JACKSON HEALTH SYSTEM

In Affiliation with the
University of Miami, Miller School of Medicine

Postdoctoral Residency Training Program
In
Health Service Psychology
2020-2021
GENERAL INFORMATION

The Department of Psychology of the Jackson Health System in affiliation with the University of Miami, Miller School of Medicine offers a Multi-Specialty Postdoctoral Residency Training Program in Health Service Psychology that emphasizes advanced evidenced-based education and clinical training to prepare psychology postdoctoral residents to work independently in their specialty areas. We are pleased to announce that as of July 2019, Jackson Health System offers three APA-Accredited, on Contingency specialty postdoctoral residency training programs in Clinical Neuropsychology, Rehabilitation Psychology, and Clinical Health Psychology. We also offer two residencies in Clinical Child Psychology. The Clinical Child Psychology- Pediatric Behavioral Medicine specialty area is not APA accredited; it is currently under review. The Clinical Child Psychology- Dialectical Behavior Therapy for Adolescents is not APA accredited; it is an Association of Postdoctoral and Psychology Internship Centers (APPIC) member.

*Questions related to the program’s accredited 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
Web: [www.apa.org/ed/accreditation](http://www.apa.org/ed/accreditation)

The Postdoctoral Residency Program is committed to promote expertise in cultural and individual diversity by recruiting faculty from different cultural backgrounds and by providing the postdoctoral residents with theoretical instruction, experiential training, and exposure to populations that are diverse in areas of age, gender, gender identity, sexual orientation, ethnicity, race, national origin, language, level of education and social economic status.

Jackson Health System is an internationally recognized, academic health system composed of six hospitals, 12 specialty care centers, two long term care facilities, several outpatient health clinics and pharmacies. The Postdoctoral Residency program takes place primarily in four hospitals that are housed on the main medical campus. These include: Jackson Memorial Hospital, Holtz Children’s Hospital, Jackson Rehabilitation Hospital, and Jackson Behavioral Health Hospital.

**Jackson Memorial Hospital** is an accredited, non-profit, tertiary care hospital and the major teaching facility for the University of Miami, Miller School of Medicine. With more than 1,550 licensed beds, Jackson Memorial Hospital provides a wide range of patient services and educational programs, a clinical setting for research activities, and a number of health-related community services.
Jackson Memorial Hospital is a regional referral center and a magnet for medical research and innovation, and the home to Ryder Trauma Center, the only adult and pediatric Level 1 trauma center in Miami-Dade County. Based on the number of admissions to a single facility, Jackson Memorial is one of the nation's busiest hospitals. Holtz Children’s Hospital is one of the largest children’s hospitals in the southeast United States. It is known worldwide for the team of pediatric specialists experienced in treating children with all types of medical needs. Jackson Rehabilitation Hospital provides comprehensive rehabilitative care to adults, adolescents and children, while helping patients and their families with the recovery process. This hospital is led by an experienced, multidisciplinary team that delivers inpatient care, outpatient services and a wide array of support services for patients with spinal cord injuries, brain injuries and a broad spectrum of medical and physical conditions. Jackson Behavioral Health Hospital offers a variety of behavioral health services for children, adolescents, adults, and seniors and has a professional atmosphere designed for maximum treatment effectiveness. Jackson Behavioral Health Hospital, in association with the medical expertise of the University of Miami, Miller School of Medicine's Department of Psychiatry, provides services in a supportive, safe environment by nurturing, compassionate, and well-qualified staff. The team consists of psychiatrists, psychologists, advanced registered nurse practitioners, registered nurses, social workers, occupational therapists, certified therapeutic recreation specialists, music therapists, counselors, case managers, peer specialists, and mental health specialists.

Psychologists play a vital role in the medical center, which 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 Jackson Health System (JHS) provides diagnostic and treatment interventions to 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 Postdoctoral residents’ natural evolution and expansion of knowledge.

The JHS Psychology Department is comprised of 14 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 faculty is highly committed to all aspects of the training program; providing quality supervision as a major aspect of their professional roles. Some psychology faculty
members have dual academic appointments within the University of Miami, Department of Psychiatry and Behavioral Sciences, as well as other medical departments. In addition to the faculty, there are also 8 postdoctoral residents, 9 psychology interns and 9-13 practicum students rotating through the different services.

The JHS Department of Psychology is affiliated with the Division of Psychology at the University of Miami, Miller School of Medicine. UM’s Division of Psychology is comprised of full-time and part-time licensed psychologists. Postdoctoral residents have multiple opportunities for involvement with other UM psychologists through research, teaching and training experiences.

**POSTDOCTORAL RESIDENCY PROGRAM**

Residents provide psychological interventions as an integrated part of each medical/psychiatric team service and are supervised by at least two attending psychologists from the JHS Department of Psychology. The postdoctoral residency clinical training meets the licensure requirements for postdoctoral supervised practice. Postdoctoral residents receive ongoing mentoring and written evaluation of feedback from supervisors every four months. There are also established written grievance and due process procedures adopted by the Psychology Training Committee for the protection of postdoctoral residents and their supervisors.

Admission into the program is highly competitive and candidates are drawn from a nationwide pool of applicants. The applicant must have a satisfactory completion of a doctoral degree from an APA accredited doctoral program in psychology or counseling, and internship training from an APA accredited or APPIC membership site.

The program offers one-year, full-time appointment with a possibility of a second year depending on the specialty practice area. The appointment offers a stipend of $42,000 and benefits that include 18 personal leave days (for vacation, sick, and educational leave) in addition to 10 Federal Holidays, and health benefits (medical, vision and dental). Postdoctoral residents also have access to the Louis Calder Memorial Library, which provides access to a variety of CD ROMS, various database searches including Medline, PsychInfo and ClinPsych, as well as a host of online full-text journals and books. Postdoctoral residents participate in different training activities according to their areas of specialty to promote the development of advanced competences in health psychology.

Presently there are eight postdoctoral residency positions available in the following specialty practice areas:

**American Psychological Association accredited, on Contingency programs**

- **Clinical Health Psychology- Adult Consultation and Liaison** (three positions - one year residency)
• Clinical Health Psychology - Adult Outpatient (one position - one year residency)
• Clinical Neuropsychology - Adult (one position - two year residency)
• Rehabilitation Psychology - Adult (one position - two year residency)

**APPIC Membership:**

• Clinical Child Psychology - Dialectical Behavior Therapy for Adolescents (one position – one to two year residency)

**APPIC Membership and currently under review for APA accreditation**

• Clinical Child Psychology – Pediatric Behavioral Medicine (One position – one year residency)

---

**PHILOSOPHY AND GOALS OF THE TRAINING PROGRAM**

The Postdoctoral Residency Training in Health Service Psychology embraces an integrated approach (Scientist/Practitioner/Scholar) by encouraging learning, clinical practice, application of scholarly findings, and conduction of research. All postdoctoral residents are assessed on their clinical competence, research abilities and supervision skills prior to admission to the program. Training is developed to instill advanced competencies by capitalizing on strengths and to successfully integrate the knowledge and skills in the specialty area in a systematic, hierarchical manner in order to become independent professionals in their particular area of specialization.

The program provides advanced clinical, experiential, and didactic training and the opportunity for the postdoctoral residents to become analytical and critical consumers of current theory and practice in the field. Specifically, this is accomplished through the constant interplay of clinical practices and scholarship activities that include grand rounds and seminars, as well as specific didactics and clinical interventions accordingly to the specific areas of specialty.

