

# DOCTORAL INTERNSHIP TRAINING PROGRAM IN HEALTH SERVICE PSYCHOLOGY







# 2023-2024

# About Didi Hirsch Mental Health Services

Since 1942, Didi Hirsch Mental Health Services has served Southern California residents by providing quality mental health and substance abuse services. As the first non-profit mental health outpatient clinic in Los Angeles, Didi Hirsch was initially founded to help adults cope with the aftermath of the Great Depression. Over the years, the agency has evolved in response to the needs of our increasingly complex community. Today, Didi Hirsch primarily serves a diverse population of adults and older adults living with chronic, severe mental illness, as well as children with serious emotional disturbance and their families.

With 10 clinical sites and nearly 100 affiliated schools, Didi Hirsch serves more than 90,000 clients annually throughout Southern California – from Pacoima to South Los Angeles, Downtown LA to Santa Ana, and many points in between. Services are offered across seven Divisions – Adult Services, Child and Family Services, Residential Services, Substance Use Services, Suicide Prevention, Research and Evaluation, and Training – providing a continuum of prevention, early intervention, and treatment services for individuals, families, and the community. These services include a nationally recognized 24-hour Suicide Prevention Hotline; outpatient mental health services for children, families, and adults; time-limited crisis counseling; field-based intensive mental health services for children, transition-aged youth and adults; school-based mental health and substance use prevention services; case management; employment services; Wellness Centers; an integrated healthcare clinic; crisis residential care; and residential care for women struggling with substance use while raising their children.

Didi Hirsch also continually endeavors to reduce the stigma attached to mental illness, and to provide hope and support to the many individuals and families whose lives are affected by mental illness.

# About the Doctoral Internship Training Program

The training of professionals in psychology and other disciplines has been an integral part of Didi Hirsch since its inception. The agency's Doctoral Internship Training Program has been accredited by the American Psychological Association since 1956, making it the oldest accredited program in California and one of the oldest in the nation. At the program's most recent re-accreditation Site Visit in 2016, the site visitors noted that the program "promotes the integration of practice and scholarly inquiry" and that its "focused, comprehensive, and continuous efforts to make diversity competence its core educational product for staff and students is a strength." Past interns interviewed by site visitors attributed much of their success to their internship training, and expressed appreciation at having received not only didactic instruction across a range of competency domains, but also applied experiences that brought learned concepts to life in meaningful, growth-promoting ways.

**IMPORTANT NOTE:** Per recommendations from the Association of Psychology Postdoctoral and Internship Centers (APPIC), we have updated our Program Brochure to reflect potential changes to our training program in response to COVID-19 (and other local/state/national emergencies) and Safer at Home Guidelines issued by the Governor of the State of California. Acknowledging that pandemic containment and State/Federal responses are ongoing and fluid, our agency and Internship Program remain dedicated to emphasizing 4 of the 5 Guiding Principles recommended by APPIC in formulating our response to the pandemic and its impact on Intern training, including 1) *Safety* of both Interns and Clients, 2) *Equity* in our selection process and access to services, 3) *Ethics* in guiding every aspect of our work, and 4) Reliance on *Science* and best practices recommended by reputable public health entities to inform our agency/Intern program's pandemic response. Throughout our brochure, please see COVID-19 specific information demarcated by an **IMPORTANT COVID-19/EMERGENCY PROTOCOL RELATED UPDATE** modifier for further information related to adjustments to our program and training opportunities. We will update this brochure frequently and regularly as updates to our program occur.

The Doctoral Internship Training Program in Health Service Psychology is currently accredited by the American Psychological Association's Commission on Accreditation (CoA), having been awarded a 7-year accreditation in 2016.

The Commission on Accreditation can be contacted at: 750 First Street, NE, Washington, DC 20002-4242 or (202) 336-5979; E-mail: apaaccred@apa.org, Website: www.apa.org/ed/accreditation for issues pertaining to internship accreditation.

Our Program Accepts 4 Interns (2 Child/Family Track; 2 Adult/Older Adult Track) 12 months starting September 1, 2023 2,000 hours (40 hours per week) \$33,363 stipend plus medical and dental benefits; \$2,000 bilingual Spanish supplement 10 vacation days | 11 agency holidays | 6 sick days | up to 5 professional leave days

## **Program Aims**

The Doctoral Internship Training Program in Health Service Psychology provides broad training in the professional practice of psychology within the context of a large community mental health center. Within the concentration of either Adult/Older Adult or Child/Family populations, the program's aims include preparing interns to: **1) Demonstrate intermediate to advanced professional competence in working with adults with severe, persistent mental illness OR children with serious emotional disturbance and their families, and 2) Demonstrate intermediate to advanced professional competence in a community mental health setting.** 

The program offers a wide range of training opportunities designed to facilitate interns' growth from students into competent, well-rounded psychologists who can:

- Help clients with severe and/or persistent mental illness to improve their quality of life through effective diagnosis, assessment, intervention, and advocacy
- Provide outreach services to the larger community
- Be sensitive to issues of cultural/ethnic diversity
- Apply their knowledge of research and of scientific principles to clinical practice, quality assurance, and program development/ evaluation
- Understand the role of psychologists in an interdisciplinary agency and work effectively as team members
- Know and apply ethical principles, laws and regulations, and practice standards and guidelines in their professional practice
- Advocate for appropriate changes in the mental health field

The program is shaped by the service needs and concerns of a diverse population of adults, children, and families with severe mental health disorders. The program's training model is practitioner-oriented, with a greater emphasis on science than traditional practitioner-scholar models. As such, Interns are trained to render services informed by the scientific bases of the profession, as well as current practical and research knowledge relevant to our population.

### Implementation

The program emphasizes the development of both profession-wide and program-specific competencies, in accordance with the APA's Standards of Accreditation (effective January 1, 2017). As such, training activities are designed to promote Intern attainment of Competencies within the context of the program's broader aims.

