



***APA-Accredited
Doctoral Internship
Program***

07/31/2026

Table of Contents

<i>Doctoral Internship Program</i>	<i>4</i>
<i>Agency Description.....</i>	<i>4</i>
Out-Patient Clinic Staffing	5
Our Mission	5
Our Vision.....	6
Our Values.....	6
<i>Doctoral Internship Mission</i>	<i>6</i>
<i>Training Team and Intern Locations.....</i>	<i>6</i>
<i>Intern Expectations and Services Provided</i>	<i>7</i>
<i>Supervision.....</i>	<i>9</i>
<i>Seminars</i>	<i>9</i>
<i>Multi-Disciplinary Teams</i>	<i>9</i>
<i>Training Model.....</i>	<i>9</i>
EBT Training.....	10
Planned Programmed Sequence of Training.....	12
Training Purpose and Aims	13
<i>Professional Expectations and Goals.....</i>	<i>13</i>
Research.....	13
Ethical and Legal Standards	14
Individual and Cultural Diversity.....	14
Professional Values, Attitudes, and Behaviors	15
Communication and Interpersonal Skills.....	15
Assessment.....	15
Intervention	15
Consultation and Inter-Professional/Interdisciplinary Skills.....	16
<i>Doctoral Intern Evaluation Plan</i>	<i>16</i>
Core Professional Competencies.....	17
<i>Communication with Interns' Home Graduate Programs.....</i>	<i>18</i>
<i>Intern Title, Matched Applicant Universities, Post-Intern Direction.....</i>	<i>19</i>

<i>APA Accreditation</i>	<i>19</i>
<i>Intern Resources.....</i>	<i>20</i>
<i>Salary and Benefits.....</i>	<i>20</i>
<i>Intern Selection</i>	<i>21</i>
<i>Application Procedures.....</i>	<i>22</i>
<i>Internship Admissions, Support, and Initial Placement Data</i>	<i>23</i>
Program Disclosures.....	23
Program Admissions	24
Financial and Other Benefit Support for Upcoming Training Year*	25
Initial Post-Internship Positions	26
<i>Commitment to Diversity, Equity, and Inclusion (DEI)</i>	<i>27</i>
Internship Program Diversity Principles and Practices	28
<i>Discrimination or Sexual Harassment Procedures.....</i>	<i>29</i>
<i>Psychology Training Program Staff</i>	<i>30</i>
<i>Appendix.....</i>	<i>34</i>
Due Process and Grievance Procedures	34
Supervision Tool for Doctoral Interns	38
Corrective Action Plan for Doctoral Interns	39
Remediation Plan for Doctoral Interns.....	40



Doctoral Internship Program

Western Youth Services (WYS) is pleased to offer a one-year, full-time Doctoral Internship that is a member of the Association of Psychology Postdoctoral and Internship Centers (APPIC) and is accredited by the American Psychological Association (APA). The 2027-2028 training year begins on the third Monday of August (08/16/27) and ends on the second Friday of August (08/11/28) the following year.

The WYS model is that of a scholar-practitioner and emphasis is placed on learning evidence-based treatment modalities that are effective with low resource, high risk, underserved, and ethnically diverse families who may have experienced trauma, abuse, neglect, domestic violence, and other life challenges. WYS serves an ever-increasing number of families at risk due to Adverse Childhood Experiences (ACEs), domestic violence, victimization, extreme stress, and poverty. In addition, services are provided to children in the foster care system who have often experienced abuse, neglect, and loss and are now faced with the challenges of coping with extremely difficult life adjustments.

Agency Description

Western Youth Services is a private, non-profit human service agency with over 50 years of service to the communities of Orange County, California. WYS provides comprehensive mental health services to children, adolescents, and families at strategically located out-patient clinics throughout the county. WYS serves over 5,000 clients per year in the out-patient clinics and over 35,000 children per year through community-based programs. Doctoral Interns are placed exclusively within the (Medi-Cal) out-patient clinics. Services are provided for children and adolescents with moderate to severe impairment(s) as a result of a mental health diagnosis, trauma, involvement in the foster care or juvenile justice system, and/or experiencing or at risk of being unhoused.

