

JACKSON MEMORIAL HOSPITAL

In Affiliation with University of Miami
Leonard M. Miller School of Medicine



PSYCHOLOGY INTERNSHIP PROGRAM

2017-2018

GENERAL INFORMATION

The University of Miami/Jackson Memorial Hospital is the third largest medical center in the nation and by far the largest medical center in the Southeast. Jackson Memorial Hospital (JMH) is an accredited, tax-assisted, tertiary teaching hospital with 1,558 licensed beds. Associated with the University of Miami Leonard M. Miller School of Medicine (UM) and the Florida International University Herbert Wertheim College of Medicine, JMH provides a wide range of patient services and educational programs, a clinical setting for research activities, and a number of health-related community services. It is a regional referral center and a magnet for medical research and innovation. JMH's world-renown treatment facilities include Ryder Trauma Center, UM/JM Burn Center, Holtz Children's Hospital, Jackson Rehabilitation Hospital and the Miami Transplant Institute. Based on the number of admissions to a single facility, Jackson Memorial is one of the nation's busiest hospitals.

The role and importance of psychologists in the medical center has been fully accepted and embraced by all medical disciplines. The psychological stress and emotional trauma associated with a serious injury or disease plays a significant role in the eventual outcome of medical treatment and rehabilitation of medically and/or psychiatrically impaired individuals. Similarly, psychologists are integrally involved in the assessment, differential diagnosis and treatment of psychiatric patients, and there is excellent collaboration between Psychiatry and Psychology in the areas of mental health, consultation of acute medical patients, and Behavioral Medicine and Rehabilitation.

DEPARTMENT OF PSYCHOLOGY

The Department of Psychology at JMH provides diagnostic and treatment interventions to both inpatients and outpatients with acute and chronic diseases, as well as physical, psychiatric, and neurological disabilities, as part of a well-integrated multidisciplinary team approach. These comprehensive clinical activities provide a rich environment for the Psychology Internship Program. The JMH Psychology Department is comprised of 12 full-time and 2 part-time licensed psychologists with expertise in various specialty areas throughout the medical center. The theoretical orientation of the faculty is quite varied, ranging from cognitive-behavioral to psychoanalytic. The JMH Department of Psychology is affiliated with the Division of Psychology at the University of Miami Leonard M. Miller School of Medicine. UM's Division of Psychology is comprised of 16 full-time and part-time licensed psychologists, 2 of whom are actively involved in the Psychology Internship Program. Interns have multiple opportunities for involvement with other UM psychologists through research and training experiences.

Thomas Robertson, Psy.D.
Chief Psychologist

INTERNSHIP TRAINING PROGRAM

The Training Program in Psychology is fully accredited by the American Psychological Association through the Commission on Accreditation located at 750 First Street, NE, Washington, DC 20002. Their phone number is (202) 336-5979. The program offers a one-year, full-time appointment with a stipend of \$20,000. Currently, there are multiple internship positions being offered (ten in total). The appointment involves intense therapeutic interventions with patients and their families on an individual and group basis. Clinical services are provided to patients throughout the medical center. The psychological interventions are an integrated part of each medical/psychiatric team service and are supervised by at least one senior attending psychologist from the department.

After an initial orientation, interns begin their one-year assignment. Interns are offered a variety of supervised clinical experiences that involve assignment of specific cases and typically includes assessment, psychotherapeutic intervention, family therapy, reporting at walking and kardex rounds, reporting at family and patient conferences, chart and report writing, integration with other services, and case management. Supervision on these tasks is extensive and exceeds APA requirements. The size of the caseload and the difficulty level of the cases will increase with the intern's competence on each clinical service.

The following tracks and rotations are offered for training and will be more fully explained in the next section:

- Adult Outpatient Clinical Track (two positions)
- Adult Behavioral Medicine and Rehabilitation Psychology Track (one position)
- Adult Neuropsychology Track (one position)
- Adult Outpatient Behavioral Health Track (two positions)
- Pediatric Behavioral Medicine Track (one position)
- Child Clinical Track (two positions)
- Pediatric Neuropsychology Track (one position)

In addition to clinical activities, interns are required to attend the academic and didactic training conferences and seminars that are presented throughout the year. These include: Introductory Seminar, Behavioral Pain Management Seminar, Psychodiagnostic Seminar, Case Conference Seminar, Supervision Module, Diversity Seminar, Ethics Seminar and Psychiatry Grand Rounds. In addition, interns may also attend Morbidity and Mortality Conferences, Neurology/Neurosurgery Grand Rounds, Brain Cutting, and other seminars and special conferences that are offered in the medical center at the discretion of the intern's primary supervisor, and depending on the assigned track. Opportunities for participating in research are available.

Regardless of track, interns are required to have two core experiences throughout the training year, i.e., psychological testing and long-term psychotherapy cases (minimum of 6 months in treatment length). At least six full psychological testing batteries and two long-term psychotherapy cases throughout the year are assigned to each intern to fulfill this requirement.

In addition to Federal Holidays, benefits include 18 personal leave days (for vacation, sick, and dissertation leave time) and health benefits (medical, vision and dental). Interns also have access to the psychiatry library, which provides access to a variety of databases including PubMed, PsycINFO, Medline and ClinPsych, as well as a host of online full-text journals and books.

PHILOSOPHY & MISSION OF THE TRAINING PROGRAM

The fundamental internship training mission is to facilitate the development of mature and competent psychologists capable of functioning independently in a multidisciplinary setting. The training staff believes this is best accomplished through a constant interplay of experiential and didactic experiences. Interns are encouraged to become analytical and critical consumers of current theory and practice in the field. Hence, one of our fundamental goals is the development of clinicians, not technicians, which is consistent with the programs practitioner/scholar model.

Within this context, the main philosophy and mission of the Psychology Internship Training Program in the Department of Psychology are:

1. To provide psychology interns with the necessary supervised experience to become effective practicing psychologists. The program evaluates each intern according to their entry competency and supervised clinical activities are sequential, cumulative, and graded in complexity.
2. To provide the intern with an understanding of the theoretical basis, both psychological and physiological, for effective assessment and therapeutic interventions. In addition, interns will become well versed in cultural and individual differences and its influence on assessment and interventions.
3. To provide the specific techniques and skills, along with medical knowledge, necessary for effective assessment and treatment of patients with psychological and/or physiological and medical conditions from a behavioral, cognitive, or psychoanalytic framework.
4. To provide an opportunity to conduct research and /or an understanding of the importance of research as it relates to effective clinical intervention.
5. To establish high ethical and professional standards of behavior for psychologists and interns.
6. To gain an understanding and appreciate ethnic, religious, socioeconomic and individual differences.
7. To provide a single standard of care to patients based on need of service regardless of other factors.

The training philosophy, mission and goals are consistent with the philosophy, mission and goals of both Jackson Memorial Hospital and the University of Miami Leonard M. Miller School of Medicine.

CRITERIA FOR SUCCESSFUL COMPLETION OF THE PSYCHOLOGY INTERNSHIP PROGRAM

Criteria for successful completion of the Psychology Internship include demonstrated competence in the areas of: professionalism, individual and cultural diversity, ethical legal standards and policy, reflective practice/self-assessment/self-care, relationships, scientific knowledge and methods, research/evaluation, evidence-based practice, assessment, intervention, consultation, teaching, supervision, interdisciplinary systems, management-administration, and advocacy.

These criteria for successful completion of the internship are discussed with the interns during the initial orientation period by the Chief Psychologist and Director of Internship Training. They are reiterated throughout the training year in seminars and supervisory sessions. Expectations as to number of patients seen, number of psychological testing reports completed, etc. are also communicated during orientation and throughout the training year.

All training staff involved with the intern's clinical work will provide interns with the appropriate feedback during their routine weekly supervisory sessions. The intern's performance is discussed monthly during the Training Committee/Psychology Faculty meetings. In addition, all supervisors are asked to complete formal written evaluations of the interns' progress toward achieving these competencies on a quarterly basis. If interns' progress in achieving these competencies is observed to be deficient, all efforts will be made to remedy existing deficiencies.