Interns choose to primarily concentrate on either Adult/Older Adult or Child/Family populations. The profession-wide and program-specific competencies are therefore framed within the context of working with adults with severe, persistent mental illness OR with children with serious emotional disturbance and their families, while functioning professionally within a community mental health center setting. Training activities are organized in a sequential manner, requiring Interns to assume increasingly complex responsibilities with a greater degree of independence and autonomy over the course of the internship year. By the end of the year, it is expected that interns will possess the requisite knowledge, skills, attitudes, and behaviors necessary to function as competent psychologists in general entry-level practice, with an emphasis on our client population and professional setting.

The program's competencies span 10 domains, and are as follows:

#### **PROFESSION-WIDE COMPETENCIES**

#### **Competency 1: Ethical and Legal Standards**

Interns will demonstrate appropriate ethical and legal knowledge, skills, and attitudes in their professional activities with individuals, groups, and organizations. **IMPORTANT COVID-19/EMERGENCY PROTOCOL RELATED UPDATE**: Depending on guidelines provided by the Governor of the State of California (i.e. "Safer at Home"), a significant portion of clinical services may be delivered remotely via HIPAA-compliant telehealth platforms. Interns will receive guidance and training in the ethical and legal considerations of telehealth service delivery, in accordance with local, state, and federal laws, CA Board of Psychology mandates, and best practice guidelines offered by the APA as they relate to telehealth practice.

**Core Components:** Interns will demonstrate knowledge and application of ethical principles (per the current APA Code of Ethical Principles and Code of Conduct), relevant state/local/federal laws, and professional standards and guidelines to all aspects of professional practice and personal conduct. As part of this, interns shall reliably identify complex ethical and legal dilemmas as they arise, and utilize ethical decision-making models to address them. Competence is built through both clinical and non-clinical work, didactic instruction, discussion, and supervision. Interns will be trained in and evaluated on their ability to consider ethical and legal issues as they intersect with both telehealth and in-person service delivery.

#### **Competency 2: Individual-Cultural Diversity**

Interns will conduct all professional activities with sensitivity to human diversity, demonstrating appropriate knowledge, skills, and attitudes in working with diverse individuals, groups, and communities representing various cultural and personal backgrounds and characteristics.

**Core Components:** Interns will demonstrate keen awareness of self and others, as shaped by individual-cultural diversity factors and context; demonstrate knowledge of current theoretical and empirical bases related to addressing diversity across professional activities; communicate and interact effectively with a range of diverse individuals and groups; and become skilled at integrating diversity considerations into effective practice. Competence is built through didactic instruction, discussion, supervision, and clinical work with clients from diverse populations.

#### Competency 3: Scientific Knowledge/Research/Evaluation

Interns will demonstrate appropriate skills, knowledge, and attitudes to make appropriate use of scientific methods/findings as they inform practice, and in conducting program evaluation and/or research that contributes to the professional knowledge base and/or evaluates the effectiveness of various professional activities.

**Core Components:** Interns will demonstrate skill at applying knowledge and understanding of the scientific foundations of psychology to their professional practice; critically evaluate and apply available sources of theoretical/empirical knowledge to inform clinical work and other activities; develop working knowledge of research principles and methods as they apply within a community mental health setting; and competently plan, implement, and disseminate findings of a research or program evaluation project. Competence is built through direct experience, didactic instruction, and supervision.

#### **Competency 4: Professional Values, Attitudes, and Behaviors**

Interns will conduct themselves with comportment and behavior that reflect the values and attitudes of psychology, and will demonstrate appropriate personal/professional self-awareness and reflection, with attention to competencies and self-care.

**Core Components:** Interns will demonstrate awareness of their identities and values as psychologists and professionals; conduct themselves with professionalism and responsibility across settings, situations, and contexts; be responsible in recognizing and addressing personal/ professional strengths, growth edges, and boundaries of competence; display professional maturity in managing issues of work-life balance; actively seek and demonstrate openness to supervision and feedback; and show commitment to lifelong learning, professional development, and quality improvement of their professional practice. Competence is built through discussion, supervision, and guided reflection.

#### **Competency 5: Communication and Interpersonal Skills**

Interns will communicate effectively, interact appropriately, and develop/maintain meaningful and helpful interpersonal relationships across a range of professional roles.

**Core Components:** Interns will demonstrate the ability to work respectfully and professionally with clients/families; to work collegially with a range of agency colleagues/staff, as well as outside professionals and organizations; and to work collaboratively with clinical supervisors and trainee supervisees. As part of this, interns will consistently display strong verbal, non-verbal, and written communication, and demonstrate a firm grasp of professional language and concepts. Interns will also remain aware of their own levels of interpersonal competence and growth edges. Competence is built through direct service to clients, interactions with colleagues, staff, and outside professionals/organizations, supervision, and guided self-reflection. Interns will also be trained in and evaluated on communication as it relates to delivery of clinical services via both telehealth and in-person format.

#### **Competency 6: Assessment**

Interns will demonstrate appropriate knowledge, skills, and attitudes in the selection, administration, and interpretation of evidence-based assessments designed to conceptualize, diagnose, and guide recommendations regarding the problems, capabilities, and issues associated with individuals. **IMPORTANT COVID-19/EMERGENCY PROTOCOL RELATED UPDATE**: Depending on guidelines provided by the Governor of the State of California (i.e. "Safer at Home"), a significant portion of clinical services may be delivered remotely via HIPAA-compliant telehealth platforms. Given that certain domains of assessment (e.g., cognitive and achievement testing) require face-to-face contact, our program may make adjustments to the core requirements for internship completion, including but not limited to adjusting the number of required assessment batteries, increasing emphasis on referral and assessment questions that can be completed remotely with limited batteries, and emphasizing mock assessment, enhanced testing didactics, and practice administrations in cases where COVID-19 and sheltering guidelines render in-person testing unsafe. Interns selecting our site should be aware of and ready for the possibility of a large portion (or up to all) of their training experience in Assessment occurring remotely through telehealth, with the possibility of increasing in-person contact during the training cycle.

