Organization of the Doctoral Internship Curriculum

The doctoral internship program is designed to be completed within a full-time, 50 week year. Approximately half of the intern's time is spent in direct service provision, 15% in related support or indirect services, and the remaining 35% is committed to didactic learning including seminar attendance and individual and group supervision.

Interns participate in constructing their individualized programs within a broad general framework that provides experience with diverse diagnostic groupings, a full range of treatment interventions and modalities, and a comprehensive understanding of working with children and families within the broader context of their community. Interns gain significant exposure to evidence-based and empirically supported intervention strategies. Throughout the year, the interns' programs are monitored and modified to meet the individual needs of each intern, provide a broad range of clinical experiences, and allow for remediation of any areas of weakness.

In all programs, there are opportunities for experience and didactic training relevant to cultural variables in mental health service delivery as well as family / community organization situations. The community we serve is characterized by rich cultural and socioeconomic heterogeneity, and includes areas of economic deprivation and barrios with multiple problems including high incidence of crime and youth gang activity, physical and emotional abuse and neglect of children, domestic violence, high unemployment, problems relating to undocumented legal status, and so on. The most numerous of the groups currently served by the Center are of Hispanic or Latinx heritage.

Because of our large and continually increasing population of Latinx families, the internship program is uniquely suited to providing a variety of opportunities for training interns who are fluently bilingual in English and Spanish, including opportunities to provide individual, family and group psychotherapy with bilingual or Spanish-only clients, psychological testing with use of instruments appropriate for bilingual children and adolescents, supervision in Spanish, and so on. The Center has a strong commitment to training both staff and trainees for work with Spanish-speaking families. Issues related to culture are suffused throughout our work, but there is also focused training on increasing the bilingual therapist's skill in service delivery to clients and parents who speak primarily or only Spanish. Particular attention is paid to the problems that can emerge for families when there is an intergenerational difference in the acculturation process.

As part of the application process, interns select a Major Assignment area in which they will spend the majority of their direct service and supervision time (75 to 80%) for the course of the training year. During Orientation in the fall of the internship year, interns also select a Minor Assignment area; these minor assignments are designed to meet the needs of the intern as well as the needs that exist within the agency at the beginning of the training year. The minor assignments are designed to round out the interns' training by providing additional experiences not covered in the Major Assignment activities.

Technical support includes a computer at each intern work station. These computers have been programmed with software which assists in significantly decreasing the amount of time spent in documentation of services (this involves the utilization of charting assistant software designed specifically for use within our agency). In addition, interns have access to scoring software for a variety of psychological testing instruments commonly used with children and adolescents. Interns also have access to the internet at all sites. In addition to regular ongoing contact with general support staff responsible for billing, medical records, reception, and so on, interns also have access to the Training Department Administrative Assistant for a variety of functions, including checking out testing materials, copying and storing of testing reports and protocols, ongoing support regarding phones, computers, therapeutic supplies, and so on..

The following sections provide descriptions of the departments in which Major Assignment areas are available, and elaborates on the role of the intern within each of these departments.

Van Nuys Site (Outpatient and Outreach Services department)

As part of the Outpatient and Outreach Services Department, Van Nuys programs provide a broad array of prevention, early intervention, and treatment programs for youth with emotional and/or behavioral difficulties. We offer treatment for children and adolescents age 0 to 19 years. These children and adolescents present with a variety of diagnostic issues as well as complex environmental and family stressors. Treatment is provided in the home, school, and community. The strength-based, family centered approach provides a continuum of services which are available at community sites as well as at our Van Nuys offices.

> Role of the Intern: In this program, interns have opportunities to provide brief and extended individual and family treatment for children and adolescents Given the breadth of ages and presentation, interns may have opportunities to work with children with typical symptoms of anxiety, depression and disruptive behaviors from the 0-5 program to Transitional Age Youth, as well as cases including unaccompanied immigrant minors, co-occurring substance abuse and other mental health disorders, trauma, autism spectrum disorders, and so on. In these contexts, interns are exposed to and learn about evidence based practices, multisystemic and contextual treatment approaches and community- and home-based services, as well as more traditional models.
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> **Due to cultural and linguistic factors, interns interested in working in the Van Nuys program must be fluently bilingual in English and Spanish.**

Balboa Site (Early Childhood and Trauma Services)

The Balboa site offers psychotherapeutic services for families with children and adolescents, from birth through age 18. Along with helping families cope with unique stresses and pressures associated with rearing young children, the clinical staff at this site provide extensive services to families in which physical and/or sexual abuse has occurred or where the child has been traumatized by domestic or community violence. Dedicated to breaking the cycles of child abuse and family violence, the overall goal of these programs is to bring hope and healing through support, understanding and education.