SUPERVISION OF TRAINEES

Each intern is assigned a primary supervisor who is responsible for all of the intern's professional activities. The supervisor is responsible for meeting with his/her intern for a minimum of two hours per week of face-to-face supervision sessions where cases are reviewed. Furthermore, professional and ethical issues, as well as content and manner of case consultation are discussed. Interns also receive 90 minutes of group supervision in Psychotherapy Case Conference on a weekly basis, 90 minutes of supervision in Clinical Ethics Rounds weekly, and 60 minutes of Psychodiagnostic Seminar weekly.

All supervisors within the medical center have major patient-care responsibilities, so interns gain skills and knowledge by working side by side with their supervisors. Interns can expect intensive supervision with the opportunity to take on considerable professional responsibility. Faculty members are eligible to be primary supervisors if they are licensed in the state of Florida and have served within their service for a minimum of six months.

The supervisor works with the intern at the beginning to delineate training goals. Supervisors schedule regular direct supervision sessions. Based upon the supervisor's assessment of intern's progress, additional supervision may be scheduled as needed. In addition to individual supervision sessions, supervisors are available to meet with interns on an immediate basis to

discuss urgent clinical matters as they occur. It is also the supervisor's responsibility to provide a thorough orientation to the clinical service to which the intern is assigned.

Supervisors will co-sign all progress notes, treatment plans, assessment reports, patient-related correspondence and any other intern entries into the medical record. When the supervisor is unavailable, he or she arranges for another psychologist to provide coverage, including supervision and to co-sign for the intern. This covering supervisor must be a faculty member, or have faculty privileges in the institution.

ACADEMIC SCHEDULE

Introductory Seminar

Coordinator: Melisa Oliva, Psy.D.

Required for all interns. The goal of the Introductory Seminar Series is to provide an introduction to basic information and skills needed for providing psychological services at Jackson Memorial Hospital. Topics such as Florida mental health laws, suicide assessment, risk management, safety planning at JMH and in Miami, social media practices, countertransference, stress management and mindfulness, finding postdocs, EPPP and licensure, and internship policies and procedures are reviewed and discussed.

Behavioral Pain Management Seminar

Coordinators: Mario Olavarria, Psy.D. & Mary I. Ishii, Psy.D.

Required for all interns. During this seminar, interns are introduced to various theories of pain, concept of behavioral pain management, assessing for pain, as well as discuss and demonstrate various types of interventions, including cognitive reframing, psychoeducation, relaxation and hypnosis.

Psychodiagnostic Seminar

Coordinator: Sheba Kumbhani, Ph.D.

Required for all interns. Our interns provide hospital-wide psychodiagnostic testing which exposes the interns to the awareness of ethical, sociocultural, diversity, legal, and administrative issues in the consultation process. The purpose of the psychodiagnostic seminar is to present and integrate psychological testing data – objective and projective personality testing, along with intellectual and neuropsychological evaluations – which informs the intern's diagnostic and treatment planning for those patients who present some difficulty in diagnosis or treatment course. Interns are provided a weekly opportunity to refine their skills in the administration and interpretation of psychological tests while also learning important methods to integrate and communicate test results effectively. All interns are expected to present two testing cases during the training year.

Case Conference Seminar

Coordinators: Claudia Ranaldo, Psy.D., J. Scott Christian, Psy.D. & Jonathan Cohen, Psy.D.

Required for all interns. A weekly, 90-minute conference where interns present psychotherapy cases for discussion according to a formal psychiatric model. The 90 minutes are devoted to the case to accomplish a thorough review and discussion of each patient and the specific techniques utilized in psychotherapeutic sessions. The focus of each presentation is on the integration

between theory, clinical application, and utilization of the literature. Presentations are in-depth, and generate interesting and stimulating discussions. All interns are expected to present two case conference presentations during the training year.

Supervision Module

Coordinator: Evelyn Benitez, Ph.D.

Required for all interns. This is designed to provide interns with a brief, but comprehensive overview in the field of supervision. Objectives of this module are to make the interns aware of the challenges in the transition from supervisee to supervisor, become familiar with different approaches to supervision, and be able to identify legal and ethical issues in supervision. Required readings will be provided.

Diversity Seminar

Coordinator: Melisa Oliva, Psy.D.

Required for all interns. This seminar series combines faculty and outside JMH facility speakers who are experts in their field in regards to considerations for mental health and interventions with particular patient populations that interns are faced in interacting daily given the diverse culture in Miami and at JMH (e.g., best practices for providing mental health care within the Haitian culture, providing mental health care to Hispanics, working with LGBTQ individuals, working with physically disabled individuals, mental health issues in the Asian population, and men's and women's mental health issues, etc.).

Ethics Seminar

Coordinators: Evelyn Benitez, Ph.D. & Dianelys Netto, Ph.D.

Required for all interns. As professional psychologists and practitioners in a large medical center, we are constantly faced with numerous ethical, moral, and legal issues involving patients, physicians and allied professional health staff. Common issues include confidentiality, duty to warn, dual relationships, physical and sexual abuse, DNR (Do Not Resuscitate Orders), AND (Allow Natural Death), refusal of medical/psychiatric interventions, diminished capacity, and competency. The purpose of Ethics Seminar is to discuss the ethical, moral, and legal implications of issues that arise in the context of a clinical case. Interns and Postdoctoral Residents are expected to present an ethics case/concept during the training year and actively participate in all group discussions.

Psychiatry Grand Rounds

Coordinator: Department of Psychiatry and Behavioral Sciences

Required for all interns. Bi-weekly formal academic presentations about various topics in psychiatry presented by psychiatrists and psychologists who are local and nationally known speakers. Meets for 90 minutes every other week. Interns are required to attend at least 50% of these rounds.

Morbidity and Mortality (M&M) Conference

Coordinator: Department of Psychiatry and Behavioral Sciences

Elective for all interns. Interns may elect to attend the University of Miami's M&M conference. M&M is a peer review of mistakes occurring during the care of patients, typically highlighting recent cases and identifying areas of improvement for clinicians involved in the case. The objectives of the M&M conference are to learn from complications and errors, to

modify behavior and judgment based on previous experiences, and to prevent repetition of errors leading to complications. They are also important for identifying systems issues (e.g., outdated policies, changes in patient identification procedures, etc.) which affect patient care. M&M is meant to be non-punitive and focused on the goal of improved patient care. M&M conference takes place once a month.

Research Opportunities

Coordinator: Philip D. Harvey, Ph.D.

Elective for all interns. Interns may elect to participate in research opportunities from the Department of Psychology at Jackson Health System or the Division of Psychology in the Department of Psychiatry and Behavioral Sciences at the University of Miami School of Medicine. Interns can be involved in different aspects of a research project, such as data collection, data management and analyses, and report writing, and will have the opportunity to work closely with the principal investigator of the project. Principal investigators include psychologists in the JHS Department of Psychology and psychologists and psychiatrists in the Department of Psychiatry and Behavioral Sciences at UM. Specific opportunities for research vary on a yearly basis depending on the studies that are funded each year. Current research efforts are aimed at Pediatric and Adult Consultation, Dialectical Behavioral Therapy for Adolescents (DBT-A), Adult and Pediatric Neuropsychological research, PTSD, cognition and aging, remotely deliverable assessment and interventions, cognition, social cognition and functioning in severe mental illness, and substance abuse in mood disorders. Interns who elect this experience will be required to participate four hours per week, in addition to their clinical responsibilities, for a minimum of three months. Additional three month rotations can be considered at the discretion of the research coordinator, principal investigator and clinical supervisor.

