

Psychology Doctoral Internship Program

MISSION: *Hope, Respect, and Recovery for People with Mental Illness*



**Rockland
Psychiatric Center**



**Rockland
Psychiatric Center**

140 Old Orangeburg Road | Orangeburg, NY 10962

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Welcome

Dear Prospective Applicant,

Thank you for your interest in the Rockland Psychiatric Center (RPC) Psychology Doctoral Internship Program. RPC is a New York State Office of Mental Health (NYS-OMH) inpatient and outpatient facility that provides compassionate and comprehensive care to adults who have serious and persistent mental illness. The primary aim of the RPC Psychology Doctoral Internship Program is to provide interns with a comprehensive clinical training in evidence-based, culturally competent, individualized services to adults in order to become competent entry-level psychologists. The Psychology Doctoral Internship Program aligns with RPC's mission of providing Hope, Respect, and Recovery for individuals with mental illness.

The RPC Psychology Doctoral Internship Program offers two positions that are full-time and have a one-year commitment. The current salary is \$40,277 plus the benefits that NYS-OMH employees receive at the onset of employment. RPC welcomes all applicants from diverse backgrounds as this placement provides a very rich and diverse employee and patient population.

This handbook will answer questions you may have about our program. It includes information regarding the program's training aims, training philosophy, and expectation of profession-wide competencies. It also provides information on the services that interns provide in our inpatient facility, the variety of unit placements offered, and other opportunities available for interns. It highlights the commitment the Training Committee has to the growth and development of the interns and the value that this internship provides. You will also find policies and procedures that an intern must adhere to when employed at RPC.

We hope you find all the information you need to decide if this placement is a good fit with your training goals. We look forward to reviewing your application packet. Good luck!

The RPC Training Committee

APPIC Membership

The Psychology Doctoral Internship Program at Rockland Psychiatric Center is an APPIC member. 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.

APA Accreditation Status

The Psychology Doctoral Internship Training Program is not currently accredited by the APA. However, the program has an APA site visit scheduled for November 19-20, 2024. Please be advised there is no assurance that we will be able to successfully achieve accreditation. Questions related to the program's accreditation status should be directed to the Commission on Accreditation:

Office of Program Consultation and Accreditation

American Psychological Association
750 1st Street, NE, Washington, DC 20002

Phone: (202) 336-5979

E-mail: apaaccred@apa.org

www.apa.org/ed/accreditation

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About Rockland Psychiatric Center

Rockland Psychiatric Center (RPC) is one of the largest psychiatric facilities in New York State. It is a New York State Office of Mental Health (NYS-OMH) inpatient and outpatient facility that provides compassionate and comprehensive care to adults who have serious and persistent mental illness.

RPC's main campus and hospital inpatient-based services are located in Orangeburg, NY, 17 miles north of Manhattan, NY. It is in a Mid-Rise Complex, which is comprised of Buildings 57, 58, and 60 and all three buildings are connected, which allows for easy accessibility across the three.

RPC is affiliated with New York University and has a close relationship with the Nathan Kline Institute (NKI), one of the two OMH research centers in New York State. NKI is located on the same campus with RPC and RPC's research unit is co-run with NKI.

Intermediate & Extended Treatment

RPC provides both inpatient and outpatient mental health services to adults who are 18 years and older. Individuals are referred to our hospital treatment services when they require care beyond their stay in acute psychiatric units of local hospitals in Westchester, Rockland, Orange, Sullivan, Ulster, Dutchess, and Putnam counties. RPC specializes in treating individuals who have been diagnosed with serious and persistent mental illness. Our efforts are focused on helping the individual return to the community with appropriate aftercare and support. Beyond hospital care, RPC offers ambulatory clinic care, Assertive Community Treatment (ACT) teams, clubhouses, transitional and other residences, and family care residences.

Admission/Triage

Individuals are admitted through a centralized Triage department. Triage staff complete initial psychiatric and physical examinations to incoming individuals. They obtain historical treatment information and current referral material. Triage identifies what unit meet the needs of the individual and escorts them to their unit, where they meet the treatment team.

Buildings/Units

RPC inpatient services has a total of 13 units providing treatment to approximately 325 adult patients. The units are located in Buildings 58 and 60. The 13 units are divided into three divisions: Admissions and Forensics (both in Building 58) and Community Reintegration (Building 60). These divisions include a variety of specialty subpopulations such as: geriatric patients, multilingual/multicultural patients, sex offenders, patients under the Criminal Procedure Law status, polysubstance abuse and/or alcohol abuse, trauma, and personality disorders to name a few.

Each building is managed by a Chief of Service and a Medical Director. Each unit has a multidisciplinary treatment team comprised of a psychiatrist, psychologist, medical specialist, nurse, social worker, rehabilitation counselor, dietician, and mental health therapy aides. Each treatment team is responsible for the treatment planning of each individual on that unit.

Community and Outpatient Services

RPC has 13 outpatient clinics covering a span of seven counties in the Hudson Valley, two ACT teams (Dutchess and Middletown), and a Mobile Mental Health Team. Our residential services is comprised of seven residences across three campuses (Rockland, Dutchess, and Middletown) and 24 Family Care homes.

Partnerships

RPC contracts with the nonprofit Consumer Empowerment Center to provide peer advocacy and peer support for those served in our treatment services. NAMI-FAMILYA – a local affiliate of the National Alliance for the

Mentally Ill – has an office in building 57 and provides a variety of supports to families. The Office of Family Support Services is available to assist in any concerns that families may have about their loved one’s care and treatment while in the hospital.

Internship Aim

The primary aim of the RPC Psychology Doctoral Internship Program is to provide interns with a comprehensive clinical training in evidence-based, culturally sensitive, individualized services to adults in order to become competent entry-level psychologists. The Internship Program aligns with RPC’s mission of providing Hope, Respect, and Recovery for individuals with mental illness.

Structure of the Training Program

The Psychology Doctoral Internship Program at RPC subscribes to a Practitioner-Scholar Model. Our philosophy of training is to provide interns with the ability to apply the learned research-based practices and theoretical perspectives into clinical practice with adults who exhibit a wide-range of clinical diagnoses. Our primary goals are clinically focused, and these are developed from the wealth of research and empirically-based treatments that inform our clinical practice. Interns are expected to become “consumers of research,” to apply what they learn into practice.

Inpatient Services

RPC’s Inpatient Services consist of 13 units on the main campus. Interns complete two-6-month rotations. The selection of rotation sites is based on the intern’s personal objectives. The units are divided into three divisions: Admissions, Forensics, and Community Reintegration. Interns identify two units of their preference, but the two units cannot be from the same division. While there is some overlap of diagnostic presentation across the divisions, each unit has a specific function and role in the overall facility, and thus some vast differences exist between the three. This rotation structure provides interns with an intensive experience in their primary area of interest, but also provides the opportunity to have a broader exposure to other clinical populations and/or treatment modalities.

Internship begins with a comprehensive facility orientation and an orientation with the Training Director. After each intern has been assigned to a unit, the intern works in conjunction with the Unit Psychologist (who is the unit supervisor) on the treatment team and integrates as a team member. Each unit has a treatment team comprised of approximately 9-11 team members of various disciplines including psychiatry, psychology, medicine, nursing, social work, rehabilitation services, pharmacy, dietician, and mental health therapy aides.

Throughout the training year and on each rotation, interns are expected to:

- Provide individual psychotherapy services
- Provide psychoeducational/psychologically-based group programming
- Learn how to interact with patients in the milieu
- Participate in interdisciplinary treatment planning and review
- Complete psychological assessments which may include a variety of batteries to assess intellectual functioning, cognitive decline, diagnostic clarification, and/or specialized risk assessments (e.g., HCR-20) for the forensic population
- Complete required documentation
- Learn how to develop a behavioral management plan
- Learn the fundamentals of supervising others by supervising psychology externs

Throughout each rotation, interns are expected to have a caseload of a minimum of five individual cases and will co-facilitate four groups. The selection of individual cases are in consultation with their Unit Psychologist and the treatment team. Interns co-facilitate 1-2 groups with the Unit Psychologist, one group with another Staff Psychologist, and one group will be co-led with their co-intern. This opportunity increases their exposure to other clinical populations and further develops their ability to work with multiple diagnostic presentations. Group supervision is also provided for a minimum of one hour per week.

Typical Weekly Schedule

There are some aspects of an intern's schedule that remain consistent from week to week: Unit Morning Rounds and Community Meeting (5 hours a week), Treatment team meetings (2-2.5 hours a week), individual, group and testing supervision (5 hours a week), supervision of externs (1 hour a week), and didactic seminars (2-3 hours a week). Other aspects are more fluid and can vary almost on a day-to-day basis: direct patient care (15 hours a week), clinical preparation, and documentation.

Inpatient Rotations

Given the variety of rotation options, interns typically rotate on their units of preference. If there is a demand for a particular rotation on a given year, this is discussed with the interns and may require some negotiation based on their desired objectives. The availability of units for the 2024-2025 year are listed below.

Please note: The availability of units for the 2025-2026 internship rotations depends on current staffing at that time.

