RIKERS ISLAND MENTAL HEALTH SERVICES NYC HEALTH + HOSPITALS CORRECTIONAL HEALTH SERVICES

PREDOCTORAL INTERNSHIP TRAINING IN CLINICAL PSYCHOLOGY

2018-2019 TRAINING BROCHURE

Rikers Island Mental Health Services New York City Health and Hospitals Correctional Health Services 16-06 Hazen Street East Elmhurst, NY 11370

Dear Internship Applicant,

Thank you for your interest in Rikers Island Mental Health Services Predoctoral Psychology Internship training program with Correctional Health Services/New York City Health and Hospitals. The internship training program is actively pursuing participation in the Association of Psychology Postdoctoral and Internship Centers (APPIC) Match Program.

On January 1, 2016, the Division of Correctional Health Services started providing mental health and medical services under New York City Health and Hospitals to individuals incarcerated in Rikers Island and the boroughs detention facilities. New York City Health and Hospitals is the largest municipal healthcare system in the country and the New York City jail system is the second largest in the nation.

We offer two one-year, full-time predoctoral psychology internship positions, each divided into three clinical rotations with two four-month mandatory rotations in specialty units: one elective rotation based on intern's interest and a year-round placement in General Population to conduct long-term therapy. Interns will also be assigned testing cases throughout the year. This training brochure contains detailed description of the services, our training program, and requirements. The application deadline is November 27th, 2017.

In addition to the APPIC online application, we also require you to include in the application materials in the Supplemental Section a copy of recent psychological assessment, including cognitive and personality measures, with all the identifying information removed, that will present your current level of competence at testing and evaluation.

Thank you again for your interest in our training program. If you have any questions, please contact me.

Sincerely,

Hung-Yi Cindy Ho, Psy.D. Director of Student Education 347-774-7778

Email: hoh7@nychhc.org

2018-2019

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INTRODUCTION

The New York City jail system is the second largest in the nation, with approximately 10,000 individuals aged 16 years and older incarcerated at any given time in 12 facilities (9 facilities on Rikers Island and 3 borough jails). Approximately 55,000 patients move through the system every year with 89% males and 11% females in the jail population (NYC Health + Hospitals, 2016). The population is racially diverse with 54% non-Hispanics blacks, 33% Hispanics, and 9% non-Hispanic white (NYC H+H). 43% of the population receives mental health services, 11% are diagnosed with a severe mental illness and 48% report substance abuse upon admission (2016).

In January 2016, the Division of Correctional Health Services (CHS) of the New York City Health and Hospitals (H + H) assumed the inmates' healthcare services in Rikers Island Correctional Facilities. The psychiatric service strives to provide safe, holistic and evidence-based therapeutic interventions for the diverse range of mental health issues that face the population, from serious mental illness to the natural struggles that accompany incarceration. The service provides some of the most comprehensive and unique treatment modalities in the country, including specialty housing units for individuals with serious mental illness, a 24-hour on-call psychiatric service, robust creative arts programming, a strong DBT training program, clinics in each of the facilities, substance use treatment, integrated re-entry services, and relationships with multiple training institutions throughout the city.

The Predoctoral Psychology Internship Program through CHS/NYC Health and Hospitals offers different clinical rotations that provide opportunities to work on specialized units that serve male and female patients who present with a vast range of psychopathology and who are at different stages of justice involvement.

TRAINING OBJECTIVES AND GOALS

The Predoctoral Psychology Internship Program utilizes the scholar-practitioner model that integrates science with practice. The program focuses on training students to be competent practitioners to perform typical entry-level responsibilities as psychologists in diagnoses and treatment, especially for those who are interested in working in a correctional setting.