The program offers postdoctoral residents a broad exposure to training across diverse cultural and ethnic populations, with intense training on multicultural perspectives and case formulation that includes culture, values, and worldviews of residents, supervisors, and clients. Residents work in diverse settings as well, a spectrum from acute emergency, inpatient units, to outpatient care. Faculty have extensive supervision experience, diverse theoretical perspectives, and rich experience working across interdisciplinary lines.

Additionally, postdoctoral residents may elect to participate in research opportunities within the JHS Department of Psychology or with the Department of Psychiatry and Behavioral Sciences at the University of Miami Leonard M. Miller School of Medicine. Postdoctoral residents are always encouraged to develop and implement their own research designs or conduct collaborative research
with other disciplines within the medical center community. Postdoctoral residents can be involved in different aspects of a research project, such as project development, 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 and psychiatrists in the Department of Psychiatry and Behavioral Sciences. Specific opportunities for research vary on a yearly basis depending on the studies that are funded each year. Each of the four specialties define research competencies and benchmarks independently.

Finally, each resident from each specialty will deliver a Capstone paper/presentation/lecture that will be attended minimally by Clinical Psychology Interns and faculty of the specialty. As the presentation could be in a multidisciplinary setting, presentations/lectures may be announced to associated departments as guests or targets of the presentation. Submission of a paper for publication or presenting a poster at a conference may also serve as a Capstone project. All of the capstone projects represent a summation of the research competency embedded in each specialty.

The training philosophy and goals of the Postdoctoral Residency Training in Health Service Psychology are consistent with the philosophy, mission and goals of both Jackson Health System and the University of Miami Leonard M. Miller School of Medicine.

Within this context, the primary philosophy and goals are to:

1. Provide psychology postdoctoral residents with the necessary supervised experiences to acquire advanced competencies that will prepare them for independent practice and on a path towards specialty boarding.

2. Provide postdoctoral residents with an understanding of the recognized strengths and limitations of various current theoretical bases for assessment and therapeutic interventions.

3. 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. Provide an opportunity to conduct clinically-based research and realize the importance of research as it relates to effective clinical interventions.

5. Establish and deepen the sense of high ethical and professional standards of behavior for psychologists and to gain an understanding and appreciate ethnic, religious, socioeconomic, and individual differences.

6. Provide essential understanding of administrative procedures, patient care, quality assurance, program evaluation, medical issues and interdisciplinary coordination that is related to the
successful and effective application of behavioral medicine and psychological interventions.

7. Provide a single standard of care to patients based on need for service regardless of other factors.

The Postdoctoral Residency Training in Health Service Psychology at Jackson Health System constitutes a program that is delivered in the following way:

- The program is part of a large Department of Psychology, housed at Jackson Behavioral Health Hospital/Jackson Memorial Hospital in affiliation with Leonard M. Miller School of Medicine.
- Provision of “core” academic requirements common to all postdoctoral residents regardless of their areas of specialization.
- Postdoctoral residents must satisfy or exceed a minimum number of training hours, amount of supervision and certain types of clinical experiences.
- The program has a consistent number of postdoctoral residents, whose training begins at a similar point in the academic year.
- There is a central administrative structure composed of the Director of Psychology Training, Specialty training directors, the Training Committee and the Chief of Psychology, who, in turn, are responsible for ensuring compliance of interns, postdoctoral residents and faculty with the policies and procedures of the training program.
- Research is strongly encouraged for all postdoctoral residents who do not conduct research as part of their routine activities.

**CRITERIA FOR SUCCESSFUL COMPLETION OF THE POSTDOCTORAL RESIDENCY PROGRAM**

Criteria for successful completion of the Postdoctoral Residency Training in Health Service Psychology include demonstrated competencies in their specialty areas in addition to 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 residency are discussed with the postdoctoral residents during the initial orientation period by the Director of Psychology Training and the Chief of Psychology. In addition, these criteria are reiterated throughout the training year in seminars and
in supervision. Expectations as to number of patients seen, number of test reports completed, etc. are also communicated during orientation and throughout the training year. Competencies are evaluated during the training year by assessing postdoctoral residents’ behavior and performance in all professional contexts (i.e., during supervisory sessions, during multidisciplinary team meetings, during formal and informal consultations, during didactic seminars, during interactions among postdoctoral residents and administrative personnel) and their performance is discussed monthly during Training Committee meetings. All training staff involved with the postdoctoral residents provides feedback to them during the supervisory sessions. Every four months, supervisors meet with the postdoctoral residents to review progress according to the Competency Benchmarks in Professional Psychology Evaluation form for their specialty area and formulate plans for the remainder of the year. The signed evaluation form is entered in the postdoctoral resident’s file and a copy is given to the postdoctoral resident for their records. If the postdoctoral residents’ progress in achieving these competencies is observed to be deficient, all efforts will be made to remedy existing deficiencies.

**SUPERVISION OF POSTDOCTORAL RESIDENTS**

Postdoctoral residents receive a minimum of two (2) hours per week of face-to-face individual supervision with at least two attending psychologists from the department. During supervision, all clinical cases are reviewed and professional, ethical, and cultural/diversity issues are discussed. Postdoctoral residents are assigned a primary supervisor who is responsible for their entire professional activities. Faculty members are eligible to be primary supervisors if they are licensed as a psychologist in the state of Florida for at least two years.

Supervisors for the postdoctoral residency training program demonstrate evidence of Professional leadership within that program's focus. Supervisors provide modeling, instruction, counseling and specific feedback. Supervisors help postdoctoral residents deal with other hospital personnel and facilitate their transition as an important contributor to the functioning of the unit or program where they are assigned. Postdoctoral residents can expect intensive supervision with the opportunity to take on considerable professional responsibility. Styles of supervision may vary depending on the specialty practice area; co-therapy, direct observation, and audio-visual recordings are used by the various supervisors.

Records of supervision and training are collected monthly by the chief postdoctoral resident and are reviewed by the Director of Psychology Training, the Chief of Psychology and Psychology Training Committee to maintain the highest caliber of mentorship and training for the Postdoctoral Residency Program. The assigned primary supervisor will assume primary responsibility for the postdoctoral residents' training.

The supervisor works at the beginning of the year to delineate specific training goals. Supervisors schedule a minimum of two (2) hours of regular direct face-to-face supervision sessions weekly.
Based upon the supervisor’s assessment of the postdoctoral resident’s progress, additional supervision may be scheduled as needed. Professional and ethical issues as well as content and manner of case consultation are discussed. Supervisors are available to meet with postdoctoral residents on an immediate basis to discuss urgent clinical matters as they occur. It is the supervisor’s responsibility to provide a thorough orientation into the clinical service to which the postdoctoral residents are assigned.

Supervisors will co-sign all progress notes, treatment plans, assessment reports, patient-related correspondence and any other postdoctoral residents’ entries in the medical record. When the supervisor is unavailable, he/she arranges for another psychologist to provide supervision and co-sign for the postdoctoral residents. The covering supervisor must be on the staff or have staff privileges at the medical center.

**ACADEMIC SCHEDULE**

**Training Seminars:**
**Coordinator:** Evelyn F. Benitez, Ph.D.
This seminar is dedicated to discuss current clinical topics of interest and includes the following series:

- Introductory Seminar Series
- DSM-5 Differential Diagnosis Case Presentation Series

**Supervision Seminar/Group Supervision:**
**Facilitator:** Johnathan L. Cohen Psy.D.
This seminar is designed to provide the postdoctoral residents both an overview in the field of supervision and ongoing group supervision of supervision. The seminar will provide a brief overview 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. The ongoing group supervision meetings will provide the postdoctoral residents the opportunity to discuss their supervision cases with interns and practicum students and the challenges they experience.

