APA-Accredited Doctoral Psychology Internship

Texas Children's Hospital Psychology Internship

Psychology Section Department of Pediatrics Baylor College of Medicine







Program Director: Liza Bonin, Ph.D. www.bcm.edu/pediatrics/psychology

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Introduction

The Section of Psychology within Pediatrics at Baylor College of Medicine offers an APA-accredited internship to doctoral students in psychology – the Texas Children's Hospital Psychology Internship. Dr. Julie Kaplow is Head of the Psychology Section, Department of Pediatrics, Baylor College of Medicine as well as Chief of the Texas Children's Hospital Psychology Service. The Texas Children's Hospital Psychology Internship Training Program is directed by Dr. Liza Bonin.

The purpose of the Texas Children's Hospital Psychology Internship is to provide training in individualized evidence-based practices of psychology with an emphasis in pediatric / child populations. The program offers doctoral students in clinical, counseling, and school psychology a one-year, full-time psychology internship. This internship is designed to prepare interns for productive and meaningful careers in a variety of contexts.

Baylor College of Medicine / Department of Pediatrics: Baylor College of Medicine (BCM) in Houston, the only private medical school in the Greater Southwest, is recognized as a premier academic health center and is known for excellence in education, research, and patient care. Located in the Texas Medical Center, the College has affiliations with eight teaching hospitals, each known for medical excellence. Baylor College of Medicine's Department of Pediatrics ranks as one of the nation's largest, most diverse, and most successful pediatric programs. Our Department of Pediatrics is committed to providing superior programs of instruction for students and residents; advancing specialty knowledge in the medical sciences, particularly as it relates to the health problems of children; and maintaining its role as a major contributor to research training and scientific activities that enhance the health of children everywhere.

<u>Texas Children's Hospital:</u> <u>Texas Children's Hospital</u> is the primary teaching/training center for Baylor College of Medicine's Department of Pediatrics. The Texas Children's main campus is comprised of six main facilities. The **Wallace Tower** is the primary outpatient pediatric services facility. The **West Tower** is



the inpatient services facility. The Feigin Tower houses pediatric research facilities (including labs), administrative offices, and faculty offices. The Abercrombie Building houses additional patient areas, other patient services international patient services), and administrative offices. The Pavilion for Women is a comprehensive obstetrics/gynecology facility focusing on high-risk births. Finally. Texas Children's is in the process opening the Legacy Tower which will house new and expanded operating rooms, intensive care units, a progressive care unit, the Texas Children's Heart Center, and include a helistop, allowing for even greater access

for the most critically ill patients. The 2019 ranking of Best Children's Hospitals by <u>U.S. News and World Report</u> once again placed Texas Children's on Honor Roll status in pediatrics, ranking Texas Children's as 3rd overall in the nation. We ranked among America's top-10 nationally in ten out of ten specialty areas, including Cardiology & Congenital Heart Surgery (#1), Pulmonology (#1), Gastroenterology & GI Surgery (#2), Nephrology (#2), Neurology & Neurosurgery (#3), Cancer (#3), Urology (#6), Neonatology (#7), Diabetes & Endocrinology (#8), and Orthopedics (#10). The Hospital is designed as a total children's hospital, serving as both a primary community hospital and as a tertiary referral center for children and adolescents with an extensive range of conditions within primary and specialized pediatric medicine.

<u>Psychology Service</u>: Our Psychology Internship Training Program is housed within the Psychology Service at Texas Children's Hospital. The Psychology Service is uniquely suited to provide broad-based clinical training in assessment and treatment of children, adolescents, and their families. Our Service provides the preponderance of Texas Children's psychological and neuropsychological clinical services with patients ranging in age from infancy through young adult. In addition to serving general pediatrics, the Psychology Service has collaborative working relationships with pediatric subspecialty departments throughout the hospital, including the Texas Children's Cancer & Hematology Centers, Diabetes &, Endocrinology, Gastroenterology, Neurology, Pulmonology, Cardiology, Plastic Surgery, Neonatology,

Genetics, Audiology, Renal/Urology, Retrovirology, Allergy & Immunology, Adolescent Medicine, Psychiatry, and Developmental Pediatrics.

The primary physical space of the Psychology Service occupies 13,000 square feet in the Wallace Tower, which is adjacent and connected to both the West Tower and the Feigin Tower. Space designated for the Psychology Service's patient care includes: 10 testing/interview rooms; 13 therapy rooms, and an indoor playground. Clinical space is equipped with observation rooms, one-way mirrors, and digital and VHS video capacity with microphones for supervision and consultation purposes. Interns also have access to a broad range of empirically supported treatment manuals, consultation and intervention handbooks, reference books, and an extensive selection of assessment tools, computerized assessment scoring programs, and access to a dictation system and a testing workroom.

Internship Training Program Overview

The mission of the Texas Children's Hospital Psychology Internship is to advance the profession of psychology and maximize child health outcomes through exemplary training in individualized evidence-based practices of psychology with an emphasis in pediatric / child populations. Our psychology internship program provides broad-based clinical training that will prepare emerging psychologists for productive and meaningful careers in a variety of contexts. As part of our mission, we are committed to providing the foundations for successful post-doctoral specialization in the fields of pediatric psychology, clinical child and adolescent psychology, and pediatric neuropsychology.

Our faculty aspires to train highly competent professionals who will:

- Uphold a strong commitment to scientist practitioner values
- Demonstrate sensitivity and responsiveness to developmental considerations and individual differences
- Be effective at contextually-relevant care as well as interdisciplinary teamwork



The internship is regarded as an intensive clinical training year wherein interns use this final phase of their formal doctoral training to develop broad and general professional competencies with an emphasis in pediatric / child populations. The model of training employed is predominantly experiential with supporting didactics and supervision. Experiential training is provided through participation in a variety of clinical rotations including outpatient, inpatient, and consultation services. These rotations provide extensive experiential training using evidence-based approaches in core areas of psychological practice.

To the extent feasible, clinical rotations and training experiences are tailored to the unique training needs and interests of each intern. Each intern is assigned a <u>primary mentor</u> who will guide the intern in development of his or her <u>individualized training plan</u>, monitor progress, and support professional development. The primary mentor works collaboratively with the intern to ensure that both the intern and program

goals and objectives are achieved through development, ongoing discussion, and sometimes refinement of the intern's training plan. Training considerations take precedence over service delivery. The training year is developmentally structured in terms of sequence and intensity with increased responsibility and independence as the year progresses.

The internship program maintains the following core aims for internship training:

- To provide broad-based experiential training in psychology with an emphasis in individualized evidence-based practices with pediatric / child populations - that will prepare interns for professional practice within a variety of contexts.
- To promote the professional development of emerging psychologists who will uphold a strong commitment to the scientist practitioner model and evidence-based practices.

Internship Clinical Training Experiences

Texas Children's Hospital's Psychology Service serves patients ranging in age from infancy to young adults. The patient population seen within the Psychology Service is racially, ethnically, and linguistically diverse, providing interns with experiential training in delivering services to families from a broad range of backgrounds. Service delivery and training experiences involve a contextually-relevant and interdisciplinary approach. Interns coordinate care with multiple systems impacting children, which include working with family systems, schools, interprofessional health care teams, and other providers of patient care. Interns serve as consultants to other departments at Texas Children's and to ancillary service providers in the community.

The training year is divided into two six-month major rotations and two six-month minor rotations as well as some opportunity for year-long training experiences. The training rotations offered provide extensive experiential training in core areas of psychological practice with pediatric / child populations (i.e., assessment, consultation and intervention). Approximately 38 percent of an intern's time is spent engaged in assessment and consultation activities, 35 percent in intervention, 16 percent in supervision/case consultation, and 11 percent in seminars, conferences, and staffings.

Major Rotations: (2 Majors, each for 6 months)

- 1) Pediatric Neuropsychology
- 2) Pediatric Health Psychology
- 3) OCD & Anxiety Disorders
- 4) Preschool
- 5) (Autism Center)

Minor Rotations: (2 Minors, each for 6 months)

- 1) Pediatric Health Psychology
- 2) OCD & Anxiety Disorders
- 3) Brief Behavior Intervention
- 4) Trauma & Grief Center
- 5) Inpatient Rehabilitation
- 6) Autism Center
- 7) Pediatric Neuropsychology
- 8) Learning Disabilities
- Evaluation/Consultation
- 9) Diagnostic Interviewing10) Research Rotation
- Year-long training activities include:

ong training activities include.