While the backgrounds of WYS clients vary, overall agency percentages include:

American Indian or Alaska Native	0.2%
Asian	4.9%
Black or African American	2.7%
Hispanic or Latino	75.7%
Middle Eastern/North African	1.1%
Native Hawaiian or Other Pacific Islander	0.1%
Other	0.6%
White	13.2%
Declined to State/Unknown	1.5%



Out-Patient Clinic Staffing

Out-patient clinics are 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 (i.e., psychiatrists/NPs, psychologists, social workers, marriage and family therapists, mental health workers, etc.) and offers a high level of expertise to its clients. Many of our clinicians are bilingual and able to offer services in clients' primary languages. WYS is well respected within and outside of the community and has built a reputation for excellent service and adherence to ethical standards and guidelines.

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 specializes in working with youth and families, we help the community cut through the stigma preventing at-risk children 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 and 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

The WYS Doctoral Internship Program seeks to build current and future expertise in child and adolescent 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. Interns develop substantial cultural sensitivity and come to effectively treat a diverse population of children and their families.

Training Team and Intern Locations

WYS has a diverse group of licensed psychologists who supervise and participate in one or more aspects of the training program in addition to postdoctoral fellows who serve as mentors for interns. Currently, all members of the psychology team have completed either their internship or post-doctoral fellowship at WYS and have remained within the agency. Post-doctoral fellows have just successfully completed their internship at WYS. This staffing allows great benefits to Doctoral Interns, as the team understands the unique demands of internship and offers an incredibly supportive and encouraging environment.

Doctoral Interns are placed within four different out-patient clinics that vary in location across Orange County, with two interns in each of the following locations: Anaheim, Huntington Beach, or one of two clinics in Santa Ana. Interns are required to have transportation during their work hours, as seminars rotate between clinics and the Corporate office. Interns may also

occasionally travel between clinics to conduct psychological testing. All clinics provide the same services, with minor differences in client demographics and clinic needs. The program strives to provide the same experience for all interns, regardless of clinic location.

Intern Expectations and Services Provided

- Carry a client caseload of approximately 12 to 20 clients
 - Varies and is dependent on a number of factors (i.e., client acuity, clinic needs, show rate, intern ability and area of expertise, etc.)
 - Interns typically conduct 12-15 client sessions per week
- Spend a minimum of 25% of time engaging in direct client contact, with approx. 50% of the time spent engaging in activities that directly benefit clients (e.g., providing individual, family, and group therapy, psychological testing, assessment, case management, consultation, etc.)
- Bill a minimum of 52 client service hours per month (i.e., providing therapy, assessment/testing, case management, etc.)
- Complete a minimum of six assessment batteries and accompanying reports which may be psycho-diagnostic, psycho-educational, or developmental in nature
- 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 seminars (usually 2 hours/week) and other WYS trainings (e.g., PCIT, FFT, TF-CBT, DBT, etc.)
 - Evidence-based seminar trainings include (but are not limited to): Acceptance and Commitment Therapy (ACT), Exposure with Response Prevention (ERP), Motivational Interviewing (MI), Cognitive Behavioral Treatment of Psychosis (CBTp), Program for the Education and Enrichment of Relational Skills (PEERS), etc.
- Lead multicultural group discussions within the intern cohort on topics related to client care and cultural sensitivity and humility
- Facilitate Quality Improvement Committee (QIC) meetings
 - Opportunity for clinicians to present challenging and complex cases to doctoral interns in order to receive assistance and support
- In accordance with County requirements, all WYS Staff, including Doctoral Interns, are required to utilize DMH documentation standards (e.g., Cal-AIM)
 - Requires interns to have strong organizational and time-management skills, as well as the ability to quickly incorporate feedback. These skills are extremely helpful in learning clinical oversight, appropriate treatment planning, tracking of progress, and reflective practice
- Evidence based care including option(s) for advanced training in Parent Child Interaction Therapy (PCIT) or Functional Family Therapy (FFT), Trauma Focused Cognitive Behavioral Therapy (TF-CBT), and Dialectical Behavioral Therapy (DBT) skills
- Consultation and case management with teachers, social workers, and other mental health care professionals
- Crisis intervention

