The Psychology Internship Program is accredited by
Commission on Accreditation of
The American Psychological Association
For questions related to the program’s accreditation, you may contact them at
750 First Street, NE, Washington, DC 20002-4242
(202)-336-5979 / apaaccred@apa.org / www.apa.org/ed/accreditation

Revised March 2020
Doctoral Internship Training Faculty

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Dolly Akel-Greer, Psy.D., TACT Clinical Coordinator & Seminar Leader

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Karina McCoy, PsyD., Clinical Supervisor Outpatient Psychotherapy and Assessment and Emergency Services, Seminar Leader

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Melina Visser, Psy.D., Manager, Quality Improvement Department
TRAINING PHILOSOPHY AND GOALS

Citrus Health Network, Inc. (CHN) has defined its training philosophy to reflect a “practitioner informed by the literature” orientation. By virtue of this orientation, we seek to train interns in a variety of entry level clinical skills, augmented by regular seminars in related subject areas, scientific colloquia, and reviews and discussions of relevant current and past literature based on the Empirically Supported Practice Documentation created by the Society of Clinical Psychology, Division 12 APA and the Society of Health Psychology, Division 38 APA. In particular, these seminars provide the major exposure to the influence of scientific contributions, more specifically empirically supported treatments (ESTs), in the practice of psychology, in a manner which allows the training process to be sequential, graded, and cumulative in nature. Seminars and supervision also train interns in ethical practice with ethnic, minority, lesbian, gay, bisexual, geriatric and disabled populations with consideration to APA 12, 17, 22, 23, 27, 35, 38, 45 Divisions’ research and recommendations. Each clinical experience begins with an orientation period, where supervisors teach interns their specific clinical responsibilities, and demonstrate, through video, role playing and/or, role modeling, and instruct them on how to perform their various clinical duties. Interns are expected to successfully complete an in vivo evaluation period of clinical duties. As time goes on, interns are expected to function more independently, and supervision focuses on more subtle aspects of case material. A major source of inspiration for this training philosophy comes from the standards offered by the American Board of Professional Psychology (ABPP). Candidates for this examination must demonstrate an advanced level of expertise in the basic areas of “assessment” and “intervention.” The CHN internship training program’s philosophy has further refined these broad areas to include “diagnostic assessment,” “psychological testing,” and “psychotherapy.”

Our basic Aims, Competency Areas and Outcomes are as follows:

Aim1: Develop intern’s ability to integrate clinical theory and practice in the application of knowledge, assessment and clinical skills in the practice of psychology.

**Competency Area A – Research.**
Outcome: To use scientific base to inform clinical practice and research by demonstrating the substantially independent ability to critically evaluate and disseminate research or other scholarly activities (e.g., case conference, presentation, publications) at the local (including the host institution), regional, or national level.

**Competency Area F: Assessment**
Outcome: To proficiently perform psychological assessments.

**Competency Area G: Intervention**
Outcome: To be proficient in psychological interventions.

**Competency Area H: Supervision**
Outcome: To be proficient in Supervision

**Competency Area I: Consultation and Inter-Professional/ Inter-disciplinary Skills.**
Outcome: To competently provide psychological consultation

Aim 2: To be aware of and respond to issues of cultural diversity.

*Competency Area C: Individual and Cultural Diversity*

Outcome: Practice with sensitivity with individuals of a diverse cultural, ethnic/racial, and social context.

Aim 3: To foster intern’s sense of professionalism

*Competency Area B: Ethical and Legal Standards*

Outcome: To maintain the highest ethical standards by being knowledgeable of and acting in accordance with each of the following: the current version of the APA Ethical Principles of Psychologists and Code of Conduct; Relevant laws, regulations, rules, and policies governing health service psychology at the organizational, local, state, regional, and federal levels; and Relevant professional standards and guidelines; by recognizing ethical dilemmas as they arise, and applying ethical decision-making processes in order to resolve the dilemmas; and by conducting self in an ethical manner in all professional activities.

*Competency Area D: Professional Values and Behaviors*

Outcome: To develop a professional identity

*Competency Area E: Communication and Interpersonal Skills*

Outcome: To develop the attitudes and skills needed to support lifelong learning.

Included on the Educational Programs SharePoint Page you will find specific measurable elements, for each of these aims, competency areas and outcomes. In addition, periodic evaluations of intern performance will be performed in relation to these parameters—the format for these evaluations can also be found on the Educational Programs SharePoint Page. Finally, we also expect interns to provide valuable feedback to the program on a regular basis. This process can also be found in the policy section of this handbook.