The main goal of the Psychology Internship Program is to train interns for the competent and ethical practice of professional psychology, foster, nurture and promote the professional development of a psychological practitioner with the skills to be a competent provider of psychological services in a culturally diverse correctional setting, and prepare interns for entry level practice. Over the course of the internship year, interns will receive training via didactics/seminar presentations, supervision, and direct patient care toward the achievement of the following training goals: Professional competency in conducting initial diagnostic assessments with an emphasis on suicide risk assessment, determining level of care based on clinical needs, developing and modifying behavioral treatment plans as needed, crisis management, violence reduction, psychological assessment, psychotherapy in a variety of modalities for various psychopathologies and clinical documentation. These goals are achieved through the trainees' closely supervised experiences in a variety of clinical rotations and didactic experiences designed to broaden and strengthen their theoretical and clinical foundations.

APPLICATION AND APPOINTMENT

Rikers Island Mental Health Services/NYC H+H Correctional Health Services Psychology Internship Program accepts two interns per year. Appointments are for a one-year period, beginning on the Tuesday after Labor Day and ending on August 31. Application deadline is November 27th, 2017.

REQUIREMNTS

There is no residency or US citizenship requirement for applicants. Applicants must be matriculated doctoral candidates enrolled in APA approved programs in good standing, with all the coursework completed and dissertation proposal defended by the start of the internship. Applicants should be familiar with DSM-5 classifications and coding of major mental illness. Understanding differential diagnoses is crucial on all rotations.

ACCREDITATION

At the time of this brochure, Rikers Island Mental Health Services/NYC Health + Hospital Correctional Health Service is working towards participating in APPIC by September 2017. This internship is not APA approved.

GENERAL PROGRAM FEATURES

Goals and Objectives for Intern Performance and Competencies

Our internship training program expects our interns to achieve the following goals that are necessary skills to perform typical tasks required in professional psychology: acquisition of professional skills in the areas of psychological assessment, psychological treatment in clinical setting, development of beginning skills in leadership, management, consultation, education and supervision, professional competency in issues of cultural and individual diversity and maintenance of appropriate levels of professional conduct and ethical behaviors. Interns will receive written evaluation assessing the aforementioned goals at the end of each rotation. Additionally, interns will receive mid-year and end-of-year written evaluations from interns' respective academic programs. Evaluations are based on a combination of individual supervision, direct supervision, written materials such as electronic documentation, case presentation, and testing reports. All evaluations are reviewed by and discussed with the Director of Training. At least 25% of interns' time is in face-to-face psychological services to patients/clients.

Supervision

Regularly scheduled individual supervision is provided by one or more doctoral level licensed psychologists, at a ratio of no less than one hour of supervision for every 20 internship hours. Supervision is provided with the specific intent of dealing with psychological services rendered directly by the intern and professional growth. Since the internship is full time at 40 hours/week, the intern will receive at least 3 hours of supervision each week; the intern will be supervised by the clinical supervisor in the clinical rotation unit, by a clinical supervisor for the year-round General Population placement (long term psychotherapy patients), and by the Director of Psychological Assessment for the year-round

assessment placement. The training staff represent a wide range of theoretical orientations ranging from psychoanalytic, interpersonal, cognitive-behavioral to integrative.

Intern Support Group

In order to provide additional support to the interns' professional growth throughout the training year, interns are required to attend a weekly intern support group to explore, discuss and process issues related to clinical practice and get to know each other better. The intern support group will be facilitated by a psychologist who maintains no supervisory contact with the interns.

ROTATIONS AND RESPONSIBILITIES

The one-year internship is divided into three, four-month rotations. The intern will spend three full days of each week at a given rotation site for four months with two other full days conducting long-term therapy with individual patients in General Population and working on psychological testing assignments. be assigned assessment cases. The first two rotations are required with the last rotation being the choice of the intern in consultation with the internship director during the orientation process in September.

