predominantly of Asians and Pacific Islanders (6%), Caucasians (20%), African Americans (1%), multiethnic (8%), and Hispanics (63%). Interns are expected to identify and implement the most suitable interventions by considering relevant cultural factors across all activities: case conceptualization of individual clients, the consultation process, peer supervision, psychodiagnostic testing, and case presentations. In addition to clinical activities, interns routinely interact with a highly diverse staff of professionals from a range of diverse identities and mental health disciplines. To contribute to the development of well-rounded culturally competent psychologists these cross-cultural interactions are emphasized as opportunities to consider multicultural perspectives and the richness of diversity of thought.



Aligned with the scholar-practitioner framework, clinical practice is deepened through the participation of monthly multicultural group discussions in which interns research and review scholarly articles that relate to multiculturalism in the field of psychology. Diversity discussions are also infused throughout individual, group, and psychodiagnostic supervision and case presentations. Interns are consistently encouraged to conceptualize their cases with cultural sensitivity; competencies in this area are formally evaluated three times over the training year as part of the Intern Performance Evaluation. Additionally, seminars and in-service trainings provided by staff psychologists and other presenters are expected to routinely weave cultural considerations into the content. Within the internship program, interns evaluate seminars on a weekly basis including evaluation of whether issues of individual and cultural diversity were integrated into the presentation and discussion. Interns also complete anonymous evaluations of supervisors and the overall program twice a year and provide feedback specifically on cultural competence in supervision and program management.



Psychology Training Program Staff

Chief Executive Officer

Lorry Leigh Belhumeur, Ph.D., PSY12974

University of California, Los Angeles, School Psychology Program
CEO/Executive Director, Laguna Hills Administrative Offices

Psychological and Training Interests: Community Mental Health, Navigating the Mental Health System, School and Learning Difficulties, Psychopathology, Role of the Consultant

Director of Training

Shannon K. Wilson, Psy.D., PSY27323

Pepperdine University

Postdoctoral Training at WYS, South Region

Professor at Pepperdine University

Director of Training, Employee Development and Engagement Director, Licensed Psychologist

Psychological and Training Interests: Professional Development and Supervision, Underserved and Marginalized Populations, Psychological Testing, Psychosis, Depressive and Anxiety Disorders, CBT, Behavioral Analysis, ACT, DBT, Trauma, ADHD, Program Evaluation

Assistant Director of Training

Joshua Chen, Psy.D., PSY22632

PGSP-Stanford Psy.D. Consortium, Palo Alto University

Doctoral Internship at The Guidance Center

Postdoctoral Fellowship at WYS, Corporate Office

Doctoral Internship Assistant Director of Training. Licensed Psychologist

Psychological and Training Interests: Trauma-Informed Care, Trauma-Focused Cognitive Behavioral Therapy (TF-CBT), Psychological Testing, Working with Adolescents, Program Development and Evaluation, Professional Development and Supervision

WYS Psychology Staff

Marlene M. Gonzalez, Ph.D., PSY30636

California School of Professional Psychology, Los Angeles

Doctoral Internship at WYS East Region, Santa Ana

Licensed Psychologist and Clinical Supervisor

Psychological and Training Interests: Child and Youth Evidence-Based Practice, Adverse Childhood Experiences, Trauma-Informed Care, Multicultural Psychology and Assessment, Mental Health Disparities, Providing Interdisciplinary Care to Underserved Children, Youth, and Families

Kylie Han Le, Psy.D., PSY28921

University of La Verne, Clinical-Community Psychology Emphasis

Doctoral Internship at WYS West Region, Fountain Valley

Postdoctoral Fellowship at WYS East Region, Santa Ana

Bilingual Licensed Psychologist and Clinical Supervisor, WYS East Region, Santa Ana



Psychology and Training Interests: Cultural and Diversity Considerations, Adaptation of EBP's to Vietnamese Populations, Adolescents, Functional Family Therapy, Incredible Years, Dialectical Behavior Therapy, Mindfulness, Compassion Fatigue

Jolvina Zuniga, Psy.D. PSY32876

American School of Professional Psychology at Argosy University

Doctoral Internship at WYS East Region, Santa Ana

Postdoctoral Fellow, WYS East Region, Santa Ana

Licensed Psychologist and Clinical Supervisor, WYS East Region, Santa Ana

Psychology and Training Interests: Trauma, Functional Family Therapy, Dialectical Behavior Therapy, Adoption and Foster Care, Birth to Five Population