- Support/psycho-educational groups with opportunities to lead/co-lead groups in areas of interest
- Case management and linkage to services within the community
- Psychiatric services with intern participation in psychiatry consultation
- Provision of consultation with other interns, clinicians, and practicum students
- Supervision of master's level clinicians/practicum students from a variety of backgrounds (i.e., MFT, MSW, etc.)
- As a cohort, complete a research project including conducting a literature review relevant to the research question and present findings



Supervision

A minimum of four hours of weekly supervision is provided to interns. Two of those hours will be individual supervision, with primary and secondary licensed psychologists. Interns also participate in two hours of weekly group supervision, with their Doctoral Intern cohort. Additional individual and group supervision may be provided in order to expand training and permit greater exposure to working within a multidisciplinary team. Weekly or biweekly psychological testing supervision is also provided.

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

Seminars

WYS offers weekly didactic 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. Some 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, mental health workers, and psychiatrists. All clinics have access to therapeutic behavioral coaches and parent partners to develop and practice skills with clients and/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 continuously 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. While interns are required to complete a research project as a cohort, interns primarily integrate research into their clinical practice through ongoing scholarly/research

activities, such as literature review, critical thinking, and the appropriate application of learning. Interns do not typically have time to complete any additional independent research projects.

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.

EBT Training

All interns will choose an EBT training track to focus on during the internship year: Functional Family Therapy (FFT) or Parent Child Interaction Therapy (PCIT). While the opportunity to become certified through PCIT International and FFT LLC is available, this is not a program requirement. Numerous factors affect the ability to become certified. While participation in the training is a requirement, certification can be considered a personal decision on the part of the intern. In addition to the preferred training track, all interns will also receive training in Trauma-Focused Cognitive Behavioral Therapy (TF-CBT) and Dialectical Behavior Therapy skills (DBT skills).

- ***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. FFT is a strength-based model. 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 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.
- ***Dialectical Behavior Therapy (DBT).*** DBT skills training is provided and adapted to better fit WYS' population. In addition, DBT skills groups (optional) meet once per week (length of group determined by facilitator). Group members learn more in depth skills based on the four modules of DBT: Core Mindfulness, Interpersonal Effectiveness, Emotion Regulation, and Distress Tolerance; Walking the Middle path is also included for children and teens.

Training in EBTs will be provided during weekly seminars and other staff training days. Supervised experience in these EBTs may be available in your region. While Doctoral Interns are encouraged to prioritize gaining in depth competence in FFT or PCIT and TF-CBT/DBT Skills as part of their internship training, interns will also receive training in and implement other EBTs*. For example:

- ***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).*** MI 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).

- ***Incredible Years (IY®).*** IY is an evidence based parenting program focusing on strengthening parenting competencies and fostering parent involvement 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). Groups typically meet for 10 to 12 weeks.
- ***Cognitive Behavioral Therapy for Psychosis (CBTp).*** CBTp is an evidence-based treatment and specialized form of cognitive behavioral therapy designed to treat individuals experiencing symptoms of psychosis, such as hallucinations and delusions. CBTp aims to help individuals understand and manage their psychotic symptoms, reduce the impact of symptoms on their daily lives, improve their coping skills and overall well-being, and prevent future psychotic episodes.
- ***Treatment of OCD and Exposure with Response Prevention (ERP).*** ERP is a type of cognitive behavioral therapy specifically designed to treat OCD. ERP involves gradually exposing individuals to situations, objects, or thoughts that trigger their obsessions while simultaneously preventing them from engaging in their usual compulsive behaviors. This process helps individuals learn to tolerate the anxiety associated with their obsessions without resorting to compulsions, ultimately breaking the cycle of OCD.
- ***Program for the Education and Enrichment of Relational Skills (PEERS®).*** PEERS is an evidence-based social skills training program for adolescents and young adults with social challenges. It was originally developed at UCLA and is designed to help individuals make and keep friends and develop romantic relationships. PEERS is appropriate for individuals with ASD, ADHD, anxiety, depression, and other socioemotional difficulties. The program involves both teen or young adult groups and concurrent parent or caregiver groups

****note that seminar training is subject to availability of trainers and expertise of psychology staff and may be modified during the training year***