Admissions Division

Unit 203-This is a co-ed unit serving as the entry point for patients who are acute and unstable and are transferred from the local community hospitals. It is comprised of some patients whose first language is not English and require the use of interpreters. In addition, there are patients who are hearing/speech impaired and communicate using American Sign Language (ASL). Interns who are bilingual or multilingual have the option to conduct psychological services in an alternative language other than English if that is the patient's preferred language. The supervisor and intern will discuss if it's clinically appropriate at that time.

Unit 204-This is a co-ed unit serving as the entry point for patients who are acute and unstable and are transferred from the local community hospitals. Patients tend to be very unstable due to non-medication compliance before arriving and some also need to learn behavioral control of their behavior.

Forensics Division

Unit 403-Criminal Procedure Law (CPL) Unit. This is a co-ed unit with patients who pled "Not Guilty by Mental Disease or Defect" and are now under the Criminal Procedure Law statute. These patients have served time in prison and were sent to RPC for further psychiatric stabilization.

Unit 504-Problematic Sexual Behaviors Unit. This is an all-male unit comprised of some Registered Sex Offenders and also individuals who have a history of problematic sexual behaviors that have impacted their ability to live in the community.

Community Reintegration Division

Unit 205-This is an all-female unit comprised of patients with psychotic, but also co-morbid personality disorders; such as Borderline Personality Disorder (BPD) that complicates their stabilization and successful placement in the community.

Unit 206-This is a co-ed unit comprised of patients who have been hospitalized for a very long time due to severity of illness, institutionalization, difficulty with placement, etc. A subset of the patients on this unit were absorbed from when Middletown Psychiatric Center and Hudson River Psychiatric Center closed and were unable to be placed in the community at that time.

Psychological Assessment

The completion of psychological assessments, which includes administration of tests, scoring, interpreting data, report writing, and diagnostic presentation of results, is an ongoing training experience throughout the training year. A minimum of four assessments are completed during the internship year. Psychological assessments are conducted for a variety of reasons; some can include to assess intellectual functioning, cognitive decline, diagnostic clarification, discharge planning, and some are risk assessments required for the forensic population.

The Testing Supervisor is responsible for overseeing the intern's ability to complete a psychological assessment. They meet for supervision a minimum of one hour a week for supervision. Interns may be assigned to complete a psychological assessment for a patient from any of the three inpatient divisions. In addition, they may be assigned to a patient who is in one of RPC's outpatient clinics and in need of a psychological assessment. This provides them with the opportunity to interact with a variety of patients and interface with different multidisciplinary teams for diagnostic presentations. Interns administer the assessments, score, integrate data, write up results, and present findings all under the supervision of the Testing Supervisor.

Didactics

The Didactic Seminars support the development of professional standards. Most of the seminar topics are presented by members of the Psychology Department and others by clinical leaders within NYS-OMH. Didactic seminars meet weekly for 2-3 hours throughout the internship year and cover a variety of professional and clinical topics. The Didactic Seminars are one of the opportunities for interns to interact and socialize together.

The Didactic Seminars, in combination with the intern's rotation experiences, provide the interns with the opportunity to learn and practice the application of psychological concepts to the professional delivery of psychological services. Seminar topics include a range of diagnostic, assessment, intervention, and professional development issues. Each topic explores how to incorporate and apply these to the populations they are serving on their rotations.

All interns are required to attend the weekly Didactic Seminars. The seminars are held in the large conference room of Building 60 on the 5th floor, every Monday afternoon from 2:30-4:30PM with some other days of the week added occasionally.

The didactic calendar for the year 2024-2025 is listed below. A similar calendar can be anticipated for the 2025-2026 year.

Date	Topic	Presenter (s)
8/12/2024	Hospital Wide New Employee Orientation	Staff Development
8/16/2024	Orientation to the Psychology Internship Program	Dr. Velez
8/21/2024	Orientation to the Psychology Internship Program/ Meet Training Committee/Psychology Department	Dr. Velez, Training Committee, Psychology Department
8/23/2024	Orientation to the Psychology Internship Program/Boundaries	Dr. Velez
8/27/2024	Orientation to the Psychology Internship Program– Review Policies & Procedures	Dr. Velez
9/2/2024	NO SEMINAR-Holiday	
9/6/2024	Supervision	Dr. Velez

Date	Topic	Presenter (s)
9/9/2024	Serious and Persistent Mental Illness	Dr. Velez & Dr. Buonocore
9/13/2024	Supervision	Dr. Velez
9/16/2024	Psychological Testing Series– 1 of 8 How to Select Psychological Tests/The Psychological Report	Dr. Pitsikalis
9/18/2024	International Festival– Cultural Diversity Day	RPC Staff
9/23/2024	Psychological Testing Series– 2 of 8 Clinical Interview/Mental Status/ Test Development and Item Analysis	Dr. Pitsikalis
9/27/2024	Supervision	Dr. Velez
9/30/2024	Documentation Treatment Planning/Behavior Plans	Dr. Kaljevic
10/2/2024 Approx 2-4PM	Psychopharmacology Series– 1 of 5	Dr. Ozdoba
10/7/2024	Forensic Series– 1 of 4 CPL 330.20 in Civil Hospitals	Dr. Saks
10/9/2024 Approx 2-4PM	Psychopharmacology Series– 2 of 5	Dr. Ozdoba
10/14/2024	NO SEMINAR-Holiday	
10/21/2024	Psychological Testing Series– 3 of 8 Administering Tests in Inpatient Setting	Dr. Pitsikalis
10/23/2024 Approx 2-4PM	Psychopharmacology Series– 4 of 5	Dr. Ozdoba
10/28/2024	Working with the Dually Diagnosed Patient	Dr. Shtrambrand
10/30/2024 Approx 2-4PM	Psychopharmacology Series– 5 of 5	Dr. Ozdoba
11/4/2024	Psychological Testing Series– 4 of 8 Intelligence Tests (WAIS-IV and WASI-2)	Dr. Pitsikalis
11/8/2024	Multicultural Series– 1 of 3 Working with Interpreters	Steven Hess
11/11/2024	NO SEMINAR-Holiday	
11/20/2024	Prolonged Exposure for Post-Traumatic Stress Disorder (PTSD)	Dr. Woods

Date	Topic	Presenter (s)
11/25/2024	Forensic Series– 2 of 4 Assessing Risk for Sexual Violence	Dr. Saks
12/2/2024	Ethics	Dr. Pitsikalis
12/9/2024	Mindfulness	Dr. Shtrambrand
12/16/2024	Group Therapy- Concepts and Clinical Application	Dr. Latendresse
12/18/2024	Intern Case Presentation	Bina Westrich
12/23/2024	Psychological Testing Series– 5 of 8 Objective Tests (Beck Series, BSI)	Dr. Pitsikalis
12/30/2024	NO SEMINAR-Holiday	
1/6/2025	Forensic Series– 3 of 4 Forensic Assessment-HCR-20	Dr. Kaljevic
1/13/2025	Multicultural Series– 2 of 3 Treatment of Latino Clients	Dr. Villavicencio
1/15/2025	Intern Case Presentation	Zoe Zins
1/20/2025	NO SEMINAR-Holiday	
1/27/2025	Psychological Testing Series– 6 of 8 Objective Tests (PAI, MMPI-3, MCMI-IV)	Dr. Pitsikalis
2/3/2025	Multicultural Series– 3 of 3 Gender-Affirming Care and People with Severe Mental Illness	Dr. Eckley
2/10/2025	Working with Families	Dr. Buonocore
2/17/2025	NO SEMINAR-Holiday	
2/24/2025	Psychodrama and its Clinical Application– Part 1 of 2	Dr. Latendresse
3/3/2025	Psychodrama and its Clinical Application– Part 2 of 2	Dr. Latendresse
3/10/2025	Psychological Testing Series– 7 of 8 Projective Tests	Dr. Pitsikalis
3/17/2025	Dialectical Behavioral Therapy in Inpatient Settings	Dr. Hegg
3/24/2025	Adult Attachment Styles and Implications for Treatment	Dr. Soliman
3/31/2025	Forensic Series– 4 of 4 Mental Health in the Prison System	Dr. Harris & Dr. Mathew
4/9/2025	Recovery Oriented Cognitive Therapy (CT-R)	Dr. Woods

Date	Topic	Presenter (s)
4/14/2025	Suicide Risk Assessment and Prevention	Dr. Villavicencio
4/21/2025	Psychological Testing Series– 8 of 8 Neuropsychological Tests	Dr. Pitsikalis
4/28/2025	Narcissism in Therapy	Dr. Ben-Yoseph
5/5/2025	Therapeutic Play and its Clinical Application– Part 1 of 2	Dr. Latendresse
5/12/2025	Therapeutic Play and its Clinical Application– Part 2 of 2	Dr. Latendresse
5/19/2025	An Introduction to Poetry Therapy	Dr. Saks
5/26/2025	NO SEMINAR-Holiday	
6/2/2025	Supervision	Dr. Soliman
6/9/2025	Thoughts About the Therapeutic Process	Dr. Ben-Yoseph
6/16/2025	Integrative and Eclectic Practice– Multimodal Therapy	Dr. Sanders
6/23/2025	Psychodynamic Treatment Planning & Interventions for Patients with Severe Mental Illness	Dr. Saks
6/30/2025	Professional Development– Post-Doc/Licensure/EPPP	Dr. Brown
7/8/2025	Starting a Private Practice	Drs. Shtrambrand, Harris, & Woods
7/14/2025	Professional Development– Diverse Career Opportunities for Psychologists	Dr. Griffin & Dr. Pitsikalis
7/22/2025	Intern Case Presentations	Dr. Velez
7/29/2025	Individual Self-Care and Wellness/Internship year wrap-up	Dr. Velez & Training Committee

Additional Didactic Experiences

Interns also have the opportunity to participate in supplementary didactic seminars, which are presented by the NYS-OMH Statewide Grand Rounds. These are held monthly. Faculty and researchers present on a variety of topics in psychology and psychiatry that are pertinent to the evaluation and treatment of adults with serious and persistent mental illness.