> Role of the Intern: At the Balboa site, interns provide extended individual and family treatment for a broad range of children and adolescents, including those who are at high risk or who have already been traumatized by physical or sexual abuse, neglect, domestic violence or other trauma. Interns have opportunities to provide community- and/or home-based services as well as more traditional outpatient services, and may have opportunities to work in children's groups or parent/caregiver groups.
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> **This year, we will have 3 openings in this Major Assignment. Due to the cultural and linguistic needs of the population served at the Balboa site, applicants who are fluently bilingual in English and Spanish will be considered 2 of the 3 openings. For the 3rd opening, proficiency in Spanish is preferred but not required.**

Northridge-Zelzah Site (Outpatient and Outreach Services)

The Outpatient and Outreach Services Department at the Northridge-Zelzah site provides psychotherapeutic services to children, adolescents, and transitional age youth. We offer

prevention, early intervention, and treatment programs for clients, age birth to 25 years, within individual and group settings. Our clients present with a variety of diagnostic issues, family dynamics, and environmental stressors. The strength-based and evidence-based practices used by our clinicians focus on removing barriers such as substance use, trauma symptoms, and family conflict, to empower clients to cope with such difficulties, demonstrate effective parenting, and to increase comfort with interpersonal interactions. In addition to treatment being provided at our office site, t4reatment is also provided in the home, school, and community as need, ir order to give those in our community access to our quality services.

Role of the intern: In this program, the intern will have opportunities to provide brief and extended individual, group, and family treatment for children and adolescents. Since there is a broad range of ages and presentations, the intern may have opportunities to work with children with typical symptoms of anxiety, depression, trauma, and disruptive behaviors within our 0-5 program and transitional age youth program, although the majority of cases will be between 6 and 18 years of age. Some cases may include co-occurring substance use, unaccompanied immigrant minors, autism spectrum disorder, and other mental heal disorders. The intern will be exposed to and learn about evidence-based practices, work with multidiscipline treatment teams, work in home-based services, as well as more traditional models.

Due to cultural and linguistic factors in our client population, the intern interested in working in the Northridge-Zelzah program must be fluently bilingual in English and Spanish.

Minor Assignments

The goal of the Minor Assignment is to provide interns with experiences that are different from their Major Assignment activities in order to round out their internship experience. While the Major Assignment is agreed upon during the application process, interns select their Minor Assignments during orientation at the beginning of the internship year. Every year, the minor assignment options change as the changing needs of the various programs create new opportunities for interns. Listed below are the options most likely to be available in the Fall of 2020.

1. In-Home Behavioral Intervention Team (IBIT) – Activities include intervention with 3-5 year olds and their parents/primary caregivers as part of an inter-disciplinary team which also includes behavior specialists who work in the home. Interns participate in multidisciplinary case conference meetings on site at the Community Family Center in the Park Parthenia complex, and receive specialized training in working with very young children and their parents/caregivers.
2. Adult Services Team – Although the majority of services our agency provides are for children and youth and their families, we have been expanding our services to adults in our community, including transitional youth up to age 25 years, and the parents of our child clients. Interns who elect this minor assignment carry two to three young adult (18-25 years old) and/or adult clients (26 years +).
3. Intake Assessment Team – Interns join other Center clinicians in conducting initial assessments of clients to determine which programs and treatment models will best meet the needs of the child and family. Interns have the opportunity to refine diagnostic interviewing skills, develop treatment plans, and learn about the range of services provided by CFGC.
4. Psychodiagnostic Assessment – all Interns will participate in psychodiagnostic assessment through their major assignment as described below. However, an intern wishing to obtain more psychodiagnostic experience may elect additional time focused on assessment. This opportunity may be appropriate whether the intern seeks to fill gaps in their assessment experience or seeks to expand an already strong base in assessment.

The Adult Services Team and Psychodiagnostic Assessment minor assignments require a full year commitment The IBIT and Intake Team minor assignments are designed to accommodate a "mid-year switch." Thus, interns may have the option of carrying one minor assignment for the first 6 months of the training year, and then switching to another for the remaining 6 months.

Psychodiagnostic Assessment

All interns participate in providing psychological testing services for clients of the Center. Interns are typically expected to complete five to six comprehensive diagnostic assessment batteries over the course of the year. The Psychodiagnostic Assessment Seminar supplements weekly individual supervision sessions in providing interns with opportunities to expand their skills in this area. Care is taken in the assignment of testing cases to ensure that each intern's testing experience is characterized by a wide range of ages, diagnostic categories, and referral questions.

All testing currently provided by interns is with cases that are already in treatment at the Center. The typical age range for testing is 5 – 18 years, and most are 8 – 16 years of age. Referrals come from a wide range of programs but many referrals will be from the interns' Major Assignment site. Referrals are generated by therapists who require assistance with differential diagnosis and so the assessments cut across diagnostic categories using multiple assessment techniques to assist with case formulation and recommendations for treatment. Results may also be used to advocate for services outside of CFGC, particularly in the schools.