Planned Programmed Sequence of Training

Interns begin the year with orientation in which they are introduced to the agency and programs, trained to work within WYS’ electronic health record system, and taught adherence to Medi-Cal (Cal-AIM) documentation requirements. Interns will engage in client assessment, case formulation, diagnosing, creating treatment plans, and how to follow the APA Ethics Code and begin to use a number of evidence-based treatment models. Once interns become more comfortable working within the Medi-Cal system, they are encouraged to engage in both familiar and less familiar treatment modalities and assessment. Seminars are initially highly didactic and pragmatic but move toward more group discussions as the year progresses. Generally, supervision is initially more specific and instructive, but moves toward more



collaborative and joint processing. Common issues such as barriers to treatment, issues in therapeutic alliance, and burn-out/feeling overwhelmed can be collaboratively explored and addressed.

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).

WYS' Doctoral Internship program is designed to provide more structure at the beginning of the year, and for interns to play an increasingly independent role toward the end of the year. Throughout the year, Doctoral 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. They will also be exposed to neuropsychological testing and know how to better 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 increased competency in this area.

We fully anticipate that interns graduating from the program will be prepared to function as entry-level child and adolescent psychologists. Many of our graduates go on to post-doctoral fellowships to further specialize in a particular area (e.g. trauma, autism, pediatrics, neuropsychology, etc.), while others accept psychology positions within community mental health agencies and hospitals or become private practitioners and/or graduate school instructors.

Satisfactory completion of the Doctoral Internship at WYS 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, and sick time in order to meet this number of hours. Interns can anticipate that their weekly responsibilities will be 40 hours per week.

Professional Expectations and Goals

Research

- Seek out research on, and apply cultural adaptations used with, EBTs 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
- Participate in creating a group research project, including conducting a literature review, and present findings within the organization

Ethical and Legal Standards

- Demonstrate good judgment when faced with ethical decisions; know when to seek information and/or consultation to behave consistently with APA ethical principles and California laws and regulations
- Know and follow specific and appropriate procedures for assessing danger to self or others, managing aggressive clients, and reporting child, elder, and dependent adult abuse
- Accurately assess ACES 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 an intern's own background and diversity membership negatively impacts 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 that 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
- Demonstrate ability to repair ruptures and/or conflicts in an effective and timely manner
- Effectively communicate barriers to learning or performance and demonstrate openness to feedback

Assessment

- Select, administer, and score batteries of age-appropriate tests and assist in differential diagnosis using the DSM-5-TR 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

- Demonstrate accurate clinical case formulation and integration into treatment plans
- Document effective treatment in a manner compliant with clinic requirements in a timely fashion

Supervision

- Ability to identify and provide feedback regarding barriers to accurate and helpful clinical observations, motivation, creativity, and implementation of known interventions

Consultation and Inter-Professional/Interdisciplinary Skills

- Demonstrate the additional value a psychologist contributes through strong consultation skills and expertise
- Respectfully maximize the potential of the consultee by understanding their level of education, training, and experience

Doctoral Intern Evaluation Plan

Doctoral interns are evaluated across 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. Each PWC contains one or more specific goals that interns are required to meet. Doctoral interns must receive an evaluation rating of three or higher on the final evaluation in each overall PWC and in each specific goal in order to complete and graduate from the Internship Program. The list below identifies which goals 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 Supervision Tool and Corrective Action Plan in the **Appendix** are 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.

Each intern must reach at least a 3 in each area by the end of the internship year. Skills must be solidly displayed in a broad range of normal or typical situations but may not yet be fully demonstrated with a wider range of diverse clients. Interns must be able to generalize skills and

knowledge to new situations and have the ability to self-assess when to seek additional training, supervision, or consultation.

Interns evaluate their supervisors and the training program twice annually. 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. Interns are encouraged to share their written feedback in supervision.