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**OVERVIEW OF INTERNSHIP ACTIVITIES**

**CORE ACTIVITIES**

Psychology interns divide their time between the following core activities. Briefly, the core activities are as follows:

- Outpatient Psychotherapy (Individual and Group)
- Psychology in Primary Care
Psychology Internship 2019

- Psychological Testing

Outpatient Psychotherapy Services

The goals of the Psychotherapy Service Program are twofold in nature with the awareness of cross-cultural and individual difference issues that pertain to the client: 1) To further develop and enhance diagnostic interview skills by conducting bio-psychosocial evaluations; 2) To further develop and refine psychotherapeutic skills, ranging from conceptualization, formulation, and diagnosis of the client’s presenting symptoms to goal setting and implementation of specific interventions; 3) To develop consultative skills which consists of assessing a client's capacity to benefit from ongoing psychotherapeutic services and collaborating on treatment dispositions and interventions with clinical supervisors and, if applicable, the multidisciplinary treatment team (psychologists, psychiatrists, and case managers.) Interns develop the skills to assess the clients’ ability to benefit from psychotherapeutic services as well as to assist with the decision to modify the level of care of clients as needed with the assistance of clinical supervisors. Interns are offered the opportunity to develop advanced skills in diagnostic interviews, individual/family psychotherapy, and group psychotherapy.

As a rule, this service offers psychotherapy, based primarily on a short-term, psycho-educational and maintenance approach. All therapy cases undergo an initial counseling session by a clinician. Through this counseling session, appropriateness for services, level of care as well as treatment modality is determined (individual, family or group). At the Center, brief therapy operates on a recommended 6-8 individual/family session model, making as much use as possible of problem-focused, defense building and supportive psychotherapeutic strategies, which can include the participation of additional family members whenever necessary and appropriate. Because of the nature of the client population served, and the tremendous life difficulties and circumstances that they tend to face on a daily basis, it is impractical to restrict one's therapeutic approach to traditional, purely psychodynamic, behavioral, cognitive-behavioral, and/or family system approaches; rather, a flexible approach which incorporates several theoretical models is encouraged, after conscientious review of the therapist's intervention repertoire and familiarity with empirically supported treatments.

When a particular case demonstrates a need for treatment beyond 8 individual/family sessions, interns can request a supervisor's approval to extend treatment for an additional fixed number of sessions. It should be understood clearly that psychotherapy services can only continue to be offered to those clients who are willing to use them reliably and have demonstrated investment and benefit in previous sessions. Therefore, a client's failure to show for two scheduled sessions or two cancellations, will result in them being automatically discharged from the Psychotherapy Service Department at that time. Of course, clients are fully informed about and agree to these conditions at the outset of treatment, and they are free to seek services in the future if they so desire.

Revised March 2020
Besides individual and family therapy, the Outpatient Psychotherapy Program also offers a specific psycho-educational approach through group therapy for those clients who can benefit from more ongoing long-term support and education in specifically identified areas. In the Psychotherapy Department, interns are provided with the opportunity to lead an adult (male/female) group offered on an ongoing basis for at least two years for those clients who have experienced long standing histories of depression, anxiety, and difficulty managing illness and stress related symptoms. Other opportunities for providing additional group therapies are available based on the intern’s areas of interest, specifically in the TACT Program. The Treating Adolescents Coping with Trauma (TACT) Program at Citrus Health Network provides Specialized and Comprehensive Services to children and adolescents who are survivors of sexual abuse, exhibit sexually reactive behaviors, present sexually inappropriate behaviors, and display sexually abusive and/or sexually offensive behaviors. Services are provided to children and their families in the Miami Dade County area from ages 4-18. Services include individual, conjoint parent-child sessions (if applicable), and group therapy depending on the clinical presentation. Specialized services are offered through the Survivors Service Track and the Offensive Behavior Service Track. Additionally, throughout the Outpatient Psychotherapy/TACT rotation, interns also co-lead a group for adolescent males with legal charges of sexual offenses. This group uses Cognitive Behavioral Therapy and psychoeducational approaches in their specific interventions.