**Core Components:** Interns will demonstrate knowledge of measurement, psychometrics, and a variety of assessment methods; show skill at selecting, administering, scoring, and interpreting a variety of assessment instruments using current research/professional knowledge and

standards; competently integrate assessment results to effectively diagnose and conceptualize presenting problems, and generate appropriate recommendations; and effectively deliver oral and written assessment findings to clients, families, and other interdisciplinary professionals. Competence is built through direct service to clients, didactic instruction, and supervision. Interns will also be trained in administration of certain telehealth assessment batteries (as well as clinical interviewing over this platform), and evaluation of Interns will include assessment of competencies relevant to both telehealth and in-person administration of assessment instruments.

#### **Competency 7: Intervention**

Interns will demonstrate appropriate knowledge, skills, and attitudes in the selection, implementation, and evaluation of evidence-based therapeutic interventions designed to alleviate suffering and promote health and well-being for individuals and groups. IMPORTANT COVID-19/ EMERGENCY PROTOCOL RELATED UPDATE: Depending on guidelines provided by the Governor of the State of California (i.e. "Safer at Home"), a significant portion of clinical services may be delivered remotely via HIPAA-compliant telehealth platforms. In mid-March of 2020, our agency switched exclusively to delivering remote services, and has recently (as of early 2021) resumed limited in-person services as clinically indicated. While Psychology Interns and other front-line clinical staff are considered "essential workers", our agency Leadership elected to continue remote services and to gradually expand in-person service delivery as it was deemed safe to return to in-person, direct client contact (as informed by public health entities and by the Governor of the Sate of California). Given the likely ebb and flow of COVID-19, it is possible that the coming training year will be characterized by potential agency closures, re-openings, partial openings, and other possible scenarios. Interns selecting our site should be aware of and ready for the possibility of a large portion (or all) of their training experience in Intervention occurring remotely through telehealth, with the possibility of increasing in-person, face to face contact during the training cycle.

**Core Components:** Interns will demonstrate knowledge and skill in accurately conceptualizing cases and planning treatment rooted in the evidence base; be able to effectively utilize a range of clinical skills across a variety of clients, diagnoses, and treatment situations; show skill at faithfully implementing a range of evidence-based interventions, with appropriate consideration of unique client factors; effectively utilize additional resources to address clients' basic needs as they impact treatment; advocate for and empower clients across larger systems; and be able to effectively utilize outcome measures to inform, evaluate, and modify planning over the course of treatment. Competence is built through direct service to clients, didactic instruction, and supervision. Interns will also be trained in delivery of therapeutic intervention over telehealth, and evaluation of Interns will include assessment of competencies relevant to delivery of therapy services via both telehealth and in-person format.

#### **Competency 8: Consultation and Interprofessional/Interdisciplinary Skills**

Interns will demonstrate appropriate knowledge, skills, and attitudes in providing expert assistance to other health service providers in response to clients' needs or goals, and in effectively engaging in interprofessional/interdisciplinary collaboration in relevant professional roles. IMPORTANT COVID-19/EMERGENCY PROTOCOL RELATED UPDATE: Depending on guidelines provided by the Governor of the State of California (i.e. "Safer at Home"), a significant portion (or all) of consultation services may be delivered remotely via HIPAA-compliant telehealth platforms, with the possibility of increasing in-person, face to face contact during the training cycle.

**Core Components:** Interns will demonstrate knowledge of consultation models and practices, and apply their understanding of the consultant's role to providing clinical consultation to members of the interdisciplinary team; efficiently address consultation questions; and effectively communicate recommendations to relevant parties. With regard to interdisciplinary skills, interns will display knowledge of and respect for the shared and unique contributions of other disciplines, and be able to interact effectively with allied professionals in interdisciplinary contexts. Competence is built through direct experience, didactic instruction, and supervision. Interns will also be trained in conducting consultation activities over telehealth, and evaluation of Interns will include assessment of competencies relevant to delivery of consultation services via both telehealth and in-person format.

#### **Competency 9: Supervision-Teaching**

Interns will demonstrate appropriate knowledge, skills, and attitudes regarding the enhancement, monitoring, and evaluation of the professional functioning of trainees and other professionals. **IMPORTANT COVID-19/EMERGENCY PROTOCOL RELATED UPDATE**: Depending on guidelines provided by the Governor of the State of California (i.e. "Safer at Home"), a significant portion (or all) of supervision/teaching may be delivered remotely via HIPAA-compliant telehealth platforms, with the possibility of increased in-person, face to face contact during the training year.

**Core Components:** Interns will demonstrate understanding of the complexities of the supervisor's role, supervision processes/procedures, and the triadic nature of the supervisory relationship; and will readily apply this knowledge to developing basic supervision skills in an individual or group supervision context. Additionally, interns will demonstrate knowledge and application of appropriate teaching methods in making presentations to peers, colleagues, and other agency staff. Competence is built through direct experience, didactic instruction, discussion, and supervision. Interns will also be trained in conducting supervision activities over telehealth, and evaluation of Interns will include assessment of competencies relevant to delivery of supervision services via both telehealth and in-person format.

#### **PROGRAM-SPECIFIC COMPETENCIES**

#### **Competency 10: Community Outreach**

Interns will demonstrate appropriate knowledge, skills, and attitudes in conducting community outreach programming that is responsive to the needs of individuals, systems, and the community. **IMPORTANT COVID-19/EMERGENCY PROTOCOL RELATED UPDATE**: Depending on guidelines provided by the Governor of the State of California (i.e. "Safer at Home"), a significant portion (or all) of community outreach may be delivered remotely via HIPAA-compliant telehealth platforms, with the possibility of increasing in-person contact during the training cycle.

**Core Components:** Interns will demonstrate skill in building collaborative professional relationships across various community systems and settings; skillfully develop novel outreach programming in response to community needs; and effectively conduct and evaluate community-based outreach with individuals who are not yet a part of the mental health system. Competence is built through direct experience, didactic instruction, and supervision. Interns may also be trained in delivery of outreach and delivery of presentations via virtual formats, and evaluation of Interns may include assessment of competencies relevant to delivery of outreach activities and presentations via both telehealth and in-person format.

#### LEARNING ELEMENTS

The Interns' training experience throughout the year includes a multitude of experiential, educational, and supervisory opportunities. Caseloads and other training activities change throughout the year depending on program need, opportunity, and intern individualized training plans. At the beginning of the year, interns collaborate with the Internship Director and their supervisors to develop their own individualized training plans.