CLINICAL ROTATIONS

ADULT OUTPATIENT CLINICAL TRACK

The internship in the Adult Outpatient Clinical Track consists of training predominantly in the Adult Outpatient Center (AOC). In the AOC, emphasis is on brief and long-term psychodynamic and cognitive behavioral therapy with a wide variety of patients who present with primary psychiatric and personality disorders complicated by medical illness and severe psychosocial stressors. Common patient diagnoses include: affective disorders, anxiety disorders, PTSD, psychosis, personality disorders, and concurrent substance abuse. The intern carries a diverse outpatient psychotherapy caseload, representing a spectrum of demographic and cultural backgrounds, clinical presentations and treatment needs. Essentially, the Adult Outpatient Clinical Track allows the intern to gain clinical experience with patients from different ethnic and socioeconomic backgrounds with a wide range of psychopathology, as well as to learn about treatment systems by becoming an integral member of a treatment team. The treatment team at the AOC consists of psychiatrists, social workers, psychiatry and psychology residents and support staff. Average work week for the AOC intern is 40-45 hours.

1. Outpatient Clinical Services

The intern assumes responsibility for a combination of assessment, consultation, and direct clinical care duties. The intern is responsible for providing 15 to 20 hours of therapy a week. The modality of therapy can include individual, couples or family intervention. Psychological assessment and outpatient group therapy are also integral components of the training in our clinic. The intern is responsible for completing a minimum of 6 psychological testing batteries during the internship year. In addition, there are a wide range of groups available. Furthermore, interns may participate in the formation of new groups. Group therapy is provided in English and Spanish. Type of groups provided are:

- Depression Group (Behavior Activation)
- Emotional Regulation Skills Group

2. Inpatient/Consultative Opportunities

Interns on the Adult Outpatient Clinical Track may also have the opportunity to provide services in the Center for Behavioral Medicine (CBM) and on inpatient psychiatry units, namely the Adult Intensive Unit, Behavioral Treatment II Unit, Health and Recovery Unit, Geriatric Medical Unit, and Miami-Dade-Forensic Alternative Center (MD-FAC). Consultation services to the inpatient psychiatry units may include assessment and psychological testing, group therapy, and psychological assistance to both patients and staff contingent on the needs of the unit. The Center for Behavioral Medicine provides outpatient assessment and intervention services to clients with psychiatric and medical disorders.

3. Research Activities

Research opportunities are available in the Adult Outpatient Clinical Track. Research

provides the knowledge base of clinical psychology and interns are expected to be conversant with the processes and products of contemporary clinical investigation. Current opportunities are available in participating in a federal research grant which targets improving patient safety and reforming medical liability by testing the effectiveness of an innovative model, the Initiative to Reduce Inpatient Suicide (I.R.I.S.), in medical/surgical units.

4. Supervision

The intern receives a minimum of two hours of supervision per week. Supervision of psychotherapy is conducted according to numerous theoretical orientations including brief dynamic, cognitive, behavioral and psychodynamic. Although supervisors operate from a variety of therapeutic perspectives, all are interested in supporting the development of the intern's theoretical orientation. In addition, the intern has abundant opportunities for observational learning and informal supervision.

ADULT BEHAVIORAL MEDICINE & REHABILITATION PSYCHOLOGY TRACK

This full year internship experience takes place within an exciting, medical setting – our ORN Hospital Center (Orthopedics, Neurology, Neurosurgery and Rehabilitation) in which psychology is exceptionally well integrated, well utilized, and much appreciated. This track is designed to prepare the intern to function independently as a doctoral level clinical psychologist with a specialty in behavioral medicine and rehabilitation psychology, whether in a medical setting or independent practice. An emphasis in neuropsychology is available for the intern with advanced training and career goals in neuropsychology. Our department enjoys a prominent position nationally in the field of Rehabilitation Psychology, with three past presidents of Division 22 of APA (Rehabilitation Psychology) and a past president of the ABPP Board in Rehabilitation Psychology. The two supervising faculty on this track provide exposure to and supervision in different approaches to behavioral medicine, as well as various subspecialty areas within the fields of behavioral medicine, rehabilitation psychology and neuropsychology.

Note that the position will provide extensive treatment experience with our diverse multi-cultural population. The cultural diversity of South Florida makes for a rich training environment, with large Hispanic, Haitian, and African American populations. The ORN Hospital Center also serves a large international program drawing many patients from around the world, especially Central America, South America and the Caribbean. This track emphasizes cross cultural training and incorporation of cultural issues into psychological/neuropsychological assessment and treatment.

The intern on this track will also experience working with a broad spectrum of patients in terms of socio-demographic, medical, and psychological characteristics. Patients on this rotation range in age from adolescents to elders. Medical diagnoses include a broad range of injuries and illnesses, such as spinal cord injury, multiple orthopedic trauma, amputation, multiple sclerosis, cancer, brain injury, diabetes, etc. A wide variety of psychiatric diagnoses are represented.

This track takes place within the medical units of Jackson Memorial Hospital, with many patients entering through our world-renowned Level One Ryder Trauma Center. Interns are integrally involved in the treatment teams within the Departments of Neurology, Neurosurgery, Orthopedics, and Rehabilitation. Interdisciplinary work with these teams is a central focus of this track. Doctoral interns are highly valued and utilized members of the team in these departments, frequently sought out for assistance regarding behavioral management and the many emotional and behavioral issues in patient care. Frequent opportunities to participate in Grand Rounds, walking and chart rounds and other training in the above departments are available to interns. The Miami Project to Cure Paralysis, founded by one of our patients and our chief neurosurgeon in 1985, has brought the best researchers from around the world to work together here, and an internationally renowned treatment team, resulting in an exciting working environment. It is in this spirit that our psychologists strive to offer evidence-based and innovative treatment approaches and cutting edge treatment programs to facilitate our patients' emotional adjustment to their medical conditions or disabilities. Average work week for the Adult Behavioral Medicine & Rehabilitation Psychology intern is 45-50 hours.

This track consists of 4 emphasis areas, which run simultaneously:

1. Acute Inpatient and Intensive Care

This rotation provides the intern a unique opportunity to learn and utilize behavioral medicine principles and techniques in an intensive care and acute care medical setting. The intern begins work with assigned patients and families from the day they enter the medical system. Interns can follow some patients through the entire treatment process as they progress from intensive care to acute care to inpatient rehabilitation and reintegration into the community in the outpatient phases of care, providing a comprehensive, long-term therapy experience over the course of the internship year. Patients seen in intensive care are critically injured or ill, and many have catastrophic injuries such as amputations, spinal cord injuries, severe multiple trauma, or acute exacerbations of oncologic or neurologic conditions.

The intern in a critical care environment must establish a communication system if the patient is intubated or trached, evaluate the patient from a cognitive and emotional perspective, evaluate family functioning, and implement a program of crisis intervention, psychotherapy, support, behavioral management, and psychoeducation. Issues such as ego defenses and understanding of medical condition, health care beliefs, "ICU psychosis," acute stress disorder, head injury and post-traumatic amnesia, treatment compliance, and emotional distress are routinely addressed. As premorbid psychopathology is often exacerbated by a medical crisis, the intern is involved in diagnosis and treatment of a wide range of psychopathology. Psychologists play an important role in helping patients wean off respirators and manage pain, and are often involved with evaluation of capacity regarding ability to make medical decisions. Additionally the intern will apply rehabilitation psychology principles regarding consultation and systems intervention with the interdisciplinary team (physicians, nurses, physical and occupational therapists, social workers, case managers, etc.) to facilitate maximal patient and family adjustment to and compliance with critical medical treatment regimens. The intern will report on his or her patients in weekly interdisciplinary rounds. Interns may be involved in patients' end-of-life decisions (withdrawal or withholding of life support) and attendance at the hospital Bioethics Committee meetings may be part of these cases.

The intern will leave this rotation with well-established crisis intervention skills and ability to work in ICU and acute care settings, a growing area of demand in our current health care climate.