Anne Geleen Gordula, Psy.D. PSY34426

The Chicago School of Professional Psychology

Postdoctoral Fellow at Frontier Health Services and WYS West Region, Fountain Valley

Licensed Psychologist and Clinical Supervisor, WYS West Region, Fountain Valley

Psychology and Training Interests: Attachment-Based Therapy, Trauma, Trauma-Focused Cognitive Behavioral Therapy (TF-CBT), High Risk Behaviors and Non-suicidal Self-Injury, Psychological Testing, Personality Testing (RPAS), Adopted & Foster Care Youth, Forensic Evaluations, Professional Development & Supervision, Eating Disorders, Expressive Art Therapy

David Whitsett, Psy.D., PSY31318

Loyola University Maryland, Clinical Psychology

Licensed Psychologist, WYS West Region, Fountain Valley

Psychological and Training Interests: Childhood Trauma, Abuse and Neglect, Acceptance and Commitment Therapy (ACT), Child Mental Health and Family Functioning in the Context of Chronic Medical Conditions

Elyssa Cacali, Psy.D., PSY31467

Pepperdine University

Internship and Postdoctoral Training at WYS West Region, Fountain Valley

Licensed Psychologist and Clinical Supervisor

Psychological and Training Interests: Underserved Populations, Supervision, Psychological Testing, Depression and Anxiety Disorders, ADHD, Autism, Neurodevelopmental Disorders, Trauma, CBT, EMDR

Appendix

APPIC policy requires that all Doctoral interns be informed of the Due Process and Grievance Procedures both during the application process and at the start of the internship. These policies are included here for your review and will also be reviewed during the interview process as well as during the initial internship orientation. Please call Dr. Shannon Wilson at (949) 855-1556 if you have any questions.

Due Process and Grievance Procedures

Guidelines for Management of Interns:

The Doctoral Internship at Western Youth Services (WYS) is designed for professional and personal growth and development. We understand the developmental nature of the internship process and expect that there may be some challenges and resulting problems that need to be addressed, either through an informal or formal process.

This document provides interns and agency staff with an overview of the evaluation process, due process procedures, procedure for responding to deficiency and problem behaviors, possible interventions, and guidelines for implementation of decisions. We encourage staff, interns, and trainees to discuss and resolve conflicts informally, however, if this cannot occur, this document was created to provide a formal mechanism for the agency and intern to respond to issues of concern.

Intern Unsatisfactory Progress and Behaviors Defined

Unsatisfactory Progress/Behavior

Areas of concern typically fall into one of two areas.

1. Skill deficiency
2. Trainee problem behavior

Problem Behavior(s) include one or more of the following characteristics:

1. The intern does not acknowledge, understand, or address the problem when it is identified
2. The problem is not merely a reflection of a skill deficit that can be rectified by academic or didactic training
3. The quality of services delivered by the intern is sufficiently negatively affected
4. The problem is not restricted to one area of professional functioning
5. A disproportionate amount of attention by training personnel is required
6. The intern's behavior does not change as a function of feedback, remediation efforts, and/or time

Due Process

The due process provides a framework for WYS staff to respond to, act on or dispute concerns and disagreements between doctoral interns and others in the training program. Due process ensures that decisions about interns are not arbitrary or personally based. It requires that the Training Program identify specific procedures which are applied to all unsatisfactory progress or problematic behavior and appeals.

General Guidelines for Due Process

1. During the orientation period, interns will receive in writing WYS' expectations related to professional functioning. The Director of Training (DT) will discuss these expectations in group supervision during both orientation and again a month later
2. The procedures for evaluation, including when and how evaluations will be conducted will be described. Such evaluations will occur at 3, 6 and 12 months
3. The various procedures and actions involved in decision-making regarding the problem behavior or intern concerns will be described
4. WYS will communicate early and often with the intern and, when needed, will communicate with the intern's home program if any suspected difficulties that are significantly interfering with performance are identified
5. The Director of Training will institute, when appropriate, a remediation plan for identified inadequacies, including a time frame for expected remediation and consequences of not rectifying the inadequacies
6. If an intern wants to institute an appeal process, this document describes the steps of how an intern may officially appeal this program's action
7. WYS' due process procedures will ensure that interns have sufficient time (as described in this due process document) to respond to any action taken by the program before the subsequent implementation
8. When evaluating or making decisions about an intern's performance, WYS staff will use input from multiple professional sources
9. The Director of Training will document in writing and provide to all relevant parties, the actions taken by the program and the rationale for all actions