Profession-Wide Competencies

The RPC Psychology Doctoral Internship Program prepares interns for entry-level practice by following the nine American Psychological Association Standards of Accreditation Profession-Wide Competencies:

- I. Research**– Interns are trained how to critically evaluate and apply empirically based research to clinical practice.
- II. Ethical and Legal Standards**– Interns must demonstrate knowledge and behave in accordance with the APA Ethical Principles of Psychologists and Code of Conduct. Interns are trained how to recognize and apply the ethical principles in a consistent and appropriate manner and seek consultation when necessary.
- III. Individual and Cultural Diversity**– Interns are trained to be culturally sensitive to the wide diversity of patients and learn how to provide culturally sensitive treatment. Interns demonstrate knowledge of current theories related to cultural differences and diversity. They also gain a better understanding of their own identity including personal/cultural history, attitudes, and biases and how these impact the provision of services they provide to others.
- IV. Professional Values, Attitudes, and Behaviors**– Interns are trained how to engage in behaviors that reflect professionalism, integrity, and empathy for others. Interns are trained to engage in self-reflection of their own personal and professional functioning and participate in activities to maintain and improve performance, well-being, and professional effectiveness.
- V. Communication and Interpersonal Skills**– Interns learn how to develop and maintain effective relationships with a wide range of individuals, including team members of various disciplines, supervisors, supervisees, and patients. They learn how to complete work in a timely, clear, and concise manner. Interns learn effective interpersonal skills and the ability to manage difficult conversations.
- VI. Assessment**– Interns develop skills to learn how to properly administer, assess, and synthesize results, to writing a complete psychological evaluation. Interns learn to assess for cultural diversity issues that may impact the assessment. Interns learn to formulate appropriate therapeutic recommendations based on the results of the assessment. They learn how to communicate orally and in writing the findings and implications of the assessment to the treatment team.
- VII. Intervention**– Interns learn to establish and maintain effective therapeutic relationships with patients. They learn to assess for clinically relevant information and demonstrate an understanding of diagnoses. They formulate case conceptualizations to help inform evidence-based intervention plans that are specific to treatment goals and objectives. They learn how to evaluate intervention effectiveness, and adapt intervention goals and methods as needed.
- VIII. Supervision**– Interns demonstrate knowledge of theories of supervision and apply them as needed. Interns demonstrate the ability to accept feedback in supervision and utilize it appropriately.
- IX. Consultation and Interprofessional/interdisciplinary skills**– Interns demonstrate interpersonal professionalism when consulting with team members, patients, and other staff. Interns learn how to work on a multidisciplinary team, navigating and incorporating different perspectives to the overall treatment goals and objectives for each individual patient.

Evaluation, Retention and Termination

In following the Profession-Wide Competencies identified above, all interns are required to demonstrate minimum levels of achievement across all nine competencies and learning elements.

At the beginning of the training year, interns receive a copy of the Intern Evaluation. This informs them of the program expectations over the course of the training year. Interns are formally evaluated by the Unit Psychologist twice a year, at the midpoint and at the end of the internship year. The evaluation process encompasses various areas such as direct observation, review of written documentation, review of assessment data, clinical discussion, and supervisory interactions. It is expected that interns begin the training program with varying degrees of competence across various skill sets. As such, formal evaluations serve to identify areas of strength and areas that require growth. Evaluations are conducted using a standard rating form, which includes space to provide written feedback regarding the interns' progress. This form is provided to the interns for their review, feedback, and signatures.

For each competency area, interns are scored on a 5-point rating scale, with the following rating values and description of each:

1 = Remedial – significant skill development required; remediation necessary

2 = Beginning/Developing Competence – expected level of competence pre-internship; close supervision required on most cases

3 = Intermediate Competence – expected level of competence for intern by midpoint of training program; routine or minimal supervision required on most cases

4 = Proficient Competence – expected level of competence for intern at completion of training program; ready for entry-level practice

5 = Advanced Competence – rare rating for internship; able to function autonomously with a level of skill representing that expected beyond the conclusion of internship training

A minimum level of achievement for interns at the mid-year evaluation is a rating score of 3 for each learning element. If an intern receives a score less than 3 on any learning element at the mid-year evaluation, the Due Process Procedures are initiated. These are discussed in more detail later on in the handbook. The minimum level of achievement for interns at the end of year is a rating score of 4 on all training elements.

Supervision

Supervision of interns is the foundation of the internship experience at RPC. Interns are regarded as trainees and the internship program's goals are to provide an enriching learning environment. Both individual and group supervision are fundamental to enhancing the learning and growth of an intern as an emerging professional.

Supervision is guided by the nine Profession-Wide Competencies listed above and cultivates interns to develop more independence and competence in each of these areas. Interns are evaluated twice a year by their Unit Supervisors, at the midpoint and end of the internship year. These evaluations are reviewed with the intern and are provided an opportunity for discussion and feedback at each timepoint.

Interns are assigned to a minimum of four supervisors; these include the Unit Psychologist for each rotation (primary supervisor), a Staff Psychologist for each group they co-lead outside of their unit (group supervisor), the Testing Supervisor, and the Training Director. All supervisors are Licensed Psychologists.

Supervision Structure	
Individual Supervision with Unit Psychiatrist	2.0 hours a week
Group Supervision	
Group Supervisor (s)	1.0 hour a week
Supervision with Training Director	1.0 hour a week
Individual Testing Supervision	1.0 hours a week
Total Hours of Supervision	5.0 hours minimum

The intern's primary supervisor is responsible for the supervision of the intern's functioning within the team. They meet for a minimum of two hours per week for supervision, which include supervising all individual cases, co-led groups and documentation. They are responsible for co-signing any documents the interns document in the Electronic Medical Record. All treatment plans and progress notes indicate that the patient was seen by an intern and supervised by a Licensed Psychologist.

Interns have up to one hour a week of supervision with other group supervisors whom they co-lead groups with outside of their unit. Interns also meet once a week with the Training Director for group supervision to discuss a variety of topics including clinical case discussion, team dynamics, and professional development. In addition, interns meet for individual testing supervision for a minimum of one hour per week to discuss the psychological assessments they are completing throughout the year. Interns always have access to consultation and supervision during which they provide clinical services.

Interns have the opportunity to provide feedback about their supervisory experience by completing a Supervisor Evaluation twice a year, at the midpoint and the end of the internship year. Interns can discuss any conflicts and/or successes with their treatment team and any supervisor with the Training Director in weekly group supervision.

Supervision of Externs

The aim of RPC Psychology Doctoral Internship Program is to provide comprehensive clinical training so that interns become competent entry-level psychologists. One aspect of this is for interns to reverse roles and learn how to transition from supervisee to supervisor. Interns learn the various supervision approaches in the current literature and learn how to apply these to become a competent supervisor.

Interns provide supervision to externs one hour a week over the course of the training year. Externs are 2nd or 3rd year level students enrolled in a psychology doctoral program. Supervision from their Unit Psychologist and the Training Director provide guidance, support, and any tools needed to increase their confidence and level of competence in this area.

Completion of Internship

In order for an intern to complete their internship, there are two criteria that must be met:

1. Completion of the required 2000 hours of training during the training year
2. Receiving the required competency ratings across all evaluations (minimum rating scores of 3 in mid-year evaluation and minimum rating scores of 4 in end-of-year evaluation)

Records of Maintenance

At the end of the training year, interns receive a Certificate of Completion. A copy of the certificate, all evaluations, and the training manual are retained by the Training Director in a file indefinitely. Any documents related to Due Process Procedures are also be maintained in the same file. However, any documents related to grievances or complaints are kept in a separate secure file designated specifically for grievances and complaints.

Intern evaluations and other relevant feedback are provided to the interns' doctoral program at the end of the internship year and if needed throughout. The Training Director contacts the doctoral program if any issues arise, such that completion of the program may be in question or if an intern begins Due Process Procedures.

Program Evaluation

Interns evaluate their supervisors at the mid-year point and at the end of the training program. In addition, interns complete a Program evaluation on the overall internship program. All the data gathered on these evaluations are used to modify/improve the internship program.