2. Inpatient and Outpatient Rehabilitation

This experience allows the intern to develop and apply a variety of rehabilitation psychology and behavioral medicine principles and techniques in our CARF accredited inpatient rehabilitation center and outpatient program, and to work on advanced psychotherapy and assessment skills that will prepare him or her to work in a medical or private practice setting. The patient population includes spinal cord injury, mild to moderate brain injury, amputations, multiple orthopedic trauma, multiple sclerosis, cancer, and a variety of other medical conditions, ranging from catastrophic to moderate levels of impairment. Patients range in age from adolescents to geriatric, with all ages ranges well

represented. The intern will provide a comprehensive initial assessment on each patient assigned, provide individual and family therapy, and co-facilitate at least one patient group psychotherapy session per week, as well as a multiple family group psychotherapy session twice per month. Issues of focus include adjustment to and coping with the psychological aftermath of serious injury/illness, treatment of acute stress disorder and PTSD, pain management, and treatment of the full spectrum of psychopathology, as medical crises often exacerbate premorbid psychopathology. Consultation with the interdisciplinary team (physicians and surgeons, nurses, physical and occupational therapist, social workers, recreation therapists, dieticians, respiratory therapists, etc.) regarding patient/family emotional status, behavioral management and treatment compliance issues is a critical role of the psychologist/intern, and a core concept of rehabilitation psychology. Interns will report in interdisciplinary rounds and may participate in bedside walking rounds weekly as well. Charting and documentation issues as required in accredited Rehabilitation settings are taught (e.g. FIMS) and familiarity with accreditation issues will prepare the intern to assume leadership in facilities in which they may serve in the future. Many past interns are now heading up Rehab Psychology programs around the country and have told us this aspect of training was particularly valuable. Outpatient work will also be available at the Center for Behavioral Medicine, located in the Jackson Behavioral Health Hospital (JBHH).

Psychology is well integrated and utilized on this service, which makes for a rich and rewarding experience. Supervision includes emphasis on treatment planning, advanced psychotherapy skills, application of behavioral medicine principles and techniques, integration of the interdisciplinary team in treatment, and addressing the diverse cultural issues present in our population as they affect health care beliefs and psychological treatment.

3. Psychological/Neuropsychological Testing/Assessment Rotation

This rotation will vary in level of advancement and amount of emphasis depending on the intern level of training and interest. For the intern with little or no training in neuropsychology, this rotation will provide training geared toward a basic level of competency in intellectual and personality assessment, as well as at least a basic level of competency in performing neuropsychological screening. *For the intern with more advanced skills, this rotation offers advanced level training and more extensive experience.* This rotation is supervised by a neuropsychologist specializing in the identification and treatment of brain injury and neuropsychological conditions in acute, rehabilitation and outpatient medical settings, including the Center for Behavioral Medicine.

Since many of our patients enter our system via our Level 1 Trauma Center with neurologic or orthopedic trauma, there is a high incidence of concomitant brain injuries, usually in the mild to moderate ranges. Many of these patients have “silent” injuries, those that are not diagnosed or a focus of treatment in the acute stages of injury, but that are noted later as the patient experiences cognitive or other symptoms which suggest brain injury. The psychology intern plays a critical role in diagnosing and treating these patients on this rotation. Referrals come from attending physicians, interdisciplinary team members, case managers, attorneys and the courts. Referrals may also include vocational/educational and

disability determinations.

All interns on this rotation will complete a minimum of six full psychological testing batteries, which will be completed in both the inpatient and outpatient settings. This rotation is designed to provide the intern with competency in administration, scoring, interpretation and report writing of personality (objective and projective) and intellectual tests, as well as neuropsychological testing tailored to the level of previous training and interest of the intern. This rotation emphasizes cross-cultural issues in assessment in light of the wide diversity of cultures and ethnicities represented in our patient population. A flexible battery approach is used, tailored to the diagnosis and referral. The provision of recommendations and feedback to the interdisciplinary team and referral sources, as well as the patient and family, are emphasized. Additionally, integration of the testing data into a comprehensive written report will also be a focus of training.

This rotation also provides training and experience in the use of remedial strategies and cognitive retraining methods to compensate for patients' cognitive and behavioral deficits. Interns will work with patients, teams and referral sources regarding issues such as competency to make medical decisions, readiness to return to work, education, driving, living independently, etc.

4. Psychological and Behavioral Pain Management

This seminar and training experience is required for interns on ABM/Rehab Psychology track and the seminar portion is open to interns on other tracks. It is provided via a weekly seminar which includes didactic instruction from several faculty, supervised practice, case presentations and application of principles and techniques in the clinical settings of the track.

The intern on this rotation will gain competency in theoretical, diagnostic and clinical issues regarding anxiety and pain syndromes, and be able to provide appropriate interventions geared toward symptom relief. Various theories related to the mind-body relationship and pain are addressed. Interventions include cognitive behavioral and behavioral techniques, various relaxation techniques, and visual imagery strategies. Faculty certified in clinical hypnosis will provide training in hypnosis, and emphasize the use of hypnosis in treatment of pain syndromes.

ADULT NEUROPSYCHOLOGY TRACK

The Clinical Neuropsychology full year rotation satisfies the requirements for a Neuropsychology Internship established by APA, Division 40 (Neuropsychology). Previous background and training in neuropsychology is required for this rotation. The Adult Neuropsychology Track includes one internship position.

On this rotation, interns function as part of an interdisciplinary team that includes neurosurgeons, trauma surgeons, neurologists, psychiatrists, and rehabilitation specialists. Training is accomplished through readings, as well as attendance at brain cuttings and neurosurgeries, Department of Neurology Grand Rounds, Neurological Rehabilitation patient and family rounds, Rehabilitation in-services, and Neuropsychology Case Conference. Areas of training include: 1) functional neuroanatomy, 2) neuropathology, 3) neuropsychological assessment, 4) neurobehavioral and cognitive retraining, 5) psychotherapeutic interventions with neurologically involved patients and their significant others, 6) behavioral management of maladaptive behaviors, and 7) ethics. Didactic training in neuropsychological assessment is based upon a combined quantitative and qualitative approach that emphasizes a dynamic understanding of cortical functioning and brain-behavior relationships. Consistent with this model, a core fixed battery, including many of the Halstead-Reitan neuropsychological tests, is administered, with a variety of other neuropsychological and personality (e.g., MMPI-2, Rorschach) tests applied in a flexible manner as indicated to clarify a patient's cognitive, emotional, and behavioral status and provide information that is clinically applicable to a patient's rehabilitation. Interns complete a minimum of eight comprehensive batteries, with additional brief consultation reports and evaluations conducted as indicated. In addition to neuropsychological evaluations, interns receive supervised training in neuropsychological rehabilitative techniques, including individual, family and group psychotherapy, family support groups and conferences, behavior modification, training of remedial techniques to compensate for cognitive-behavioral deficits, and cognitive retraining of attention, memory, executive, and other mental functions. Interested interns also may have the opportunity to provide supervised supervision of practicum students.

The Neuropsychology Service is primarily housed in the Jackson Health System's Ryder Trauma Center, a world-renowned Level I trauma facility. The Neuropsychology Service enjoys an excellent working relationship with the Departments of Neurosurgery, Physiatry, Neurology, and Psychiatry. Interns have the opportunity to work with patients and families from a diverse sociocultural, ethnic, and language spectrum, allowing them to learn about the impact of these issues on evaluation, intervention, and recovery. Experience is provided with a broad range of neurological and neuropsychiatric conditions (e.g., traumatic brain injuries, cerebrovascular accidents, multiple trauma, neuromuscular and neurodegenerative disorders, transplants, neuro-oncology, seizure disorders). In addition to working with patients experiencing an array of neurological diagnoses on the inpatient Neurological Rehabilitation unit, interns will work with traumatic brain injury patients on the neurosurgical and traumatic intensive care units, and acute floors. Interns also will follow patients via the outpatient neuropsychology program (located near the acute inpatient floor and at the Center for Behavioral Medicine), completing full neuropsychological assessments, providing short- and long-term individual, family and group therapy, and implementing cognitive rehabilitation with patients experiencing a variety of neurological conditions. Interns will also provide diagnostic

consultations to a variety of other medical and psychiatric units throughout the JHS medical center. The interns will have a unique opportunity to follow patients throughout their recovery process from the neuroscience intensive care unit to outpatient treatment. Finally, interns have the opportunity to participate in clinically relevant research, including ongoing faculty projects. Average work week for the Adult Neuropsychology intern is 45-50 hours.