- 1) Ongoing Outpatient Therapy
- 2) Didactic seminars and conferences
- 3) Clinical supervision/case consultation



<u>Including</u> supervision and rotation-specific conferences and staffings, roughly 60-65% of intern time is spent in their Major Rotation, 24-26% in their Minor Rotation, 5% in Ongoing Outpatient Therapy, and 5% in core (non-rotation specific) Internship Program didactics.

Internship Training Tracks

The Texas Children's Hospital Psychology Internship currently has two training tracks:

Track I: Clinical Child / Pediatric Health Psychology - 3 positions

Track II: Pediatric Neuropsychology - 2 positions

The program currently maintains three psychology intern positions with an emphasis in clinical child / pediatric health psychology (Track I) and two positions with a pediatric neuropsychology focus (Track II). When an intern matches to a training track, the intern can expect to participate in the major rotations corresponding to the core training area(s) of the track. Remaining rotations of the intern's training plan are based on general training needs and rotation availability. The details of the plan are determined via consultation and collaborative decision-making with primary mentor and training director. This training track structure provides for both depth and breadth of clinical training and allows the program to individualize an intern's training year.

Track I: Clinical Child Psychology & Pediatric Health Psychology (194814)

Interns on this training track participate in a Clinical Child Psychology major rotation and the program's Pediatric Health Psychology major rotation. The primary options for the Clinical Child Psychology major are OCD & Anxiety Disorders or the Preschool Rotation. Potential minors on this track include the full range of options available, taking into consideration training needs and availability. In keeping with the APA's taxonomy for specialization within professional psychology, interns spend at least 50% of their training time in service delivery within the recognized specialty of Clinical Child & Adolescent Psychology.

Track II: Pediatric Neuropsychology (194813)

Interns on training track II will have a year-long pediatric neuropsychology focus. Interns on this track complete two neuropsychology/assessment-focused majors. Potential minors for interns on this track often include intervention focused option(s) to round out the internship training year and provide strong preparation for practice as a neuropsychologist. Training track II is suitable for interns building upon a strong background in assessment and preparing for post-doctoral specialization in pediatric neuropsychology. In keeping with the APA's taxonomy for specialization within professional psychology, interns on Track II spend at least 50% of their training time in service delivery within the recognized specialty of Clinical Neuropsychology.

For example, an intern who matches to the Pediatric Neuropsychology Track would participate in two distinct Pediatric Neuropsychology/Assessment-Focused major rotations and two minors.

Major Rotations	Pediatric Neuropsychology	Pediatric Neuropsychology	
Minor Rotations	Brief Behavior Intervention	Inpatient Rehabilitation	
	Ongoing Outpatient Therapy		
	Internship Didactics & Supervision		

Below find another example – this one wherein the intern is on the Clinical Child / Pediatric Health track:

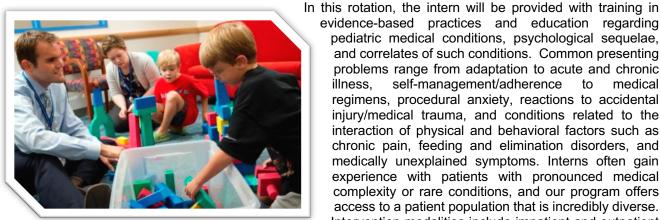
Major Rotations	Pediatric Health Psychology	OCD & Anxiety Disorders	
Minor Rotations	LD Evaluation	Pediatric Health Psychology	
	Ongoing Outpatient Therapy		
	Internship Didactics & Supervision		

Descriptions of Major Rotations

Pediatric Neuropsychology Rotation: The patient population served through the Pediatric Neuropsychology Program is representative of the wide variety of conditions seen in primary and specialized pediatric medicine practice. Particular emphasis is placed on chronic medical illnesses, including leukemia, brain tumors, sickle cell disease, epilepsy, stroke, traumatic brain injury, organ failure and transplantation, and cochlear implantation. Other typical referrals include neurodevelopmental delays, genetic disorders, diabetes, lupus, HIV, neuropsychiatric disorders, pre- and post-surgical evaluations, and other neurological or systemic medical conditions.

Primary services in which interns engage include outpatient neuropsychological assessment, associated intervention planning, and consultation with families, schools, and referring physicians. The clinical populations served and specific services provided vary by specialty area(s) of the rotation supervisor. Interns may also participate in multidisciplinary clinics/staffings as well as rotation-specific clinical/didactic meetings (e.g., multi-disciplinary staffings for autism, cochlear implant, brain tumor, or long-term survivors of childhood cancer; Brain Tumor Boards, Bone-Marrow Transplant Boards, and Epilepsy Rounds). Interns will have the option (and expectation) of attending a variety of didactics, including Child Neuropsychology Conference, Neuropsychology Readings Group, and Neurology Grand Rounds). This major rotation is suitable for interns building upon a strong background in assessment and preparing for post-doctoral specialization in neuropsychology. Training experiences will be selected and scaffolded -- based on intern experience and previous training. Faculty supervisors for the Pediatric Neuropsychology rotations include: Leandra Berry, Ph.D., Douglas Bloom, Ph.D., Kimberly Davis, Ph.D., Karen Evankovich, Ph.D., Mary Reeni George, Ph.D., ABPP/CN., Marsha Gragert, Ph.D., ABPP/CN, Lynnette Harris, Ph.D., Jennifer Haut, Ph.D., ABPP/CN, Lisa Noll, Ph.D., Kimberly Raghubar, Ph.D., M., and David Schwartz, Ph.D., ABPP.

Pediatric Health Psychology Rotation: The Pediatric Health Psychology Program serves children/adolescents and their families who are having difficulty managing physical symptoms, adapting to chronic/acute medical conditions, and/or adhering to medical regimens. Referrals are received from a wide array of pediatric subspecialties including: Cardiology, Diabetes/Endocrinology, Gastroenterology/Nutrition, Hematology-Oncology, Neurology, Physical Medicine & Rehabilitation, and Pulmonology with additional referrals coming from Allergy/Immunology, Bariatric Surgery, the Fetal Center/NICU, Gender Medicine, Gynecology, Orthopedics, Plastic Surgery, Retrovirology, Rheumatology, Trauma Service, and Transplant Services, among others.



evidence-based practices and education regarding pediatric medical conditions, psychological sequelae, and correlates of such conditions. Common presenting problems range from adaptation to acute and chronic self-management/adherence illness, medical regimens, procedural anxiety, reactions to accidental injury/medical trauma, and conditions related to the interaction of physical and behavioral factors such as chronic pain, feeding and elimination disorders, and medically unexplained symptoms. Interns often gain

complexity or rare conditions, and our program offers access to a patient population that is incredibly diverse. Intervention modalities include impatient and outpatient

experience with patients with pronounced medical

therapy, assessment, and consultation and liaison services within the medical setting. Interns may attend various rounds and multidisciplinary staffings/clinics and receive mentoring in effective work with interprofessional health care teams. Depending on interest and feasibility, interns have the opportunity to participate in on-going research projects. Faculty supervisors for this rotation include Marni Axelrad, Ph.D., ABPP, Ginger Depp Cline, Ph.D., ABPP, Katherine Cutitta, Ph.D., Danita Czyzewski, Ph.D., Petra Duran, Ph.D., Katherine Gallagher, Ph.D., Lisa Noll, Ph.D., Karin Price, Ph.D., ABPP, Nicole Schneider, Psy.D., Mariella Self, Ph.D., and Gia Washington, Ph.D., ABPP.

OCD & Anxiety Disorders Rotation: The OCD and Anxiety Disorders Program provides specialized assessment and intervention services to children and adolescents with anxiety and obsessive-compulsive related disorders, including Obsessive-Compulsive Disorder, Health Anxiety/Panic Disorder, Selective Mutism/Social Phobia, and medically-related Specific Phobias. Patients may also have medically unexplained symptoms or co-morbid medical conditions that are treated by the pediatric medical specialists at Texas Children's Hospital. The OC-ADP assessment and treatment approach is strongly evidence-based, with interventions placing significant emphasis on exposure based Cognitive-Behavioral Therapy (CBT). Interventions are either individual-focused with significant family involvement or conducted via a family-based approach. Continuous outcome assessment and judicious use of data to guide treatment are incorporated.