Mandatory Rotations

AMKC Intake Unit/Suicide Assessment Unit

The first required rotation at AMKC Intake Unit will expose interns to a high-paced environment similar to emergency room. AMKC is a 24/7 intake unit which services inmates who are new arrivals at Rikers Island with mental health and medical services available around the clock. Students will conduct intake mental health assessments with a focus on diagnostic evaluation, risk assessment and determination of required levels of clinical care. This rotation serves as a gateway at the island and will expose interns to a wide range of psychopathology. AMKC also provides Methadone treatment to those individuals who are detoxing. The interns will also conduct daily suicide risk assessment with patients who are placed on suicide watch on the specialized unit under the supervision of the Senior Clinical Supervisor.

GRVC 730 Return Unit

GRVC 730 Return Unit is a 25-bed unit for patients returning from State hospital who are pre-identified as high risk for psychiatric decompensation. These patients have been found incompetent to stand trial at least once. Often these r patients are diagnosed with a Serious Mental Illness (SMI) and have a history of treatment noncompliance and multiple admissions to either Kirby Forensic Psychiatric Center or Mid-Hudson Forensic Psychiatric Center for fitness restoration. On PACE 730, doctoral-level students have the opportunity to carry a caseload of individual therapy patients and run groups with a focus on fitness restoration maintenance, CBT for psychosis, Substance Recovery and Motivational Interviewing.. Students also play an active role on the multidisciplinary treatment team which is made up of a Psychologist, Psychiatrist, Psychiatric Nurse Practitioner, Mental Health Clinicians, Mental Health Treatment Aide Supervisors, Mental Health Treatment Aides, Creative Arts Therapist, Discharge Planning Social Worker, and Forensic Case Managers.



Year Long Placement

General Population

In order to provide training in competency conducting long-term therapy, the intern will be assigned patients in the General Population in various facilities to follow throughout the internship year. While these patients are typically high functioning and more psychiatrically stable, they also present with a wide range of diagnoses and receive psychotropic medications. At times, change in level of care might be clinically indicated, interns will be trained to assess such need and discuss it with the clinical supervisor.

Assessment

Psychological assessment referrals can be initiated in any facility on the island. Interns will be assigned to address these referrals, select appropriate testing instruments, administer appropriately selected tests, analyze and integrate the results and made treatment recommendations in the integrated report. All services will be performed under the supervision of Director of Psychological Assessment. CHS has access to a wide range of psychological testing tools.

One Elective Rotation

AMKC PACE Assessment Unit (PAU)

Placement at AMKC PACE (Program for Accelerated Clinical Effectiveness) Assessment Unit will expose interns to psychological assessment to address specific referral questions made by mental health providers. AMKC PAU is an 18-bed unit located in AMKC specifically for patients who are in need of psychological assessment with the purpose of clarifying diagnoses, identifying intellectual or cognitive impairments, and making treatment plan recommendations based on testing results. Through the provision of intensive assessment and treatment in a tailored therapeutic milieu, the PACE unit is designed to encourage adherence to treatment and jail rules for patients who struggle to function adequately while incarcerated due to chronic mental illness, risk of acute psychiatric decompensation, and/or behavioral disruption. Psychological testing includes personality, intellectual functioning, neurocognitive, and functional abilities.

GMDC Young Adults Mental Observation Unit (MOU)

GMDC Mental Observation Units (MOU) are mental health treatment units (one dorm area, Dorm 4, and one cell area with two sides, 4 Main A and 4 Main B) that integrates trauma-focused psychodynamic, relational, cognitive-behavioral, and systems theories within a multicultural framework and tailors treatment to meet the individual mental health needs of our patients. Patients are males aged 18 through 21. Patients who are transferred to the MO have demonstrated psychiatric instability that requires a higher level of care than can be provided in General Population (GP). There is no specific referral process for the MO, but patients must be transferred by a health (medical or mental health) provider. Thus, patients on the MO have been transferred from our GP population either upon intake evaluation or at any point throughout their incarceration, or transferred from MO units in other buildings due to their age. Patients are required to attend weekly individual therapy and medication management if

prescribed medication. They are also encouraged to attend daily creative art therapy (either music or art) and weekly psychotherapy groups. In addition to weekly individual supervision provided by the clinical supervisor, the clinical team meets weekly for a treatment team meeting. Externs placed on this unit are expected to carry a small caseload of individual patients for whom they conduct diagnostic interviews and provide diagnostic formulations used to create individualized treatment plans to guide weekly psychotherapy. Externs will also be expected to complete all necessary documentation. Externs may also co-lead psychotherapy groups (with an opportunity to lead independently depending on experience level), as well as be an active participant in the weekly team meeting and consult with DOC as needed.