The following is an approximate overview of the internship program's weekly time commitments (40 hours total) - Please not that a portion or all of these activities may possibly be delivered virtually, depending on local/state/and national responses to COVID 19 and other emergencies:

- 23 hours client related activity (direct service/telehealth, case management, psychological assessment/report writing, clinical documentation)
- At least 4 hours of individual and group supervision (supervision may be delivered remotely, depending on CA Board of Psychology guidelines in response to COVID-19 and other local/state/national emergency protocols in place). Please refer to https://www.psychology.ca.gov/covid/index.shtml for up-to-date guidance.)
- 1 hour of Professional Issues group/Supervision-of-Supervision
- 1 hour of interdisciplinary team meetings
- 2 hours of Community Outreach (CE&P) project
- 3 hours of work on the Program Evaluation project
- 2 hours of Intern Didactic Seminar, and a possible additional 2 hours of Continuing Education seminars and training workshops
- 2 hours of provision of supervision of practicum students

The following is an approximate overview of the caseload requirements per week:

- 6-8 individual therapy cases in the primary Track (Adult/Older Adult or Child/Family)
- Up to 2 therapy groups
- One ongoing psychological assessment case (a total of 4 comprehensive assessments and 2 assessment consultations are required per year); <u>IMPORTANT COVID-19/EMERGENCY PROTOCOL RELATED UPDATE</u>: due to COVID-19, adjustments may be made to this requirement depending on the availability of face-to-face assessment opportunities. Adjustment in previous training cycles have include fewer psychological testing batteries conducted over the course of the training year

By the end of the training year, interns are expected to be consistently meeting competency expectations for entry-level practice in all Profession-Wide and Program-Specific Competencies. Interns receive informal guidance and formative feedback from supervisors during the year, as well as two formal written summative evaluations at mid-year and year-end. Successful completion of the program is supported by continual supervisory guidance and feedback, which help interns develop their clinical skills and meet the program requirements and performance expectations.

Administrative policies and procedures are reviewed with interns at the time of orientation to the program and are available upon request. Intern evaluation forms and other evaluation tools utilized by the Internship are also available upon request by e-mailing <u>kmakanui@didihirsch.org</u>.

### Resources

• Didi Hirsch is headquartered on Sepulveda Boulevard in Culver City, within 4 miles of the Pacific Ocean and close to the West Los Angeles campuses of UCLA and Pepperdine University. Interns in the Child/Family Track provide services to children, adolescents, and families within Child Outpatient Services at the agency's Inglewood Center, though some assessment services may be provided at our Taper, Glendale, and/or Metro Centers in order to increase intern exposure to a greater breadth of client diversity. Interns in the Adult/Older Adult Track provide services within the Adult Services program at the Inglewood Center, which houses both standard and intensive outpatient services for transition-aged youth, adults, and older adults. Some assessment services may be provided at our Sepulveda Center, based on demand. Additionally, some field-based work (e.g., home visits, IEP meetings, and outreach) is required in all programs.

- Each intern is supplied with a laptop computer with an up-to-date version of Microsoft Office, as well as a high-speed internet connection (Ethernet and WiFi) and access to a printer. A Training laptop loaded with SPSS statistical software is available in the Training Division suite.
- Interns have access to an extensive library of assessment materials at their respective training sites, including an up-to-date inventory of test instruments/kits reflective of common referral questions and assessment best practices, technical manuals, handbooks, and various training multimedia. Designated assessment computers loaded with scoring software are available at each of the primary training sites. Additionally, interns have remote access to online assessment scoring through the Training Division's Q-Global account.
- Interns have access to a small library of books and multimedia, which are available for check-out from the Training Division. This library includes more current offerings from the field of psychology, along with classic psychology texts. Interns are also granted access to the agency's online journal database.
- Audio and video recording equipment is available for check-out with the Training Division.

### **Training Opportunities**

#### **ADULT TRACK (Inglewood Center)**

#### **Outpatient/Field Capable/Intensive Services**

The Inglewood Adult Services program provides services to a multi-ethnic population of adults with severe and persistent mental illness. The program is rooted in the Recovery Model, with an emphasis on psychosocial rehabilitation to assist clients in maximizing their level of functioning in the community. Common diagnoses seen in the program include schizophrenia and other psychotic disorders, bipolar disorder, and severe depression and anxiety, which lead to substantial impairment in life functioning. Co-occurring personality disorders and/or substance abuse are also common. Furthermore, a large percentage of our clients report significant trauma histories spanning back to childhood. Current or past histories of homelessness, food insecurity, chronic medical illness, and involvement with the legal system are also frequently part of the clinical picture. IMPORTANT COVID-19/EMERGENCY PROTOCOL RELATED UPDATE: Depending on guidelines provided by the Governor of the State of California (i.e. "Safer at Home"), a significant portion (or all) of clinical services may be delivered remotely via HIPAA-compliant telehealth platforms or via in-person, face to face format within our clinic. Given that they are classified as Essential Workers, Interns should be willing and prepared to conduct in-person services and training activities as required by the Internship and Agency.

Depending on current level of functioning, clients are provided with services that range from less intensive in scope to greater intensity/acuity. The Inglewood Center also houses a number of specialty programs (i.e. CalWORKS, a workforce re-entry program for adults whose mental health concerns pose a barrier to employment). The Inglewood Adult Services program currently utilizes eight evidence-based and promising practices certified by the Los Angeles County Department of Mental Health, including Seeking Safety, Individual and Group Cognitive-Behavioral Therapy, Interpersonal Psychotherapy, PEARLS, Problem-Solving Therapy, and Managing and Adapting Practices (MAP), and Crisis-Oriented Recovery Services (CORS). Additionally, Inglewood clinicians frequently utilize third-wave behavioral models, including Dialectical Behavior Therapy (including individual and skills groups) and Acceptance and Commitment Therapy (ACT), which fit well with the needs of our client population. Staff follow an interdisciplinary team approach in working with psychiatrists, social workers, MFTs, psychologists, nurses, and case managers.