**Clinical Ethics Discussion and Consultation Seminar Series:**
**Facilitators:** Evelyn F. Benitez, Ph.D. & Dianelys S. Netto, Ph.D.
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. The ethics seminar helps residents understand and adhere to the APA Ethical Principles of Psychologists and Code of Conduct including 2010 and 2016 Amendments. 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. This seminar series is a monthly meeting premised on open and safe discussions of ethical dilemmas that are relevant at
any given time throughout the training year. Residents have an opportunity to present cases as they arise. The postdoctoral resident provides pertinent information about the case and ethical dilemma, and the group provides “consultation” following the 5-Step Decision-Making Process which is discussed at the first session. The facilitators will also provide brief examples of ethical cases to elicit group discussion on identifying ethical dilemmas and to practice utilizing the 5-Step Decision-Making Process. Discussion of recent literature and articles will be provided and discussed as time permits.

**Diversity Seminar**

**Coordinator:** Thomas Robertson, Psy.D.

*Required for all first year residents.* The Diversity Seminar is designed to provide residents with the sensitivity, awareness, knowledge, and skills for multiculturally competent clinical care in the field of psychology. At the conclusion of the seminar, residents will be able to:

- Identify and describe how their own personal/cultural history, attitudes, and biases may affect how they understand and interact with people different from themselves.
- Identify and describe salient aspects of their patient’s unique worldview and how to successfully integrate this into assessment and treatment.
- Recognize the need for consultation, and properly identify/utilize culturally relevant knowledge bases and resources.
- Implement successful multiculturally competent assessment, intervention, and professional communication skills within clinical practice, supervision, and consultation.

**Diversity Didactics**

**Coordinator:** Melisa Oliva, Psy.D.

*Required for all first year residents.* This seminar series combines faculty and outside JHS facility speakers who are experts in their field in regards to considerations for mental health and intervention with particular patient populations that interns are faced with interacting daily given the diverse culture in Miami and at JHS (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, and men’s and women’s mental health issues, etc.).

**Behavioral Pain Management Seminar**

**Facilitators:** Mario Olavarria, Psy.D. & Mary I. Ishii, Psy.D.

During this seminar, postdoctoral residents and 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.
Morbidity & Mortality (M&M) Rounds
Coordinator: Department of Psychiatry
M&M is a peer review seminar dedicated to learning from complications and errors occurring during the care of patients in which psychiatry and/or psychology was involved. The main objective is to identify mistakes and to modify behavior and judgment to prevent repetition of error leading to complications or death. Another important objective of this seminar is to identify systems issues (e.g., outdated policies, changes in patient identification procedures, etc.) that 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.

Psychiatry Grand Rounds
Coordinator: Department of Psychiatry
This seminar is a formal academic presentation about various topics in psychiatry presented by psychiatrists and psychologists who are local and nationally known speakers.

Psychodiagnostic Seminar
Coordinator: Sheba R. Kumbhani, Ph.D.
The postdoctoral residents are invited to attend the different topics presented in psychodiagnostic seminar. The purpose of the seminar is to provide an overview of several intellectual, neuropsychological and personality tests and discussion on how to present and integrate psychological testing data.

Postdoctoral residents Lunch Meetings:
Postdoctoral residents are required to attend weekly lunch meetings with their postdoctoral resident class. The resident lunch meetings serves as a forum for peer support, peer case review and networking. Meetings set for Thursdays from 11:00 to noon (subject to change).

SPECIALTY PRACTICE AREAS

CLINICAL HEALTH PSYCHOLOGY -

Adult Consultation & Liaison 3 Residents – One Year Residency
The Residency Program in Clinical Health Psychology- Adult Consultation & Liaison (Adult C/L) offers three, one-year postdoctoral positions designed to prepare trainees to function independently as future health psychologists in multiple interdisciplinary inpatient and outpatient medical settings. This specialty practice area emphasizes the inextricably related aspects of health and illness to psychological, personality, and behavioral factors. As such, the Adult C/L team provides psychological services to the surgical, emergency room, trauma, and medical units within Jackson Memorial Hospital, and outpatient treatment through the Center for Behavioral Medicine at Jackson Behavioral Health Hospital.

The Adult C/L team consists of four attending psychologists, three postdoctoral residents and three
practicum students. This includes the director/attending psychologist Dr. Judd Scott Christian, attending psychologist Dr. Lisa Gonzalez-Alpizar, attending psychologist Dr. Catherine de la Osa, and attending psychologist Dr. Thomas Robertson. The Adult C/L team provides psychological services throughout one of the largest public teaching hospitals and one of the largest public medical centers in the country. As mentioned earlier, this includes providing services to surgical, emergency room, and medical units in Jackson Memorial Hospital, including the Ryder Trauma Center, the only Level 1 Adult and Pediatric trauma center in Miami-Dade County. Being a large public teaching hospital, also lends itself to a wide range of cultures and international communities that are represented in the population. Postdoctoral residents are encouraged to incorporate diversity and cultural awareness throughout all domains of care. Given this variety of treatment units, a full range of medical and psychiatric issues are encountered on this fast-paced service.

Psychological consultation may be requested for a number of concerns. Some of these include: pre-existing psychiatric issues, current illness-related distress, wide-ranging adjustment issues, behavioral management strategies, poor adherence to treatment, pre-transplant concerns/evaluation, and to address capacity issues to provide informed consent and/or clearance for hospital discharge. The Adult C/L service represents the full range of activities required of a health psychologist working in medical/consultation-liaison psychology, allowing the postdoctoral residents to become proficient in collaboration with medical teams and to enhance skills in the overall management and treatment of medically and/or psychiatrically compromised patients. Postdoctoral residents will learn the rapid assessment of medically compromised patients, the ability to render a diagnosis, provide treatment, guide teams, and decide on disposition in medical areas that require rapid decision-making and follow-up. During the initial assessment, postdoctoral residents will conduct clinical interviews, and incorporate medical information and formal Mental Status Examinations to arrive at diagnostic impressions and treatment recommendations for a wide range of simple to complex and comorbid conditions. In the case of rendering decisions related to capacity or involving general pre-surgical and/or pre- and post-transplant patients, brief neurocognitive testing may be required to arrive at treatment recommendations and/or to inform decision-making processes. As noted, given the diverse communities served, several of the attendings are bilingual and residents are trained on multi-linguistic rendering of services which includes the use of language lines and translator services as indicated and needed. Additionally, during triage meetings, cultural considerations are discussed in order for residents to have an enriched experience regarding case conceptualization and understand how cultural dynamics may impact patients.

The miracle of organ transplantation happens more times each year at Jackson Memorial Hospital than at any other hospital in the Southeast United States. Consultations for organ transplantation include heart/LVAD, kidney, liver, lung, multi-visceral, and bone marrow. The Adult C/L team is also consulted to provide psychological testing to assess for anxiety, depression, mania, psychosis, and/or personality characteristics that may be impacting and/or interfering with medical or
psychiatric care. Postdoctoral residents learn to write succinct reports and progress notes that are geared for medical colleagues in order to assist them in the management of their patients. The postdoctoral residents will also triage daily consults and psychiatric evaluations, as well as treat and/or refer for continued care post-discharge. Except for certain cases involving the assessment of capacity, postdoctoral residents typically follow their patients throughout the course of hospitalization and occasionally continue treatment on an outpatient basis within the Adult Outpatient Center for Behavioral Medicine (AOCBM) located in Jackson Behavioral Health Hospital.