RMSC Mental Observation Unit (MOU)

RMSC mental observation units are 90-bed (45 beds/unit) units that provide enhanced mental health services for patients with serious mental illness. Treatment includes daily clinical rounds and group therapy, art therapy 2-3 times per week, and weekly individual therapy. Patients who require suicide watch are housed on the MO units and seen twice a day to assess risk and need for suicide watch. A Level System is utilized to reinforce treatment compliance. Various treatment modalities are utilized, including, DBT, CBT for Psychosis, Motivational Enhancement Therapy, and trauma informed treatment. The MO team engages in daily case conferences. The MO team works closely with the Elmhurst Hospital Prison Ward clinical team to refer patients for inpatient hospitalization when a higher level of care is indicated, as well as providing continuity of care when patients are discharged from the hospital to Rikers Island. Externs are an integral part of the MO team and are expected to have a caseload of individual patients, assist in crisis intervention, conduct group therapy, and complete psychological assessment for differential diagnosis.

Presentations

Interns are required to present their doctoral dissertations at the end of the year at Grand Rounds and a patient's treatment progress, including a discussion on ethical issues, at the monthly Clinical Supervisors' meeting.

For the elective rotation, interns can choose from a variety of specialized units to gain experiences in different levels of functioning, gender, and clinical presentation.

In addition, interns attend a variety of lectures and other didactic programs throughout the year. In an effort to provide additional support, interns will also attend a weekly support group. Participation in this group may or may not entail the disclosure of personal information. This group will be process-orientated and led by a clinical psychologist who does not have supervisory relationship with the interns.

ADMINISTRATIVE ASSISSTANCE, RESOURCES AND SUPPORT

Interns will have computers and printers on the rotation units, access to photocopy machine in the facilities. All interns have individual email accounts as well as access to the Internet as permitted by NYC Health + Hospitals. Although interns will have access to phone, there are no individual phone number or voicemails for the interns. Interns are trained in and provided with access to the electronic medical record system (eCW). Interns will have

electronic access to peer-reviewed journals, books, collections, news in psychiatry and articles stored in the institutional share drive.

CONFERENCES, SEMINARS AND DIDACTICS

The psychologists who provide weekly supervision to the interns serve as Clinical Supervisors in all of the specialty units. In addition to individual supervision, didactics will be offered weekly by facility. Other training activities include Orientation Workshops, weekly Journal Club, where a research article relevant to correctional mental health is discussed, monthly Grand Rounds where outside speakers are invited to present on topics relevant to forensic and correctional psychology, and Crisis Intervention Team (CIT) training. Interns also participate in bi-weekly yearlong psychological assessment seminar alternating with diversity seminar.

RESEARCH

Interns are required to present their doctoral dissertations at the end of the year at Grand Rounds, and a chosen patient's treatment progress, including a discussion on ethical issues, at the monthly Clinical Supervisors' meeting. There is currently no research opportunity.

STIPEND AND BENEFITS

The two intern positions are full-time funded with \$25,000 each. Interns are entitled to the 11 public holidays (New Year's Day, Martin Luther King Jr.'s Birthday, Presidents' Day, Memorial Day, Independence Day, Labor Day, Columbus Day, Election Day, Veterans' day, Thanksgiving Day and Christmas Day) and will accrue vacation time and sick time. Interns will choose a health care plan at the beginning of the training year.

CURRENT STAFF

Internship Training Committee

Virginia Barber-Rioja, Ph.D. Clinical Director. CUNY John Jay College of Criminal Justice, New York, 2009.