In addition, interns will be provided the opportunity to rotate through our Assessment and Emergency Services (AES) department for a day. AES is a psychiatric emergency rooms and is often the starting point for any client seeking mental and behavioral health services at Citrus Health Network. In this mini-rotation, offered within the Outpatient Psychotherapy Program, psychology interns will conduct diagnostic interviews in order to assess client’s level of acuity or psychiatric status and to ensure the correct and appropriate disposition for client’s immediate and long-term needs. Additionally, they will be completing brief crisis interventions geared at reducing acute levels of psychological distress and assisting clients regain a more adaptive level of functioning. Psychology interns will be screening new and active clients for psychotherapy services and determining the need and appropriateness of psychotherapy treatment. If psychotherapy treatment is warranted, the psychology intern will initiate psychotherapy treatment and provide an initial appointment for services.

Interns are offered the opportunity through the Individual Outpatient Psychotherapy Program to develop specialized skills with the sub-populations that exist at the Center. These sub-populations include working with children, adolescents and the adult population who present a wide range of clinical diagnoses. Some of the clinical presentations include children and adolescents with behavioral and emotional difficulties, dually diagnosed adults, the chronically mentally ill, affectively impaired adults, adults diagnosed with personality disorders, children and adolescents.
who are survivors of sexual abuse and children and youths with sexual reactive and sexual abusive/offensive behaviors.

**Primary Care Psychology**

The Primary Care Psychology service delivers integrated care with a focus on the application of psychological knowledge and principles to common physical and mental health problems. Areas of focus may include depression, anxiety, ADHD, perinatal and post-partum depression, weight management, hypertension, cardiac disease, cancer, and diabetes, as well as health promotion and prevention. Additionally, the psychology intern will have the opportunity to provide manualized treatment for smoking cessation and chronic pain. The primary function of the psychology intern is to provide behavioral health services in a manner that upholds quality standards and results in better patient health outcomes. The rotation is designed to prepare the intern to function independently as a clinical psychologist with experience working in a primary care setting, as part of an interdisciplinary team. The psychology intern will gain experience working with children, adolescents, and adults with low to moderate SES, and various medical and psychiatric diagnoses. The psychology intern will provide consultation to all primary care providers, facilitate the integration of behavioral health services, and focus on a whole person approach to health care. Further, the psychology intern along with the multidisciplinary team will have the opportunity to conduct daily huddles; huddles will provide an opportunity to anticipate patient needs, identify gaps in care, enhance communication, teamwork, and practice flow.

The Primary Care Psychology rotation strives to provide evidence-based treatment approaches to facilitate improvement in both mental health and physical health outcomes. The psychology intern will become proficient in therapeutic approaches such as cognitive-behavioral therapy and motivational interviewing to improve psychiatric symptoms and overall level of functioning, increase motivation for change, and enhance self-management skills. Intern clinical responsibilities may include: (1), administering/reviewing behavioral health and substance abuse screeners, (2) conducting triages, risk assessments, and diagnostic interviews (3) developing psychological treatment plans and health goal plans, (4) providing short-term therapeutic interventions; and (5) referring patients to specialty care and other services, if deemed appropriate (6) administering and scoring post-partum depression and developmental screeners during primary care visits, and (7) completing outcome measures at initiation, re-administer at every other session, and at termination of behavioral health services. Additionally, interns will be expected to write timely, professional reports suitable for a fast-paced medical setting. The on-site supervisor will provide hands-on supervision appropriate to the level at which the intern is operating. The on-site supervisor will discuss professional and ethical issues, as well as content and manner of case consultation, during the routine weekly supervisory sessions. At some sites, there is the additional resource of having a Post-Doctoral Resident with the availability to consult on cases on-site. Further, the intern will have the opportunity
to lead Wellness Groups in CHN’s Children’s Crisis Unit, these groups are offered on an ongoing basis with topics focusing on stress management and lifestyle modifications.

**Psychological Testing Service**

The goal of an intern’s experience in the psychological testing service is to develop the administration and interpretation skills necessary to conduct psychological and psycho-educational evaluations in order to formulate an appropriate diagnosis and make treatment recommendations as needed. The focus of training and supervision in psychological testing will center on developing refined administration skills and increasing proficiency in interpretation of cognitive, academic, behavioral, developmental and personality assessments. Interns are expected to complete no less than 8 psychological assessments for the internship year. The assignment of testing referrals will include adults, adolescents and children from culturally diverse populations.

The assigned testing supervisor will closely supervise all aspects of the evaluation process including a pre-testing review of the case, appropriate test selection, interpretation and review of all test data, report writing and distribution of the final report in compliance with Center policy. As the intern’s skills in test administration and interpretation develop, he or she will be expected to assume more autonomous functioning in the psychological testing process.

