



**INFORMATION for the
INTERNSHIP IN HEALTH SERVICE
PSYCHOLOGY**

Table of Contents

Description of Facility and Training Program	2
About The Region	3
Supervisor Profiles	3
Program Aims and Values	6
Structure of the Program	6
Clinical Experiences	6
Supervision	7
Didactic Training	9
Additional Didactics	9
Evaluation	10
Successful Completion of the Program	11
Internship Logistics and Information	11
Application Requirements and Interview Process	11
Compensation, Time Off, Hours Worked	12
Due Process and Grievance Policies	13

Description of Facility and Training Program

Northwest Neurobehavioral Health, LLC is a multidisciplinary clinic in Meridian, ID (a suburb of Boise). We serve a wide range of individuals from a very extended geographical range. Our reputation in the community is predominantly for work with neurodiverse individuals and their families (people with autism spectrum disorders, neurological conditions, etc.). However, we are a generalist practice and see individuals dealing with depression, anxiety, mood disorders, behavior disorders, OCD, etc. Full-time practitioners typically have their own offices and are supported by a full administrative staff. Psychology staff include psychologists, neuropsychologists, licensed clinical professional counselors and licensed clinical social workers. Our multidisciplinary clinic also offers medication management, occupational therapy, and speech/language therapy services.

The clinic has 30+ clinical offices, an occupational therapy gym, conference rooms for larger and smaller meetings and trainings, a lobby with a front office space and a back office space for our administrative staff, and a kitchen and bathrooms for staff use. Clerical and administrative support for interns is the same as for clinical staff and includes reception, scheduling, billing/insurance staff who interface with our contracted billing service who also help with credentialing, and our Business Operations Manager who also manages payroll and HR.

Equipment available to interns will include technology and support (computers with necessary business software, phone, copiers etc.). Clinical equipment will include furnished office space for administrative and clinical work, a broad array of testing equipment and measures (multiple cognitive, executive functioning, memory, academic and other measures, as well as access to online administration and scoring of some measures), sterilization equipment for testing materials, hand sanitizer dispensers in various locations throughout the building, etc.

The primary purpose of the Internship in Health Service Psychology at NNH is to provide both breadth and depth of training via exposure to and immersion in a variety of clinical experiences. Interns will receive training and clinical experience in a broad array of treatments and assessments and will work with many fellow professionals in the field. An individual supervisor will remain consistent throughout the year. However, interns will receive rotating secondary individual supervision, will participate in group supervision, and group didactics weekly. This provides exposure to a variety of approaches and theoretical orientations. Interns are expected to conduct individual and family therapy, individual psychological assessment, and to participate as a member of the team in multidisciplinary diagnostic assessment clinics. Exposure to an array of evidence-based treatment modalities for specific conditions such as autism spectrum disorders, obsessive compulsive disorder, trichotillomania, etc. will be part of the training. Interns will also participate in program development, and will present capstone education trainings to the staff on a clinical topic of their choosing. Elective opportunities are also available for exposure to group psychotherapy, participating in research, and community outreach.

About The Region: Boise and its surrounding areas frequently make top ten lists for livability. <http://www.bvep.org/facts/national-accolades.aspx> Meridian itself was named USA Today's 2015 "#1 Best City to Live In." The weather is generally temperate and experiences all four seasons. The Treasure Valley is considered "high desert," but also has tree-lined rivers with an extensive Greenbelt for running, biking, floating the river in summer, etc. There are many trails (some within five minutes of downtown Boise) for hiking, trail running, mountain biking, and off-leash dog walking. Within one to three hours' drive, there are several ski areas (Bogus Basin, Tamarack, Brundage and Sun Valley). There are great opportunities for kayaking, whitewater rafting, ziplining and other outdoor recreation. The town also has an active music scene, including Treefort Music Festival, free weekly concerts downtown at Alive After 5 on Wednesdays, as well as small and medium venues for touring bands. Sports lovers will find plenty of opportunities to cheer on Boise State Broncos, Idaho Steelheads hockey and Boise Hawks baseball.

Supervisor Profiles

Primary and secondary supervisors at NNH represent a variety of experience, clinical specialties, theoretical orientations, and supervisory styles. The overall internship is designed to be developmental in nature, but individual supervisors may operate from a variety of stances, including psychodynamic, cognitive-behavioral, systems-based, etc.