Interns in the OCD and Anxiety Disorders Program have opportunity to develop clinical expertise in: 1) conducting accurate and efficient assessment of OCD, anxiety, and related issues in children and adolescents; 2) identifying and using ongoing outcome assessment to measure progress in treatment and inform treatment decisions; 3) providing modular, evidence-based interventions that are data-driven and research-based; and 4) collaborating with school personnel, psychiatrists, pediatricians, and medical subspecialists. Opportunities for clinical research, program development, quality improvement, and community outreach are also available as a component of the program. Supervision is provided by clinical psychologists trained in exposure-based cognitive-behavioral and family-based approaches to treatment. Faculty supervisors for this rotation include: Liza Bonin, Ph.D., Karin Price, Ph.D., ABPP, and Kelly Banneyer, Ph.D.

Preschool Rotation: The Psychology Service provides specialty care for preschool populations. The preschool rotation provides interns with the opportunity to conduct diagnostic evaluation and conceptualization for preschool age children, intervention with preschool pediatric populations (e.g. pediatric cancer, epilepsy, cleft palate, medical trauma), and short-term preschool services for typically developing healthy children through the Brief Behavior Intervention. Children most commonly present with disruptive behaviors, sleep problems, mood concerns and/or problems at school. Our pediatric patients are typically referred through their primary medical team, and we are often called on to provide recommendations to the medical team. Families with typically developing children with behavior and/or mood concerns are self-referred or referred to the BBI when they present to their pediatricians with these concerns. A preventative, developmentally-based behavioral treatment model is applied. Therapy focuses on short-term, goal-oriented techniques and parent training with live coaching of skills. Interns have the opportunity to participate in extensive training and receive live supervision while providing services. Within the Brief Behavioral Intervention component of this rotation, interns and will have the opportunity to interact with members of multidisciplinary teams including preschool teachers and directors as well as medical residents in family medicine and developmental pediatrics. Within the pediatric component of this rotation, interns will have the opportunity to interact with physicians, nurses, and other medical professionals involved in the child's medical care. Our patient population is ethnically and culturally diverse, and specialized training is available in providing culturally competent care. Interns have many opportunities to strengthen their multicultural awareness and translate their knowledge regarding individual and cultural diversity into daily clinical practice. The rotation also includes the opportunity for bilingual (Spanish) supervision. Marni Axelrad, Ph.D., ABPP and Petra Duran, Ph.D. are the faculty supervisors for the Preschool rotation.

Autism Center Rotation: The Autism Center offers diagnostic, developmental, psychological and neuropsychological evaluation for individuals suspected of having an autism spectrum disorder (ASD). The patient population includes children from a range of referral sources (e.g., school, physicians, and families) who may have pre-existing diagnoses (e.g., developmental delays or other neurodevelopmental disorders), and the child is also suspected of having an ASD. Our center also provides evaluation for those who have been diagnosed with ASD and are in need of a comprehensive evaluation to aid in development of treatment recommendations. The Autism Center faculty work in conjunction with faculty in a range of other disciplines and evaluate children in clinics ranging from a multidisciplinary format to an individual practitioner. In the multidisciplinary clinics, interns have the opportunity to work on teams that include faculty and staff from psychiatry, developmental pediatrics, neurology, social work, speech/language pathology, and occupational therapy.

Within this rotation, interns will have the opportunity to engage in psychological, behavioral, and/or

neurocognitive assessment of individuals with (or suspected of having) ASD, including evaluations using gold standard diagnostic tools such as the Autism Diagnostic Observation Schedule, 2nd Edition (ADOS2). Interns will also have the opportunity to: (1) conduct psychological/neurocognitive assessment of children with various neurologically-based developmental problems, including screening at risk populations; (2) participate in diagnostic differentiation and formulation of further assessment and treatment plans; and (3) participate in family consultations/feedback and provide recommendations for intervention services. Opportunities also exist for clinical research, particularly projects involving behavioral phenotyping of ASD. Leandra Berry, Ph.D. and Rachel Fein, Ph.D. are the faculty supervisors for the Autism Center rotation. Additionally, Robin Kochel, Ph.D. provides ADOS/ADI-R training and research experiences. Please note: The opportunity for a major rotation placement at the Autism Center will depend on availability/feasibility and intern training goals.

Descriptions of Minor Rotations

<u>Pediatric Health Psychology Minor Rotation</u>: For interns on Track II who do not participate in Pediatric Health Psychology as a major rotation, they have the option of participating in this program on a more limited basis as a minor rotation.

When central to an intern's overall training plan and professional trajectory, interns on Track I have the option to pursue an additional pediatric health psychology experience on a more limited basis as a minor rotation (typically implemented for interns intending to pursue a career as a pediatric psychologist; see Major Rotation Description for details).

<u>OCD & Anxiety Disorders Minor Rotation</u>: For interns who do not participate in OCD & Anxiety Disorders as a major rotation, they have the option of participating in this program on a more limited basis as a minor rotation.

When central to an intern's overall training plan and professional trajectory, interns on Track I have the option to pursue an additional OCD & Anxiety Disorders experience on a more limited basis as a minor rotation (typically implemented for interns intending to pursue career specialization in OCD and/or anxiety disorders (See Major Rotation Description for details).

<u>Brief Behavior Intervention Minor Rotation:</u> For interns who do not participate in Preschool as a major rotation, this is an opportunity to participate in the Brief Behavior Intervention (BBI) component of the Preschool Program. The BBI is designed to provide short-term services for parents and children, ages one

to six years, for a wide range of behavioral and developmental concerns such as temper tantrums, aggression, sleep problems, noncompliance, daycare difficulties. Families are referred to the BBI when they present to their pediatricians with these concerns. A preventative. developmentally-based treatment model is applied. Therapy focuses on shortterm, goal-oriented techniques and parent training with live coaching of skills. The intervention is most similar to Parent Child Interaction Therapy (PCIT), using many of the same live training opportunities for parents, as well as similar intervention techniques. Interns have the opportunity to participate in an extensive training, receive live supervision while providing services, and will have the opportunity to interact with members of multidisciplinary teams



including preschool teachers and directors as well as medical residents in family medicine and developmental pediatrics. Interns participating in this minor rotation will also have opportunity to participate in the diagnostic intake process, including conceptualization, for preschool aged children. Marni Axelrad, Ph.D., ABPP and Petra Duran, Ph.D. are the faculty supervisors for the BBI rotation.

Trauma and Grief Center Minor Rotation: The primary purpose of the Trauma and Grief Center is to raise the standard of care and increase access to best-practice care among traumatized and bereaved children, adolescents, and their families. The patient population includes children ages 7 to 17-years-old who are referred from within the hospital or the larger community due to concerns related to experiences of trauma (e.g., physical or sexual abuse, immigration/deportation-related traumas, witnessing violence) or loss of a loved one. The Trauma and Grief Center has three primary aims: (1) provide evidence-based assessment and interventions for youth who have experienced traumas and/or losses; (2) conduct research on adaptive and maladaptive responses to trauma and loss as well as treatment effectiveness; and (3) provide training and professional education in trauma- and grief-informed assessment and interventions using best practice teaching methods. In addition, the Trauma and Grief Center is home to the Harvey Resiliency and Recovery Program, which is dedicated to serving the needs of the many Houston-area children and families adversely affected by Hurricane Harvey and its aftermath. In the TAG Center rotation, interns will have the opportunity to work as part of a multidisciplinary team that includes psychology, social work, and psychiatry to provide assessments and treatments grounded in best practices in bereavementand trauma-informed care. Interns will be trained in and utilize our evidence-based assessment protocol and treatments for childhood trauma and bereavement. The primary faculty supervisors for this minor training experience are Julie Kaplow, Ph.D., ABPP and Ryan Hill, Ph.D. Stephanie Yudovich, LCSW also contributes to training and provides supplemental supervision.