As stated above, postdoctoral residents on the Adult C/L service also provide outpatient psychological services within the AOCBM. This center specializes in outpatient psychological assessment and behavioral health services, emphasizing advanced evidence-based interventions. This outpatient center serves diverse racial and ethnic populations coping with acute and chronic issues secondary to medical illnesses including HIV, cancer, diabetes, transplantation, pain, bariatric, and other medical conditions. The services offered include individual, family and group psychotherapy, partial and complete psychological assessments, pre-bariatric and pre-transplant evaluations, and adjustment post medical intervention. In addition, the Adult C/L team coordinates training and CL services with the Clinical Health Psychology Adult Outpatient resident in the AOCBM, who also works on Adult C/L service 1 day per week.

For all types of services, postdoctoral residents will be trained to answer the referral question with targeted interventions tailored to be brief, concise, informative, and collaborative. To facilitate their continued education, postdoctoral residents will be provided with reading assignments targeting differential diagnosis and the more common psychiatric presentations of certain medical illnesses and/or drug-induced clinical presentations. Moreover, postdoctoral residents will receive two hours of face-to-face supervision and multiple hours of “live” supervision with the 4 attending psychologists. This type of “live” supervision frequently occurs in major teaching hospitals affiliated with medical schools, and provides a very rich training experience.

*Three positions available for the 2020-2021 residency year.*

**Adult Outpatient Behavioral Medicine – One Resident – One Year Residency**

The Clinical Health Psychology Adult Outpatient Behavioral Medicine Residency offers a one-year postdoctoral position designed to provide the necessary clinical experience and supervision to prepare the Postdoctoral Resident to become an independent practitioner in Health Psychology Specialty Practice Area. This position emphasizes the relationship among emotional, cognitive, social, cultural and biological aspects of health and disease and promotes the use of evidence-based interventions to address the highly complex and challenging needs of a population that often presents with medical illnesses complicated by severe psychosocial stressors and psychiatric disorders. The training for this position takes place in the Adult Outpatient Center for Behavioral Medicine (AOCBM) located in Jackson Behavioral Health Hospital and under the supervision of Dr. Clara Lora Ospina and Dr. Keith Lit.
At AOCBM, the multidisciplinary team provides evidence-based interventions to address the multifactorial aspects of mental disorders secondary to HIV/AIDS, Cancer, Traumatic Injury, Diabetes, and other Chronic Illness, as well as providing Pre-Transplant support and Pre-Bariatric Surgery assessment. In the AOCBM, emphasis is placed on teaching brief and long-term psychodynamic, cognitive behavioral, and ACT strategies in individual and group modalities with a wide variety of patients who present with primary psychiatric and personality disorders complicated by medical illness and severe psychosocial stressors.

The Adult Outpatient Center for Behavioral Medicine works in close collaboration with 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. Common patient diagnoses include: affective disorders, anxiety disorders, PTSD, psychosis, personality disorders, and concurrent substance abuse. The Psychology Resident carries a diverse outpatient psychotherapy caseload, representing a spectrum of demographic and cultural backgrounds, clinical presentations and treatment needs. Essentially, the Adult Outpatient Health Psychology Track allows the resident 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 multidisciplinary treatment team. The treatment team at the AOCBM consists of psychiatrists, social workers, psychiatry and psychology interns, practicum students, and support staff.

Applicants who have had experience working with patients with chronic medical conditions such as HIV/AIDS, Cancer, Diabetes and Transplant are preferred as are those who work well with multidisciplinary teams. Residents will need to be able to manage complex cases, handle varied responsibilities efficiently, and be comfortable providing culturally sensitive mental health services to clients usually underserved for reasons such as financial limitations, restricted insurance coverage, limited English proficiency, and stigma associated with illness, gender identity or sexual orientation. This training program provides the postdoctoral training hours and the supervision required for licensing eligibility. Average work week for the AOCBM Psychology Resident is 40-45 hours.

1. Outpatient

**Outpatient Clinical Services**

The Psychology Resident assumes responsibility for a combination of assessment, consultation, and direct clinical care duties. The resident is responsible for providing 20 to 25 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 resident is responsible for completing a minimum of three complete psychological testing batteries during the training year, as well as weekly pre-bariatric surgery evaluations. In addition, there are a wide range of groups available and residents may participate
in the formation of new groups. Group therapy is provided in English and Spanish. Types of groups provided have included:

- Depression Group (Behavior Activation)
- Emotional Regulation Skills Group
- HIV/AIDS support groups
- Addiction Group
- Grief/Bereavement

2. Inpatient/Consultative Opportunities
Residents also have the opportunity to provide services 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.

3. Research Activities
Research opportunities are available in the Adult Outpatient Health Psychology Track. Research provides the knowledge base of clinical psychology and residents are expected to be conversant with the processes and products of contemporary clinical investigation.

4. Supervision
The resident 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, ACT 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 resident has abundant opportunities for observational learning and informal supervision.

*One position available for the 2020-2021 residency year.*

**Clinical Health Psychology Seminar**
The Clinical Health Psychology residents will participate in a Clinical Health Psychology Seminar every other week spread out over the training year. This provides them an opportunity to discuss and examine what is being practiced daily in real time. The overarching goal is to provide a didactic expansion of their foundational knowledge in clinical health psychology, and to foster understanding of how the skills learned here can be implemented in a variety of health care settings. The seminar is adapted from Division 38’s Integrated Primary Care curriculum and tailored to parallel their experience throughout their training year, going from general (Foundational Modules) to more precise skills training (Topic Modules).
The residency program in Clinical Neuropsychology offers a two-year position designed to prepare postdoctoral residents for board certification and a career in clinical neuropsychology. The training for the program will take place in the world-renowned Ryder Trauma Center and in the new state-of-the-art Christine E. Lynn Rehabilitation Center, slated to open in early 2020. The Ryder Trauma Center is a level 1 trauma center and a referral center for South Florida, Latin America and the Caribbean. The training experience is based on a scientist-practitioner model that envisions the integration of all aspects of clinical neuropsychology training. The population served ranges in age from older adolescents to end of life from a broad range of cultural backgrounds and socioeconomic levels. Medical diagnoses encompass a broad range of neurological disorders, including traumatic brain injury, cerebrovascular accidents, polytrauma, neuro-oncology, encephalopathy, and other neurological conditions.

The clinical neuropsychology service is part of an interdisciplinary team of professionals, including Neurologists, Physiatrists, Neurosurgeons, Psychiatrists, physician extenders, Case Managers, Social Workers, and Physical, Occupational, and Speech Language Pathology therapists. The Neuropsychology Team consists of a postdoctoral resident, a neuropsychology intern, several practicum students, and four attending neuropsychologists. Postdoctoral residents will have the opportunity to be supervised by all for attending neuropsychologists, who are experienced in neuropsychology as well as rehabilitation psychology. Two of the attending neuropsychologists are bilingual English/Spanish. Interested bilingual applicants are provided the opportunity to train and have supervision in both languages.

The Postdoctoral Residency Training in Clinical Neuropsychology aims to advance the academic, clinical, and research-training experience of the postdoctoral resident to meet the proficiencies required for Board Certification in Neuropsychology. Trainees also will be expected to meet the psychology standards of identifying and providing quality psychological services including specific behavioral, psychological, cognitive, and educational interventions for patients, families/significant others to maximize cognitive, behavioral and psychological functions, improve adaptation, increase independence, and enhance community reintegration and quality of life.