Training Period, Stipend and Benefits

Training Period

RPC's Psychology Doctoral Internship Program is a full-time (40 hours per week), 12-month commitment beginning in August. Interns are expected to be on-site Monday through Friday, from either 8:00 AM to 4:30 PM or 8:30 AM to 5:00 PM.

Stipend

RPC interns receive the current salary of \$40,277 per year with an additional location differential (\$3,400) pay. RPC has a lag payroll system, where the first paycheck is issued three to four weeks after the beginning of internship.

Paychecks are distributed every two weeks on Thursdays. Direct deposit is an option for those who would like to have their paycheck deposited directly into their bank account. These forms can be obtained from Human Resources and then paystubs are mailed home.

Benefits

Office Space/Resources

RPC interns are provided with a shared office with one other intern, each with their own desk space and computer with internet connection, phone with voicemail, and access to a centralized printer for their training year. They are also provided with basic office supplies, have access to a copy machine, scanner, and fax machine. There is a microwave and refrigerator in a common area for their convenience as well.

The computer access given to interns includes a secure server drive where they write and store their clinical documents, as well as the Mental Health Automated Record System (MHARS), where they can review and write in patient records. Interns are provided access to all available testing manuals and materials for psychological assessments.

Health Insurance

RPC interns can choose to receive either individual or family coverage and select from a variety of health insurance plans (Empire Plan or various HMO's). They also receive a dental and a vision plan, and a prescription coverage plan (co-pay is paid separately). There is a 30-day waiting period for these benefits to go into effect.

Holidays, Personal Leave, and Vacation

RPC interns are off for all Legal Holidays during their internship year. They receive five personal leave days which are available to use immediately. Interns earn 13 days of vacation time during the training year at a rate of one day every 28 days. Although these days begin accruing from the onset, they cannot be used until the seventh month of employment. Interns also earn 13 days of sick leave during the training year at a rate of one day every 28 days. These days can be used immediately after earning them.

Family/Maternity Leave

One of the requirements to complete internship is that interns must fulfill 2000 hours of full-time employment. However, during the course of the internship year, interns may experience life circumstances that require an extended leave from their duties; such as the need to care for a family member with a serious condition, pregnancy, childbirth, and adoption, or the intern's own health condition which prevents them from fulfilling their duties. During these circumstances, careful planning and consideration goes into how this impacts the structure and process of the training experience. Interns are not eligible to apply for The Family and Medical Leave Act (FMLA) because this is only applicable to employees who have been employed longer than one year of state service. However, the Training Director works in conjunction with the intern's doctoral training program to determine if an extension for the program to be completed is an option and how long that extension would be. If an extension is agreed upon, the extension is no more than three months, thus requiring the internship to be completed at the end of 15 months from the initial start date. The NYS-OMH cannot secure an intern's salaried item past the initial one-year commitment period. Therefore, when an intern returns from leave, he/she returns on an unpaid basis, until all the internship requirements are fulfilled.

While interns are not required to inform RPC if they are pregnant or planning for pregnancy/adoption prior to Match Day, it is recommended that interns inform the Training Director as early as reasonably possible so that proper planning can begin with sufficient time. Given that interns are New York State employees, all details regarding medical benefits are provided when beginning employment.

Lactation

RPC employees who return from maternity leave are entitled to break time to express breast milk in a private location each day they report to work. Interns who choose to express their breast milk are provided the opportunity to utilize one of two lactation rooms at RPC during the workday. Details are provided by the Training Director should this need arise.

Professional Leave

Interns have up to three days of professional leave during the training year, which means they can attend conferences or be used for dissertation defense if needed.

Parking

Parking is available at no cost on the RPC campus. There are ample parking spaces/lots in front and adjacent to all three buildings. Interns receive a parking pass to display on their windshield to indicate they can park in all parking lots on grounds.

Additional Resources

RPC has a relationship with the Nathan Kline Research Institute. As such, all interns have access to thousands of journal articles and books. These resources include PsychINFO, PsycARTICLES as well as multi-subject databases that have full text journals. This is an extremely valuable resource utilized for putting the research into clinical practice, but also with dissertation completion.

Intern Selection and Academic Preparation Requirements Policy

Administrative Structure of Internship

RPC's Psychology Doctoral Internship Program consists of a Training Director and a Training Committee. The Training Committee is comprised of Licensed Psychologists and the Training Director. The Training Committee meets monthly or more often if needed. The purpose is to discuss the interns progress in all areas, including achieving their required competencies, and discuss any issues that may be arising. It is also to discuss the program structure and to ensure it is meeting it's aims and providing an enriching training environment. The Training Committee meets weekly during the time where applications are received. The Training Committee reviews the applications and determines which applicants to invite for interviews based upon a standard rating scale used to determine potential goodness of fit for the internship program. After the interviews, the Training Committee meets to decide which applicants are ranked and this is done by a majority vote. In the event of a tie between Committee members, the Training Director makes the final decision.

Application Process

The RPC Psychology Doctoral Internship Program currently offers two full-time internship positions. Applicants interested in the internship program should submit an online application through the APPIC website (www.appic.org) using the APPIC Application for Psychology Internships (AAPI).

A complete application consists of the following materials:

1. A completed online AAPI
2. Cover letter (as part of AAPI)
3. A current Curriculum Vitae (as part of AAPI)
4. Three Standard Reference Forms (SRF), two of which must be from persons who have directly supervised your clinical work (as part of AAPI). Please submit no more than three SRFs.
5. Official transcripts of all graduate coursework
6. Psychological Assessment

All application materials must be received by the date noted in the current APPIC directory listing in order to be considered.

Application Screening and Interview Process

RPC bases its selection process on the entire application noted above; however, applicants who have met the following qualification prior to beginning internship are considered preferred:

1. A minimum of 350 intervention hours
2. A minimum of 75 assessment hours
3. Dissertation proposal defended
4. Some experience working with severe and persistent mentally ill populations.

All applications are reviewed by the Training Committee using a standard Application Rating Scale and evaluated for potential goodness of fit with the internship program. Applicants who are bilingual or multilingual are encouraged to apply. The Training Committee meets to determine which applicants to invite for interviews

based upon the results of this review process. Applicants are notified by email whether they have received an interview on or before December 15th.

Interviews are scheduled in early January. Applicants meet as a group with the Training Director to obtain information about the internship program. The Training Committee joins to describe their units and rotation possibilities. Each applicant is then interviewed by two members of the Training Committee and the Training Director. Interviews are conducted using a standard set of interview questions, but additional questions may be asked as deemed appropriate by the interviewers. After the interview, applicants receive an on-unit tour by the current interns. Applicants should expect to be on-site for approximately three hours.

Questions regarding the selection process or requirements may be directed to the Training Director, Katherine Velez, Ph.D. via email at Katherine.velez@omh.ny.gov.

All interns who match to RPC are required to complete the following requirements:

- Are investigated through a Criminal Background Check (CBC) by fingerprint. If there is a history of a felony or misdemeanor, Human Resources would request documentation to review the information and then make a decision to hire
- Are checked against the Staff Exclusion List (SEL), which is maintained by the Justice Center for the Protection of People with Special Needs
- Are screened against the Statewide Central Registry of Child Abuse and Maltreatment (SCR)
- Must complete I9 Form- Employee Eligibility Verification
- Submit proof of a PPD test or QuantiFERON test in the past 12 months
- Submit Immunization Record with proof of Blood titer for MMRV and Hepatitis
- Submit Record of Flu Vaccine for current flu season or sign declination form and wear a mask during flu season

Public Health Crisis

Covid-19 emerged and evolved rapidly in New York State in 2020. RPC in conjunction with NYS-OMH, has implemented guidelines and procedures to ensure the health and safety of its employees and patients. Per NYS-OMH, all RPC employees, including psychology interns, are considered essential employees and therefore are expected to report to work during a public health crisis, such as COVID-19. Safety precautions were implemented by the use of personal protective equipment, employee health screenings, and social distancing in interactions with patients and staff. All health and safety guidelines are communicated to all staff. With all the procedures that have been implemented, it is anticipated that interns have the ability to complete internship requirements safely.

At this time NYS-OMH requires all employees, including interns to be fully vaccinated against COVID-19 by the start of the internship year. Applicants can contact the Training Director for further discussion on whether an exemption can be made based on select extenuating circumstances.

Diversity and Non-Discrimination Policy

RPC is one of the largest psychiatric facilities in New York State with over 1,000 employees serving both the inpatient and outpatient facilities. Given our geographic location and strong values for diversity, RPC currently employs a diverse workforce. The overall demographic breakdown of the RPC workforce is: 34.30 %-Black, 25.70%-White, 17.20%-Asian/Pacific Islander, 6.07%-Hispanic, 0.56%-American Indian/Alaskan Native, and 16.17%-Unknown.