Inpatient Rehabilitation Minor Rotation: The TCH inpatient Rehabilitation Unit (IRU) is a CARF accredited, 12-bed unit. Interns work with a multidisciplinary team in the care of patients with a variety of injuries/diseases of the central nervous system (CNS), including brain tumors, traumatic brain injury, CNS infections, demyelinating conditions, cerebral vascular accidents, cerebral palsy, and other conditions with known or suspected CNS involvement. The population is diverse with respect to age (toddler through young adulthood) as well as language dominance, culture, and socioeconomic status. Specific responsibilities of rotating interns, under the supervision of the attending faculty member, will be individualized based on the intern's training goals and area of focus (Clinical Child/Pediatric Health Psychology vs Pediatric Neuropsychology). Clinical activities will also vary based on the admitted children's need for services. On this rotation, all interns will gain experience in team consultation and participation in multidisciplinary team and family conferences, comprehensive clinical interviews aimed at care planning, and family education and training about brain injury and home/school/community re-entry. Additional clinical experiences may include performance of serial assessments of neurobehavioral status and neurobehavioral management, pre-discharge neuropsychological evaluations, Parent Management Training (for children ages 2-to-5), and interventions for behavior and pain management. Kimberly Davis, PhD is the primary supervisor for this rotation with supplemental supervision of behavioral intervention services provided by select pediatric health psychology faculty.

<u>Autism Center Minor Rotation</u>: For interns who do not participate in the Autism Center as a major rotation, they have the option of participating in this center on a more limited basis as a minor rotation (See Major Rotation Description for details).

<u>Pediatric Neuropsychology Minor Rotation:</u> Interns on Track I have the option of participating in this clinical program on a more limited basis as a minor rotation. The rotation would be designed based on the intern's background, skill level, and goals (see Major Rotation Description for details).

Learning Disability Minor Rotation: In this rotation, the intern will gain a working knowledge of best practices related to the diagnosis, treatment, and developmental course of specific developmental learning disabilities. The intern will be able to differentiate the presence of specific learning disabilities from comorbid conditions such as attention, emotional, or behavior disorders that similarly serve as obstacles to learning. There also will be an emphasis on the development of appropriate, evidence-based intervention strategies and the communication of intervention strategies to parents and relevant professionals through written reports, parent conferences, and communication with other professional providers. The intern will be expected to select appropriate assessment techniques, review current research related to neurocognitive causes of learning disabilities and the cognitive profiles associated with developmental learning disorders. In addition, the intern will develop a familiarity with the federal and state regulations governing school-based diagnosis and intervention for learning disabilities. Doug Bloom, Ph.D. is the primary faculty supervisor.

<u>Diagnostic Interviewing Minor Rotation</u>: The Diagnostic Interviewing rotation provides opportunity for interns to participate in efficient clinical interviewing, behavioral assessment, and diagnostic consultation to inform intervention planning. This rotation can be implemented when the development of diagnostic skills is a priority and/or when there are gaps in diagnostic interviewing experience. There are opportunities to conduct diagnostic evaluations within Psychology Service clinics (e.g., Pediatric Health Psychology) or in Primary Care.

Research Minor Rotation: For interns who have demonstrated exceptional research competencies and solid preparation for clinical practice, a research minor rotation is a possible option. Participation in the Research Minor is an exception rather than a routinely implemented rotation (see below).

Ongoing Clinical Training Experiences

Ongoing Outpatient Therapy: All interns will carry several outpatient cases to complement their training year rotation selections and provide the opportunity for longer-term therapy. Outpatient therapy cases are available from the Pediatric Health Psychology Program, OCD & Anxiety Disorders Program, Preschool Program, as well as Autism Center. To facilitate broad-based clinical training experience, interns have the option to carry cases that are outside of their major and minor rotations. Interns will be supervised by training faculty with expertise suited to each outpatient case. Potential supervisors include: Marni Axelrad, Ph.D., ABPP, Kelly Banneyer, Ph.D., Liza Bonin, Ph.D., Ginger Depp Cline, Ph.D., ABPP, Katherine Cutitta, Ph.D., Danita Czyzewski, Ph.D., Petra Duran, Ph.D., Rachel Fein, Ph.D., Katherine Gallagher, Ph.D., Ryan Hill, Ph.D., Lisa Noll, Ph.D., Karin Price, Ph.D., ABPP, Nicole Schneider, Psy.D. Mariella Self, Ph.D., and Gia Washington, Ph.D., ABPP, and Stephanie Yudovich, LCSW.

Research

The internship year is designed to foster a research-minded approach to clinical work. Interns will develop their knowledge and skills in the clinical application of evidence-based assessment and intervention practices for a wide range of pediatric / child presenting problems.

While the internship is primarily a clinical training year, our training faculty adheres to a scientist practitioner model and research programs are ongoing. Protected time for research is possible through the program's research minor; however, **most research involvement by interns is conducted as part of an intern's clinical rotation** and/or entails supplemental or "extra" involvement beyond the requirements of a clinical rotation. Supplemental activities might include participation in poster preparation, development of manuscripts, and grant writing activities.

Didactics and Supervision

DIDACTICS: The broad range of clinical experiences afforded to interns is enhanced by both formal and informal didactics, clinical and professional conferences, and opportunities to attend various rounds and staffings.

Training Program Seminar: All interns attend the internship's weekly Psychology Training Program Seminar. The presentations within this seminar series address core topics pertinent to profession wide competencies in health service psychology with an emphasis in pediatric / clinical child psychology (e.g., evidence-based assessment and intervention practices; pediatric medical conditions and psychological disorders; current research / best practices in a pediatric care; collaborative care in a pediatric health care environment). Seminars are conducted by Psychology Section faculty and, on occasion, invited guest speakers from outside of the Section. The order of seminars within this didactic series is structured to allow for an appropriate developmental sequence that facilitates intern learning and augments clinical experiences. Ginger Depp Cline, Ph.D., ABPP coordinates the Training Program Seminar.

<u>Psychology Practice Conference</u>: This practice-focused conference typically consists of Case Conceptualization Presentations for cases in ongoing psychosocial intervention or, on occasion, recent evaluations/consultations. Attendees include all psychology interns and pediatric/clinical postdoctoral fellows involved in the following clinical programs: Pediatric Health Psychology, OCD & Anxiety Disorders, Preschool, and Trauma & Grief Center. Clinical cases, typically from the aforementioned programs, are rotated through the conference schedule to allow for peer supervision and consultation for a range of presenting problems, assessment methods, and treatment modalities; this format allows for all interns to benefit from the breadth of internship clinical rotations and programs. All case conceptualization presentations are expected to include discussion of evidence-based and developmentally appropriate



practices, methods of individualizing assessment/intervention, and relevant ethical considerations and diversity issues. Research articles and/or scholarly reviews relevant to case presentations are expected.

Additionally, once per month, this forum includes a <u>Multicultural Diversity Seminar</u> (exploring themes such as racial/ethnic backgrounds, acculturation, language, and transition). The Psychology Practice Conference is held ~ 3 times per month and is coordinated by Ginger Depp Cline, Ph.D., ABPP and Petra Duran, Ph.D.

Research/Professional Development Series: This seminar series meets monthly and focuses on scholarly professional development. This meeting provides an opportunity to model and discuss the integration of science and practice. The faculty/interns discuss practical guidelines for developing programs of research and methods to integrate clinical and research activity. Other topics include pursuing grant funding, licensure, and post-internship opportunities such as postdoctoral training and potential career trajectories in pediatric psychology, child and adolescent clinical psychology, research/academia, and clinical neuropsychology. Liza Bonin, Ph.D. coordinates this internship didactic series.

Clinical/Pediatric Psychology Program Meeting: The Clinical/Pediatric Psychology Meeting provides a weekly forum for Clinical and Pediatric Psychology faculty, fellows, interns, and graduate students to come together for consultation, discussion, and education to support patient care, program development, and faculty and trainee growth. The forum includes discussion of clinical program procedures and improvement initiatives and is a valued opportunity for case consultation/peer supervision. The meeting schedule incorporates clinically focused topic seminars as well as journal club discussions. Marni Axelrad, Ph.D., ABPP coordinates this clinical program meeting.