Procedures for Due Process

1. Psychology staff from the clinics will update the Psychology Training Committee (PTC) on intern progress at each committee meeting
 - a. The Director of Training and in-clinic supervisors will initiate a plan of correction/remediation when there has been evidence of poor progress or intern problematic behavior, the steps in step 2 below have been followed, and the behavior has not yet resolved
2. Supervisors will use supervision notes or confirmation email(s) that specify needed follow up (see Intern Supervision Notes below) once concern arises
 - a. Supervision notes are signed by intern and a copy is given to the intern. Confirmation email is read and acknowledged by intern to supervisor if email is used to communicate agreed plan
 - b. If intern problem remains after three or more signed supervision notes/emails, coaching ensues to correct problem, as intern is not demonstrating capacity to change independently
 - c. Supervisor will hold 1-2 Coaching/Counseling sessions to walk intern through desired change
 - i. Intern's agreed upon plan is summarized by supervising psychologist in an email written to the intern with a copy to both the Director of Training and Program Director
 - ii. If behavior remains unchanged after emailed plan, move on to corrective action plan
 - d. Corrective Action Plan (See Corrective Action Plan below)
 - i. Supervising psychologist uses and completes provided form, typically with input of Program Director and Director of Training
 - ii. Seek intern permission to involve school in effective planning

- iii. Initiate and outline corrective plan between Supervising Psychologist and internship Director of Training, and school Director of Training when permitted
 - iv. Ensure time period for correction and clear description of corrected behavior is clear and documented in the tool
 - v. Present and discuss with intern. If needed, make any necessary changes to clarify understanding and obtain intern signature
 - vi. Written/electronic copy provided to Program Director and Director of Training
 - e. Remediation Plan (See Remediation Plan Tool for Interns below)
 - i. Includes home graduate school in the Remediation plan
 - ii. Usually includes increased supervision
 - iii. Always sets a timeframe for needed improvement
 - iv. Usually sets failure to complete the internship as a possible outcome of Remediation plan
 - f. Academic probations (drop box on Remediation plan)
 - i. Due to failure to meet Remediation plan
 - ii. May extend Remediation plan for extenuating circumstances or terminate internship
3. Poor performance on an intern evaluation may trigger Corrective Action Plan or Remediation Plan
 - a. A significant number of low ratings, (poor performance) on the evaluation may trigger a Corrective Action Plan. The threshold for expected competencies is at or above 80 percent of expected competencies for that evaluation period
4. Unethical, violent, or highly disruptive behavior (e.g. stealing, physical attacks, knowingly disregarding client confidentiality) may result in immediate termination of internship.

Grievance Procedures

Guidelines for Intern Grievance with Supervisor, Staff Member, or Training Program

It is expected that relations between the doctoral interns and the supervisors/training staff will be characterized by open communication, mutual respect and courtesy. When relations are conducted in this manner, it is expected that most disputes between interns and faculty members will be quickly resolved. If a trainee experiences a problem with a WYS clinical or support staff member, the intern is encouraged to proceed by taking the actions described below. If a step is not successful, the intern should proceed to the next step. We recognize that, in some situations, the intern may feel uncomfortable about talking directly with a staff member about an issue. If that is the case, the intern is advised to consult with the Director of Training.

Definitions:

“411”: each month, interns have an opportunity to communicate any concerns, confusion, and/or requests regarding the internship program direction to the Psychology Training Committee (PTC). On a rotating basis, one representative from the intern class will present these items to the PTC for immediate problem solving, clarification or resolution, giving interns the opportunity to advocate for their class and practice giving constructive feedback. Some examples include: inconsistent or unclear directions, unclear communication, barriers, etc.

Informal Problem Resolution Process or Needs Presented to PTC “411”

1. Attempt to address and resolve the problem with the individual as soon as possible
2. If addressing the issue with the individual is not successful, or the intern prefers not to first address the issue with the individual, they may consult with the Director of Training. The Director of Training will assist by:
 - a. Serving as a consultant to assist in deciding how best to communicate with the individual, or
 - b. Facilitate a mediation session between the intern and individual, or
 - c. Take the issue to the Program Director, Chief Operating Officer, and/or Training Committee for consultation and problem solving
3. Present request, inconsistency, barrier, and concern through the “411” process to the designated intern for rapid resolution
 - a. Following presentation to the PTC, interns are asked to request a follow up from the Director of Training, directly or through the Training Administrative Assistant, if no email or verbal response is provided in the following week or if the matter has become more challenging
4. If satisfactory resolution is not attained, the trainee may file a formal written grievance

Formal Grievance Process

The Internship Program will use the formal process whenever a dispute is not resolved informally and utilize the following procedures.