- Hung-Yi Cindy Ho, Psy.D. Director of Student Training & Clinical Supervisor at GRVC Restrictive Housing Unit (RHU). The Chicago School of Professional Psychology, Chicago, 2008.
- Alexandra Garcia-Mansilla, Ph.D. Director of Psychological Assessment. Fordham University, New York, 2010.
- Virginia Finneran, Ph.D. Senior Clinical Supervisor at AMKC. CUNY John Jay College of Criminal Justice, New York.
- Marilyn Chen, Ph.D. Clinical Supervisor at GRVC 730 unit. St. John's University, New York, 2010.

- Kristy MaGee, Psy.D. Clinical Supervisor at RMSC Mental Observation Unit (MOU). Pace University, New York, 2016.
- Roman Maslovskiy, Ph.D. Clinical Supervisor at AMKC intake unit. Alliant International University, California, 2010.
- Erin Weinstein, Ph.D. Clinical Supervisor at GMDC Mental Observation Unit (MOU). Fairleigh Dickenson University, New Jersey, 2016.
- Erin Williams, Ph.D. Clinical Supervisor at AMKC Clinical Alternative to Punitive Segregation (CAPS). John Jay College of Criminal Justice, New York, 2015.
- Shanah Segal, Psy.D. Clinical Supervisor at AMKC PACE Assessment Unit. University of Hartford, Connecticut, 2016.

Clinical Supervisors

Brian Belfi, Psy.D. Clinical Supervisor at RMSC. Albizu University, Miami, 2002.

Patty Carambot, Ph.D. Clinical Supervisor at OBCC. John Jay College of Criminal Justice, 2016.

Bryan Fallon, Ph.D. Clinical Supervisor at RMSC. New School for Social Research, New York, 1995Nikol

Andrea Grant, Psy.D. Clinical Supervisor at RNDC. New York University, New York, 1997.

Andiea Harris, Ph.D. Clinical Supervisor at AMKC/GRVC. New School for Social Research, New York, 1995.

Jennifer Jones, Psy.D., LPC. Clinical Supervisor at GMDC TRU. Rutgers Graduate School of Applied and Professional Psychology, New Jersey, 2013.

David Jurich, Ph.D. Clinical Supervisor at BKDC. New School University, New York, 2005.

Jaclyn Koch, Ph.D. Clinical Supervisor at RMSC. Hofstra University, New York, 2010.

Beth LaGrange, Ph.D. Clinical Supervisor at AMKC. Vanderbilt University, Tennessee, 2008.

Lindsay Mathews, Ph.D. Clinical Supervisor at RMSC CAPS/PACE. CUNY John Jay College of Criminal Justice, New York, 2016.

Patrick McCauley, Ph.D. Clinical Supervisor at GRVC MOU. Capella University, 2015.

- Ming Ng, Psy.D. Clinical Supervisor at EMTC. Yeshiva University Ferkauf Graduate School of Psychology, New York, 1999.
- Michelle Pavony, Ph.D. Clinical Supervisor at AMKC PACE HSU. Binghamton University, New York, 2013.
- Brickell Quarles, Ph.D., M.S. (Biology). M.S. (Theology). Clinical Supervisor at RNDC. Fuller Theological Seminary, California, 2003.
- Maria Rivera, Ph.D., M.S. (Biostatistics) Clinical Supervisor at OBCC Intake/General Population (GP). City University of New Year Graduate Center, New York, 1994.
- Janet Sendar, Psy.D. Clinical Supervisor at VCBC. Yeshiva University Ferkauf Graduate School of Psychology, New York, 1992.
- Giuseppe Sottile, Ph.D. Clinical Supervisor at AMKC. Walden University, 2011.
- Nikol Stancato, Psy.D. Clinical Supervisor at GRVC PACE Acute Care Unit (ACU). American School of Professional Psychology at Argosy University, Phoenix, 2010.