Core Professional Competencies

1. Research
 - a. Science Mindedness
 - b. Scientific Foundations of Professional Practice
 - c. Scientific Approach to Knowledge Generation
2. Ethical and legal standards
 - a. Knowledge and Application of Ethical, Legal, and Professional Standards and Guidelines
 - b. Ethical Conduct
3. Individual and cultural diversity
 - a. Interactions of Self and Others as Shaped by Individual and Cultural Diversity
 - b. Applications Based on Individual and Cultural Context
 - c. Empowerment
4. Professional values and attitudes
 - a. Integrity
 - b. Deportment
 - c. Accountability
 - d. Concern for the Welfare of Others
 - e. Professional Identity
 - f. Reflective Practice
 - g. Self-Assessment
 - h. Self-Care
 - i. Roles, Processes, & Procedures
 - j. Administration
5. Communication and interpersonal skills
 - a. Interpersonal Relationships
 - b. Affective Skills
 - c. Expressive Skills
6. Assessment
 - a. Diagnosis and Conceptualization
 - b. Evaluation Methods
 - c. Measurement and Psychometrics
 - d. Application of Methods
 - e. Communication of Findings

7. Intervention
 - a. Knowledge of Interventions
 - b. Intervention Planning
 - c. Skills and Implementation
 - d. Application of Scientific Method of Practice
8. Supervision
 - a. Providing Supervision
 - b. Awareness of Factors Affecting Quality
9. Consultation and Inter-professional/Interdisciplinary skills
 - a. Addressing Consultation Needs & Communicating Findings
 - b. Knowledge of the Shared & Distinctive Contributions of Other Professions
 - c. Interdisciplinary Collaboration

Communication with Interns' Home Graduate Programs

A summary letter, along with a copy of the intern's evaluation, is sent to the intern's graduate program Training Director at the mid and end-of-year points. Please note that WYS does not complete graduate 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, Matched Applicant Universities, Post-Intern Direction

WYS Doctoral Interns are all given the title of Doctoral Intern. Prior interns have come from APA-accredited graduate programs including:

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

Many interns opt to stay at Western Youth Services for post-doctoral fellowships. Others have gone on to fellowships in Child and Adolescent Psychology, hospital or community settings, private practice, or teaching within professional schools. WYS currently has eight full-time Doctoral Interns and three post-doctoral fellows.

APA Accreditation

WYS' Doctoral Internship Program is APA-accredited (since 2010) 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)

Intern Resources

All interns have their own offices, computers, printers, phone extensions, and e-mail addresses. 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 additional cameras are available in order to provide for additional supervision and consultation.

Administrative assistants are employed in all clinics. 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 intern program will collect and monitor weekly 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.

Intern records are kept for an indefinite amount of time and kept on-site at WYS in a locked and secure location for 10 years. After 10 years, intern records are maintained in an off-site secure location. Many records are also stored electronically.

Western Youth Services is located in Southern California, between San Diego and Los Angeles counties. 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 year-round. 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>.

Salary and Benefits

- The current (2026-2027) salary is \$48,672.00 per year for monolingual interns and \$51,105.60 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 up to a total of 79.92 hours or 9.99 days
- Education leave for dissertation or other educationally related activities include 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)
- Medical, dental, and vision insurance available along with EAP



WYS' 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, etc.). 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.

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 and 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 475 hours of supervised clinical treatment experience (400 intervention hours, 75 assessment hours)
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 some psychological testing prior to internship
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 Procedures

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. 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 WYS and the intern program along with training interests, as well as an applicant's experience, insight, training, and writing ability. Strong applicants will be invited in December for interviews that occur online in January.

After completion of interviews, applicants' materials and interview responses are reviewed in order to rank 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 out-patient clinic. Applicants who are unlikely to pass this evaluation should refrain from applying.

Questions

For programmatic questions:

Director of Training, Dr. Shannon K. Wilson: shannon.wilson@westernyouthservices.org

Assistant Director of Training, Dr. Joshua Chen: joshua.chen@westernyouthservices.org

Administrative Specialist, Zack Allen: zack.allen@westernyouthservices.org

Internship Admissions, Support, and Initial Placement Data
(Date Program Tables updated 07/17/2026)

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.	☐ Yes ☒ 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:

Western Youth Services (WYS) is a child and family community mental health agency serving the needs of vulnerable children in Orange County, California. Interns provide and are trained in evidence-based family therapy, evidence-based child therapy, trauma therapy, psychological testing, and consultation with treatment team members (i.e., social services staff, school personnel, psychiatrists, etc.). WYS anticipates having nine licensed psychologists who all participate in one or more aspects of the training program (e.g. teaching, supervision) and 3-4 postdoctoral fellows who will serve as mentors for interns. Interns are placed in one of four out-patient clinics (2 interns per clinic) located in Anaheim, Huntington Beach, or Santa Ana (2 clinics). Interns are required to have transportation during work hours as seminars and group supervision alternate locations, and interns may occasionally travel between clinics to conduct psychological testing. All clinics provide opportunities for evidence-based trainings that include, but are not limited to, Parent-Child Interaction Therapy (PCIT), Functional Family Therapy (FFT), Trauma Focused CBT (TF-CBT), and Dialectical Behavior Therapy (DBT) skills.