**SEMINARS**

The internship program provides opportunities for didactic exposure to scientific literature, and the discussion thereof, through several seminars. In the event that an intern wishes to add to the training experience by bringing additional literature, he/she is welcome to do so. These seminars also focus on review of clinical cases. Additionally, seminars will provide exposure to other Citrus Faculty/Residents and community-based psychologists with specialty practice expertise. A complete calendar and all syllabi for these seminars that include topics for discussion and objectives can be found on the Educational Programs SharePoint Page.

These seminars are facilitated by the following faculty members:

**Adult Diagnostic & Psychotherapy Seminar:** Dr. Cabrera and Dr. Egusquiza  
**Child Diagnostic & Psychotherapy Seminar:** Dr. McCoy, Dr. Akel-Greer and Dr. Hricisak.  
**Primary Care Psychology Seminar:** Dr. Artiles, Dr. Vera and Dr. Maspions  
**Psychological Testing Seminar:** Dr. Rosen and Professional Guest Speakers  
**Psychological Mentoring:** Psychology Residents CHN Faculty and Staff Psychologists

Revised March 2020
**Grand Rounds:** Professional Guest Speakers and CHN Faculty

Monthly Grand Rounds are held on the 2\textsuperscript{nd} Wednesday of each month from 12pm-1pm. Attendance is mandatory.

Interns are also encouraged and invited to attend scientific meetings in the community, which are sponsored by a number of organizations, including the Florida Psychological Association, Dade County Psychological Association, the University of Miami, Nova Southeastern University, the Florida Psychoanalytic Society, South Florida Psychiatric Society, Baptist Hospital and others. Notices of these meetings, as well as job opportunities and other matters pertinent to the Psychology Department are shared via email.

**SUPERVISION**

APA requirements state that interns must have at least four hours of supervision per week. To comply with this standard, each intern will be assigned supervision as follows:

- 2 hours of individual supervision with Placement Supervisor to address administrative and clinical issues
- 1 hour individual supervision with Training Director for testing
- 1 hour group supervision
- TACT supervision will be provided as required.

All supervisors are receptive to discussion of issues related to the integration of science and practice and discuss issues regarding diversity relating but not limited to cross-cultural issues, religious/individual differences, disabilities and sexual orientation issues as they apply to their client contacts.

Additional regular supervision will be provided as needed. Above and beyond these times, interns should feel that a faculty supervisor is always available for consultation. Every supervisor is accessible by text or cellular phone and is accustomed to responding quickly when called. Other CHN licensed psychologists and post-doctoral residents are also available for consultation as needed.

In order to provide a consistently rich learning environment, program faculty will consult with each other regarding supervisory issues/mentoring approaches on a regular basis.

**WORK SCHEDULE**

Revised March 2020
Normally, interns’ clinical activities can typically occur weekdays between the hours of 7:30am and 5:30pm. Interns have the flexibility to schedule certain activities (e.g., psychotherapy sessions and psychological assessment) at other times. There are other activities which occur regularly, such as seminars, or rounds on an assignment, which interns are required to attend. A general guideline is provided below for weekly hours in each activity:

**Rotation-Specific Activities:** 25-35 hours/week  
**Psychological Testing:** up to 5 hours/week  
**Seminars:** 4 hours/week  
**Required Individual/Group Supervision:** 4 hours/week total supervision time  
  - 2 hour/week individual supervision - Rotation-Specific  
  - 1 hour/week individual supervision - Psychological Testing  
  - 1 hour/week group supervision – Case Presentations  
**Additional Supervision, as needed:** 30 mins – 1 hour/week

All interns will receive the same administrative assistance and resources as any fulltime regular CHN staff. Please do not hesitate to contact the administrator at any of your placement sites if you need help navigating your way through administrative procedures.

**PROFESSIONALISM**

Professionalism is one of the key competency areas evaluated during the internship year. Among many other factors, interns are expected to:

- Arrive on time to all educational and clinical activities or call their placement supervisor or seminar presenter to advise of their late arrival.
- Submit all finalized documentation within 48 hours of delivery of clinical services as per CHN center-wide policy.
- Continuously self-evaluate and monitor for wellbeing.
- Maintain open communication with supervisors and/or Training Director
- Treat peers, patients, faculty and staff with respect.