<u>Child Neuropsychology Conference</u>: This conference is attended by neuropsychology faculty and interns while on a Pediatric Neuropsychology rotation. Postdoctoral fellows in pediatric neuropsychology and graduate students conducting a neuropsychology practicum also attend and participate in this conference. All Psychology Section faculty and trainees are welcome to attend. The conference format is



one of didactic and actual case presentation as well as periodic modeling of ABPP-CN fact finding by faculty and post-doctoral fellows. Didactic presentations by program and guest faculty and, to a lesser extent, postdoctoral fellows cover a selection of core topics pediatric and life in span neuropsychology. Cases for case presentations are selected from recent evaluations in the Psychology Service to concepts illustrate basic neuropsychology. The structure of case presentations involves development and revision of differential diagnoses through statement of reason for referral, review of background information, description of behavioral observations, presentation of test data, interpretation of information, and elucidation of recommendations. In addition to providing interns with modeling of case conceptualization and experience in presenting case information to colleagues, this conference allows for exposure to a variety of presenting problems and peer consultation on current challenging cases. This weekly conference is coordinated by Marsha Gragert, Ph.D., ABPP/CN.

Neuropsychology Readings Group: This seminar is intended for postdoctoral fellows, neuropsychology interns, and select graduate student externs. Junior and other faculty preparing for the written examination for ABCN certification may also regularly attend, and there is faculty representation at every scheduled (biweekly) readings group. The selection of readings and topics is based upon a two-year curriculum in support of our postdoctoral training program. The selection of readings includes topics from 5 main domains that span the developmental spectrum through adulthood, including neuropsychological assessment, clinical neuropsychology, basic and clinical neurosciences, behavioral (clinical) neurology, and general clinical psychology. The purpose of this readings group is to provide 1) a broad range of foundational topics in neuropsychology and 2) specific preparation for the ABCN written examination. This didactic is coordinated by Marsha Gragert, Ph.D., ABPP/CN.

<u>Council of Houston Area Training Sites (CHATS):</u> Approximately once per month interns participate in a didactic seminar/networking opportunity sponsored by the Council of Houston Area Training Sites (CHATS). CHATS is comprised of all APA-accredited doctoral psychology internship programs in the Houston area. CHATS member programs collaborate each year to provide participating interns with professional development activities and peer networking opportunities beyond those offered within the individual internship programs.

<u>Psychology Peer Review:</u> This monthly meeting is a forum in which both clinical and research faculty from the Psychology Section present work-<u>in-progress</u> (e.g., grant proposals, manuscripts, resubmissions, clinical protocols, etc.) for which they are seeking feedback from peers. This is a forum in which faculty can benefit from honest, constructive feedback from peers in order to optimize chances of success in the larger grant funding and journal publication arenas. Interns may attend as participants in order to learn more about the ongoing research programs in the Section, to see the process of constructive scientific peer review at work, and to further develop their own research skills and knowledge, but only faculty are eligible to present their work in this forum.

Psychology Grand Rounds: The Psychology Grand Rounds series is the primary forum for the Department of Pediatrics Psychology Section Continuing Education (CE) programming. Our Psychology Section is approved by the American Psychological Association to sponsor continuing education for psychologists. Our Grand Rounds CE activities are held approximately once per month. The aim of this educational series is to provide up-to-date knowledge and skills relevant to: (1) evidence-based assessment and intervention practices; (2) psychological disorders as well as behavioral, developmental, and neurocognitive functioning in children and adolescents; (3) standards of care, quality improvement methods, research methods and professional issues pertinent to psychological practice in a medical center and children's hospital, and (4) ethical standards and legal issues pertinent to the care of children in a pediatric medical environment. Dr. Cline is the Psychology Section's APA CE Director and coordinates the Section's CE Committee and Psychology Grand Rounds didactic programming.

<u>Texas Children's Hospital Pediatric Grand Rounds</u>: Weekly TCH Pediatric Grand Rounds are sponsored by the Baylor College of Medicine Department of Pediatrics and feature both research and clinical presentations by BCM faculty and invited lecturers.

Additionally, all interns are welcome to participate in range of pediatric subspecialty rounds and/or seminars as time allows (and depending on their rotations, might be encouraged to attend; e.g., Neurology Rounds, Epilepsy Grand Rounds, Brain Tumor Boards, BMT Psychosocial Rounds, Palliative Care Conference).

Finally, in addition to the aforementioned seminars, conferences, and rounds, some specific clinical rotations have their own clinical program staffings (e.g., Autism Center, OCD & Anxiety Disorders Program) with opportunities for program development discussions, consultation and peer supervision. Over the course of the training year, interns will conduct several scholarly presentations within clinical program meetings.

SUPERVISION: Individual supervision is provided for all major rotations, minor rotations, and ongoing training experiences. Interns receive a *minimum* of 2 hours of individual supervision per week; however the typical and expected amount of individual supervision provided is between 3 to 4 hours per week. Beyond individual supervision, interns receive supplementary supervision/consultation within the context of staffings, conferences, and program-specific meetings. Rotations also include opportunities for live supervision, joint-sessions, and role modeling, sometimes using a vertical team approach. The Psychology Service suite includes observation rooms, one-way mirrors, and digital video capacity with microphones that are utilized for supervision purposes.

Early supervision and consultation with primary mentor includes self-assessments to identify strengths and targeted domains for development. In consultation with primary mentor and training director, the intern develops an individualized training plan (see Program Overview) within the first weeks of the training program. This plan will be refined as the year progresses and used as a method to ensure both program and individualized intern training goals are met.

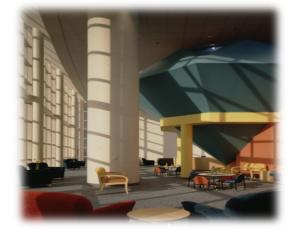
<u>Intern Meeting</u>: Interns meet as a group with the Training Director every other week. This time is provided for interns to ask questions, raise issues, and provide feedback and suggestions. It affords an opportunity to discuss the training program, clarify expectation and procedural issues, and maintain open lines of communication.

Evaluation Process

Evaluation and feedback are regarded as ongoing processes that occur through both formal and informal means. All supervising faculty and interns are encouraged to share feedback with each other throughout training rotations and the training year. Evaluation provides the opportunity to further individualize an intern's training program as well as improve the overall Internship Program.

Expectations and Procedures: At the start of the internship training year, all interns are provided with an Intern Handbook that delineates program requirements and competency expectations as well as policies and procedures that outline steps to be followed if an intern is not fulfilling program requirements or performing at the expected level of competence. The program's Intern Handbook as well as Due Process Procedures are available for review on request.

<u>Intern Evaluation</u>: To ensure preparation for practice in health service psychology, the program fosters intern development of and assesses intern achievement of profession-wide competencies (PWC). Interns are expected to demonstrate performance commensurate with their level of training and strong preparation for entry level practice (and postdoctoral specialization). In keeping with this standard, interns are expected to achieve competency domain ratings of "*Developing Competence*" or above on all rated competency elements during internship (Quarters 1, 2, and 3). By the end of the internship training program (end of 4th Quarter), interns are expected to achieve competency domain ratings of "*Competent*" or above on all profession-wide competency elements.



The program's profession-wide competency evaluations are conducted by major rotation, minor rotation, and ongoing clinical training supervisors. Evaluations are conducted four times per year (at 4, 6, 9, and 12 months). All evaluations are based in part on direct observation of the intern by the training supervisor. Each supervisor is responsible for reviewing evaluation feedback with the intern during supervision and providing a copy of the evaluation form to the Director of Training.

<u>Supervisor/Program Evaluation</u>: Interns are provided with a venue for feedback on an ongoing basis through the Intern Meeting with the Director of Training. Additionally, interns complete supervisor evaluation/program feedback forms at 6 and 12 months.

Administrative Resources

Interns are provided with designated office space to conduct their clinical administrative work. Interns are provided with an individually assigned computer, private telephone line with voicemail, and pager. Each computer is connected to TCH and BCM intranet systems with access to electronic medical records and access to Houston Academy of Medicine-Texas Medical Center Library with its vast catalog of electronic journals and Pub-Med access.

Within the Psychology Service suite, interns have access to computers with programs for statistical analysis and research. Interns benefit from the administrative support provided by the Psychology Service's administrative assistants, referral center coordinators, and practice manager as well as the hospital's information services, scheduling, admissions, and billing department personnel.