As such, RPC is a welcoming learning environment for all interns and welcomes applicants from all backgrounds. RPC adheres to The Human Rights Law that says in section 296.1(a), that it is an unlawful discriminatory practice “[f]or an employer or licensing agency, because of the age, race, creed, color, national origin, sexual orientation, gender identity or expression, military status, sex, disability, predisposing genetic characteristics, familial status, marital status or status as a victim of domestic violence [of any individual], to refuse to hire or employ or to bar or to discharge from employment such individual or to discriminate against such individual in compensation or in terms, conditions or privileges of employment.” Persons with disabilities, and persons with pregnancy-related conditions, are entitled to reasonable accommodation as provided in section 296.3. Accommodation of sabbath observance or other religious practices is required by section 296.10. The Human Rights Law further provides, in sections 296.15 and 296.16, protections from employment discrimination for persons with prior conviction records, or prior arrests, youthful offender adjudications or sealed records.

RPC’s Psychology Doctoral Internship Program goal is to train interns how to develop the knowledge, skills, and awareness to accept and respect all patients. The Internship Program has an expected competency in individual and cultural diversity that each intern must demonstrate by the end of their training experience. Through supervision and in-vivo experiential learning, interns learn how to become aware of their own individual biases and attitudes and how these may affect the treatment provided to our patients. They also learn to be more comfortable working with multicultural, socioeconomic, and diverse gender experiences that RPC provides. Over the course of the year, a didactic series on cultural diversity is also be provided. Interns learn how to professionally navigate cultural differences and provide culturally sensitive treatment. These skills enhance their professional development as a growing professional in the field. Diversity experiences and training are interwoven throughout the training program to ensure that interns are personally supported and well trained in this area.

Diversity Amongst the Population Served

Our inpatient census averages 325 patients. The catchment area of patients we serve include New York City and seven counties in the Hudson Valley. Given the location and the vast geographical area, RPC serves patients from ethnically and socioeconomically diverse populations. RPC provides services regardless of financial or immigration status. In addition, we have a dedicated inpatient unit (multilingual unit) that has a group of individuals whose first language is not English and require the use of interpreters. That unit also has individuals who are hearing/speech impaired and communicate using American Sign Language. Interpreters are available on site for these patients as well. Opportunities are provided for interns to have a rotation on this unit to learn about the intricacies of working with mono-lingual patients who require interpreters. There are unexpected challenges in treating these patients in a safe, equitable, and nurturing manner, and these are addressed via didactic seminars to learn how to navigate these successfully.

RPC also has a Cultural Competency Diversity and Respect Committee (CCDR) which meets monthly to discuss planning of cultural and wellness activities to promote, educate, and accept all diversity within our workforce. Interns have the opportunity to join this committee during the training year and contribute ideas for promoting diversity in our workforce.

Formal Due Process Procedures

The Training Committee meets monthly to discuss interns' progress. They also convene on an as-needed basis for any issues related to intern performance, probation, and termination procedures. RPC follows Due Process Procedures to ensure that decisions are as objective as possible. Due Process Procedures are utilized when a supervisor, faculty, and/or staff member express concerns about the performance and functioning of an intern. The procedures are outlined in a step-wise manner and involve greater levels of intervention as an issue increases in persistence, complexity, or level of disruption to the program.

The following policy is intended as a set of instructions and guidelines so that interns receive the support and assistance necessary to remediate concerns. These procedures are a protection of the rights for both the intern and the Internship Program.

Rights and Responsibilities

Interns: Interns have the right to be treated respectfully, professionally, and ethically. An intern has the right to participate in Due Process Procedures by having their viewpoint heard at each step in the process, such that they are given every reasonable opportunity to remediate any problems. The intern has the right to appeal decisions in which he/she disagrees, within the limits of this policy.

All interns have a responsibility to engage with the training program in a manner that is respectful, professional, and ethical. In addition, they should make every reasonable attempt to remediate behavioral and competency concerns and strive to meet the aims and objectives of the program.

RPC: The Internship Program at RPC and its faculty/staff have the right to be treated respectfully, professionally, and ethically. RPC has the right to implement Due Process Procedures as delineated below. The Internship Program has the right to make decisions related to remediation for an intern, including probation, suspension and termination, within the limits of this policy.

The Internship Program has the responsibility of engaging with the intern in a manner that is respectful, professional, and ethical. In addition, it should make every reasonable attempt to support interns in remediating behavioral and competency concerns and support interns to the extent possible in successfully completing the training program.

Definition of a Problem

Problems are defined as:

- An intern is unable and/or unwilling to acquire and integrate professional behavior; these attitudes or characteristics threaten the quality of clinical services provided and interfere with professional functioning.
- An intern is unable to acquire professional skills in order to reach an acceptable level of competency; these attitudes or characteristics threaten the quality of clinical services provided and interfere with professional functioning.
- An intern is unable to control or manage personal stress, psychological dysfunctions, and/or excessive emotional reaction; these attitudes or characteristics threaten the quality of clinical services provided and interfere with professional functioning.

It is the professional judgment of the Training Committee to determine when an issue becomes a problem that requires remediation. Issues typically become identified as problems that require remediation when they include one or more of the following:

- The intern does not acknowledge, understand, or address the problem when it is identified.
- The problem behavior is not merely a skill deficit, which can be addressed by additional supervision or clinical and didactic training.
- The problem behavior is negatively impacting the intern's ability to provide adequate services.
- The problem behavior is generalized to multiple areas of functioning.
- The problem behavior leads to a demand for attention and support that exceeds what the Training Committee can provide.
- The problem behavior does not change as a function of feedback and/or time.
- The problem behavior has potential for ethical or legal ramifications if not addressed.
- The problem behavior negatively impacts the public view of RPC.
- The problem behavior negatively impacts other interns at RPC.
- The problem behavior potentially cause harm to a patient.
- The problem behavior violates appropriate interpersonal communication with RPC staff.

Informal Review

When a supervisor and/or other faculty/staff member believes that an intern's behavior is problematic or that an intern is having difficulty performing at the expected level of competence, the first step is to raise the issue with the intern directly and as soon as feasible in an attempt to informally resolve the problem. Resolution may be attained using the following methods:

- Increase supervision
- Increase in didactic training
- Increase in structured readings

The supervisor and/or faculty/staff member who raised the concern should monitor the outcome and seek consultation with the Training Director to discuss the issues.

Formal Review

If the problem behavior persists following an attempt to resolve the issue informally, or if an intern receives a rating below a "3" on any learning element on a mid-year supervisory evaluation, the following process is initiated:

Notice- The intern is notified in writing that the issue has been raised to a formal level of review and a Hearing is held. In addition, a copy is also shared with the intern's home doctoral program.

Hearing- The supervisor/faculty/staff member holds a Hearing with the Training Director, Training Committee, and the intern within two weeks of issuing a Notice of Formal Review to discuss the problem behavior and to determine what action needs to be taken to address the issue. If the Training Director is the supervisor who is raising the issue, an additional faculty member who works directly with the intern is to be included in the Hearing. The intern has the opportunity to present his/her perspective at the Hearing and/or to provide a written statement with a response to the problem.

Outcome and Next Steps- The results of the Hearing is determined by the Training Director, Training Committee, and other faculty/staff who are present at the Hearing. The outcome of the Hearing is communicated in writing to the intern within 10 business days of the Hearing.

The following may occur as a result of the Hearing:

- 1. Acknowledgment.** The Training Director and Training Committee may issue in writing, an “Acknowledgement Notice” which formally acknowledges:
 - a. The Training Director and Training Committee are aware of and concerned with the problem behavior.
 - b. The problem behavior has been brought to the attention of the intern.
 - c. The supervisor and/or Training Committee are to work with the intern to specify the steps necessary to rectify the problem or skill deficits addressed by the inadequate evaluation rating.
 - d. The problem behavior is not significant enough to warrant further remedial action at this time.

- 2. Remediation.** The intern may be placed on a “Remediation Plan.” This plan defines in writing, the problem behavior, what the intern is required to do to address, change, or improve the behavior or skill deficit and the specific length of time it is to be monitored. The implementation of this Remediation Plan leads to a change in status for the intern such that they are placed on a “Probationary Status.” The length of this probationary status depends on the nature of the problem behavior and is determined by the Training Director and Training Committee. The written remediation plan is shared with the intern and the intern’s home doctoral program. It includes the following:
 - a. A definition of the problem behavior or skill deficit that is impacting the intern’s functioning
 - b. The specific plan to be implemented to rectify or improve the problem
 - c. The specific time frame for which the problem is expected to be resolved or ameliorated
 - d. The procedures designed to ascertain whether the problem has been appropriately remediated

At the end of the specific time frame, the Training Director provides a written document indicating whether or not the problem has been remediated. This document becomes part of the intern’s permanent file and is shared with the intern’s home doctoral program. If the problem has been resolved the intern’s Probationary Status is removed. If the problem has not been resolved, The Training Director may choose to:

- a. Extend the Remediation Plan- this includes all of the information delineated above and the new extended time frame is specified clearly or
- b. Move to Step 3 below.