Recommended readings and texts include *Neuropsychological Assessment (4th Ed.)*, by M.D. Lezak, D.B. Howieson, & D.W. Loring (New York: Oxford University Press, 2004); *Clinical Neuropsychology*, by K. Heilman and E. Valenstein (New York: Oxford University Press, 2003); *A Compendium of Neuropsychological Tests: Administration, Norms, and Commentary*, by E. Strauss, E. Sherman, & O. Spreen (Oxford University Press, 2006); and *Neuroanatomy Through Clinical Cases*, by H. Blumenfeld (Sinauer Associates, 2002).

ADULT OUTPATIENT BEHAVIORAL HEALTH CLINICAL TRACK

The Adult Outpatient Behavioral Health Clinical Track focuses on providing outpatient psychological services for patients with co-morbid psychiatric and medical disorders, with a strong emphasis on HIV/AIDS. The training for this track takes place in the Center for Behavioral Medicine.

The Center for Behavioral Medicine is a very dynamic specialty clinic located in the Jackson Behavior Health Hospital. The Center for Behavioral Medicine's multidisciplinary team has the expertise to address the highly complex and challenging needs of this population and provide culturally sensitive mental health services to clients usually underserved for reasons such as financial limitations, restricted insurance coverage, sexual orientation, stigma associated with the illness and limited English proficiency.

The Center for Behavioral Medicine works in close collaboration with the Jackson Health System's medical teams and with Miami Dade community providers. The clinic provides evidence-based interventions to address the multifactorial aspects of mental disorders associated with medical illnesses.

The leadership team consists of two licensed clinical psychologists that serve as administrative and clinical directors. The clinical team includes attending psychiatrists, licensed clinical psychologists, a neuropsychologist, licensed clinical social worker, one psychology resident, two psychology interns, psychiatric residents and several practicum students.

Post-doctoral psychology residents, psychology interns and practicum students are an integral part of the mental health team of the clinic. Primary clinical responsibilities include conducting initial psychological evaluation, individual, family, and group psychotherapy and psychological testing. They also participate in weekly multidisciplinary staffing, where cases are reviewed and individual treatment plans are developed.

The program offers the opportunity for psychology interns to provide comprehensive mental health services to a diverse ethnic population of all ages affected by HIV/AIDS and other concomitant illnesses including Hepatitis C, diabetes, and substance abuse. The training combines the clinical, academic and research experience necessary to prepare interns to provide mental health services in health care settings. One of the two available internship positions is designated specifically to attend to the multiple issues of the Hispanic population. To address the complex needs of these clients, general knowledge about Hispanic culture and language proficiency is preferred.

Applicants who have had experience working with patients infected or affected by HIV, and/or other medical conditions are preferred as are those who work well with multidisciplinary teams. Interns will need to be able to manage complex cases, handle varied responsibilities efficiently, and be comfortable working with a multicultural population with different sexual orientations. This training program provides the internship training hours and the supervision required for licensing eligibility. Average work week for the Adult Outpatient Behavioral Health Clinical intern is 45-50 hours.

PEDIATRIC BEHAVIORAL MEDICINE

The Pediatric Behavioral Medicine track combines inpatient consultation-liaison services to Holtz Children's Hospital with outpatient treatment through our Child and Adolescent Center (CAC) and the Center for Behavioral Medicine (CBM). Interns will also complete psychological testing batteries through our inpatient child and adolescent psychiatry unit and through the CAC and CBM outpatient clinics.

Pediatric behavioral medicine consults are requested by medical staff across a number of pediatric services including solid organ transplant (liver/intestine/multivisceral, kidney, heart, and lung), GI, cardiology, pulmonology, special immunology/HIV, nephrology, intensive care, burn, orthopedics, trauma, neurology, and general pediatrics teams. Interns are exposed to patients ranging in age from infancy to young adulthood as well as their families. We are consulted regarding a wide variety of issues, including adjustment to chronic illness/recurrent hospitalization, pre-transplant evaluation and post-transplant management, pain management, non-adherence, psychological distress being converted as physical symptoms, anticipatory anxiety, regimen adherence/pill swallowing, illness-related challenges to quality of life (peers, academics, loss of independence), end-of-life/palliative care, patient-staff communication issues, parental support/bereavement, and acute stress/reaction to trauma and body disfigurement as a result of injury/treatment. Our approach is multidisciplinary and we work closely with teams comprised of medical interns/residents/fellows/attendings, surgeons, social workers, physical, occupational and speech therapists, child life specialists, nurses, and child psychiatry fellows. In addition, the pediatric behavioral medicine service is now an official part of the Pediatric Palliative Care Team (PediPals). We work with a culturally, lingually, and socioeconomically diverse clientele and staff. While the emphasis of consultation is on assessment and providing recommendations to the family and medical team, there are also many opportunities for brief, solution-focused interventions as well as longer-term, intensive interventions as a large portion of our patients remain in the hospital for several days to many months and/or have chronic conditions requiring frequent inpatient stays.

In addition to inpatient consultation-liaison, interns will be expected to carry 4 – 6 outpatient cases in the CAC with a clinical child focus and in the CBM with a pediatric behavioral medicine focus. Interns may also have the opportunity to conduct outpatient pre-transplant evaluations in the CBM. Furthermore, a minimum of six full psychological testing batteries are expected by the end of internship year. An average work week for the Pediatric Behavioral Medicine intern is 40-45 hours.

CHILD CLINICAL TRACK

The Child Clinical Track will consist of a one year experience in the Child and Adolescent Center (CAC) and rotations in each of the following services: The Dialectical Behavior Therapy Program for Adolescents (DBT-A) and the Child and Adolescent Acute Inpatient Psychiatry Unit (CAAP). Average work week for the Child Clinical intern is 40-45 hours.

1. Child/Adolescent Outpatient Clinic (CAC)

In the Child and Adolescent Center (CAC) the intern provides treatment to children/adolescents with a wide range of childhood disorders, including: mood and anxiety disorders, ADHD, disruptive behavior disorders, PTSD, obsessive-compulsive disorder, phobias, adjustment disorders, conduct disorder, autism spectrum disorders, intellectual disability and parent-child conflicts. Children range in age from 3 to 21 years, and come from diverse cultural and socioeconomic backgrounds. Working with parents is an integral part of therapy in the CAC therefore the intern works individually or co-jointly with their client's caretakers.

The internship experience in CAC includes the following:

- Provide individual and family therapy. Modalities of therapy include cognitive-behavioral therapy, play therapy, psychodynamic therapy, and interpersonal therapy. When needed, interns will work closely with psychiatry to improve their client's adherence with their medication.
- Parenting skills with parents/caretakers of your own clients or other CAC client's parents.
- Psychological testing utilizing a variety of testing measures with emphasis on learning to select appropriate tests and interpretation/integration of data for comprehensive reports.

2. Dialectical Behavior Therapy Program for Adolescents (DBT-A)

In the Dialectical Behavior Therapy Program for Adolescents (DBT-A), the intern provides individual and group treatment to adolescents and their families experiencing multiple problems including frequent psychiatric hospitalizations, suicidal ideation and behavior, non-suicidal self-injury, severe depression and anxiety. All treatment is performed within a standard comprehensive DBT-A format under the guidance of an intensively trained team. Adolescents range in age from 12-18 years.