Internship Admissions, Support, & Initial Placements

Date Program Tables are Updated: 8/13/2019

Internship Program Admissions / Application Procedures and Selection Process:

The Texas Children's Hospital Psychology Internship recruits for five full time interns (see page 6 for information about the program's three training tracks). Psychology intern selection is based on factors deemed directly relevant to prospective interns' potential success in the program and in the profession of psychology, including prospective intern preparation in pediatric psychology, clinical child psychology, and/or pediatric neuropsychology. Relevant factors in this decision process include: clinical and research experiences; education; references from past supervisors, internship training objectives; and long-term professional goals. We endeavor to accept interns from a broad range of graduate training programs as this enriches the Internship Program. Graduate students in clinical, counseling, and school psychology are considered for admission to the Internship Program.

Our Psychology Section values diversity and is committed to inclusion. We are committed to the recruitment, retention, development and promotion of psychologists of all backgrounds and experiences. We believe this reflects the multicultural values and experiences of our patients, families, and broader community. Applications from bicultural / bilingual students and those underrepresented in psychology are thus especially welcome.

Does the program require that applicants have received a minimum number of hours of the following at the time of application? If yes, now many:

While the overall <u>quality</u> of <u>supervised</u> experience is <u>substantially</u> more important than the <u>number of hours</u> conducted, applicants typically have completed approximately 750 direct contact hours at the time of application. The program expects applicants to have obtained a combination of intervention and assessment hours, but does not have a specific minimum hours requirement for intervention or assessment. Successful applicants typically present with experience / hours that are commensurate with the preparation needed to be successful on the track for which they are applying (e.g., solid breadth and more assessment experiences than intervention if applying to pediatric neuropsychology track).

Describe any other required minimum criteria used to screen applicants.

Requirements for admission include:

- Completion of at least three years of graduate coursework at an APA-accredited doctoral training program
- Practicum training in assessment and treatment of pediatric / child populations
- Obtained masters degree and passed comprehensive exams by application deadline

 Completion of dissertation proposal defense and initiation of data collection at the time of internship application submission. The completed application deadline is October 31, 2019.

In order to apply, prospective interns should submit their completed application via the AAPI Online Applicant Portal by **October 31, 2019 11:59pm CST**.

The AAPI Online Portal is accessed through the Association of Psychology Postdoctoral and Internship Center's (APPIC) online application service. http://www.appic.org.

To be considered, the following materials must be submitted through the APPIC's Online Service by October 31, 2019:

- Cover Letter (letter of intent)
 - Please include statement of career goals and interest in the Texas Children's Hospital Psychology Internship through the Department of Pediatrics at Baylor College of Medicine.
 - Please <u>clearly specify within your cover letter in bold type the name of the training track(s) for which you are applying</u> (see page 6 for names of training tracks).
- Curriculum Vitae
- APPIC Application for Psychology Internship (AAPI)
- Official copy of all Graduate transcripts
- Three letters of recommendation (preferably one from applicant's academic advisor and two others from clinical supervisors).

After all application materials have been reviewed by the Psychology Internship Selection Committee, personal interviews or telephone interviews (if an onsite visit is not feasible) will be arranged for those applicants still under consideration. If feasible, personal interviews are preferred. Please feel free to contact us for more information at any time at PsychologyInternship@TexasChildrens.org.

The Texas Children's Hospital Psychology Internship Program adheres to Baylor College of Medicine's diversity and inclusion policies (e.g., affirmative action, equal employment, and disability policies) as well as other applicable BCM employment policies. The internship program also supports and agrees to abide by the APPIC policy that no person at this training facility will solicit, accept, or use any ranking-related information from any intern applicant prior to the Internship Match. The internship follows APPIC Match Policies; applicants should register for the match. Please directly contact the APPIC office with any policy issues: **APPIC Central Office** 10 G Street, NE Suite 750 Washington DC 20002 Appic@aol.com Phone: 202-589-0600 Fax: 202-589-0603.

Following receipt of the computerized match results, matched candidates will be contacted via telephone. Applicants will be required to complete BCM's credentialing process before a formal internship offer can be extended. Per BCM policy, the credentialing process involves a criminal history check, health screening, and a reference check.

The TCH Psychology Internship Training Program requires a full-time commitment. Accordingly, any additional outside employment/coursework is discouraged, and rarely permitted. If permitted, it must be pre-approved by the Director of Training.

Stipend and Benefit Support:

Annual Stipend/Salary for Full-time Interns		\$31,000	
Annual Stipend/Salary for Half-time Interns		NA	
Program provides access to medical insurance for intern?	Yes		
Trainee contribution to cost required?	Yes		
Coverage of family member(s) available?	Yes		
Coverage of legally married partner available?	Yes		
Coverage of domestic partner available?	Yes		
Hours of Annual Paid Personal Time Off (PTO and/or Vacation)	2	208*	
Hours of Annual Paid Sick Leave		96	
In the event of medical conditions and/or family needs that require extended leave, does the program allow reasonable unpaid leave to interns/residents in excess of personal time off and sick leave?	Yes		

Other Benefits: In addition to medical insurance, interns have the option to purchase dental and vision benefits for themselves, with the option of adding family members at a standard price. Interns are also entitled to participate in the medical school's Flexible Spending Accounts, 403B tax-deferred investment plan, and BCM Wellness Program. Malpractice insurance is provided. Finally, up to \$450 per year is available for travel to professional conferences if the Intern is the primary author responsible for a presentation at the conference. The intern stipend and benefits are provided by Baylor College of Medicine.

*Note: Paid personal time off is comprised of 7 BCM paid holidays, 4 paid floating time off, and 15 additional paid time off to be used for vacation, personal days, and professional / dissertation release time.

Initial Post-Internship Positions:

	2015-2018	
Total # of interns who were in the 3 cohorts	15	
Total # of interns who did not seek employment because they returned to their doctoral program/are completing doctoral degree	0	
	Post doc	Employed
Community mental health center		
Federally qualified health center		
Independent primary care facility/clinic		
University counseling center		
Veterans Affairs medical center		
Military health center		
Academic health center	15	
Other medical center or hospital		
Psychiatric hospital		
Academic university/department		
Community college or other teaching setting		
Independent research institution		
Correctional facility		
School district/system	·	
Independent practice setting		

Not currently employed	
Changed to another field	
Other	
Unknown	

The majority of our intern graduates go on to pursue post-doctoral fellowship training in academic medical centers and children's hospitals including: Baylor College of Medicine/Texas Children's Hospital, Boston Children's Hospital, Children's Hospital of Philadelphia, Kennedy Krieger Institute, Cincinnati Children's, Children's National Medical Center, Nationwide Children's, UCLA, Children's Hospital of Orange County, Children's Healthcare of Atlanta Pediatric Hospital, St. Louis Children's Hospital, Riley Children's Hospital, Children's Medical Center Dallas, Dell Children's Hospital, McLean OCI, Medical College of Wisconsin, University of Miami, Oregon Health Sciences Center, University of Oklahoma Health Sciences Center. Additionally, some of our intern graduates have pursued post-doctoral research fellowships in university settings (e.g., Harvard University, Temple University) or transitioned from internship directly into faculty positions (e.g., University of New Orleans).

Opportunities for Post-Doctoral Training

The Psychology Section also offers post-doctoral fellowship training. Postdoctoral training typically involves focused training within one of the Psychology Service clinical programs, with opportunities for adjunct clinical experiences in other programs. Potential postdoctoral options include specialization through the following programs: 1) Pediatric Neuropsychology; 2) Pediatric Health Psychology; 3) OCD & Anxiety Disorders; 4) Preschool; and 5) Trauma and Grief.

Postdoctoral training in Pediatric Neuropsychology is a two-year residency, with the program being a member of the Association of Postdoctoral Programs in Clinical Neuropsychology (APPCN).

The Pediatric Neuropsychology and Pediatric / Clinical Child Psychology Post-Doctoral Fellowships are academic programs offered through Baylor College of Medicine's Psychology Section within the Department of Pediatrics. www.bcm.edu/pediatrics/psychology



Houston and the Texas Medical Center Community



The Texas Medical Center (TMC) is a 1,000-acre complex comprised of 47 independent institutions, including 21 renowned hospitals and two specialty institutions, three medical schools, six nursing schools, and schools of dentistry, public health, pharmacy, and virtually all health-related careers. The TMC institutions are joined in their common dedication to the highest standards of patient and preventative care, research, and education as well as local, national, and international community well-being.