- 3. Suspension.** The intern may be placed on a “Suspension Status.” This plan removes the intern from all clinical work for a specified amount of time. During this time, the intern may receive additional support through increased supervision, obtaining additional didactic training, close mentorship, or be engaged in another method of remediation. The time frame for the length of the suspension period depends on the nature of the problem behavior and is determined by the Training Director and Training Committee. The written Suspension Plan is shared with the intern and the intern’s home doctoral program. It includes the following:
 - a. A definition of the problem behavior or skill deficit that is impacting the intern’s functioning
 - b. The specific plan to be implemented to rectify or improve the problem
 - c. The specific time frame for which the problem is expected to be resolved or ameliorated
 - d. The procedures designed to ascertain whether the problem has been appropriately remediated

At the end of the suspension period, the Training Director provides a written document indicating whether the problem behavior has been remediated to a level that indicates that the suspension of clinical work can be lifted. This document becomes part of the intern’s permanent file and is shared with the intern’s home doctoral program. This document may include a recommendation that the intern be placed back on a “Probationary Status” with a Remediation Plan. In this case, the process delineated in Step 2 above would be followed. If the problem has not been resolved, The Training Director may choose to move to Step 4 below.

4. Termination. If the problem behavior is not rectified through any of the above processes, or if the problem represents gross misconduct or ethical violations that have the potential to cause harm, the intern may be terminated. Termination would be defined as the discontinuation of participation of the intern with any aspect of the training program. The decision to terminate an intern would be made by the Training Director, Training Committee, and a representative from the Human Resources Department. The decision to terminate an intern is made within 10 working days of the previous step completed in this process. The Training Director may decide to suspend an intern's clinical activities during this ten-day period when the final decision is being made. The Training Director notifies in writing of the decision to both the intern's home doctoral program and APPIC.

Interns who are hired as New York State Employees have the opportunity to be members of the Professional Employees Federation (PEF) Union upon hiring. As such, in the event that a problem behavior escalates to the point of possible termination, all union guidelines are followed accordingly.

Appeal Process

An intern has the right to appeal any decisions made during the Due Process Procedures. If the intern wishes to challenge a decision at any step in the Due Process Procedures, the intern may request an Appeals Hearing before the Training Committee. The intern must submit a request in writing to the Training Director within five working days of notification regarding the decision with which the intern is dissatisfied. Upon receipt of a written appeal, a review panel is convened by the Training Director consisting of him/herself, the Chief of Psychology, and at least two other members of the Training Committee who work directly with the intern. The intern may request a specific member of the Training Committee to serve on the review panel. The Appeals Hearing is held within 10 working days of receiving the intern's request. The review panel reviews all written materials and have an opportunity to interview the parties involved. They then vote by majority to either uphold the original decision or modify the decision. Decisions made by the review panel are shared in writing with the intern and the intern's home doctoral program.

If the intern is dissatisfied with the decision of the review panel, he/she may appeal the decision. The intern has an additional five working days to seek further review by submitting a written request to the Clinical Director. The Clinical Director reviews all documentation and provide a final decision within five working days of the intern's request. The final decision is delivered in writing within five working days of receipt of the appeal to the intern and to the intern's home doctoral program.

Grievance Procedures

Grievance procedures are implemented in situations in which an intern raises a concern about a supervisor, staff member, trainee, or any aspect of the internship training program. Interns who pursue grievances in good faith are not be penalized in any way.

The following are the procedures for when an intern raises a grievance about a supervisor, staff member, trainee, or the internship program.

Informal Review

Interns are encouraged to discuss the issue as soon as feasible with the individual that is involved in an effort to resolve the problem informally.

Formal Review

If the intern does not believe the issue was resolved satisfactorily, the intern may submit a formal grievance in writing to the Training Director. If the Training Director is the object of the grievance, the grievance should be submitted to the Chief of Psychology. The individual being grieved is asked to submit a response in writing. The Training Director (or Chief of Psychology, if appropriate) meet with the intern and the individual being grieved within 10 working days. Upon review of the complaint, the Training Director (or Chief of Psychology), may determine that the intern and individual being grieved require separate meetings. In the event that the grievance is related to the training program itself and not a specific individual, the Training Director and Chief of Psychology meet with the intern together. The goal of this meeting is to develop a plan of action to resolve the matter. The plan of action includes all of the following:

- a. The behavior/issue associated with the grievance
- b. The specific steps to rectify the problem
- c. The procedures designed to determine whether the problem has been appropriately rectified

If the situation involves a direct supervisor, the plan of action may include assigning an additional supervisor, reassigning a supervisor or modifying an interns' responsibilities. If the situation involves other interns or staff, modifications to assignments or other appropriate actions may be implemented.

The Training Director (or Chief of Psychology) documents the process and outcome of the meeting. The intern and the individual being grieved (if applicable) report back to the Training Director (or Chief of Psychology) in writing within 10 working days whether the issue has been adequately resolved.

In the event that it is not resolved, the Training Director (or Chief of Psychology) convenes a review panel within 10 working days. This review panel consists of the Training Director (or Chief of Psychology) and two other members of the Training Committee. The intern may request a specific member of the Training Committee to serve on the review panel. The review panel examines all written materials and have an opportunity to interview the parties involved or any other individuals with relevant information. The review panel has final discretion regarding outcome.

If the review panel determines that a grievance against a staff member cannot be resolved internally or is not appropriate to be resolved internally, then the issue is turned over to the Human Resources Department in order to initiate the NYS-OMH Due Process Procedures.

Psychology Department

The Psychology Discipline at RPC provides psychological services, including diagnostic evaluations, treatment, training, and consultation. The Psychology Department consists of a total of 28 psychologists that provide inpatient and outpatient services to patients with severe and persistent mental illness. RPC's psychologists are committed to providing the highest professional standards in the performance of these services. In addition, those that are in the Training Committee are dedicated to providing high standards of training to our interns so that when they complete this internship, they are well-equipped in working with some of the most severe mentally ill patients. The members of the Training Committee reflect a wide range of interests and orientations with a commitment to providing evidence-based clinical treatment. At this time, there are 9 psychologists in the Psychology Department that are former interns/externs of Training Programs at RPC.

Paul Saks, Ph.D. - Chief of Psychology

Dr. Saks earned degrees in Psychology and Education at Teachers College/Columbia University. He received his Doctoral Degree in Clinical Psychology at The Gordon F. Derner Institute of Adelphi University in 2008. He then engaged in analytic training at the NYU Postdoctoral Program in Psychoanalysis and Psychotherapy. Dr. Saks became a Licensed Psychologist in 2011. He has worked at several NYS-OMH facilities including Bronx Psychiatric Center, Manhattan Psychiatric Center and Mid-Hudson Forensic Psychiatric Center. He came to work at Rockland Psychiatric Center in 2022 as the Chief of Psychology. His academic and clinical interests include psychodynamic treatments for psychosis, the treatment and assessment of the sex offending mentally ill, risk assessment with forensic populations, and creative arts/poetry therapies. Dr. Saks is an Adjunct Assistant Professor of Psychology at John Jay and Teachers College and has a private forensic consultation and therapy practice.

Katherine Velez, Ph.D. - Training Director

Dr. Velez received her Doctoral Degree in Clinical Psychology in 2007 from St. John's University, New York. She completed her doctoral internship at the Hudson River Regional Consortium, which included Rockland Psychiatric Center, Middletown Psychiatric Center, and Hudson River Psychiatric Center at that time. Upon graduating she began working as a psychologist at Rockland Psychiatric Center on a long-term care unit with patients who had serious and persistent mental illness and extensive periods of hospitalization. Dr. Velez has been a Licensed Psychologist since 2009. She is now the Principal Psychologist and the Training Director for the internship and externship program at Rockland Psychiatric Center. She serves on the Hospital Ethics Committee. She is bilingual in Spanish and some of her interests include women issues and severe and persistent mental illness.

Training Committee

James Brosnan, Ph.D.

Dr. Brosnan completed his Doctoral Degree in Counseling Psychology from Trinity College in Dublin, Ireland in 2019. His dissertation focused on expressive writing's impacts on self-reported health, post-traumatic growth, and life satisfaction. In training he had internships at St. James's Hospital Outpatient Service, the Portlaoise Child & Family Center, and St. John of God's Hospital. Upon graduation he worked for Spectrum Mental Health which provided individual and couples therapy to the public. Additionally, he provided trauma screening and individual and group sessions to content reviewers working for Google, Facebook, and YouTube. He returned to the US and began working at Rockland Psychiatric Center in 2021 on the admissions unit, 204, which caters to a diverse population of individuals and clinical presentations. He has a clinical interest in working with individuals with severe mental illness, complex trauma, and personality disorders.

Susan Buonocore, Ph.D.

Dr. Buonocore received her Doctoral Degree in Clinical Psychology in 2005 from New School University, New York. She completed her doctoral internship at Manhattan Psychiatric Center. She began her career at South Beach Psychiatric Center as a Psychologist on a long-term care inpatient unit, working with patients with serious and persistent mental illness and multiple hospitalizations. Dr. Buonocore has been a Licensed Psychologist since 2007. She began working at Rockland Psychiatric Center since 2019. She is currently working at Rockland Psychiatric Center on a long-term care, community reintegration inpatient unit with patients who have serious and persistent mental illness and have been institutionalized for a long time.