The postdoctoral residency program is designed to provide training across multiple services and models of neuropsychology. The primary settings include the inpatient neurorehabilitation program, as well as acute neurosurgery, neurology and trauma services. Postdoctoral residents also conduct full neuropsychological batteries and carry long-term therapy cases in the outpatient neurorehabilitation program. Within each service, the postdoctoral resident functions integrally with the Interdisciplinary Team.
On the acute care units, the postdoctoral resident functions within a consultation model. This work involves administration of brief screening measures, coma stimulation, patient/family education and support, crisis intervention, and facilitation of family education and support groups. Relevant feedback is provided to team members in a consultative manner.

Within the inpatient Neurorehabilitation setting, the postdoctoral resident functions as an embedded member of the team. Responsibilities are similar to those on the acute service, with the addition of attending and participating in treatment team meetings to provide neuropsychological input regarding treatment needs, community reintegration, vocational and academic potential, discharge planning and outpatient services. In addition to the general program didactics, the postdoctoral resident in the Clinical Neuropsychology Postdoctoral Residency Program attends Neuropsychology Case Conference, Neuropsychology/Rehabilitation Psychology Journal Club, Neuropsychology Board Certification Study Group, brain cuttings, and selected Neurology and Rehabilitation Medicine Grand Rounds. The postdoctoral resident also will participate in ongoing on-site research, including completing an independent clinical research project for presentation or publication.

Competitive applicants are expected to have an extensive background in neuropsychological testing, neuroanatomy/neuropathology, and strong general clinical psychotherapy training. Experience with cognitive retraining, individual/family/couple and group psychotherapy is preferred. Applicants must also have some background in research methods and statistics, as well as some research experience. The program reserves the right to withhold an offer for the second year if the trainee does not demonstrate satisfactory performance or reasonable progress prior to second performance evaluation.  

*Position open for the 2020-2022 training years.*

**REHABILITATION PSYCHOLOGY- ADULT – One Resident – Two Year Residency**

The Residency Program in Rehabilitation Psychology offers a two-year postdoctoral position designed to prepare a trainee to function independently as a future rehabilitation psychologist on multiple interdisciplinary treatment teams in a large medical setting. The program reserves the right to withhold an offer for the second year if the trainee does not demonstrate satisfactory performance or reasonable progress prior to second performance evaluation.

The training for this position takes place primarily in the Jackson Rehabilitation Hospital under the primary supervision of Dr. Mario Olavarria and Dr. Sheba Kumbhani attending neuropsychologist as a secondary supervisor. The training is nestled within a department that has a history of enjoying a prominent position nationally in the field of Rehabilitation Psychology, with three past postdoctoral residents of Division 22 of APA (Rehabilitation Psychology) and a past postdoctoral resident of the ABPP Board in Rehabilitation Psychology. The program aims at facilitating the aforementioned professional development by guided individual supervision and mentorship. Supervision focuses on developing the trainee’s skill set in the different proficiencies
of Rehabilitation Psychology within the stimulating and clinically challenging Jackson Health System and interfacing with the University of Miami, a large cutting-edge academic institution.

This program emphasizes cross cultural training and incorporation of cultural issues into psychological/neuropsychological assessment and treatment. The Rehabilitation Hospital serves a large international program drawing many patients from around the world, especially Central America, South America and the Caribbean.

The Postdoctoral Residency program is designed to provide training and clinical exposure to develop proficiencies within Rehabilitation Psychology Specialty Practice Area. As such, the training will focus on developing assessment and intervention skills 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 which include an emphasis on spinal cord injury (Major), neurological disorders (Major), multiple orthopedic trauma (Major), acquired brain injury (Major-Minor), amputation (Minor), pain (Minor), oncology (Minor), frequently accompanied with a wide variety of co-occurring psychiatric diagnoses. The postdoctoral resident will develop and sharpen his/her consultation skill set by way of interfacing with a number of treatment teams within the Departments of Physical Medicine & Rehabilitation, Neurology, Neurosurgery, Orthopedics, Trauma and Psychiatry. Interdisciplinary work with these teams is a central focus of this program. Subsequently, the postdoctoral resident will consult with the team in our world-renowned Level One Ryder Trauma Center Intensive Care Unit or our Neurosurgical Intensive Care Unit staffed by recognized University of Miami Neurosurgeons who also serve as faculty at the Miami Project to Cure Paralysis.

The postdoctoral resident will provide services that may include psychotherapeutic interventions, cognitive retraining and/or pain management as the patient progresses through the acute levels of care in preparation for rehabilitation. Additionally, the postdoctoral resident has the opportunity of assisting the Rehabilitation Center’s treatment team prepare and tailor their approach with this patient. The postdoctoral resident will also have the opportunity to continue services within an outpatient context and through our unique Spinal Cord Injury Peer Support Group.

The postdoctoral resident will enjoy the freedom of partaking in existing research projects either within Psychology or Psychiatry, Rehabilitation, Neurosurgery and/or the Miami Project to Cure Paralysis. In the recent past, graduates of our rehabilitation psychology internship have participated in the Miami Project to Cure Paralysis’ first FDA approved human clinical trial of human Schwann cells transplant for the acutely spinal cord injured. Involvement in this project has allowed the opportunity for crucial assessment of patients and the provision of informed consent in such experiments, resulting in an enlivening research environment for rehabilitation psychology.
Postdoctoral resident may also provide supervision to pre-doctoral interns and externs in rehabilitation psychology. The postdoctoral resident will be able to work alongside the attending rehabilitation psychologist on matters related to management and administration as this clinician is also the facilitator of the spinal cord injury team meetings. The postdoctoral resident will have the option of participating in focus groups as the Rehabilitation Department is entering a new and exciting time with the recent approval for a projected three-year plan to construct a state of the art rehabilitation center in collaboration with the University of Miami and the Miami Project.  

*One position available for the 2020-2022 training years.*

**CLINICAL CHILD PSYCHOLOGY**

**Dialectical Behavior Therapy for Adolescents (DBT-A) – Two Residents – One or Two Years Residency**

The Dialectical Behavior Therapy for Adolescents (DBT-A) residency offers a one or two-year position designed that aims to develop the professional identity and skill-set of a developing clinical child psychologist who provides professional services relating to the diagnosis, assessment, evaluation, treatment and prevention of psychological, emotional, and behavioral disorders in children and adolescents. The training takes place in the Jackson Behavioral Health Hospital (JBHH) in the Child and Adolescent Center and Dialectical Behavior Therapy for Adolescents (DBT-A) program under the supervision of Dr. Claudia Ranaldo, Dr. Carolina Avila and Dr. Jonathan Cohen.

The first year postdoctoral resident will receive approximately 60% time training and supervision in general clinical child and adolescent psychology, and 40% training and supervision in Dialectical Behavior Therapy for Adolescents (DBT-A). The resident will be seeing general outpatient cases within the Child and Adolescent Center (CAC) with a focus on providing evidence-based individual and family therapy. The Child and Adolescent Center offers a multidisciplinary approach for evaluation and treatment of children and adolescents with a wide range of childhood disorders. Modalities include play therapy, cognitive-behavioral therapy, behavioral therapy, dialectical behavior therapy, interpersonal therapies and parent management training.