Interns in the Adult/Older Adult Track have the opportunity to provide individual and group therapy, diagnostic intake, psychological assessment, interdisciplinary consultation, and case management services to a range of adults, including transition-age youth (16-25) and older adults (65+). Interns work with clients from across the service spectrum, with increasingly challenging and complex cases assigned as the year progresses. As part of this, interns have the opportunity to conduct field work and participate in crisis intervention (i.e., involuntary hospitalizations) with licensed clinical staff. They may also choose to participate in a specialty program (i.e., CalWORKS) or a specific clinical sub-team (i.e., TAY, Older Adult), based on training goals and professional interests. At the beginning of the training year, interns will receive formal training and LACDMH certification in the following evidence-based and promising practice: Seeking Safety. Subject to availability, there may be additional opportunities to receive formal training in specific practices; past examples have included Interpersonal Psychotherapy and Problem-Solving Therapy and Crisis Oriented Recovery Services (CORS) . Additional evidence-based models (as listed above) are introduced in individual and group supervision, with supervisors reviewing relevant literature/resources with interns, orienting them to core interventions, and guiding them in delivering these models to clients. Interns with an interest in Dialectical Behavior Therapy are also invited to participate in a DBT Consultation Team for Adult

Division clinicians held at the agency's Sepulveda Center. Lastly, interns are offered Clinic and Field Safety training, a training in Suicide Assessment and Intervention delivered by our Suicide Prevention Center, and a one-day professional assault crisis training (ProACT).

IMPORTANT COVID-19 RELATED UPDATE: Due to State of California "Safer at Home" guidelines in response to the COVID-19 pandemic, possible site closures may occur during the 2022-2023 Training Cycle. Because full certification in ProACT requires in-person training, certification in this model may not be possible during the 2022-2023 training year. If the site closures interfere with normal, in-person operations, Interns will still receive the didactic portions of Pro-ACT training. Interns will also receive a 6-hour course in Suicide Risk Assessment and Intervention, delivered by our Suicide Prevention Center. This training will fulfill licensure requirements for AB 89 (2915.4 of the CA Business and Professions Code).

#### CHILD/FAMILY Track (Inglewood Center)

#### **Outpatient Program**

The Inglewood Child & Family Services program provides services to a multi-ethnic population of children and adolescents (ages birth to 18) with severe emotional disturbance, along with their families/caregivers. The program strives to assist clients and families in attaining their highest possible level of functioning by altering dysfunctional behaviors, promoting adaptive coping, enhancing communication and problem-solving skills, and maintaining appropriate boundaries within the family system. Emphasis is placed on early intervention, with a goal of promoting lifelong mental health/wellness through the fostering of healthier developmental trajectories. Common diagnoses seen in the program include depression, anxiety, adjustment disorders, ADHD, and other disruptive behavior disorders, which lead to substantial impairment in life and/or family functioning. Early-onset psychosis, bipolar disorder, and co-occurring developmental disorders are also seen regularly among this population. Furthermore, a majority of clients have experienced significant traumas, including physical/sexual/emotional abuse, neglect, loss of caregiving figures, and community violence. Co-occurring substance use and/or other forms of maladaptive coping are common among the adolescent population. Current or past histories of academic struggles, housing instability, food insecurity, and/or involvement with child welfare system are also frequently part of the clinical picture. <u>IMPORTANT COVID-19/EMERGENCY PROTOCOL RELATED UPDATE</u>: Depending on guidelines provided by the Governor of the State of California (i.e. "Safer at Home"), a significant portion (or all) of clinical services may be delivered remotely via HIPAA-compliant telehealth platforms or via in-person, face to face format within our clinic. Given that they are classified as Essential Workers, Interns should be willing and prepared to conduct in-person services and training activities as required by the Internship and Agency.

Guided by science and best practices, the Inglewood Child & Family Services program currently utilizes eight LACDMH certified evidence-based and promising practices, including Managing and Adapting Practices (MAP), Trauma-Focused Cognitive Behavioral Therapy (TF-CBT), Seeking Safety, Families Overcoming Under Stress (FOCUS), Child-Parent Psychotherapy (CPP), Positive Parenting Program (Triple P), Parent-Child Interaction Therapy (PCIT), and Crisis-Oriented Recovery Services (CORS). Inglewood clinicians also frequently incorporate interventions pulled from third-wave behavioral models such as DBT and ACT, which fit well with the needs of our adolescent population. While the bulk of service delivery conducted by Inglewood Child & Family takes place in the Outpatient Clinic setting, the program is also highly integrated into the local school districts. Through these relationships, the program has clinicians placed in multiple elementary, middle, and high schools in the area providing school-based mental health services. Clients and their families are also seen in the field (i.e., at home) on a case-by-case basis.

Interns in the Child/Family Track have the opportunity to provide individual, family, and group therapy, diagnostic intake, psychological assessment, interdisciplinary consultation, and case management services to a range of children and adolescents. A portion of these services may be school-based, with interns spending one day per week meeting with clients at an assigned school placement. As the training year progresses, interns are offered increasingly challenging and complex cases, with opportunities to weight their caseloads toward a specific area of professional interest, per their training goals. Across all training experiences, interns gain exposure collaborating and advocating across the various community systems with which our clients and families interface (including Regional Center, Special Education, child welfare, and public assistance programs). Interns may also conduct field work (i.e., home visits, attending IEP meetings) and participate in crisis intervention with licensed clinical staff. At the beginning of the training year, interns will receive formal training and LACDMH certification in the following evidence-based and promising practice: Seeking Safety. Subject to availability, there may be additional opportunities to receive formal training in specific practices; past examples have included Trauma-Focused CBT, and Managing and Adapting Practices (MAP), and Crisis Oriented Recovery Services (CORS). Additional evidence-based models (as listed above) are introduced in individual and group supervision, with supervisors reviewing relevant literature/resources with interns, orienting them to core interventions, and guiding them in delivering these models to clients. Interns are also offered Clinic and Field Safety training, a training in Suicide Assessment and Intervention delivered by our Suicide Prevention Center, and a one-day professional assault crisis training (ProACT).