Recent census data show that the greater <u>Houston</u> area contains over 5.5 million inhabitants, making Houston the 4th largest U.S. city. This population base includes a wide variety of racial and ethnic groups that give Houston a rich diversity and cosmopolitan feel. Thirty-seven percent are 24 or younger, and 32 percent are between ages 25-44. Houston is an international city that is a leader in the arts, education, and health care. Unlike most big cities, Houston offers a very affordable cost of living. The cost of living and housing costs in Houston are 19 and 38 percent below the average for areas with more than 2 million people, respectively.

Houston offers a wide range of cultural and recreational activities. Cultural attractions in the city include numerous museums and a thriving theater district. In fact, Houston is one of only a few U.S. cities with permanent ballet, opera, symphony, and theater companies performing year-round, and Houston is second only to New York's Broadway theater district for number of theater seats (nearly 10,000) in a concentrated downtown area. Nightlife is alive and well in downtown Houston and in many other areas of town. If you're into sports, Houston is home to numerous professional teams including the Texans, Astros, Rockets, Comets, Aeros, and the Dynamo

soccer team. If you want to play, the greater Houston area offers almost all sporting and hobby interests, including tennis, golf, water sports, cycling, and running. The city maintains more than 350 municipal parks and 200 open spaces. There are 53 parks and public spaces located in downtown alone! In addition, the city provides seven golf courses and operates a modern



zoological garden for public use. Houston is considered to have one of the best culinary scenes in the country, boasting over 11,000 restaurants.

So what about that heat? Yes, the summers are hot, but there's plenty of air conditioning, and there are water activities to beat the heat. And the upside is that winters are mild and virtually carefree, since snowfall and ice are rare. Temperatures range between a low of 32 degrees (20 days per year) and a high of 90 degrees (95 days per year). With an average temperature year-round of 68 degrees and average rainfall of 46 inches, you can enjoy outdoors as much as you'd like to.

Houston Highlights

- Ranks among
 Kiplinger's 10 Best
 Cities for Young
 Adults (2010)
- Low cost of living and affordable housing
- No state or local income taxes
- Multicultural population of more than 5.5 million in the metropolitan area 3rd largest Hispanic and 3rd largest Mexican populations in the US
- More than 40 colleges, universities, and institutes
- Average temperature of 68 degrees
- Permanent <u>ballet</u>, <u>opera</u>, <u>symphony</u>, and <u>theater</u> companies and a 19 institution museum district
- An "urban forest" with 350 parks and more than 200 green spaces
- NASA's Johnson

Internship Program Training Faculty

Marni E. Axelrad, PhD, ABPP (SUNY Binghamton), Professor of Pediatrics, Clinical Child Psychologist; Coordinator of Preschool Program; Clinical Director Clinical/Pediatric Psychology Program. Prevention of disruptive behavior disorders in young children, short term relationship/behavior consultation with families with young children, behavioral intervention for preschoolers treated in the Cancer Center, ADHD assessment, psychosocial assessment and treatment of children with Disorders of Sexual Differentiation, and assessment in Costello Syndrome.





Kelly Banneyer, Ph.D. (University of Texas at Austin), Assistant Professor of Pediatrics. Clinical interests: Diagnostic assessment and treatment of anxiety and obsessive compulsive disorders in preschoolers, school-age children, and adolescents via evidence-based practices; Diagnostic assessment of attention-deficit/hyperactivity disorder in school-age children.

Leandra Berry, Ph.D. (University of Connecticut), Assistant Professor of Pediatrics, Pediatric Neuropsychologist; Associate Director of Clinical Services for the Autism Center. Evidence-based diagnostic, developmental, and neuropsychological assessment of children at risk for or diagnosed with Autism Spectrum Disorder (ASD); provision of general outpatient neuropsychological services; evidence-based treatment of ASD and commonly occurring comorbidities. Research interests include early identification and diagnosis of ASD, clinical phenotyping, evidence-based treatment, and factors associated with treatment outcome.





Liza Bonin, PhD (University of Texas at Austin), Associate Professor of Pediatrics, Clinical Psychologist; Director of Psychology Internship Training Program – Assessment and treatment of anxiety disorders via evidence-based practices, with focus on evaluation and treatment of pediatric obsessive compulsive disorder and health anxiety. Foci also include professional development/clinical training and quality improvement.

Douglas Bloom, PhD (University of Houston), Assistant Professor of Pediatrics. Neuropsychological assessment and consultation of pediatric brain dysfunction; assessment and treatment of learning disorders; AD/HD; systemic lupus erythematosus, traumatic brain injury, neurofibromatosis, hydrocephalus.





Ashley Butler, PhD (University of Florida), Assistant Professor of Pediatrics. Clinical interests: assessment and treatment of preschool- and school-age disruptive behavior disorders and ADHD; integrated behavioral health care in primary care settings. Research interests: outcomes of behavioral health care in non-specialty settings; racial/ethnic minority parent access to and engagement in young child behavioral health care; interventions to improve outcomes of behavioral health care among minority children and families

Stephanie Chapman, Ph.D. (University of Houston), Assistant Professor of Pediatrics, Clinical Team Lead – TCHP's The Center for Women and Children. Clinical interests: preschool and school-age disruptive behaviors, primary care psychology, pediatric health psychology, maternal behavioral health, and improving access of behavioral health for historically underserved communities.





Ginger Depp Cline, PhD, ABPP (University of Kentucky), Assistant Professor of Pediatrics – Pediatric Health Psychology and Primary Care Psychology; psychosocial adjustment and CBT for children/adolescents with health conditions (injuries, diabetes, cancer, HIV/AIDS, etc.); pediatric medical traumatic stress and injuries; primary care diagnostic evaluations.

Katherine E. Cutitta, Ph.D. (East Carolina University), Assistant Professor of Pediatrics, Clinical Psychologist. Evidence-based cognitive and behavioral interventions for management of congenital heart disease and cardiovascular disease, particularly illness adjustment and coping, activity limitations/ re-engagement, difficulties with treatment adherence, transplant and medical device evaluations, as well as cardiac related depression and anxiety in children and adults with cardiac conditions.





Danita Czyzewski, Ph.D. (Purdue University), Assistant Professor of Pediatrics, Pediatric Psychologist. Evidence-based treatment related to adjustment, adherence, and treatment of pediatric disorders, especially gastrointestinal disorders including functional abdominal pain, young child feeding disorders, IBD, encopresis; pulmonary disorders including cystic fibrosis, lung transplant; Management of somatic symptom and related disorders. Research interests in irritable bowel syndrome and quality of life related to lung transplant.

Kimberly Davis, Ph.D. (Purdue University), Assistant Professor of Pediatrics, Pediatric Neuropsychologist. Evaluation, consultation, and intervention for children with acute and/or recently acquired neurologic injury. Services provided to children admitted to the inpatient rehabilitation unit (IRU) and across the continuum of care through outpatient follow-up clinics and outpatient neuropsychological evaluation. Research Interests: prediction of outcome following traumatic brain injury and linear modeling for trajectories of brain injury recovery.





Petra A. Duran, Ph.D. (Kent State University), Assistant Professor of Pediatrics. Clinical interests include prevention of disruptive behavior disorders in young children, adaptation of evidence based treatments for Spanish speaking families and underserved populations, increasing multicultural awareness, Provision of behavioral intervention for preschoolers treated in the Cancer Center, and diagnostic assessments and psychosocial assessment and treatment of children from the department of Plastic Surgery.

Karen D. Evankovich, PhD (University of Houston), Assistant Professor of Pediatrics. Pediatric Neuropsychology; Neuropsychological evaluation of children with a wide variety of neurological and neurodevelopmental disorders, ranging in age from early childhood through late adolescence. Special interests include pediatric epilepsy and pediatric demyelinating disorders.





Rachel Fein, Ph.D., BCBA (University of Houston), Assistant Professor of Pediatrics, Clinical Psychologist Clinical interests include evidence-based diagnostic, developmental, and psychological assessment of children at risk for or diagnosed with Autism Spectrum Disorder (ASD), provision of parent management training to families of preschool-aged children with ASD and co-morbid disruptive behaviors, and culturally responsive assessment and treatment. Research interests broadly surround ASD with an emphasis on parent management training for families of children with ASD and comorbid disruptive behaviors.