Lastly, residents will participate in a variety of inpatient and outpatient testing to meet the aim of becoming a competent and well-rounded clinical child psychologist. A minimum of 3 psychological evaluations will be completed each year within the outpatient Child and Adolescent Center, and residents will also complete diagnostic consults approximately once per month on the Child and Adolescent Acute Inpatient Psychiatry Unit (CAAP) located in the JBHH. CAAP provides residents with an opportunity to work with severely mentally ill children and adolescents in an inpatient psychiatric setting. The patient population is diverse, 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 residents work as a consultant for the CAAP.
multidisciplinary team, which includes psychiatrists, child psychiatry fellows, social workers, activity therapists, nurses and mental health technicians. The residents will participate in team meetings and ongoing collaboration with cases following a focused testing battery to include diagnosis, discharge recommendations, and follow-up treatment recommendations. The residents will gain valuable experience in working with diverse children and families, managing highly complex cases and varied responsibilities efficiently, and gain experience working with a multicultural population. Training and supervision in DBT-A will include completion of foundational training and providing all aspects of standard comprehensive DBT treatment including individual and family therapy, facilitation of multi-family skills training groups and adolescent skills training groups, and phone coaching, as part of an intensively trained DBT consultation team. Postdoctoral residents can also participate in research focused on evaluating the efficacy of DBT for adolescents and families as well as treatment outcomes. Opportunities for designing original research are also available. Research time is approximately 10-15%.

Candidates interested in the second year, will receive 100% time further specialized training in DBT as well as have the opportunity to supervise interns and provide consultation. In the second year, the position is designed to provide an immersive experience in comprehensive, high-fidelity DBT treatment to adolescents and young adults ages 11-24 who present with chronic suicidality, non-suicidal self-injury, chronic emotional dysregulation and/or other high-risk impulsive behaviors. The training takes place in the Jackson Behavioral Health Hospital in the Child and Adolescent Center’s Dialectical Behavior Therapy program for Adolescents (DBT-A). Decisions will be made collaboratively with the trainee if there is interest in completing a second year, and will be decided by January 1.

In addition to the general program didactics and clinical activities, the postdoctoral residents in this position are required to attend the Psychiatry Division Rounds, and DBT Didactic. The postdoctoral residents can also participate in seminars and special conferences that are offered in the medical center at the discretion of their supervisor.

The successful candidate must work well with multidisciplinary teams, have experience in working with children and families, be able to manage complex cases and varied responsibilities efficiently, and be comfortable working with a multicultural population. Candidates with DBT and CBT training and/or prior experience are preferred. This training program provides the clinical postdoctoral training hours and the supervision required for licensing eligibility. One position available for the 2020-2021 residency year.

**Pediatric Behavioral Medicine – One Resident – One Year Residency**

The Pediatric Behavioral Medicine residency offers a 1-year postdoctoral training that combines inpatient consultation-liaison services to Holtz Children’s Hospital, outpatient treatment through the Center for Behavioral Medicine (CBM), and applied clinical research under the leadership of
Dr. Melisa Oliva and attending psychologist Dr. Jonathan L. Cohen. Residents will also have the opportunity to complete psychological testing batteries through the Child and Adolescent Center (CAC) and pediatric CBM outpatient clinics.

Holtz Children’s Hospital is one of the largest children’s hospitals in the southeastern United States. Located at the University of Miami/Jackson Memorial Medical Center, it is known worldwide for the outstanding team of pediatric specialists experienced in treating children with all types of needs; from routine care to life-saving procedures. The Center for Behavioral Medicine and the Child and Adolescent Center are housed in the Jackson Behavioral Health Hospital, which specializes in behavioral health services to children, adolescents, and young adults, emphasizing advanced evidence based interventions with exposure to diverse cultural and ethnic populations.

Training in this Specialty Practice Area emphasizes the relationship among behavioral, emotional, cognitive, social, cultural and biological aspects of health and disease in order to promote well-being, prevent illness and aid in the rehabilitation process. The candidate selected for the Pediatric Behavioral Medicine residency will gain specialized clinical experience in pediatric psychology, including adjustment to new or chronic medical illness, preparation for medical procedures/surgery, end stage organ disease, conducting solid organ pre-transplant evaluations, burns, trauma, end of life issues, eating disorders, psychosomatic concerns, pain management, anxiety, depression, poor adherence to medical and psychiatric treatment, safety assessments, and multidisciplinary collaboration with medical teams.

Approximately 10% of the postdoctoral resident’s time will be dedicated to applied research and academic pursuits related to the effectiveness of clinical treatment interventions and pediatric mental health issues within the medical setting. Opportunities for scholarly oral and/or poster presentations and involvement in scholarly publications will be available during the year. Evidence of a research product will be expected at the end of the residency.

This Specialty Practice Area consists of 4 emphasis areas, which run simultaneously:

1. **Pediatric psychology consultation-liaison to inpatient medical units**
   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, nephrology, and general pediatrics teams. Residents 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 and adolescent psychiatry 2nd year fellows, and ethicists. We attend particular team’s rounds as needed or requested to provide feedback on patient care and coordination (e.g., trauma and solid organ transplant rounds, nephrology rounds and selection committee, GI transplant selection committee, pediatric bioethics committee, etc.) 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.

2. **Outpatient therapy through the pediatric CBM clinic**
In addition to inpatient consultation-liaison, residents will be expected to carry approximately 4-6 outpatient cases in the pediatric CBM with a pediatric behavioral medicine focus. Residents may also have the opportunity to carry cases initially consulted on in the hospital through to the outpatient therapy setting. Furthermore, residents may have the opportunity to conduct outpatient pre-transplant evaluations in the pediatric CBM.

3. **Outpatient psychological testing**
A minimum of three full psychological testing batteries are expected by the end of the residency year, including utilizing cognitive, achievement, objective, projective and self-report and parent measures. Typical testing referrals come from the CAC and pediatric CBM clinics or post discharge from our inpatient child and adolescent psychiatric unit. Referral questions include diagnostic clarification, cognitive assessment/neurological functioning that may impede treatment adherence, determining treatment modality to best fit with patient’s needs, and assessing emotional functioning. Testing occurs infrequently with young children (younger than age 6), with typical ages ranging from school-age children to adolescents.

4. **Pediatric Behavioral Medicine didactics**
In addition to providing services at Holtz and pediatric CBM, the pediatric behavioral medicine resident will also be involved in the following pediatric focused didactics:

1. **Pediatric Psychology/Psychiatry Consultation-Liaison Seminar & Rounds**
   Facilitators: Melisa Oliva, Psy.D. & Nicole Mavrides, M.D.

   The pediatric behavioral medicine resident participates in a 60 minute Pediatric
Psychology/Psychiatry Consultation-Liaison Seminar every other week totaling 21 sessions spread out over 10 months of the training year. This seminar is also attended by the pediatric behavioral medicine psychology intern and five child and adolescent pediatric psychiatry 2nd year fellows as well as rotating medical students. This seminar provides an opportunity to discuss timely journal articles and evidence-based practices regarding all topics related to being part of a pediatric consultation-liaison service. Topics range from foundational topics (e.g., the role of the C/L team, working within a multidisciplinary team) to skills-based learning with particular populations that the service is routinely consulted on (e.g., working with burn patients, somatoform disorders, transplant patients, pain management, etc.). In addition to these topics, the resident will have the opportunity to present on a topic and a case that they have been involved in consultation and treatment in the hospital setting. This provides the resident the opportunity to present and teach interdisciplinary team members. Cases jointly followed on the consult service with psychiatry and psychology are also discussed to form a plan for best practice and care of the patient.