Carolyn Golden, PsyD: Director of Internship Training

Dr. Carolyn Golden graduated with a PsyD in clinical psychology, with an emphasis in family therapy, in 2005 from the Illinois School of Professional Psychology in Chicago, IL. While in Chicago, she worked with the Deaf and Hard of Hearing population in residential and inpatient settings. She also completed a therapy practicum at a day school specializing in adolescents with mood disorders and autism spectrum disorders. Dr. Golden came to Boise in 2004 for her doctoral internship, and has since made her home in the community.

Dr. Golden is a licensed psychologist in Idaho and conducts therapy and psychological assessment at NNH. She is also the Director of Internship Training. She has supervised doctoral interns, post-doctoral residents, doctoral practicum students and master's level counselors and family therapists. She is also adjunct faculty at Boise State University, and teaches courses on the Psychology of Gender, a special topics course on the Psychology of Belief, and Research Methods. She specializes in the family-based treatment of anxiety disorders, OCD, autism spectrum disorders and mood disorders. She also works individually with adolescents and adults and conducts psychological assessments with an array of clients. Dr. Golden utilizes evidence-informed practices such as Exposure with Response Prevention (ERP) for OCD, Acceptance and

Commitment Therapy (ACT), Child Parent Relationship Therapy (CPRT) as well as more process-based systems and family intervention. Dr. Golden has also worked on research which took place at NNH regarding the neuropsychological impacts of prenatal methamphetamine exposure. In her off time, she enjoys reading, continuing to learn, travel and flat-water kayaking.

Jeffrey D. Hall, PhD: Supervising Psychologist/Managing Partner of NNH

Dr. Jeffrey Hall completed his undergraduate education at Northwest Nazarene University. He received his master's and doctoral degrees in clinical psychology from Fuller Theological Seminary's Graduate School of Psychology (APA accredited) in Pasadena, California. Dr. Hall completed his doctoral internship at the Warm Springs Counseling Center and Training Institute in Boise, Idaho, and completed his post-doctoral residency at NNH. Dr. Hall is licensed as a psychologist in Idaho. Dr. Hall completed training through Utah Regional Leadership Education in Neurodevelopmental and related Disabilities (URLEND), with a focus on Autism Spectrum Disorders (ASD). URLEND is a multidisciplinary training program that is grant funded by the Maternal and Child Health Care Bureau (U.S. Department of Health and Human Services). As part of URLEND, Dr. Hall received specialized clinical and didactic training, and participated in legislative activity and research dealing with issues specific to children and youth with special healthcare needs.

Dr. Hall has worked with children, adolescents, and adults in individual, family, and group therapy contexts. He has worked within inpatient hospital, residential care, and outpatient counseling center settings. Dr. Hall's areas of interest including working with child, youth, and families dealing ASD and other neurodevelopmental disorders, including Attention-Deficit/Hyperactivity Disorder (ADHD) and learning disabilities. Through the use of Cognitive, Behavioral, Group, and Family therapies Dr. Hall assists those he works with in the development of greater behavioral and emotional regulation, adaptive functioning, and self-advocacy.

Dr. Hall provides assessment of developmental, emotional, behavioral, and academic needs of children and adolescents. As a member of the Autism Diagnostic Clinic Team, he works in conjunction with other psychologists and our speech-language pathologists to assess children suspected of having pervasive developmental difficulties, including ASD. In his personal life Dr. Hall enjoys spending time with his wife, two sons and daughter, running and being outdoors.

Melinda L. Jorgensen, PhD: Supervising Neuropsychologist

Dr. Melinda Jorgensen is one of the members of our pediatric neuropsychology team. She grew up in the Southwest and received her undergraduate degree in psychology from Arizona State University. She then moved to Las Vegas and volunteered as a research

assistant at the University of Nevada, Las Vegas under the direction of Daniel Allen, PhD, ABPP-CN, the former president of the National Academy of Neuropsychology. Dr. Jorgensen received her graduate training at Idaho State University, where she began to specialize in neuropsychology. She completed an APA approved doctoral internship at Utah State Hospital where she received specialized training in pediatric and forensic neuropsychology. She then developed a post-doctoral residency under the supervision of Craig Beaver, PhD, ABPP-CN at Southeast Idaho Center for Neurobehavioral and Developmental Disorders in Idaho Falls, Idaho.

Dr. Jorgensen provides neuropsychological evaluations for children and teens who present with full spectrum of conditions, including mild to moderate TBI and seizure disorder, pregnancy/birth trauma and prematurity, Fetal Alcohol Syndrome and exposure to teratogens in utero, executive dysfunction, aphasic and dyspraxia conditions, Alexithymia and Autism Spectrum Disorder, and many other conditions. In her personal life, Dr. Jorgensen is a loving wife, caring mother to her two dogs, wonderful cook/baker, and avid bicyclist.