TRAVEL INSTRUCTIONS

Directions to Rikers Island by Car:

- Enter "Rikers Island Bridge" in Google map or navigation system of your choice. When you are near, you will see the blue and orange Rikers Island sign on your left and a parking lot on your right on Hazen street. Please park your car in this lot, leave your cellphone in the car and board the Q100 Limited Rikers Island Long Island City bus at the bus stop in front of the parking lot to Sam Perry Control Building ("Perry Building.")
- Perry Building will be your first stop on the island where you will exchange for a visitor's ID with a government issued ID and your school ID. Proceed through the security clearance and board Route Bus to your assigned facility.

Directions to Rikers Island by Public Transportation:

- Q100 Limited Rikers Island Long Island City is the only bus to Rikers Island. It will take you across the Rikers Island bridge to Sam Perry Control Building ("Perry Building.")
- Perry Building will be your first stop on the island where you will exchange for a visitors ID with a government issued ID and your school ID. Proceed through the security clearance and board Route Bus to your assigned facility.
- Board Route Bus 3 to West Facility. Once clearing the security at West Facility, make a right to Correctional Health Services trailer.

Orientation Workshops

Please note, orientation workshops will meet in West Facility on Wednesday 9am-10am unless otherwise noted.

Topic	Presenter	Date
Overview of criminal justice system	Dr. Virginia Barber	9/6/17
Rikers Island & various services on the island	Dr. Roman Maslovskiy	9/13/17
Dual loyalty, Confidentiality, Forensic ethics/HIPPA in correctional setting	Dr. Anthony Waters	9/20/17
Collateral information	Dr. Alexandra Garcia	9/27/17
Department of Correction	DOC	10/4/17
Gang intelligence and safety	DOC	10/11/17
CIRT program & alternative to incarceration (ATI)	Dr. Barber and Ms. Solimo	10/18/17
Discharge planning & AOT	Mr. Collins + Ms. Solimo	10/25/17
LGBTQ Issues in Correctional Setting	Mr. Mohammad Jaffer	11/1/17

Didactics and Seminars

Please note, didactics will meet in West Facility on Wednesday 10am – 11am unless otherwise noted.

Topic	Presenter	Date
Documentation requirements on eCW	TBD	9/6/17
Review of mandatory reporting policies	Dr. Erin Weinstein	9/13/17
Clinical interviewing x 4 sessions	Dr. Maria Rivera	9/20/17, 9/27/17, 10/4/17, 10/11/17
Psychopharmacology x 2 sessions	Dr. Robert Roy	10/18/17, 10/25/17
730 evaluation	Dr. Marilyn Chen	11/1/17
Hospitalization assessment & BHPW	Dr. Marilyn Chen	11/8/17
Suicidal risk assessment	Dr. Roman Maslovskiy	11/15/17
Violence risk assessment	Dr. Virginia Barber	11/29/17
Verbal de-escalation	Dr. Anthony Waters	12/6/17
Treatment of non-suicidal self-injury (NSSI)	Dr. Virginia Finneran	12/13/17
DBT and DBT in correctional setting	Dr. Cindy Ho	1/10/18,1/17/18,1/24/18
Malingering	Dr. Raymond Poggioli	1/31/18
Trauma x 3 sessions	Dr. Jennifer Jones	2/7/18, 2/14/18, 2/21/18
Dual diagnosis/Co-occurring disorders x 3 sessions	Dr. Patty Carambot	2/28/18, 3/7/18, 3/14/18
Self-care	Dr. Beth LaGrange	3/21/18
Supervision	Dr. Cindy Ho	3/28/18

Testing and Diversity Seminars

Please note, seminars will meet in West Facility on Wednesday 11am – 12pm unless otherwise noted.

• Testing and diversity seminar will alternative throughout the year:

Testing seminar will be led by Dr. Garcia

Diversity seminar will be led by Dr. Ho & Dr. Rivera