2. Clinical Health Psychology Seminar

The pediatric behavioral medicine resident also participates in a 90-minute Clinical Health Psychology Seminar every other week totaling 20 sessions spread out over 10 months of the training year. This seminar is also attended by the adult consult-liaison residents and pediatric consultation-liaison intern. This seminar provides the resident with an opportunity to discuss and examine what is being practiced daily in real time. The overarching goal is to provide a didactic expansion of foundational knowledge in clinical health psychology, and to foster understanding of how the skills learned here can be implemented in a variety of health care settings. The seminar is adapted from Division 38’s Integrated Primary Care curriculum and tailored to parallel the residents’ experiences throughout their training year, going from general (Foundational Modules) to more precise skills training (Topic Modules). The seminar is a mirror to direct service delivery. Much of this information is reiterated in everyday rounding and walking supervision as well as individual face-to-face supervision. The goal is to instill both knowledge and advanced specialty competencies that can be applied in various settings, from outpatient clinics, to primary care, or hospital-based care. The seminar is taught by the adult health and pediatric psychologists on staff as well as guest speakers from other parts of the hospital, including psychiatry, medicine, pain specialists, and affiliated health psychologists from the University of Miami. This curriculum and direct service delivery provides a rich context for understanding the science of health psychology; the other two pillars of psychology’s foundation are provided in the Ethics Seminar and the Diversity Seminar. The clinical
Health Psychology Seminar incorporates ethics and diversity on a daily basis. In fact, over the course of an average week, the trainees encounter and address patients embodying all of the topics that are expanded upon over the course of the year.

1. **Pediatric Palliative Care (PediPals) Multidisciplinary Meeting**  
   **Facilitators:** Kimberly Juanico, RN, BSN, CHPPN, Pediatric Palliative Care Nurse Coordinator  
   The pediatric behavioral medicine resident takes part in the Pediatric Palliative Care rounds once a week with multidisciplinary team members through Holtz Children’s Hospital, including the Pediatric ICU Director, Palliative Care Team Coordinator, medical students/residents/fellows rotating through the Palliative Care Service, Child Life, Pastoral Care, and Hem-Onc psychologist and trainees, along with a hospital volunteer who is part of the parent advisory board. Current hospitalized patients with chronic or life-limiting illnesses are discussed as well as problem-solving/formulating interdisciplinary plans to improve care and quality of life.

2. **Child Division Rounds – (Optional)**  
   **Facilitators: Psychiatry and Psychology Attendings**  
   Child Division Rounds consist of case presentation, journal club, and ethics cases. The resident will have the opportunity to work with the child and adolescent psychiatry fellows and administer and present psychological testing results during the fellow’s case presentation. The resident will also present one of their own cases with an emphasis on psychological test interpretation. This seminar is optional for the pediatric behavioral medicine resident.

3. **Pediatric Grand Rounds – (Optional)**  
   **Facilitators: Pediatric Chief Medical Officer & Pediatric Chief Medical Resident**  
   Optional weekly formal academic presentations about various topics in pediatrics presented by local and nationally known speakers. Attended by pediatric attendings and trainees (medical students, interns, residents and fellows). Meets for 60 minutes every week.

The postdoctoral resident can also participate in seminars and special conferences that are offered in the medical center at the discretion of the postdoctoral resident's supervisor. The postdoctoral resident will work within a multidisciplinary team, including close collaboration between psychology and psychiatry staff and trainees. The postdoctoral resident will be provided the opportunity to teach multidisciplinary trainees in psychiatry, psychology and other disciplines as well as supervise pre-doctoral psychology interns. The postdoctoral resident will receive two hours of individual supervision and mentorship will be provided in teaching, supervision, research, and overall career and professional development.  
*One position available for the 2020-2021 residency year.*
PROGRAM FACULTY

**GISELA AGUILA-PUENTES, PSY.D.**
Nova Southeastern University (Clinical), 1992
Clinical Internship: University of Miami School of Medicine/ Jackson Memorial Hospital
Postdoctoral Fellowship: University of Miami School of Medicine/ Jackson Memorial Hospital

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: Jackson Memorial Hospital in Affiliation with Leonard M. Miller School of Medicine University of Miami

Dr. Avila is a clinical psychologist in the Dialectical Behavior Therapy Program (DBT-A, DBT-YA) and the Child and Adolescent Center (CAC). She is also the Director for Practicum Training, working as a liaison between the Department of Psychology, practicum students and local universities. 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.**
Albizu University (formerly Caribbean Center for Advance Studies Miami Institute of Psychology) (Clinical), 1996
Clinical Internship: Metro-Dade Youth and Family Service
Postdoctoral Training: Apogee (formerly Affiliates for Evaluation and Therapy)

Dr. Benitez is the Assoc. Chief of Psychology, the Director of Psychology Residency Training and the Clinical Director of the Child and Adolescent Center (CAC). She is responsible for supervising interns and postdoctoral residents providing outpatient individual and family psychotherapy, parenting group therapy and psychological testing in CAC. Dr. Benitez is also an attending
psychologist for the Pediatric Behavioral Health team which provides consultation liaison service at Jackson Memorial Hospital’s pediatric units. Her clinical interests are in areas of trauma, ADHD, anxiety, cultural and acculturation process, 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.

**JUDD SCOTT CHRISTIAN, PSY.D.**

*Nova Southeastern University (Clinical), 2003*

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

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

Dr. Christian serves as an Attending Psychologist and Director of the Adult Behavioral Medicine/Consultation-Liaison Psychology Service. In addition, he is also the Director of Adult Clinical Health Psychology Residency Training. After specializing in Behavioral Medicine (Psychosocial Oncology and Women’s Behavioral Medicine) and serving as the Chief Intern and Chief Postdoctoral resident in Psychology at Jackson Memorial Hospital, Dr. Christian worked in private practice for approximately 11 years. Within this practice, his specializations included general psychotherapy, specialized health psychology services, and treatment/psychotherapy resistant clients. Dr. Christian augmented his 11 years in private practice through appointments as an Adjunct Faculty/Professor and Supervisor at local universities (Nova Southeastern University - Doctoral Program; Albizu University - Doctoral Program). Dr. Christian returned to the Jackson Health System in 2015. His clinical interests are in applied psychotherapy (individual, couple/marital), supervision, consultation-liaison psychology, assessment, medical and health psychology, grief/bereavement, women’s health issues, psycho-oncology, and the application of positive psychology strategies within various psychotherapeutic, clinical, and supervision/training situations. At present, Dr. Christian teaches several other didactics and seminars at Jackson, and has taught, trained, and supervised several different psychotherapeutic modalities.

**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 Med. School*

Dr. Cohen is a part-time clinical psychologist in the Department of Psychology. His primary duties are with the Child and Adolescent Center (CAC), Center for Behavioral Medicine (CBM) and the Miami-Dade County Court Marchman Act Program. He is responsible for supervising psychology interns and residents providing outpatient individual and family psychotherapy in the CAC and CBM. Dr. Cohen also facilitates the Supervision of Supervision seminar for psychology residents and co-facilitates Clinical Case Conference for psychology interns. 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.

**Catherine De la Osa, Psy.D.**

Carlos Albizu University (Clinical), 2016  
Clinical Internship: Mental Health Center of Florida  
Postdoctoral Fellowship: Jackson Health System/University of Miami

Dr. de la Osa is an Attending Psychologist within the inpatient Adult Behavioral Medicine/Consultation-Liaison Service and the Adult Outpatient Center for Behavioral Medicine (AOCBM). She provides psychotherapy with various medical populations, and has experience in clinical psychotherapy, health-related psychotherapy, consultation, and assessment. Throughout her training and professional practice, she has focused on the area of general psychotherapy. Other areas of clinical interest include the application of positive psychology within medical settings, as well as, leadership and team roles. Dr. de la Osa has experience with executive and leadership coaching which has enabled her to aid others with professional developmental with a focus on leadership skills and the creation and achievement of their goals. Dr. de la Osa is also responsible for supervising residents and practicum students.