Kimberly L. Parks, PhD: Supervising Psychologist, Partner

Dr. Kimberly Parks earned her Bachelor's degree in Psychology from Linfield College in McMinnville, Oregon. She earned her Master's degree and Doctoral degree in Clinical Psychology from the University of Mississippi. Dr. Parks completed her doctoral internship at the Warm Springs Counseling Center and Training Institute in Boise, ID. She also completed her post-doctoral training at the Warm Springs Counseling Center and Training Institute at the West Campus in Meridian, ID. In October 2010, Dr. Parks helped form Northwest Neurobehavioral Health, LLC in collaboration with several colleagues. Dr. Parks is a licensed psychologist in the state of Idaho. She is also a Professional Member of the Trichotillomania Learning Center, Inc. (TLC) and a graduate of TLC's Professional Training Institute.

Dr. Parks has worked with children, adolescents, and adults in individual and group therapy contexts. The majority of her experience has been in outpatient counseling centers, but she also has experience working within inpatient hospital and residential facility settings. Dr. Parks specializes in the treatment of Body Focused Repetitive Behaviors, including hair pulling (Trichotillomania), chronic skin picking, and nail biting. Dr. Parks' other areas of interest include anxiety disorders (such as OCD and Generalized Anxiety Disorder), ADHD, and Autism Spectrum Disorders. Dr. Parks uses primarily Cognitive Behavior Therapy (CBT), but also incorporates other therapeutic techniques including Behavior Therapy, Habit-Reversal Training (HRT), and mindfulness. In addition, Dr. Parks conducts comprehensive psychological assessments with children and adolescents to assess emotional, behavioral, and academic needs. In her personal life, Dr. Parks enjoys spending time with her husband and two children. She also enjoys music, art, and spending time outdoors.

Program Aims and Values

The aims of the Doctoral Internship in Health Service Psychology at Northwest Neurobehavioral Health are:

- 1: To provide interns with training in high quality, evidence-informed psychological assessment and therapeutic services for children, adolescents, adults, and their families.
- 2: To prepare interns to integrate knowledge of theory and best practices with client-centered care which acknowledges and appreciates the contexts and complexity of those they serve.
- 3: To promote habits of critical thinking, collaboration, curiosity, and clinical humility in the service of lifelong professional development.

The program values the breadth of human diversity found within the community and the technical and professional competencies necessary for psychologists to effectively interface with individuals, families, and groups within the community. Developing competency in various aspects of human diversity, including individual, cultural, and spiritual/religious diversity are key components of the training program. Additionally, technical competencies in therapeutic intervention and diagnostic assessment, as well as professional competencies in legal and ethical issues, working within a multidisciplinary setting, and communication and interpersonal skills are also key components of the program.

The program is designed to be developmental in nature. While many of the experiences are communal among interns, we also understand that interns are individuals. Training plans are developed between Intern and Supervisor in order to individualize some key goals for the internship year. Some flexibility in clinical opportunity is also available, especially in the second half of the year, for interns who want to dive deeper into certain therapeutic or assessment modalities.

Structure of the Program

Clinical Experiences

Intern's distribution of face-to-face service hours may vary somewhat depending on intern development, clinical need and monthly schedule, but will ramp up to 18-21 hours per week, including therapy, testing, intakes, and testing feedback sessions. Interns are expected to conduct one testing case per week and complete 25 billable hours per week, including report writing.

Psychotherapy

Interns will conduct individual and family psychotherapy with clients presenting a range of clinical concerns, and will have opportunities to co-lead psychotherapy groups. Interns are expected to attain broad and general training, and are therefore expected to see clients representing a variety of ages, clinical issues, etc. but will likely have opportunities to influence case selection for training purposes over the course of the year.

Assessment Cases

Interns will conduct a variety of assessments within interdisciplinary clinics with other psychologists, interns, and speech therapists:

- **Autism Diagnostic Clinic:** alternates assessment of early childhood evaluation and older children suspected of autism spectrum disorders.
- **General Psychology:** assesses a range of psychological and learning difficulties utilizing a flexible array of psychological instruments.
- **Neuropsychological Assessment:** assesses individuals with a wide array of medical complications, such as genetic disorders, prenatal substance exposure, significantly prenatal birth, traumatic brain injury, post-concussive complications, etc.