<u>IMPORTANT COVID-19 RELATED UPDATE</u>: Due to State of California "Safer at Home" guidelines in response to the COVID-19 pandemic, possible site closures may occur during the 2023-2024 Training Cycle. Because full certification in ProACT requires in-person training, certification in this model may not be possible during the 2023-2024 training year. If the site closures interfere with normal, in-person

operations, Interns will still receive the didactic portions of Pro-ACT training. Interns will also receive a 6-hour course in Suicide Risk Assessment and Intervention, delivered by our Suicide Prevention Center. This training will fulfill licensure requirements for AB 89 (2915.4 of the CA Business and Professions Code).

## **Training Opportunities (All Interns)**

All interns participate in the following activities regardless of their track placement. <u>IMPORTANT COVID-19/EMERGENCY PROTOCOL RELATED</u> <u>UPDATE</u>: Depending on guidelines provided by the Governor of the State of California (i.e. "Safer at Home"), a significant portion (or all) of the training activities below may be delivered remotely via HIPAA-compliant telehealth platforms. Given that they are classified as Essential Workers, Interns should also be willing and prepared to attend in-person training/supervision activities as required by the Internship and Agency.

#### Community Outreach (CE&P)

In keeping with the agency's mission of stigma reduction and increasing access to mental health services, all interns coordinate, develop, and conduct one community outreach project over the course of the training year. Examples of past projects include community groups on parenting, adolescent issues, and older adult issues, community education on suicide prevention, and support groups for persons with major medical illnesses. Interns are required to prepare a brief presentation of their projects, including outcomes, successes, and challenges, for delivery to an audience of agency leadership, supervisors, and peers at the annual CE&P Forum hosted by the Training Division. Interns with an expressed interest in community psychology and primary prevention may elect to devote addition hours to this or other outreach projects.

#### **Program Evaluation**

All interns choose a program evaluation project in collaboration with the Internship Director and the agency's Research and Evaluation Division. These projects offer interns an opportunity to apply their knowledge of research methods to clinical practice evaluation and outcome measurement in a community setting. Interns receive supervision and support in identifying their project topics, and are responsible for conducting a review of relevant literature, selecting appropriate evaluation measures, collecting and analyzing data, preparing a brief write-up of findings, and presenting recommendations to agency staff at the agency's annual Intern Research & Evaluation Forum.

#### Supervision-of-Supervision

Interns are paired up by Track to co-facilitate a biweekly supervision group comprised of psychology practicum students. Interns receive didactic training on current theories and models of supervision, methods of evaluation, legal and ethical issues in supervision, and diversity issues related to supervision. They also participate in monthly Supervision-of-Supervision with the Internship Director, which includes reviews of audio-recorded supervision sessions.

### **Seminars**

#### **Psychology Intern Didactic Seminar**

This year-long seminar series is held weekly, covering a wide range of topics in professional psychology, including diversity issues, empiricallysupported treatment models, psychological assessment methods, supervision, and other special topics. As much as possible, the seminar is tailored to the interests and experiences of the current intern cohort. Staff who are experts in various aspects of professional psychology may be invited as speakers.

#### **Professional Issues Seminar**

This year-long seminar is also held weekly and covers a wide range of topics in the professional practice of psychology. In the past, such topics have included legal and ethical issues, career options in psychology, strategies for CVs and job interviews, new technologies and psychology practice, HIPAA, the Affordable Care Act, and psychology licensure preparation. This seminar also provides interns with monthly supervision-of-supervision, and a weekly opportunity to bring up questions, concerns, problems, and feedback about the internship program.

#### **Continuing Education Seminar Series**

This series addresses the needs of licensed agency staff. Guest or agency speakers present monthly on a variety of advanced topics related to issues in mental health service delivery or special client populations. Past examples include Psychosis and Recovery, Dialectical Behavior Therapy (DBT), Motivational Interviewing, Play Therapy, HIV/AIDS, Military Culture 101, Eating Disorders, Typical/Atypical Development in Young Children, and Immigration and Acculturation Issues in Clinical Practice. The seminar series also includes information on psychopharmacologic treatments for child and adult disorders, legal and ethical issues, and current topics in supervision.

### Staff

#### TRAINING DIRECTORS

#### Kalani Makanui, Ph.D., Director of Psychology Training / Internship Director

Interests: Treatment and assessment with birth to five populations; religion and spirituality in clinical practice; cats.

#### Linda O'Connor, LCSW, Training Director (Master's Level)

Interests: Community consultation and outreach; integrative care; continuing education and staff development.

#### Erin Hubbard, Psy.D., Division Director, Training

Interests: Empirically-based treatment; testing and assessment of children; adolescent mental health; psychology training.

#### TRAINING SUPERVISORS

#### Giselle Collins, Ph.D., Training Psychologist, Training Division

Interests: Testing and assessment of adults; severe mental illness; eating disorders in TAY and adult populations.

#### Christie Schueler, Ph.D., Training Psychologist, Training Division

Interests: Psychology training; adolescent depression; MAP training and implementation; drinking tea.

#### Elizabeth Kaspar, Psy.D., Bilingual Training Psychologist, Training Division

Interests: Treatment and assessment of adults, trauma informed care, culturally responsive treatment, and Zumba.

#### Jan Okabe-Wong, Psy.D., Lead Psychologist, Child/Family Division

**Interests:** Birth to five populations; treatment of trauma-related symptoms; attachment-based interventions; race, ethnicity, and cultural identity in clinical practice.

#### Aleynè Eatman, Psy.D., Lead Psychologist, Child/Family Division

Interests: Assessment and treatment of teens, anything related to amusement parks.

### OTHER CONTRIBUTORS TO THE PROGRAM Kristine Santoro, Ph.D., Chief Health and Innovation Officer Lyn Morris, LMFT, Chief Executive Officer



#### ADJUNCT SUPERVISORY STAFF

Oscar Gonzalez, LCSW Christina Ahumada, Ph.D. Shoshie Askren, LCSW Sae Lee, Ph.D. Donald Meland, M.D. Razan Seikaly, Ph.D., LMFT Christine Bae, LCSW, MPH Rachel Gloer, LCSW Alison Helton, LMFT Alexander Dorsey, LPCC Fred Pasquarella, M.A. Stephen Miller, Ph.D. Ben Wegner, Psy.D. Lisa Schumacher, LCSW Mei Ling Acevedo, LCSW Constandina Palivos, Ph.D. Timothy Encinas, LCSW Glenda Rivers, LMFT Marina Eckart, LMFT Michael Nutt, Psy.D.