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	\$48,672.00 (for monolingual speaking interns) or \$51,105.60 (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?	<u>Yes</u>	No
If access to medical insurance is provided:		
Trainee contribution to cost required?	<u>Yes</u>	No
Coverage of family member(s) available?	<u>Yes</u>	No
Coverage of legally married partner available?	<u>Yes</u>	No
Coverage of domestic partner available?	Yes	<u>No</u>
Hours of Annual Paid Personal Time Off (PTO and/or Vacation)	Up to 90**	
Hours of Annual Paid Sick Leave	Up to 79.2**	
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?	<u>Yes</u>	No
Other Benefits (please describe): 14 paid holidays (2 floating), employee assistance program, 403(b) retirement plan, vision, dental, up to 24 hours of education leave, educationally-related activities, or fellowship application activities *Note that programs are not required by the Commission on Accreditation to provide all benefits listed in this table **The eligibility to accrue vacation hours occurs on the first day of the month immediately following the start of internship. 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 follows ninety (90) days of the internship year. Sick leave is accrued at 3.33 hours per pay period, up to 79.92 hours or 9.99 days.		

Initial Post-Internship Positions

(Provide an Aggregated Tally for the Preceding 3 Cohorts)

Years	2022-2025	
Total # of interns who were in the 3 cohorts	20	
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	6
Consortium	0	0
University Counseling Center	0	0
Hospital/Medical Center	5	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	1
Independent practice setting	1	1
Other	2*	0
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 2 interns from preceding 3 cohorts are unknown and listed as "Other"		



Commitment to Diversity, Equity, and Inclusion (DEI)

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 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 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, LGBTQIA+ Committee, etc.). 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 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.). Doctoral Interns are expected to identify and implement the most suitable interventions by considering relevant cultural factors across all activities including, but not limited to: 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 over the training year as part of intern performance evaluations. 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 per year and provide feedback specifically on cultural competence in supervision and program management.

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, perpetrator, or witness, 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.



Psychology Training Program Staff

Chief Executive Officer, Licensed Clinical Psychologist

Lorry Leigh Belhumeur, Ph.D.

University of California, Los Angeles

CEO/Executive Director, Licensed Psychologist

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

Director of Training, Licensed Clinical Psychologist

Shannon K. Wilson, Psy.D.

Pepperdine University

Postdoctoral Training, WYS

Graduate Professor, Pepperdine University

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

Assistant Director of Training, Licensed Clinical Psychologist

Joshua Chen, Psy.D.

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

Doctoral Internship, The Guidance Center

Postdoctoral Fellowship, WYS

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

Senior Licensed Clinical Psychologist, DEI Program Manager

Marlene M. Gonzalez, Ph.D.

California School of Professional Psychology, Los Angeles

Doctoral Internship, WYS

Post-Doctoral Fellowship, CHLA

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



Licensed Clinical Psychologists, Clinical Supervisors

Jolvina Zuniga, Psy.D.

American School of Professional Psychology, Argosy University

Doctoral Internship, WYS

Postdoctoral Fellowship, WYS

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

Kylie Han Le, Psy.D.

University of La Verne, Clinical-Community Psychology Emphasis

Doctoral Internship, WYS

Postdoctoral Fellowship, WYS

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

Nicole Tibbits, Psy.D.

Midwestern University

Doctoral Internship, WYS

Postdoctoral Fellowship, WYS

Psychology and Training Interests: Child and Youth Evidence-Based Practice, Trauma-Informed Care, Early Childhood Development, Autism Spectrum Disorder, Attention Deficit Hyperactivity Disorder, Parent Training, Providing Interdisciplinary Care to Underserved Children, Youth, and Families

David Whitsett, Psy.D.