The internship experience in the DBT-A Program includes:

- Individual DBT therapy, family therapy, adolescent skills training groups, multifamily skills training groups
- Weekly consultation team meetings
- Weekly DBT specific individual supervision
- Biweekly DBT group supervision
- Optional participation in ongoing research projects

3. Child and Adolescent Acute Inpatient Psychiatry Unit (CAAP)

The Child and Adolescent Acute Inpatient Psychiatry Unit (CAAP) provides interns with an opportunity to work with severely disturbed children and adolescents in an inpatient psychiatric setting. CAAP is an acute psychiatric unit that provides short-term care for children and adolescents up through the ages of 17, who present with a wide range of diagnoses including Mood Disorders, Anxiety Disorders, Psychosis, Developmental Disorders, Disruptive Behavioral Disorders, Adjustment Disorders, Personality Disorders, etc. The patient population is varied, though many of the patients are from highly dysfunctional families, lower SES family systems, and/or have been abused and/or neglected in some manner.

Psychology works as a consultant for the CAAP multidisciplinary team, which includes psychiatrists, child psychiatry fellows, social workers, activity therapists, nurses and mental health technicians. The interns will participate in team meetings and ongoing collaboration with cases.

The interns primarily provide psychological testing on a consult basis on the CAAP Unit. Other potential opportunities include intake assessments, individual and family treatment, and behavioral management. The interns will have the opportunity to work with children/adolescents at all developmental levels with a range of diagnoses.

4. Child Clinical Track Didactics

In addition to providing services in CAC, DBT-A and CAAP, the interns will also be involved in the following child focused didactics:

1. Child Trauma Seminar

Coordinators: Jon Shaw, M.D. & Evelyn F. Benitez, Ph.D.

The psychology trainees participate with the psychiatry fellows and residents in bi-weekly seminars where specific child trauma journal articles are reviewed and discussed. The interns and fellows are expected to participate and/or lead the didactic instructions. In addition, interns and fellows are encouraged to present their trauma therapy cases in the seminar to obtain feedback or assistance as needed.

2. Child Psychiatry Rounds

Coordinators: Psychiatry Attendings

Child psychiatry rounds consist of case presentation, journal club, and ethics cases. The intern will have the opportunity to work with the psychiatry fellow and administer and present the psychological testing results during the fellow's case presentation. The interns will also present one of their own cases with an emphasis on psychological test interpretation.

3. DBT for Adolescents Didactic

Coordinators: DBT-A Team

DBT-A didactic is offered bi-weekly and includes review and discussion of the major literature and research related to the understanding and delivery of DBT to adolescents and their families. This includes book chapters and journal articles to help trainees gain a greater understanding of the model of treatment as well as how to

deliver the model with fidelity.

PEDIATRIC NEUROPSYCHOLOGY TRACK

The Pediatric Neuropsychology rotation meets the requirements for a Neuropsychology Internship established by APA Division 40. Previous experience and course work in Neuropsychology are required. Course work and experience working with children/adolescents is also required.

The Pediatric Neuropsychology Program offers a continuum of care from inpatient acute hospitalization and rehabilitation through outpatient treatment. On the inpatient service, the intern will provide consultation and liaison services to children in the Pediatric Intensive Care Unit or acute units, as well as neuropsychological screening, emotional/behavioral assessment, cognitive retraining, and psychotherapy on the Family Centered Pediatric Rehabilitation Unit. Neuropsychological screenings, including assessment of Post Traumatic Amnesia, neurobehavioral exams, and baseline testing, are used to design individual cognitive retraining programs, as well as inform the treatment team and parents of the patient's current cognitive capabilities. Individual interventions include multisensory stimulation for low level patients, behavioral protocols for motivation, pain management/relaxation, and/or individual psychotherapy. In addition, working with the parents is an essential component of treatment; both in the education of brain injuries/medical conditions and in helping the family adjust to the child's changing status and long term deficits. Discharge planning involves liaison with community agencies and the child's school, particularly regarding appropriate educational placement for each child. In addition, the intern will be an integral part of the interdisciplinary team – working closely with PT, OT, Speech, Recreation Therapy, Social Work, nurses, nurse practitioners, and attending doctors, as well as participate in walking rounds, ID rounds, and family conferences.

Children/adolescents on the inpatient units range from infancy to age 18 and have had traumatic brain injuries, strokes, tumors, intractable seizures, encephalitis, gunshot wounds, near drowning, multiple sclerosis/ADEM, and a variety of other neurological insults, as well as spinal cord injuries, congenital disabilities, and orthopedic injuries. Brain injury severity ranges from coma (RLAS II-III) to mild brain involvement to no brain involvement. The children/adolescents on the inpatient units present with a variety of premorbid diagnoses that must be integrated into the treatment (e.g., Autism, ADHD, Learning Disorders, Conduct Disorder, Sexual Abuse victim, etc.). In addition, the intern will have the opportunity to work with patients and families from diverse ethnic and socioeconomic backgrounds.

The Pediatric Neuropsychology Program also offers comprehensive outpatient evaluations and treatment for referrals from the community, as well as for recently discharged inpatients. These services are located in offices adjacent to the inpatient rehab floor and at the Center for Behavioral Medicine at JBHH. Services include initial evaluations, comprehensive neuropsychological testing, cognitive retraining, individual psychotherapy, behavior modification, and parent training. Typical diagnoses include children with Traumatic Brain Injury, Spinal Cord Injury, neurological illnesses, behavior problems, school difficulties, autism, or other psychological issues. Comprehensive neuropsychological testing involves initial assessments/obtaining background information, selection of appropriate tests, administration of a wide variety of neuropsychological measures, as well as parent and teacher measures/behavioral and emotional measures, interpreting and integrating results, and

comprehensive written reports. The intern will also have the opportunity to supervise practicum students for initial assessments, cognitive retraining, and neuropsychological testing.

Training is facilitated through readings, weekly group testing seminars, walking rounds, and brain cuttings. Interns participate in weekly ID rounds with the Pediatric Rehabilitation Team. In addition, weekly brain cuttings of brains of deceased infants through geriatric aged provide valuable knowledge of brain anatomy. Weekly group testing seminar will review selected topics and tests, with the emphasis on test selection, interpretation, and report writing, as well as provide a forum to discuss ongoing testing cases, diagnoses, and recommendations. The intern will have intensive supervision on all cases and is also expected to complete a variety of readings regarding the specific types of cases they are currently following. Recommended readings include Neuropsychological Evaluation of the Child, by Ida Sue Baron (Oxford University Press, 2004); and Neuroanatomy through Clinical Cases, 2nd Edition, by Hal Blumenfeld (Sinauer Associates, Inc, 2010).

There are also opportunities for research on this rotation. Retrospective research using files of the many patients that have completed neuropsychological testing is available. Additionally, case studies of our unusual and rare patients are routinely submitted for poster presentations. Average work week for the Pediatric Neuropsychology intern is 45-50 hours.

PROGRAM FACULTY

SUPERVISING PSYCHOLOGISTS:

GISELA AGUILA-PUENTES, Psy.D.

Nova Southeastern University (Clinical), 1992

Clinical Internship: University of Miami School of Medicine

Postdoctoral Residency: University of Miami School of Medicine

Dr. Aguila-Puentes is the Director of the Neuropsychology Service and an attending neuropsychologist. Her clinical interests are in the neuropsychological diagnosis and treatment of patients with neurological dysfunctions, as well as psychotherapy with adults. Her research interests are primarily within the area of memory disorders.

CAROLINA AVILA, Psy.D.

Nova Southeastern University (Clinical), 2013

Clinical Internship: The Help Group

Postdoctoral Fellowship: University of Miami School of Medicine/Jackson Memorial Hospital

Dr. Avila is a clinical psychologist in the Dialectical Behavior Therapy for Adolescents (DBT-A) Program and the Child and Adolescent Center (CAC) and the Coordinator for Practicum Training. She is responsible for supervising individual, family and group DBT therapy as well as psychological testing. Her clinical and research interests are in the areas of DBT with children and adolescents, as well as trauma, depression, anxiety, ADHD, developmental disorders, family therapy and parenting skills training. Dr. Avila is a member of the American Psychological Association, the Society of Clinical Child & Adolescent Psychology (Division 53), the Society for Child and Family Policy and Practice (Division 37), and the Association for Behavioral and Cognitive Therapies (ABCT).