Dr. Buonocore is an integral part of the training programs here at RPC. She is a supervisor in the Internship and Externship Program where she has trainees rotate on her unit and she supervises their clinical work including individual and group therapy. She is involved in the interviews and selection of candidates. In addition, she provides didactic trainings to the trainees. Her clinical interests include trauma and resiliency and serious and persistent mental illness.

Jennifer Hegg, Psy.D.

Dr. Jennifer Hegg received her Doctoral Degree in Clinical Forensic Psychology at Alliant International University in San Francisco, California in 2015. Her pre-doctoral internship was completed at Metropolitan State Hospital, a forensic inpatient psychiatric hospital in Norwalk, California. She also completed post-doctoral training at Oregon State Hospital, also a forensic inpatient psychiatric hospital in Salem, Oregon. Dr. Hegg continued as a staff psychologist at Oregon State Hospital after becoming a licensed psychologist in 2015, working with patients who were deemed not competent to stand trial due to mental disease or defect, as well as patients who were found not guilty by reason of insanity. Dr. Hegg also worked as an independent contractor completing psychological evaluations focused on competency, mental state at the time of the offense, and mitigation matters for the Public Defender's Office in Salem, Oregon.

Dr. Hegg started working at Rockland Psychiatric Center in 2022 on a forensic unit with patients found not responsible by reason of mental disease or defect. During her post-doctoral internship and positions as a staff psychologist Dr. Hegg has provided clinical training and supervision, including individual and group supervision, for practicum and internship students. Dr. Hegg is a supervisor in the Internship and Externship Program where she has trainees rotate on her unit and she supervises their clinical work including individual and group therapy. She is involved in the interviews and selection of candidates. In addition, she provides didactic trainings to the trainees. Her clinical interests have included working with inpatient forensic populations using a broad range of cognitive, behavioral, and insight-oriented techniques in the psychotherapy process.

Tina Kaljevic, Psy.D.

Dr. Kaljevic received her Doctoral Degree in Clinical Psychology from Wright State University-School of Professional Psychology in 2008. She completed her internship at Wasatch Mental Health in Provo, Utah. Since completing her internship, she has worked for the State of NY at various agencies including OPWDD, DOCCS, and OMH. Dr. Kaljevic has been a Licensed Psychologist since 2013.

Dr. Kaljevic has been working at Rockland Psychiatric Center since 2013. She has been an integral member of the training programs at RPC. She was a supervisor in the Externship Program for many years where she had students rotate on her unit and she supervised their clinical work including individual and group therapy. She is involved in the interviews and selection of candidates. In addition, she has provided didactic trainings to both new employees and students. Currently, she serves as a Psychology Supervisor at Rockland Psychiatric Center. Some of her professional interests include severe mental illness and forensics.

Harry Pitsikalis, Psy.D.

Dr. Pitsikalis received his Doctoral Degree in Clinical Psychology in 2013 from Wright State University-School of Professional Psychology in Dayton, Ohio. Dr. Pitsikalis has been a Licensed Psychologist since 2014. Since completing his internship, he has worked for the State of NY in various OMH facilities including Pilgrim Psychiatric Center and Creedmoor Psychiatric Center. He started working at Rockland Psychiatric Center in 2019 and worked on an all-male Continuing Care Unit. Currently he serves as a Psychology Supervisor at Rockland Psychiatric Center.

Dr. Pitsikalis has been an integral member in the training programs at RPC. He is involved in the interviews and selection of candidates. In addition, he provides a series of didactic trainings to the trainees. He has also been supervising the psychological assessments completed by trainees. Professional interests include emotional intelligence, psychodynamic/object relations theory, motivational interviewing & psychological testing. He also maintains a private practice in NYC/NJ and teaches at York College, CUNY.

Patricia Woods, Psy.D.

Dr. Woods received her Doctoral Degree in 2006 from the American School of Professional Psychology in Honolulu, HI. She completed her doctoral internship at Ulster County Mental Health, a community mental health center in Kingston, NY. Since completing her internship, she worked at Western State Hospital in Tacoma, WA for her post-doctoral training. She also worked at the National Center for Telehealth and Technology, a Department of Defense (DOD) Center of Excellence, and at the Weill Cornell Medical School at NY Presbyterian Hospital with active-duty soldiers and Veterans.

Dr. Woods has been a Licensed Psychologist since 2008. She began working at Rockland Psychiatric Center in 2017, on a high acuity all female unit, which treats individuals diagnosed with psychotic, mood, and personality disorders. Her specialty is the treatment of PTSD, self-harm, anxiety, psychosis and BPD. She utilizes an active solution-focused approach to provide support, guidance and evidenced-based cognitive behavioral therapies to improve her patients' quality of life. She also incorporates Recovery Oriented Cognitive Behavioral therapy (CT-R) as another form of treatment. She is a supervisor in the Externship Program and has provided didactic trainings to both new employees and students. Currently, in addition to her work at RPC, she has a private practice where she specializes in using evidence-based cognitive behavioral treatments for trauma, anxiety and mood disorders.

Didactic Instructors

Arnon Ben-Yoseph, Psy.D.

Dr. Ben-Yoseph received his Doctoral Degree in Clinical Psychology in 2001 from Indiana University of Pennsylvania, PA. He completed his doctoral internship at the Hudson River Regional Consortium, which included Hudson River Psychiatric Center and Rockland Psychiatric Center. Upon graduating, he began working as an inpatient psychologist at Hudson River Psychiatric Center with patients who had serious and persistent mental illness and co-occurring substance addictions and personality disorders. Dr. Ben-Yoseph has been a Licensed Psychologist since 2003. At this time, he is working as an outpatient psychologist at the Putnam Clinic of Rockland Psychiatric Services. He provides treatment to patients with serious and persistent mental illness, substance addictions, personality disorders, and some patients who are under the Criminal Procedure Law 330.20. Dr. Ben-Yoseph was part of the Training Committee at the Hudson River Regional Consortium Internship Program before the program was forced to close in 2012. He provided individual and group supervision to interns and a variety of didactics.

Samantha Brown, Psy.D.

Dr. Brown earned her Doctoral Degree in Clinical Psychology from William James College in Newton, Massachusetts, in 2023. She completed her doctoral internship with Wellpath, located within the Maine Department of Corrections, where she gained experience working in both adult and juvenile facilities. During her internship, Dr. Brown provided individual and group therapy and conducted various assessments. After graduating, Dr. Brown began her role as an Associate Psychologist at Rockland Psychiatric Center in October 2023. She currently serves as the psychologist for Unit 504, one of the forensic units primarily housing patients with a history of problematic sexual behaviors. In addition, she continues to work part-time at her internship site in Maine, where she performs evaluations to aid in the treatment of juveniles. Dr. Brown is actively working towards licensure in both New York and Maine. Her professional interests include the treatment of problematic sexual behaviors, substance use disorders, and justice-involved adults.

Jayne Eckley, M.A.

Ms. Jayne Eckley is completing her Doctoral Degree in Counseling Psychology at Fordham University in Manhattan, NY. Her dissertation topic focuses on the workplace experiences of transgender women. She completed her doctoral internship at the New Jersey VA in 2022 and worked with individuals diagnosed with trauma- and stressor-related disorders, dissociative disorders, and substance use disorders. Following internship, Ms. Eckley began working at Rockland Psychiatric Center, where she was an extern on the Forensic ITU and multicultural units in 2018. Currently, she practices trauma-informed group and individual psychotherapy with a geriatric population with serious and persistent mental illness on Unit 305. She has clinical interests in severe and persistent mental illness, trauma, and dissociative disorders. She is an active advocate as a member of the LGBTQ+ community and has provided didactics on gender identity and mental health.

Mary Griffin, Psy.D.

Dr. Griffin received her Doctoral Degree in Clinical Psychology in 2005 from Argosy University in Atlanta, GA. Her doctoral internship placement was at Westborough State Hospital working with the severely mentally ill. Dr. Griffin has been employed by Rockland Psychiatric Center since 2006 where she has worked in various inpatient units and in varying roles. She has worked in direct patient care on a transitional placement unit, long term chronic male unit, and in admissions. She became a Licensed Psychologist in 2007 and during her time working on the various units, she supervised interns and externs. She then became a psychology supervisor where she supervised non-licensed and licensed psychologists as well. Dr. Griffin's areas of interest include working with substance abuse, cognitive remediation, trauma, and personality disorders. Most recently, Dr. Griffin has moved into the role of Employee Assistance Program Coordinator and has received additional training to achieve her CEAP, Certification in Employee Assistance.

Andiea Hedayat-Harris, Ph.D.

Dr. Andiea Hedayat-Harris received her Doctoral Degree in Clinical Psychology in 1996 from The New School for Social Research, New York. She completed her doctoral internship at Mount Sinai Hospital/Elmhurst Hospital Center and completed a Post-doctoral fellowship at New York Hospital/Cornell Westchester in Neuropsychology and Psychotic disorders Services, where she was also trained in Dialectic Behavior Therapy. Over the years, she has held many Clinical, Teaching and Administrative positions including private practice. Her specialties include working with the Geriatric population as well as the patients who are involved in the justice system and those with severe mental illness. Dr. Hedayat-Harris is bilingual in Farsi.