Loyola University

Post-Doctoral Fellowship, WYS

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

Elyssa Cacali, Psy.D.

Pepperdine University

Doctoral Internship, WYS

Postdoctoral Fellowship, WYS

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



Alyssa Byerly, Psy.D.

The Chicago School of Professional Psychology

Doctoral Internship, WYS

Postdoctoral Fellowship, WYS

Psychology and Training Interests: Child and Youth Evidence-Based Practice, Parent-Child Interaction Therapy (PCIT), TF-CBT, Client-Centered Play Therapy, Projective Personality Measures, Schizophrenia Spectrum Disorders, Neurodevelopmental Psychological Testing

Marit Murry, Ph.D.

Suffolk University

Doctoral Internship, WYS

Postdoctoral Fellowship, WYS

Psychology and Training Interests: DBT, trauma-informed care, TF-CBT, delivering high-quality, evidence-based care to youth with complex psychopathology as well as acute and high-risk needs, particularly those from lower-resourced and diverse backgrounds

Allie DeSousa, Psy.D.

Chicago School of Professional Psychology

Doctoral Internship, WYS

Postdoctoral Fellowship, WYS

Psychology and Training Interests: Psychological testing with an emphasis on neurodevelopmental assessment, passion for underserved clients, play therapy with complex trauma

Christina Amiot, Psy.D.

Chicago School of Professional Psychology

Doctoral Internship, WYS

Postdoctoral Fellowship, WYS

Psychology and Training Interests: PCIT and TF-CBT with a strong passion for working with “littles” and teens, psychological testing

Psychologists (Working Toward Licensure)

Nicole Dietrich, Psy.D.

University of Indianapolis

Doctoral Internship, WYS

Postdoctoral Fellowship, WYS

Psychology and Training Interests: Child and Youth Evidence-Based Practice, PCIT, TF-CBT, Neurodevelopmental Psychological Testing, Child-Centered Play Therapy, Parent Training, Behavioral Interventions for Externalizing Behaviors, Early Childhood Development, Interdisciplinary Care Coordination



Cameron Walker, PsyD

The Chicago School of Professional Psychology

Doctoral Internship, WYS

Postdoctoral Fellowship, WYS

Psychology and Training Interests: Child and Youth Evidence-Based Practice, Trauma-Informed Care, TF-CBT, FFT, Juvenile Justice, Neurodevelopmental Psychological Testing, Schizophrenia Spectrum Disorders and Personality (Objective/Projective) Testing, Bilingual in Spanish for Therapy and Psychological Testing

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 initial internship orientation. Questions may be directed to the Director or Assistance Director of Training.

Due Process and Grievance Procedures

Guidelines for Management of Interns

The Doctoral Internship at 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 unsatisfactory progress and problematic 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 Problematic Behaviors Defined

Areas of concern typically fall into one of two areas:

1. Skill deficiency or not meeting program requirements
2. Trainee problematic behavior

Problematic 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. A disproportionate amount of attention by training personnel is required
5. The intern's behavior does not change as a function of feedback, remediation efforts, and/or time

Due Process Procedures

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 will discuss these expectations during orientation. A member of the PTC will also review these expectations 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 problematic behavior(s) or intern concerns are outlined and described.
4. WYS will communicate early and often with the intern and, when needed, will communicate with the intern's school 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. Regional psychology staff will update the PTC on intern progress at each committee meeting.
 - a. When there has been evidence of intern unsatisfactory progress or problematic behavior, the in-region supervisors will initiate a plan of correction/remediation, in collaboration with the Director of Training.
2. Supervisors will use the Supervision Tool when concerns initially arise regarding intern unsatisfactory progress or problematic behavior (see Supervision Tool below). The Supervision Tool should identify the area of concern, the requested change, the ways that the supervisor or program will assist the intern with the requested change, and a follow-up date.
 - a. The Supervision Tool is signed by both the intern and supervisor and a copy is given to the intern.
 - b. Supervisor will hold 1-2 coaching sessions to walk intern through desired change. These sessions may be held as part of individual supervision or scheduled separately as needed.
 - c. On the follow-up date, the supervising psychologist will meet with the intern to review progress toward desired change. If behavior remains unchanged, a Corrective Action Plan will be created.
 - i. The intern's agreed upon plan and progress are summarized by the supervising psychologist in an email written to the intern with a copy to both the Director of Training and Program Director.
3. Corrective Action Plan (See Corrective Action Plan below)
 - a. Supervising psychologist uses and completes the provided form, typically with input of the Program Director and Director of Training
 - i. The Director of Training may involve the intern's school Director of Training to facilitate effective planning.
 - ii. A copy of the Corrective Action Plan is provided to the intern, Director of Training, and Program Director.
 - b. Initiate and outline corrective plan between supervising psychologist and internship Director of Training, and school Director of Training (if applicable)
 - i. Ensure time period for correction and clear description of corrected behavior is clear and documented in the tool.