Our Agency and Internship remain committed to fostering an environment of diversity, equity, inclusivity and anti-racism, and further dedicated to recruiting and retaining a diverse group of Psychology Interns and Training Faculty. Didi Hirsch provides equal employment opportunities to all qualified applicants and employees without discrimination with regard to race (including traits historically associated with race such as hair texture and protective hairstyles such as braids, locks and twists), religious belief (including dress or grooming practices), color, sex, sex stereotype, pregnancy, childbirth, breastfeeding or related medical conditions (including breastfeeding), age, national origin (including possessing a driver's license issued under Vehicle Code § 12801.9), ancestry, sexual orientation, gender, gender identification and expression, transgender status, transitioning status, citizenship status, physical or mental disability, medical condition, genetic characteristics, genetic information, family care, marital status, enrollment in any public assistance program, status as military, a veteran or qualified disabled veteran, status as an unpaid intern or volunteer, or any other classification protected by law. We also prohibit discrimination based on the perception that anyone has any of those characteristics, or is associated with a person who has or is perceived as having any of those characteristics. Full details relevant to our agency/internship EEO, Discrimination and Harassment, Retaliation, and Accommodation Policies are available upon request from the Internship Director.



# **Former Interns**

14-15	Julia Corcoran	PGSP - Stanford, Psy.D. Consortium
14-15	Lauren Franks	Azusa Pacific University
14-15	Chelsea Gilbert	Alliant IU/CSPP-Los Angeles
14-15	Zoe Rahimi	Argosy University - Southern California
15-16	Carey Incledon	Pepperdine University
15-16	Melody Lavian	Loma Linda University
15-16	Elizabeth Romero	Pepperdine University
15-16	Elizabeth Solomon	PGSP – Stanford Psy.D. Consortium
16-17	Renee Alas	Pepperdine University
16-17	Rebecca Corness	Illinois School of Professional Psychology/Argosy - Chicago
16-17	Ariane Myers-Turnbull	Alliant University / CSPP – San Diego
16-17	Avery Voos	UC Santa Barbara
17-18	Annie Allhoff	PGSP – Stanford Psy.D. Consortium
17-18	Helen Day	University of Maine
17-18	Karen Guan	UCLA
17-18	Tiffany Renteria-Vazquez	Fuller Theological Seminary
18-19	Emily Escovar	UCLA
18-19	Michael Nutt	Chicago School of Psychology—Chicago Campus
18-19	Marina Marcus	Teachers College at Columbia University
18-19	Sarah DeLuca	Palo Alto University
19-20	Jessica Hamel	Rutgers University NJ-Piscataway/New Brunswick
19-20	Alexis Hershfield	Alliant IU/CSPP-Los Angeles
19-20	Anne Tootell	University of Maryland at College Park
19-20	Benjamin Wegner	Chicago School of Psychology—Chicago Campus
20-21	Rhea Wagle	UC Santa Barbara
20-21	Miriam Rubenson	University of Southern California (USC)
20-21	Derik Hossepian	Palo Alto University
20-21	Lauren Broussard	Pepperdine University
21-22	Alissa Der Sarkissian	UC Santa Barbara
21-22	Meela Salamat	The Chicago School of Professional Psychology (TCSPP) - Irvine
21-22	Samantha Gonzalez	University of Alabama at Birmingham
21-22	Bryon Cunningham	Alliant IU/CSPP-Los Angeles
22-23	Brittany Drake	UCLA
22-23	Pooja Patel	UCLA
22-23	Alysia Aubry	Alliant IU/CSPP-Los Angeles
22-23	Sophia Berger	Azusa Pacific University

# **Application Information**

- Applications for the 2023-2024 training year are due by Monday, November 14th, 2022 at 11:59 pm (EST)
- Didi Hirsch is a member of APPIC and follows the APPIC guidelines for internship selection, including use of the APPIC Uniform Application (AAPI) online and the Internship Match Program. 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.
- The online application form is available via the APPIC website: www.appic.org
- Instructions and forms to register for the Internship Match can be obtained via the National Matching Service (NMS) website: www.natmatch.com/psychint

#### The following steps should be taken to apply to the internship program.

- 1. Complete the AAPI Online at www.appic.org and designate Didi Hirsch Mental Health Services
- Important: In your cover letter, please be sure to specify a) Your reasons for applying to Didi Hirsch and b) How your previous experience and/or interests match our training program and agency mission. Please also identify whether you are applying for the Adult/Older Adult (APPIC Program Code 111613) or Child/Family (APPIC Program Code 111612) Track. You may choose only one Track.
- 3. We will not be requesting any supplemental materials at the time of application. However, if you are invited for an interview we ask that you provide a de-identified psychological testing report.

#### Applicants will be notified of their interview status by email no later than December 12th, 2022 at 5pm PST.

<u>IMPORTANT COVID-19 RELATED UPDATE</u>: Due to State of California "Safer at Home" guidelines in response to the COVID-19 pandemic, possible site closures during the Winter of 2022/2023 due to COVID-19, and APPIC recommendations related to the 2023-2024 Internship Application/Interview cycle, our site will be conducting Open Houses and Interviews virtually for the 2023-2024 Internship application cycle. These Open Houses are scheduled for Tuesday, January 3rd and Monday, January 9th, 2023 (from 9 a.m.— 12:00 p.m. PST), and virtual interviews will occur between January 3rd, 2023 and January 20th, 2023. Further details will be sent at the time of interview offer.