Katherine A. Gallagher, Ph.D. (University of Kansas), Assistant Professor of Pediatrics, Pediatric Psychologist. Cognitive and behavioral interventions for psychosocial aspects of pediatric diabetes, particularly illness adjustment and coping, diabetes distress and "burnout", diabetes-related family conflict, difficulties with treatment adherence, as well as depression, anxiety, emotion regulation, and behavioral difficulties in youth with diabetes.





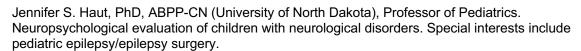
Mary Reeni George, PhD, ABPP/CN (National Institute of Mental Health and Neurosciences, India), Assistant Professor of Pediatrics. Neuropsychological evaluation of children with sickle cell disease, pediatric stroke, complex AD/HD, pediatric brain tumors, leukemia, hydrocephalus and other neuropsychiatric disorders.

Marsha Nortz Gragert, PhD, ABPP/CN (Washington University in St. Louis), Associate Professor of Pediatrics, Director of the Postdoctoral Fellowship in Pediatric Neuropsychology. Neuropsychological evaluation and intervention in pediatric brain tumor patients and other pediatric cancer survivors; school re-entry and educational intervention for children with cancer and other chronic health conditions.





Lynnette L. Harris, PhD (Southern Illinois University at Carbondale), Associate Professor of Pediatrics. Neuropsychological evaluation of chronic medical conditions and their treatments, primarily including patients from neuro-oncology, hematology, and bone marrow transplant, as well as patients with metabolic storage diseases, sickle cell disease, genetic disorders, and HIV/AIDS or other immune dysfunction.







Ryan M. Hill, Ph.D. (Florida International University), Assistant Professor of Pediatrics, Psychologist. Evidence-based assessment and treatment of suicide-related behaviors in children and adolescents, assessment and treatment of traumatized and/or grieving children and adolescents, training in suicide risk assessment, development of interventions to improve the prevention of suicide-related behaviors in school-, healthcare-, and community-based settings

Marisa E Hilliard, PhD (The Catholic University of America), Associate Professor of Pediatrics, Pediatric Psychologist; Research interests: Research interests: Strengths-based assessment and intervention strategies to promote good quality of life, high self-management, and optimal health outcomes of youth and young adults with type 1 diabetes and their families.





Lisa S. Kahalley, PhD (University of Memphis), Associate Professor of Pediatrics. Research interests include: neurocognitive late effects and functional outcomes in pediatric cancer survivors, treatment-related differences in neurocognitive and quality of life outcomes for pediatric brain tumor patients and survivors.

Julie. B. Kaplow, Ph.D., ABPP (Duke University), Associate Professor of Pediatrics, Clinical Child Psychologist, Director of the Trauma and Grief Center and the Harvey Resiliency and Recovery Program. Evidence-based assessment and treatment of traumatized and/or grieving children and adolescents, training in implementation and dissemination of trauma- and bereavement-informed best practices, biological, psychological, and behavioral consequences of childhood trauma and bereavement, with an emphasis on therapeutically modifiable risk factors.





Lisa Noll, PhD (Loyola University), Assistant Professor of Pediatrics. Pediatric health psychology; neuropsychological assessment and consultation; infant consultation and support; intervention with children with chronic illness.

Karin Price, PhD, ABPP (University of Connecticut), Associate Professor of Pediatrics; Clinical Psychologist; Clinic Chief; Evidence-based assessment and treatment of anxiety and mood disorders in children and adolescents; evaluation of ADHD and comorbid conditions; evaluation of adolescent candidates for bariatric surgery; clinical outcome research; research in organizational factors that impact implementation of evidence-based practice.





Kimberly Raghubar, PhD (University of Houston), Assistant Professor of Pediatrics, Duncan Family Scholar in Pediatric Neuropsychology. Neuropsychology consultation and assessment. Research interests include neurocognitive correlates and academic functioning in survivors of pediatric cancer, the role of epigenetic mechanisms on neurocognitive outcomes following treatment for pediatric cancer.

Nicole Schneider, Psy.D. (George Fox University), Assistant Professor of Pediatrics, Clinical Psychologist. Pediatric Health Psychology; pediatric consultation and liaison; adjustment to chronic and acute illness; adherence to medical regimens; adolescent/young adult health psychology; oncology and bone marrow transplant; palliative care.





David Schwartz, PhD, ABPP (University of Delaware), Associate Professor of Pediatrics, Clinical Program Director, Pediatric Neuropsychology. Neuropsychology and pediatric health psychology; psychosocial screening of children with diabetes, solid organ transplant, and other chronic illnesses; adherence to medical regimens; neuropsychological assessment of pediatric cancer (brain tumors, leukemia), diabetes, thyroid disorder, other endocrine disorders, congenital heart disease, renal disease.

Eric A Storch, Ph.D. (Columbia University), Professor of Psychiatry & Behavioral Sciences, Vice Chair and Head of Psychology in Psychiatry and McIngvale Presidential Endowed Chair. Research Interests include cognitive behavioral treatment childhood obsessive compulsive disorder, as well as other obsessive-compulsive spectrum disorders and anxiety disorders. Treatment of anxiety in children with autism spectrum disorders.





Mariella M. Self, Ph.D. (Texas A&M University). Associate Professor of Pediatrics; Director, Pediatric/Clinical Child Psychology Postdoctoral Fellowship Program; Pediatric Psychologist. Inpatient consultation and outpatient psychotherapy to improve medical regimen adherence/self-management, pain or symptom management, and adjustment/functional adaptation for children with chronic illnesses including cardiac conditions and heart transplantation, functional and organic gastrointestinal disorders, medically unexplained physical symptoms, demyelinating disorders, among others.

Gia Washington, PhD, ABPP (Saint Louis University), Assistant Professor of Pediatrics, Clinical Psychologist. Pediatric health psychology; psychosocial adjustment related to sickle cell anemia, gastric bypass, and HIV/AIDS; cultural competence in clinical practice; psychotherapy with adolescents.



Additional Program Supervisors / Contributors

Kristin Adkins, MA, LPA
Charla Clark, MA, LPA
William Guerrero, MA, LPA
Robin Kochel, Ph.D.
Ashley Ney, MA, LPA
Shannon Pray Thornton, MA, LPA
Laura Yaffee, MA, LPA
Stephanie Yudovich, LCSW

Current and Prior Interns – Academic Programs

2019-2020 PSYCHOLOGY INTERNS

Eastern Michigan University
Georgia State University
Illinois Institute of Technology
Temple University
University of Florida

2018-2019 PSYCHOLOGY INTERNS

George Mason University University of Central Florida University of Connecticut University of Houston University of Nevada

2017-2018 PSYCHOLOGY INTERNS

Eastern Michigan University University of Alabama (2) University of Houston University of Memphis

2016-2017 PSYCHOLOGY INTERNS

Rosalind Franklin University of Medicine
University of Cincinnati
University of Florida
University of Houston
University of Wisconsin

2015-2016 PSYCHOLOGY INTERNS

University of Houston
University of Massachusetts
University of Memphis
University of Texas at Austin
University of Windsor

2014-2015 PSYCHOLOGY INTERNS

Auburn University
Brigham Young University
Nova Southeastern University
University of Houston
Virginia Commonwealth University

2013-2014 PSYCHOLOGY INTERNS

Kent State University Loyola University University of Cincinnati University of Houston Virginia Tech University

2012-2013 PSYCHOLOGY INTERNS

Carlos Albizu University
Marquette University
Jackson State University
University of Florida
Virginia Commonwealth University

2011-2012 PSYCHOLOGY INTERNS

Southern Illinois University
Texas Tech University
University of Houston
University of Miami
University of Tennessee

2010-2011 PSYCHOLOGY INTERNS

Southern Methodist University University of Houston University of New Mexico University of South Florida University of Texas at Austin

2009-2010 PSYCHOLOGY INTERNS

American University
Kent State University
Purdue University
University of Cincinnati
University of Texas at Austin

2008-2009 PSYCHOLOGY INTERNS

Michigan State University
Purdue University
University of Connecticut
University of Florida
University of Houston

2007-2008 PSYCHOLOGY INTERNS

Indiana University/Purdue Michigan State University University of Cincinnati University of Texas at Austin University of Wisconsin

2006-2007 PSYCHOLOGY INTERNS

Brigham Young University University of Kentucky University of North Carolina

2005-2006 PSYCHOLOGY INTERNS

Texas A & M University University of Houston University of Minnesota