Steve Hess, TC, CI, CT

Mr. Hess has been a certified American Sign Language interpreter for over 40 years. After training at the National Technical Institute for the Deaf/Rochester Institute of Technology, he began his career interpreting for the Liberal Arts College at RIT. He then embarked on a long freelance journey that would find him interpreting in courtrooms, graduate school classrooms, businesses large and small, state and federal agencies, doctors' offices, hospitals, operating rooms, medical schools, theaters, and much more. He has interpreted for many well-known Deaf poets, lecturers, and performers. He first began interpreting at RPC in 2005 and became RPC's interpreter coordinator in 2013. In addition to American Sign Language, he is fluent in French, and he has a basic conversational knowledge of Japanese.

John Daniel Latendresse, Psy.D.

Dr. Latendresse obtained an MA in Drama Therapy in 1990. He also attended the New York Psychodrama Institute from 1991-1994. Dr. Latendresse earned his doctorate in psychology from the University of Denver, School of Professional Psychology in 2002. He has been a Licensed Psychologist since 2004. Dr. Latendresse's focus of interest was in child psychology and his dissertation was on Countertransference with Teenagers and Children. He also has a background in theater and film, which he has been able to incorporate into his professional career as a psychologist. Dr. Latendresse had a private practice in Brooklyn, New York for 10 years where he treated both children as well as adults. He has worked at Bellevue Hospital, Brooklyn Children's Center, and several prisons in the New York area. He began working at Rockland Psychiatric Center in 2017 and has been working with the state government for almost 27 years.

Kenneth Ozdoba, M.D.

Dr. Ozdoba obtained his psychiatry degree from the Temple University School of Medicine in 2001. He has been training mental health professionals of all disciplines since graduating from his psychiatry residency from Montefiore Medical Center in 2005. After graduating, he supervised a unit at Bronx Psychiatric Center from 2005-2013, which included presiding over treatment teams comprised of psychiatry, psychology, and social work interns. This involved both lecturing on a variety of topics that included psychopharmacology, as well as individual supervision, both in pharmacology and psychotherapy. Dr. Ozdoba started working at Rockland Psychiatric Center in 2013. He later became the Director of Medical Education in 2015, which involves the organization of rotations and clerkships for medical students and residents from several institutions that include NYU, Columbia, and Touro College. Currently, he continues to provide didactics to trainees on psychopharmacology topics. In addition, he is involved in the admission triage process of patients to RPC. Lastly, he has been the chairman of RPC's Pharmacy and Therapeutics Committee since 2015. Dr. Ozdoba is an excellent lecturer who provides the latest and relevant information regarding the psychopharmacological treatments provided to our patients.

Salam Soliman, Psy.D.

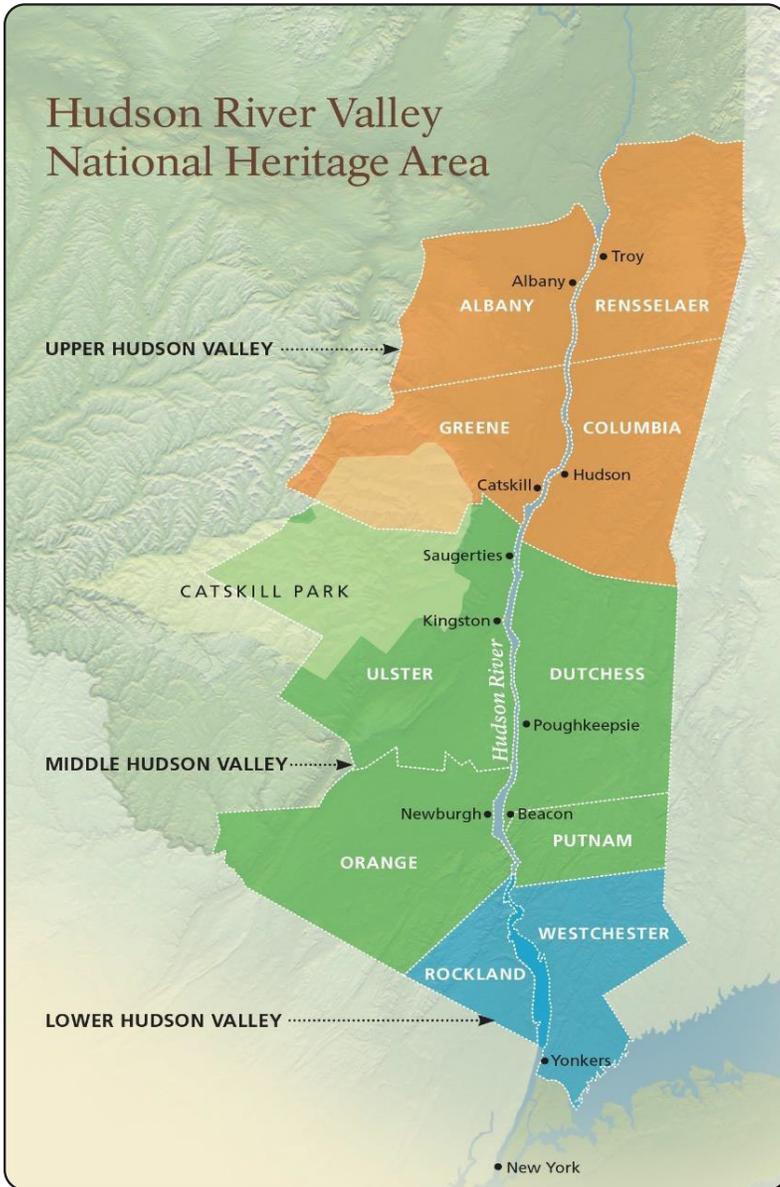
Dr. Soliman has a Master's in Education from the University of Ottawa and a degree in Forensic and Experimental Psychology from Carleton University. She also received a Master's in Science with a focus on Educational Psychology in 2004, and then went on to receive a dual doctorate in Clinical and School Psychology from Pace University in 2006. She completed her internship at the Child Guidance Center of Southern Connecticut in 2006. She has been a licensed psychologist since 2008 in CT and 2021 in NY and is also a certified school psychologist. Dr. Soliman has been working in the field since 1996 and has been nationally endorsed as an infant mental health expert. She has trained and worked both nationally and internationally in hospitals, courts, public schools, universities, and outpatient clinics. Her work primarily focused on children, with a particular interest in disrupted attachments, the long-term effects of trauma on children, the impact of racism and inequities on young children, families and providers and the benefits of reflective supervision.

Dr. Soliman is a seasoned consultant and speaker with many years of experience providing support in the infant mental health field. This includes a leadership role with the Reflective Supervision Collaborative. Additionally, Dr. Soliman provides consultation services to many organizations including the Louisiana State University, the Alliance for Infant Mental Health, Zero to Three, Maternal, Infant, and Early Childhood Home Visiting (MIECHV), Child Health Development Institute, and KKH Hospital in Singapore among others. She began working at Rockland Psychiatric Center in September 2024, on the multicultural/multilingual unit where she provides psychological services to patients via the use of interpreters who have severe and persistent mental illness.

Priscilla Villavicencio, Psy.D.

Dr. Villavicencio received her Doctoral Degree from Argosy University/Phoenix in 2010. She completed her internship from an APA accredited internship at Sunset Terrace Behavioral Center – Lutheran Medical Center in Brooklyn, NY. After graduating, Dr. Villavicencio worked at Behavioral Medicine Associates treating clients with mood disorders related to work or vehicular accidents. She started working at Rockland Psychiatric Center since 2011 and has been providing outpatient services at the Mount Vernon and Orangeburg Service Centers. She has been a Licensed Psychologist since 2012. She offers individual, family, couples, and group counseling and primarily serves clients with severe mental illness, substance abuse disorders, and trauma. Many of her cases include clients who are primarily Spanish speaking. Dr. Villavicencio also facilitates and completes testing for the Cognitive Remediation program at Orangeburg Service Center.

About the Hudson River Valley



The Hudson River Valley extends 150 miles above the tip of Manhattan. It is divided into 3 regions (Lower, Middle, and Upper) and includes 10 counties. There are a multitude of places to explore across the three regions and some highlights include: it is home to The Culinary Institute of America, Storm King Art Center, NY Renaissance Faire, The Great Jack O'Lantern Blaze, Bear Mountain Zoo, the Palisades Mall, and the Woodbury Common Premium Outlets.

RPC is located in Rockland County, which is located in the Lower Hudson Valley Region, just 17 miles north of New York City.

Rockland County is known for its beautiful river views, quaint villages, shopping, and fine dining and breweries. In addition, the county has over 2,500 acres of parkland filled with sparkling lakes, wildlife, and amazing views. There are opportunities for lots of outdoor recreation, including hiking, boating, fishing, camping, golf, and ice-skating, just to name a few.

Psychology Doctoral Internship Program

MISSION: *Hope, Respect, and Recovery for People with Mental Illness*



**Rockland
Psychiatric Center**

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