1. If the grievance cannot be resolved within 10 days by steps one through three above, the intern will submit a formal written grievance to the Program Director or Director of Training. Depending on the nature of the complaint, the Program Director or Director of Training will review the grievance with the supervising psychologist before the next Psychology Training Committee meeting. The Director of Training will make recommendations for resolving the grievance in consultation with the appropriate individual(s) and/or group, again, depending on the nature of the complaint.
2. Grievances about individual staff or employees will be handled in consultation with the Human Resources Manager. Grievances about the Training Program will be handled in consultation with the Psychology Training Committee. If the Director of Training is the object of the grievance, or is unavailable, the issue should be raised instead with the Chief Operating Officer, who will determine which review group is most appropriate.

3. Grievances about or against staff that are not resolved at the level of the Chief Operating Officer and HR Manager will involve the Director of Training from the home graduate school and will be brought to WYS' CEO for final resolution.
4. Grievances about the Psychology Training Program that have not been resolved by the Director of Training in consultation with the Psychology Training Committee will go to a Panel for final resolution. The Director of Training (or Chief Operating Officer) will convene a review panel consisting of the Director of Training, the Chief Operating Officer, the Human Resource Manager and one staff member of the Intern's choosing. The Director of Training from the home graduate program may be included in the panel. The Review Panel will review all written materials (from the Intern, other party(s), etc.,) and have an opportunity at its discretion to interview the parties or other individuals with relevant information. The Review Panel has final discretion regarding outcome.

Discrimination or Sexual Harassment Procedures

The training program is committed to maintaining an atmosphere conducive to personal and professional development. This requires an environment in which each intern feels safe and respected. All concerns and/or complaints related to discrimination or sexual harassment that involves interns, whether the intern is the alleged victim or perpetrator, will be handled in strict compliance with agency procedures described in the WYS Employee Handbook. The agency's procedures for discrimination and sexual harassment take precedence over the conflict resolution steps above.



Supervision Notes for Doctoral Interns

Intern:

Supervisor:

Date:

High risk client initials or issue discussed	Risks	Method of Assessment	Plan

Concerns:

Directives:

Response to Directives:

Intern Signature

Supervisor Signature

Corrective Action Plan

1. Highlight a positive skill, attribute or recent accomplishment:
2. State the problematic behavior:
3. Explain why the behavior is a problem (for the Agency, for teammates, for management):
4. Explain why the behavior is a problem for the psych intern:
5. Describe the desired behavior. Give specifics:
6. Explain why the desired behavior will be beneficial for all involved (Agency, teammates, AND the psych intern):
7. Define how you want to see the behavior (role play, model, ask them to demonstrate):
8. Describe how the supervisor will support the requested change:
9. Agree on a follow-up date:

Remediation Plan for Doctoral Interns

1. State the <i>problematic behavior, performance, or conduct</i>:
2. Describe the <i>desired behavior</i>. Give specifics:
3. Give <i>specific recommendations</i> for rectifying the problem:
4. Describe the <i>steps</i> the intern/supervisor/Director of Training will take to meet the goal and demonstrate the desired behavior. Check all that apply: <input type="checkbox"/> increased supervision <input type="checkbox"/> change in format, emphasis or focus of supervision <input type="checkbox"/> involve graduate school Director of Training in problem solving <input type="checkbox"/> recommendation/requirement of personal therapy <input type="checkbox"/> reduce workload <input type="checkbox"/> specify coursework to complete <input type="checkbox"/> recommend leave until <input type="checkbox"/> recommend second internship after resolving current performance problem
5. Specify emphasis of supervision, additional course work or training, recommendation of graduate program, workload reduction, here
6. Define procedures for measuring success or failure of effort:
7. Describe how the <i>supervisor will support</i> the required change:
8. Time frame for successful resolution or probation status decision:

Date:

Intern Signature

Supervisor Signature

Director of Training Signature

Outcome (select one):

- No improvement in performance
 Incomplete improvement in performance
 Complete improvement in performance

Recommendation (select one):

- Remove from internship
 Place on probation
 Return to routine intern status

Date:

Intern Signature

Supervisor Signature

Director of Training Signature