EVELYN F. BENITEZ, Ph.D., CAP

Carlos Albizu University (Clinical), 1996

Clinical Internship: Metro-Dade Youth and Family Services

Dr. Benitez is the Associate Chief of Psychology, Director of the Post-Doctoral Psychology Residency Training program and Clinical Director of the Child and Adolescent Outpatient Center. Dr. Benitez's clinical interests are in areas of trauma, developmental disorders, anxiety, ADHD, and addiction. Dr. Benitez has expertise in addiction and has been a Certified Addiction Professional (CAP) and a member of the Florida Alcohol and Drug Association since 1990. She is also a member of the American Psychological Association since 1996.

SCOTT CHRISTIAN, Psy.D.

Nova Southeastern University (Clinical), 2003

Clinical Internship: Jackson Memorial Hospital

Postdoctoral Fellowship: University of Miami School of Medicine/Jackson Memorial Hospital

Dr. Christian is an attending psychologist within the Adult Behavioral Medicine/ Consultation/Liaison Service, Adult Outpatient Center (AOC), and the outpatient Center for Behavioral Medicine (CBM). After specializing in Behavioral Medicine (Psychosocial Oncology and Women's Behavioral Medicine) and serving as the Chief Intern and Chief Fellow in Psychology at Jackson Memorial Hospital, Dr. Christian created a successful fee-for-service private practice specializing in general individual and couple's psychotherapy, health psychology, and treatment for psychotherapy-resistant clients. Dr. Christian augmented his 11 years in private practice through appointments as an Adjunct Faculty/Professor and Supervisor at both Nova Southeastern University and Carlos Albizu University.

JONATHAN L. COHEN, Psy.D.

Nova Southeastern University (Clinical), 1993

Clinical Internship: Children's Hospital/Judge Baker Children's Center Harvard Medical School

Advanced Fellowship: Children's Hospital/Judge Baker Children's Center Harvard Medical School

Dr. Cohen is a part-time Attending Psychologist in the Department of Psychology. He is responsible for providing individual and family supervision within the Child and Adolescent Center, Center for Behavioral Medicine and Adult Outpatient Center. In addition, Dr. Cohen works with the Miami-Dade County Court Marchman Act Program. His clinical interests are in the areas of father-infant bonding/paternal role in parenting, treatment of children, adolescents and families, and parenting skills. Dr. Cohen is a member of the American Psychological Association.

SUSAN IRELAND, Ph.D.

University of Miami (Clinical, Health), 1995

Clinical Internship: Miami VA Medical Center (Neuropsychology)

Postdoctoral Fellowship: University of Miami School of Medicine/Jackson Health System (Neuropsychology, Rehabilitation Psychology)

Dr. Ireland is the Director of Outpatient Adult Neuropsychology and an attending neuropsychologist and rehabilitation psychologist on the inpatient and outpatient Neurorehabilitation service and at the Center for Behavioral Medicine. Clinical and research interests include recovery of function from neurological disorders (e.g., traumatic brain injury, cerebrovascular accidents), including the role of psychotherapeutic, cognitive retraining, and psychopharmacological interventions and the impact of psychoactive substances and other co-morbid psychopathology on neurological insults and recovery.

SHEBA KUMBHANI, Ph.D.

Palo Alto University (Clinical), 2007

Clinical Internship: Baylor College of Medicine

Postdoctoral Residency: Dartmouth-Hitchcock Medical Center/Geisel School of Medicine at Dartmouth

Dr. Kumbhani is an attending neuropsychologist in the Neuropsychology service, primarily serving the acute neuropsychology service. The acute service provides assessment and treatment to new traumatic brain injury patients, ranging from mild to severe, consultations that arise out of the Neurology and Neurosurgery Services, and offers weekly support groups for patients and families. Her clinical and research interests are in the assessment and treatment of adults with neurological disorders.

DIANELYS S. NETTO, Ph.D.

Nova Southeastern University (Clinical), 1997

Clinical Internship: University of Miami School of Medicine/Jackson Memorial Hospital

Postdoctoral Residency: University of Miami School of Medicine/Jackson Memorial Hospital

Dr. Netto is a part-time attending neuropsychologist in the Neuropsychology Service. She provides assessment and treatment to individuals with various neurological conditions and cognitive impairment ranging from mild to severe throughout the acute hospital setting. Family therapy and support groups are also an integral part of the service. Her clinical and research interests are in the area of adult neurological disorders, assessment and intervention of Hispanics, cognitive rehabilitation and family/group therapy. Dr. Netto is a member of Division 40 (Society for Clinical Neuropsychology).

MARIO OLAVARRIA, Psy.D.

California School of Professional Psychology (Fresno), 1998

Clinical Internship: University of Miami School of Medicine/Jackson Memorial Medical Center

Postdoctoral Fellowship: Biscayne Institute of Health and Living and University of Miami School of Medicine

Dr. Olavarria is an attending psychologist on the Adult Behavioral Medicine and Physical Rehabilitation Psychology Service and the Center for Behavioral Medicine. Dr. Olavarria is also the director of the Spinal Cord Injury Acute and Rehabilitation Psychology Services for Jackson Health System. Dr. Olavarria is responsible for providing psychological services to two acute neurosurgical units, the Neurosurgical Intensive Care Unit, the Trauma Intensive Care Unit, two acute care units and the Rehabilitation Unit. His areas of professional interest are in cross cultural studies, behavioral pain management, hypnosis, family and systems intervention with medical patients, and the psychological adaptation process of patients with physical trauma and disabilities (i.e. spinal cord injury, amputation and orthopedic trauma).

MELISA OLIVA, Psy.D.

Nova Southeastern University (Clinical), 2007

Clinical Internship: University of Miami School of Medicine/Jackson Memorial Medical Center

Post-Doctoral Fellowship: Harvard Medical School/Boston Children's Hospital

Dr. Oliva is the attending psychologist for the Pediatric Behavioral Medicine service and at the Center for Behavioral Medicine. Dr. Oliva specializes in the area of pediatric psychology and professional interests include pediatric solid organ transplantation, non-adherence to medical recommendations, bioethics, and biofeedback assisted relaxation training. Dr. Oliva is involved in research with the pediatric transplant population, including assessment on use of mental health services, quality of life, non-adherence, psychological integration of grafts, psychological factors impacting transplant outcomes, and transition to adult health care. Dr. Oliva has participated in NIH funded research studies and has several publications in the areas of pediatric psychology and pediatric psychiatry consultation-liaison services. Dr. Oliva is a member of the American Psychological Association, the Society for Pediatric Psychology (Division 54), and the International Pediatric Transplant Association (IPTA).

CLAUDIA A. RANALDO, Psy.D.

Florida School of Professional Psychology-Tampa Campus (Clinical/Child), 2012

Clinical Internship: Chicago School of Professional Psychology

Postdoctoral Fellowship: University of Miami School of Medicine/Jackson Memorial Hospital

Dr. Ranaldo is the Director for the Dialectical Behavior Therapy Program for Adolescents (DBT-A). She is responsible for supervising individual, group and family therapy in both the CAC and DBT-A Program as well as supervising psychological testing within the CAAP unit. Her primary clinical and research interests include DBT therapy with children and adolescents, object-relations, attachment, childhood trauma, PTSD, the Rorschach, and emerging personality disorders in adolescents. Dr. Ranaldo is also a certified School Psychologist, and is interested in helping children and families access appropriate services within their schools. Dr. Ranaldo is a member of the American Psychological Association, the Society of Clinical Child & Adolescent Psychology (Division 53) and the Association for Behavioral and Cognitive Therapies.

THOMAS ROBERTSON, Psy.D.