**Lisa Gonzalez-Alpizar, Psy.D.**

Nova Southeastern University (Clinical), 2005  
Clinical Internship: Jackson Memorial Hospital/University of Miami  
Postdoctoral Fellowship: Jackson Memorial Hospital/University of Miami

Dr. Gonzalez-Alpizar is an Attending Psychologist within the inpatient Behavioral Medicine/Consultation-Liaison Service and the outpatient Center for Behavioral Medicine (CBM). She provides psychotherapy with various medical populations, and has extensive experience in applied clinical psychotherapy, health-related psychotherapy, consultation, and assessment. Throughout her training and her professional practice, she has spent the majority of her career in the areas of psycho-oncology and palliative care. Other areas of clinical interest include oncology survivorship, women’s health issues and program/professional development. Dr. Gonzalez-Alpizar has taught, trained, and supervised in many psychotherapeutic modalities. As such, she is responsible for supervising postdoctoral residents, interns, and practicum students.

**Susan Ireland, Ph.D.**

University of Miami (Clinical, Health), 1995  
Clinical Internship: Miami VA Medical Center (Neuropsychology)  
Postdoctoral Fellowship: Jackson Memorial Hospital/University of Miami (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 R. 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.

KEITH LIT, PH.D.
Nova Southeastern University (Clinical), 2017
Clinical Internship: South Florida Consortium Internship Program – Broward Health Medical Center
Postdoctoral Fellowship: Jackson Health System/University of Miami School of Medicine

Dr. Lit is an Attending Psychologist in the Adult Outpatient Center for Behavioral Medicine (AOCBM). His primary clinical and research interests include clinical health psychology, psychological assessment, the integration of mindfulness and acceptance with other psychotherapy approaches, and contemporary applications of behavior analysis across a range of clinical disorders. Dr. Lit is responsible for conducting and supervising outpatient psychotherapy and psychological testing, as well as adult consultation/liaison services for inpatient medical and psychiatric populations. As a member of the Clinical Health Psychology team, he teaches in seminars and lectures on relevant topics. Dr. Lit provides direct psychological services to patients both individually and in group therapy.

CLARA LORA OSPINA, PSY.D.
Nova Southeastern University (Clinical), 2004
Clinical Internship: Harvard Medical School/ Boston Veterans Affairs Medical Center
Postdoctoral Fellowship: Providence Veterans Affairs Medical Center

Dr. Lora Ospina is the Clinical Director of the Adult Outpatient Center for Behavioral Medicine (AOCBM). Dr. Lora Ospina’s areas of interest include issues pertaining to difficulty with
infertility, Post-Traumatic Stress Disorder (PTSD) and other anxiety-related disorders, depression, marital discord, bereavement and adjustment due to loss, chronic pain management, end of life issues, and situational stressors. Dr. Lora Ospina was a clinical supervisor at Boston University’s Center for Anxiety and Related Disorders (CARD) and Psychological Services Center (PSC), and an Adjunct Professor at Emmanuel College. Dr. Lora Ospina worked in the private sector in Boston and was a Clinical Director at Commonwealth Psychology Associates before returning to Miami in 2014 to set up her own practice in Coral Gables. Dr. Lora Ospina is fully bilingual (English/Spanish) and has interests in facilitating groups in relaxation skills, anger management, pain management and healthy thinking. Dr. Lora Ospina conducts counseling and psychotherapy using various therapeutic approaches including psychodynamic, cognitive-behavioral, existential, and family systems.

**DIANELYS S. NETTO, PH.D.**

*Nova Southeastern University (Clinical), 1997*

*Clinical Internship: Jackson Memorial Hospital/University of Miami*

*Postdoctoral Residency: Jackson Memorial Hospital/University of Miami*

After completing her post-doctoral training in 1999, Dr. Netto was hired as full time faculty and directed the outpatient Neuropsychology program, including providing supervision of practicum students and interns. Dr. Netto was responsible for formalizing and growing the outpatient program up until 2005. After going on maternity leave, Dr. Netto focused on private practice work. She returned to the Jackson Health System in 2015 and is now a part-time attending neuropsychologist on the Neuropsychology Service, focusing on acute inpatient consults, inpatient rehabilitation and outpatient follow up assessments and intervention. Dr. Netto co-facilitates the Ethics Seminar for both interns and residents and contributes to the Neuropsychology seminar and training of practicum students. Clinical and research interests include Spanish-speaking patients and caregivers, adult neurological disorders, minority assessment and intervention, and cognitive rehabilitation.

**MARIO OLAVARRIA, PSY.D.**

*California School of Professional Psychology (Fresno), 1998*

*Clinical Internship: Jackson Memorial Hospital/University of Miami*

*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: Jackson Memorial Hospital/University of Miami*  
*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: Jackson Memorial Hospital in Affiliation with Leonard M. Miller School of Medicine University of Miami*

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: The University at Stony Brook New York*

*Postdoctoral Fellowship: Kaiser Permanente Oakland Medical Center– Dept. of Psychiatry*

Dr. Robertson is the Chief of Psychology. 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 psychiatry residents in the UM Miller School of Medicine psychiatry residency program. 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 clinical health psychology, 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 has trained with Dr. Steven Hayes in ACT and is enthusiastic about ACT use in brief behavioral medicine contexts. He serves as an Attending Psychologist at the Center for Behavioral Medicine and supervises the resident and interns working at the CBM. He also provides psychotherapy to CBM patients.

**UNIVERSITY OF MIAMI FACULTY**

**MARISA ECHENIQUE, PSY.D.**

*Albizu University, (Forensic), 2010*

*Clinical Internship: Jackson Memorial Hospital in Affiliation with Leonard M. Miller School of Medicine University of Miami Medicine*

*Post-Doctoral Fellowship: University of Miami School of Medicine/Jackson Memorial Medical Center (Behavioral Medicine)*

Dr. Echenique is an Assistant Professor of Clinical Psychiatry in the Department of Psychiatry and Behavioral Sciences, University of Miami Miller School of Medicine. She is also a Psychology Attending at The Behavior Health Clinic, Miami Transplant Institute, and Special Immunology OB/GYN Clinic. She also serves as the student behavioral health coordinator for UM Leonard Miller School of Medicine. She provides clinical onsite supervision of postdoctoral residents and practicum students on the HIC Service. Dr. Echenique’s clinical interests include mood disorders, PTSD and adjustment to medical illness. Dr. Echenique is also involved in research activities, with primary interests including HIV secondary prevention, HAND, and suicide prevention.
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-accredited clinical or counseling psychology program, and internship training from an APA accredited or APPIC membership site are welcome to apply.

Applicants are required to submit their application on APPA CAS (APPIC Psychology Postdoctoral Application) and include the following documents:

- Letter of intention specifying the specialty of interest
- Curriculum Vitae
- Official School Transcript
- Three (3) Letters of Recommendation
- Two de-identified recent work samples (e.g. psychological evaluations, formal intake evaluations, or case presentation)
- List of test administered and amount of integrated testing reports written

**IMPORTANT DATES**

**Application Deadline:** December 16, 2019

**Notification of Acceptance for Interview:** January 10, 2020

**Interviews:** January 29, 2020 to February 19, 2020

**Notification Date:** February 24, 2020

Applicants who are selected will be required post-selection to:

1. Pass an on-site physical, drug screen and criminal background check within the 30 days prior to Residency start date.
2. Have an active Basic Life Support (BLS) card from the American Heart Association before starting their residency year.

3. Must be available to start residency on September 1, 2020.

4. Attendance is mandatory on all orientation days, the last week of June, and on the first and last month of residency. For any extenuating or exceptional circumstances, the primary supervisor must present to the Training Committee for approval.