### Requirements

- Only applicants from APA or CPA-accredited programs in Clinical Psychology will be considered.
- Applicants must be U.S. Citizens (or Permanent Residents), or be able to obtain an F-1 Visa with authorization to participate in Curricular Practicum Training from their university. Didi Hirsch does not sponsor students for visas. *Please note that all applicants MUST have a valid U.S. Social Security number.*
- Applicants must have completed ALL coursework by the start of internship.
- Comprehensive Exams (or their equivalent) must be completed by the Ranking Deadline.
- Applicants must have a minimum of three years pre-internship training and should have accrued 1,000 practicum hours (inclusive of direct service, supervision, and support activities) before the application deadline. Of these hours, 500 should be in direct service (assessment and intervention) to clients. <u>IMPORTANT COVID-19/EMERGENCY PROTOCOL RELATED UPDATE</u>: The Impact of COVID-19 on practicum direct contact hour accrual during the 2020 through 2022 training years will be taken into account in interview selection decisions.
- Applicants must have some experience in psychological testing by the start of internship (with most competitive applicants having at least 100 hours in direct assessment experience at the time of application).
- Applicants must be willing to take and able to pass a background check during pre-employment. While prior legal history does not
  automatically exclude an applicant from training at Didi Hirsch, final decisions regarding clearance are made at the level of our Human Resources Department, and are determined in accordance with the California Fair Chance Act (see <a href="https://www.dfeh.ca.gov/resources/frequently-asked-questions/criminalhistoryinfoinemploymentfaqs/">https://www.dfeh.ca.gov/</a>
  resources/frequently-asked-questions/criminalhistoryinfoinemploymentfaqs/ for further details). In accordance with this law, final
  employment decisions will include an individualized assessment of prior conviction history, and take into account multiple factors
  (i.e., nature of the conviction(s) relative to essential intern functions, timeframe in which the offense occurred, mitigating circumstances).
- The California Department of Public Health issued a mandate on August 5th, 2021 that COVID-19 vaccination is required of all healthcare workers in specified facilities (under which Didi Hirsch is included), with exceptions provided for medical and/or religious exemptions. Interns will be expected to comply with this state mandate as a condition of employment. For more information, please visit: www.cdph.ca.gov -> Programs -> CID -> CDC -> COVID-19

#### Additionally, desirable applicants will have:

• Experience in empirically supported treatments; Experience in community mental health settings and/or with similar clinical populations.

### **Internship Admissions, Support, and Initial Placement Data**

### Date Program Tables are Updated: 08/15/2022

#### **Program Disclosures**

As articulated in Standard I.B.2, programs may have "admission and employment policies that directly relate to affiliation or purpose" that may be faith-based or secular in nature. However, such policies and practices must be disclosed to the public. Therefore, programs are asked to respond to the following question.

Does the program or institution require students, trainees, and/or staff (faculty) to comply with specific policies or practices related to the	_Yes
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.	<u>X</u> No
If yes, provide website link (or content from brochure) where this specific info Presented: NA	rmation is

### **Internship Program Admissions**

Date Program Tables are updated: 08/15/2022

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:

To be eligible for internship at Didi Hirsch Mental Health Services, applicants must provide verification of enrollment in an APAaccredited or CPA-accredited doctoral program in clinical psychology. Applicants must verify supervised professional experience (at the practicum level totaling at least 500 direct service hours) that is consistent with the training aims and competencies of the internship, and commensurate experience within the desired track. Prior experience conducting psychological assessment is required. Applicants must also be willing to engage in in-person, face to face training and service delivery as "Essential Workers"

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	Y	Amount: 400
Total Direct Contact Assessment Hours	Y	Amount: 100

#### Describe any other required minimum criteria used to screen applicants:

Applicants must hold U.S. Citizenship, or obtain an F-1 Visa and Social Security Number and university authorization to attend internship. Applicants must have a minimum of 3 years of pre-internship graduate training, and have accrued at least 1,000 practicum hours (500 of which should be direct service). Applicants must have at least some experience with psychological assessment within the desired track to be considered. Applicants must have completed all coursework by the start of internship. Applicants must also be able to pass a background check to the standard of our agency HR Division prior to hire. Prior experience with EBPs is highly desirable.

### Internship Admissions, Support, and Initial Placement Data (Continued)

Annual Stipend/Salary for Full-time Interns	\$33,363		
Annual Stipend/Salary for Half-time Interns	N	N/A	
Program provides access to medical insurance for intern?	Yes		
If access to medical insurance is provided:			
Trainee contribution to cost required?	Yes		
Coverage of family member(s) available?		No	
Coverage of legally married partner available?		No	
Coverage of domestic partner available?		No	
Hours of Annual Paid Personal Time Off (PTO and/or Vacation)	Personal Time Off (PTO and/or Vacation) 80		
Hours of Annual Paid Sick Leave	48		
In the event of medical conditions and/or family needs that require extended leave, does the program allow reasonable unpaid leave to interns/residents in excess of personal time off and sick leave?	Yes		
Other Benefits (please describe): 5 Professional Leave Days			

### Financial and Other Benefit Support for Upcoming Training Year\*

\*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)

	2018	2018-2021	
Total # of interns who were in the 3 cohorts	12 0		
Total # of interns who did not seek employment because they returned to their doctoral program/are completing doctoral degree			
	PD	EP	
Community mental health center	0	3	
Federally qualified health center	0	0	
Independent primary care facility/clinic	0	0	
University counseling center	0	0	
Veterans Affairs medical center	1	0	
Military health center	0	0	
Academic health center	2	0	
Other medical center or hospital	2	0	
Psychiatric hospital	0	0	
Academic university/department	0	0	
Community college or other teaching setting	0	0	
Independent research institution	0	0	
Correctional facility	0	0	
School district/system	0	0	
Independent practice setting	0	3	
Not currently employed	0	1	
Changed to another field	0	0	
Other	0	0	
Unknown	0	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.

#### For further information, please email:

Kalani Makanui, Ph.D., Internship Director at kmakanui@didihirsch.org

#### **DIDI HIRSCH MENTAL HEALTH SERVICES**

323 North Prairie Avenue, Suite 430, Inglewood, CA 90301

Tara Palacios, Administrative Assistant II: (310) 895-2321

Training Fax: (424) 835-3799

Main Office: (310) 390-6612