California School of Professional Psychology (San Francisco), 1996 Clinical

Internship: State University of New York at Stony Brook

Postdoctoral Fellowship: Kaiser Permanente Oakland Medical Center – Department of Psychiatry

Dr. Robertson is the Chief Psychologist. After training and working in Behavioral Medicine at Kaiser Permanente, he joined the C/L Psychiatry team at UM/Jackson and was a voluntary Associate Professor of Psychiatry & Behavioral Sciences at the Miller School of Medicine. He worked in C/L consultation for two years, Oncology for two years, and then became head of the Outpatient Clinic and the Coordinator of Psychotherapy Training for residents in the psychiatry residency program here at UM/Jackson. Dr. Robertson recently returned from

three years at Columbia University Counseling & Psychological Services to accept the role of chief. Dr. Robertson's clinical interests are in psychotherapy, supervision, medical psychology, grief and bereavement, gender, orientation, and sexual issues. He trained at a UCSF clinic devoted to the care of LGBT clients in San Francisco and has treated hundreds of patients living with HIV. Dr. Robertson has taught and trained in most of the major psychotherapeutic modalities and is interested in psychotherapy outcome research. He serves as an Attending Psychologist at the Center for Behavioral Medicine, hosts the Book Club, and supervises interns working at the CBM. He also provides psychotherapy to CBM patients.

SUZAN TANNER WOODWARD, Ph.D.

Nova Southeastern University (Clinical), 1992

Clinical Internship: University of Miami School of Medicine

Postdoctoral Residency: University of Miami School of Medicine

Dr. Tanner is the Director of the Pediatric Neuropsychology Service and the Pediatric Rehabilitation Psychology Service. Her primary clinical and research interests are in the areas of pediatric neuropsychology (including assessment and treatment of children with neurological disorders, head trauma, learning disabilities, and ADHD), and cognitive rehabilitation, as well as parent training, and assessment/treatment of developmental disorders. Dr. Tanner is a member of the American Psychological Association, Division 40 (Clinical Neuropsychology) and Division 22 (Rehabilitation Psychology), and the National Academy of Neuropsychology.

OTHER PSYCHOLOGISTS AFFILIATED WITH THE INTERNSHIP PROGRAM:

NICOLETTA B. TESSLER, Psy.D., M.B.A.

University of Denver Graduate School of Professional Psychology, 2004; University of Miami Executive MBA in Health Sector Management and Policy, 2013

Clinical Internship: Bronx Psychiatric Center of the Albert Einstein College of Medicine

Postdoctoral Fellowship: University of Miami School of Medicine/Jackson Memorial Hospital

Dr. Tessler is the Senior Vice President & Chief Executive Officer of Jackson's Behavioral Health Hospital. She plays an active supportive and abiding role in the internship program, working closely with the Chief Psychologist to enhance the training program. Her business interests include healthcare strategy, innovation, and health economics. Her clinical and research interests include: suicide, PTSD and trauma, multicultural psychology, bereavement stress, women in leadership, group process and dynamics, and psychological adaptation to medical illness. Dr. Tessler also has a major interest in behavioral health-medical health integration, telepsychiatry, and supervision and training.

PHILIP D. HARVEY, Ph.D.

Stony Brook University (Clinical), 1982

Clinical Internship: Stony Brook Clinical Consortium

Dr. Harvey is Leonard M. Miller Professor of Psychiatry and Director of the Division of Psychology at the University of Miami Miller School of Medicine. He is the author of over 900 scientific papers and abstracts and he has written or edited 10 books and over 60 book chapters. He has given more than 2,300 presentations at scientific conferences and medical education events. He has received more than \$40 million dollars in research grants in his career and currently has over \$10 million dollars in active research support. In his clinical work he has performed more than 1,000 psychological assessments. He has received a number of awards, including the Inaugural Schizophrenia International Research Society Clinical Scientist Distinguished Contributions award, The Department of Veterans Affairs John Blair Barnwell Award, and the American Psychiatric Foundation's Alexander Gralnick Schizophrenia research award. He is among the top 1% of all mental health researchers in the number of citations of his work. He is a member of the American Psychological Association, the American College of Neuropsychopharmacology (Fellow), the International College of Neuropsychopharmacology (Fellow), the Society for Research in Psychopathology (Founding Member), the Society for Biological Psychiatry, International Neuropsychological Society, the Schizophrenia International Research Society (Founding Director), and the International Society for Clinical Trials and Methodology (Founding Member). His research has focused for years on cognition and everyday functioning and he has studied aging in schizophrenia, functional impairments in severe mental illness, the cognitive effects of typical and atypical antipsychotics, as well as the effects of cognitive enhancing agents in various conditions, including schizophrenia, dementia, affective disorders, and traumatic brain injury.

MARY I. ISHII, Psy.D.

Illinois School of Professional Psychology – Chicago Campus (Health Psychology Specialization), 1997

*Clinical Internship: University of Miami School of Medicine/Jackson Memorial Hospital
Postdoctoral Fellowship: University of Miami School of Medicine*

Dr. Ishii is a Voluntary Clinical Assistant Professor in the Department of Psychiatry and Behavioral Sciences at the University of Miami Leonard Miller School of Medicine/JMH. She is the attending psychologist for the UM/JMH Burn Center in the Department of Surgery and provides consultation services to the Orthopaedic Hand, Orthopaedic Trauma, and Trauma services for amputees, pain management and other intensive trauma related injuries. Dr. Ishii developed and facilitates a bi-weekly Burn Survivor Support Group as well as serves as an advisor to a local Amputee Support Group. Her research and clinical interests are in the areas of burn injuries and psychological sequelae, traumatic amputations, orthopaedic/traumatic injuries, medical issues, hypnosis, and HIV/AIDS. Dr. Ishii is a member of the American Psychological Association, American Burn Association and American Society for Clinical Hypnosis.

APPLICATION INFORMATION

Applicants from APA-approved clinical and counseling psychology programs are welcome to apply. *Strong applicants from non-APA-approved programs will be considered on a case by case basis.*

The application deadline for the 2017-2018 internship year is **November 1, 2016**.

Applicants are required to submit the APPI online application including the following documents:

1. Official Graduate Transcript(s)
2. Curriculum Vitae
3. Three Letters of Recommendation
4. Two recent work samples (e.g., psychological evaluations, treatment or case summary)

Since we offer seven clinical tracks, **please list and rank up to four choices** for interviewing purposes at the University of Miami/Jackson Memorial Hospital. This rank will solely be used for arranging interviews (in accordance with APPIC Match Policy # 5d). **Include your rank order list in the first paragraph of your cover letter in bold font.** Please note, three of the tracks have two programs, General and Hispanic. Only include clinical tracks in your rank order list. Program distinctions do not need to be included.

The following is a list of the specific track(s) to choose from:

CLINICAL TRACKS	APPIC PROGRAM CODE	
Adult Outpatient Clinical	General: 121924	Hispanic: 121925
Adult Behavioral Medicine/Rehab	121913	
Adult Neuropsychology	121912	
Adult Outpatient Behavioral Health	General: 121926	Hispanic: 121927
Pediatric Behavioral Medicine	121915	
Child Clinical	General: 121922	Hispanic: 121923
Pediatric Neuropsychology	121914	

Applications will be reviewed by the supervisors for each track that you have selected. They will then make a decision whether to offer an interview for their track. A select number of applicants will be offered interviews.

This internship site abides by the APPIC policy that no person at this training facility will solicit, accept, or use any ranking-related information from any intern applicant.

All applicants can expect to be notified via e-mail as to their interview status on or before December 12, 2016. If you have been invited for an interview(s) you will be asked to call our

office at a specific time to schedule your interview(s). If you have not heard from the program after the date listed above, feel free to e-mail the Director of Internship Training to inquire about the status of your application (moliva2@jhsMiami.org).

Applicants who are matched to UM/JMH will be required post-match to: 1) pass an on-site physical, drug screen, and criminal background check within 30 days prior to the start of internship, 2) have an active Basic Life Support (BLS) card from the American Heart Association before starting internship year, and 3) sign an affidavit of good moral character.

Submit all materials via the APPIC online submission portal.

Direct any questions to:

Melisa Oliva, Psy.D.
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