Evidence Based Practices

In cooperation with the Los Angeles County Department of Mental Health, the Center implements a number of EBPs under the county's Prevention and Early Intervention (PEI) Program. These EBP offerings include Child Parent Psychotherapy, Parent-Child Interaction Therapy (PCIT), Seeking Safety, Positive Parenting Program (Triple P), Aggression Replacement Training, and Managing and Adapting Practice (MAP). Treatment with these EBPs currently comprises about half of the services provided by the Center.

All interns will participate in the Managing and Adapting Practice (MAP) program. For a more complete description, see the section about MAP under Didactic Component below. Training in Seeking Safety is also likely to be available. Interns may also be trained in other EBPs depending on the needs of their Major Assignment program and on the availability of training slots in the departments in which they Major Assignment takes place.

While some of the EBPs are limited to specific sites within the Center, most have been implemented across all sites, including all of the sites in which interns will work. Our contract with the County Department of Mental Health requires that all clinicians implementing these EBPs be trained by developer-approved trainers. Because of this, interns may have limited access to formal training in some of the EBPs during their internship year. The Center currently has certified trainers in some of the EBPs, including MAP, Seeking Safety, and Aggression Replacement Training.

DIDACTIC COMPONENT

This component has two clusters of programming which are operationalized as follows:

1. Major learning is accomplished through individual and small group supervision which is designed for intensive, individualized instruction in the assessment or intervention strategies for given clients and their families.

2. Attendance at the following seminars is designed to enable interns to develop a knowledge base required of those who pursue the profession of child mental health in community-based treatment networks:

a. Clinical Issues Seminar

This seminar, which meets for 1 ½ hours each week throughout the course of the training year, is designed to cover topics related to child psychotherapy, child development, and cultural competence. Using both lecture and group discussion, a variety of areas are addressed. Certain topics are covered each year (e.g., attachment, the developmental impact of child maltreatment, resilience, and cultural competence). However, intern interests drive this course, and each year these interests change, depending on the intern group. Interns are invited and encouraged to discuss their research on issues relative to their individual domains of expertise. They are also encouraged to introduce topics for discussion.

b. Psychodiagnostic Assessment Seminar

The assessment seminar offers interns graduate level instruction and practice in administering a broad range of tests and other procedures for gathering data; organizing the resulting observations and data into relevant, useful inferences or impressions; and writing concise client-focused reports. Prior basic understanding of the principles and theories underlying psychodiagnostic assessment is expected. Emphasis is placed on acquisition of practical skills permitting interns to function as increasingly independent consultants to colleagues and parents. Course content balances the pragmatics of mastering test selection, administration, and interpretation of assessment batteries for a range of childhood problems with exploration of the assumptions and limits (i.e., implicit personality theories, related philosophical beliefs, and empirical constraints) challenging current practice. Seminar topics focus on the construction of dynamic formulations and common differential diagnoses. Given the high proportion of Latinx clients, issues relevant to assessment of Latinx children are addressed throughout the seminar and more explicitly through topics such as assessing monolingual/bilingual children and acculturation. This seminar begins with a 2-3 day workshop in September, followed by a weekly 2-hour meeting.

c. Professional Development Seminar

This seminar, which meets three to four times each month beginning in October, has two basic purposes. One is to provide a forum for addressing issues related to the APA ethics code and the internship program's expectations regarding development of professional identity. The other purpose is addressing issues related to life after internship. Typical topics covered include making decisions about the post-doc year (e.g., choosing between academic or clinical positions, deciding between entry-level jobs or formal post-doc training. etc.). Included in this seminar is a multi-week module on preparation for providing clinical supervision. While the focus of this seminar is on important post-doc decisions, time is also made available for research presentations or discussions of other issues of interest to the interns.

d. Managing and Adapting Practice (MAP) Group Supervision Seminar

Rather than a single-protocol EBP, MAP is a program designed to improve the quality, efficiency, and outcomes of children's mental health services by giving practitioners easy access to the most current scientific information and by

providing user-friendly monitoring tools and clinical protocols. Using an on-line database, the system can suggest formal evidence-based programs or, alternatively, can provide detailed recommendations about discrete components of evidence-based treatments relevant to a specific youth's characteristics. MAP as practiced at the Center focuses on four common symptom areas with children and adolescents: anxiety, depression, disruptive behaviors and trauma. This seminar begins with a 5-day intensive training in the Fall. Interns then participate in weekly group supervision for their MAP cases for one hour for the duration of the internship year. The seminar meets the developer requirements for participant certification as a MAP Therapist.

e. Continuing Education Experiences

There are continuing educational experiences for senior staff which are available to interns as well. Regularly scheduled interdisciplinary inservices provide an opportunity for staff and interns to hear presentations and discuss various topics, including perspectives on treatment, ethical and legal issues, child and adolescent psychopharmacology, and new developments in treatment approaches and mental health service delivery. The Center is an approved provider of continuing education as mandated by law for licensed psychologists, LCSWs and MFTs. In this capacity, the Center also offers periodic seminars and workshops which are available to other mental health professionals in the community.