- ii. Present and discuss with intern. If needed, make any necessary changes to clarify understanding and obtain intern signature.
 - c. On follow-up date, the supervising psychologist will meet with the intern to review progress toward correcting unsatisfactory progress or problematic behavior. If sufficient progress is not made, move on to a Remediation Plan.
4. Remediation Plan (See Remediation Plan Tool for Interns below)
 - a. Remediation Plan usually sets failure to complete the internship as a possible outcome
 - i. Usually includes increased supervision.
 - ii. Always sets a timeframe for needed improvement.
 - b. Director of Training contacts intern's graduate school and provides a copy of the Remediation Plan.
 - c. 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.
5. Poor performance on an intern evaluation may trigger Corrective Action Plan or Remediation Plan
 - a. Low ratings (poor performance) on the evaluation may directly trigger a Corrective Action Plan if an intern does not meet an expected competency for the evaluation period.
6. Unethical, violent, or highly disruptive behavior (e.g. stealing, physical attacks, knowingly disregarding client confidentiality, etc.) may result in immediate termination of internship.
7. Appeals Process
 - a. An intern that wishes to appeal the program's actions must notify the Director of Training via email within 3 business days with a written statement regarding the appeal. The Director of Training will meet with the intern to discuss the appeal to try and reach a resolution. If a resolution is not attained, the intern should follow the Formal Grievance process.

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 will be quickly resolved. If an intern 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.

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 PTC for consultation and problem solving.
3. Present request, inconsistency, barrier, or 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 using the informal resolution or “411” process, the trainee may file a formal written grievance.

Formal Grievance Process

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

1. If the grievance cannot be resolved within 10 business days utilizing the informal resolution or “411” process, the intern will submit a formal written grievance to their 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 PTC 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 PTC. 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 PTC will go to a Review 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 panel will review all written materials 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.

Supervision Tool for Doctoral Interns

Intern:

Supervisor:

Date:

1. State the area of concern:
2. Describe the desired change. Give specifics, including timeline:
3. Describe how the supervisor will support the requested change:
4. Follow-up date:

Intern Signature

Supervisor Signature

Corrective Action Plan for Doctoral Interns

Intern:

Supervisor:

Date:

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 intern:
5. Describe the desired behavior. Give specifics:
6. Explain why the desired behavior will be beneficial for all involved (Agency, teammates, and the intern):
7. Define how you want to see the behavior (i.e., role play, model, ask them to demonstrate, etc.):
8. Describe how the supervisor will support the requested change:
9. Agree on a follow-up date:

Intern Signature

Supervisor Signature

Remediation Plan for Doctoral Interns

Intern:

Supervisor:

Date:

1. State the problematic behavior, performance, or conduct:
2. Describe the desired behavior. Give specifics:
3. Give specific recommendations for rectifying the problem:
4. Describe the steps the intern/supervisor/Director of Training will take to meet the goal(s) and demonstrate the desired behavior (check all that apply):
☐ Increased supervision
☐ Change in format, emphasis, or focus of supervision
☐ Involve graduate school Director of Training in problem solving
☐ Recommendation/requirement of personal therapy
☐ Reduce workload
☐ Specify coursework to complete
☐ Recommend leave until
☐ Recommend second internship after resolving current performance problem
☐ Other (please describe)
5. Specify emphasis of supervision, additional course work or training, recommendation of graduate program, or workload reduction:
6. Define procedures for measuring success or failure of effort:
7. Describe how the supervisor will support 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