**PERFORMANCE EVALUATIONS**

As just described, interns are given verbal feedback on their work on an ongoing and continuous basis via supervision. Progress is documented in intern’s supervision logs. Formal performance evaluations are conducted by supervisors involved with a given intern using in-vivo supervision at the start and end of each assignment. A program-wide evaluation form (found on the Educational Programs SharePoint Page) is used where each aspect of an intern's functioning based on the competency areas delineated by the APA SoA, each according to our training goals, objectives, and
competencies, is evaluated, including the areas of initial diagnostic assessment skills, therapeutic intervention skills, testing skills, adherence to ethical principles and standards, appropriate use of knowledge related to cross-cultural issues and individual difference issues as they apply to their client contact, productivity, and receptivity to supervision. In order to successfully complete the Doctoral Internship, the intern must obtain a score of 3 or higher on the Midterm Evaluation on each competency, and a score of 4 or higher on the Final Evaluation on each competency. Both the Mid-Year and End-Year Evaluation will be shared with the intern’s doctoral program. If an intern scores 2 or lower on any competency in the Midterm Evaluation, a remedial plan will be developed for that specific competency. In the event that an intern does not meet minimum standards in a certain area, the Internship Training Director and the Rotation Supervisor will meet to define the appropriate intervention to take. Documentation of this meeting will be kept in the intern’s educational file along with any pertinent documents related to the intern’s time at CHN. This documentation may also be forwarded to the university graduate programs from which the interns come in order to satisfy their own academic requirements.

It is also extremely valuable to the Center and the internship program to receive ongoing feedback from trainees regarding our operations, resources, policies, and trainees’ opinions about the content, process, and quality of the training provided. This usually occurs through the frequent communications trainees have with supervisors on a nearly daily basis. Quarterly, interns will be asked to complete an anonymous evaluation form consisting of a rating scale and comment areas to address the internship program’s strengths and weaknesses. The form and the corresponding policy describing the method used to collect this information and how it is used to implement program changes can be found on the Educational Programs SharePoint Page.

The Graduate Psychology Education Committee has oversight of the Doctoral Internship Program in Psychology. An representative(s) from the intern class will be selected at the beginning of the program year by their peers to participate in the committee and act as the liaison between the cohort of interns and the program.

**PAID TIME OFF & EDUCATIONAL LEAVE**

Taking leave from one's duties at the Center must be planned carefully and in full coordination with supervisors and other trainees in order to make sure the delivery of services in all areas continues responsibly and as smoothly as possible. Currently, all psychology trainees are entitled to standard employee benefits, which include 10 days of Paid Time Off (PTO) and the following holidays:

- **New Year’s Day**
- **Independence Day**
- **Thanksgiving Day**

*Revised March 2020*
Additionally, Interns are entitled to 5 days Educational Leave. Any time not taken before the end of the program year will be forfeited.

Citrus Health Network policy for psychology trainees to obtain approval for leave requests is as follows:

1. Intern should verify time requested is available. This may be confirmed through the Office of Education and Training or the Human Resources Department.

2. At least two weeks prior to the dates requested, the intern must submit a LEAVE REQUEST (found on the Educational Programs SharePoint Page) to their placement supervisor for coverage arrangements and initial approval. Please note that taking PTO in the month of June is strongly discouraged.

3. The signed LEAVE REQUEST form will be given to the Internship Training Director for review and final approval.

4. Once approval is obtained, LEAVE REQUEST should be submitted to the Office of Education and Training and the Human Resource Department for processing.

On average an intern may work on-site between 7:30 a.m. and 6:00 p.m. with an allotted lunch break.

In the event that an intern calls in sick, please contact the Placement Supervisor and Internship Training Director as soon as possible. Interns must be ready to provide as much information as possible with respect to the duties that they will not be able to perform. In the event that an intern needs an extended leave of absence due to illness or other leave, as applicable, the proper required forms must be completed and submitted. Upon the day of return to the Center, interns must complete a LEAVE REQUEST using the same method described above.

Upon commencement of the training program, CHN will provide up to 40 hours of educational leave with pay to psychology interns. Following proper protocols, educational leave may be taken only once it is approved by the appropriate supervisors, Internship Training Director and lastly, the Chief Executive Officer. The Human Resources Department must be in receipt of the approved request for educational leave prior to the intern taking the leave in order to ensure proper processing of the request.

NOTE: This handbook is intended to provide a general overview of the program. Its contents

Revised March 2020
may be modified as needed throughout the internship year. For additional information, please refer to the applicable policies and procedures reviewed during Orientation and stored on SharePoint.

APPIC Disclaimer: 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.