Interns will take one week a month away from the team assessments to complete individual comprehensive assessments. Focus of these assessments will be based on intern development and client need.

Supervision

Interns will participate in a variety of supervisory experiences, including individual, group and in-vivo supervision. These experiences exceed requirements for both APPIC and the State of Idaho.

Primary Supervision & Service Extender Status

Interns will be assigned a licensed psychologist as their primary supervisor throughout the year and will meet individually with that supervisor a minimum of one hour weekly (two hours weekly the first quarter), in addition to other individual, group, and in-vivo supervisory experiences. They will also be

registered as Psychology Service Extenders (SE) with the State of Idaho Bureau of Occupational Licenses (IBOL). This means that all clinical activity conducted by the intern is viewed as conducted under the license of the supervising psychologist. Once matched, interns will be guided through the process of applying for SE Status, in concert with their primary supervisor. (Applicants who meet internship-readiness requirements from an APA-approved doctoral program and can pass a background check can expect to meet SE requirements.) All clients will be made aware of the Intern's status as an SE and doctoral intern.

See <http://adminrules.idaho.gov/rules/current/24/1201.pdf> for further information regarding SE status and qualifications.

Secondary Supervision

Interns will rotate through secondary supervisors (also licensed psychologists) with whom they meet individually one hour weekly to gain additional consultation regarding therapy and testing cases. This provides increased exposure to an array of perspectives, clinical skill areas, and treatment techniques. While primary supervisors retain ultimate supervisory responsibility over cases, including treatment plans, assessment reports, etc., we believe that it is good for interns to be exposed to multiple perspectives for therapy and assessment cases.

Group Supervision

Interns will participate in one weekly hour of group therapy supervision where interns meet with licensed supervising psychologists for case consults.

Clinic Staffing

Interns will participate in weekly group supervision/case staffing of clinic cases lead by a licensed psychologist (1.5-2 hours weekly). Interns practice building skills at case presentation, consideration of testing data and clinical history, refining diagnosis, and selection of treatment recommendations.

Didactic Training

Didactic Activities which meet the definition of supervision:

Therapy Training

Interns will receive 1 hour of didactic training per week focused on therapeutic technique and case conceptualization from a variety of theoretical orientations. Interns will be encouraged to refine and develop their clinical voice through exposure to a range of theoretical models. While providing education about various therapeutic modalities and subspecialties, this weekly didactic hour is led by the same supervising psychologist throughout the year, provides opportunities for evaluation of therapeutic skill and clinical reasoning, and serves as one of the gates to successful completion of the internship.

Assessment and Diagnostic Training

Interns will receive 1 hour of didactic training per week focused on increasing interns' knowledgebase and technical skill in the utilization of interview and a variety of psychometric tools used in the diagnostic assessment of children, adolescents, and adults. Types of assessment covered in the didactic training sessions will include psychological, educational, developmental, and neuropsychological. While providing education about various testing instruments, this weekly didactic hour is led by the same supervising psychologists over the course of the year, provides opportunities for evaluation of administration skill and clinical reasoning, and serves as one of the gates to successful completion of the internship.

Didactic and other learning activities which do not meet the definition of supervision:

Additional Didactics

Twice monthly, interns will participate in an hour of didactic training related to professional issues in psychology. These hours may be led by NNH psychologists, or other speakers may present as appropriate. Throughout the year, one-off or limited series "special topics didactics"

are led by various appropriately qualified professionals or are completed online and provide educational activities which may not necessarily extend over time or provide opportunities for evaluation of intern skill/performance. Examples include speakers discussing specialty areas of clinical practice, such as working with clients with selective mutism or trauma. Some activities, such as successful completion of HIPAA training, do serve as gates to progress in the internship. Interns will also participate in general clinical staff meetings and discipline specific staff meetings, addressing the day-to-day practical issues of working in a community mental health setting.

Peer Consult

Interns will meet weekly as a cohort in an unsupervised peer consult group to engage in peer-mentoring, discuss cases, process internship-related issues, provide peer editing of psychological assessment reports, choose a clinically relevant book to read, etc.

Evaluation

Supervisor Evaluation of Interns:

Most feedback by supervisors to interns will be given informally, in the due course of supervision. Formal evaluations will occur at the midpoint and end of internship, which are written with influence from the key Competency Benchmarks In Professional Psychology written and published by the APA. Goals and target competencies will be reviewed at the beginning of the year, emphasizing skills in interviewing, assessment (including report writing), diagnostics, treatment planning, therapeutic intervention, use of supervision, ethics, and professionalism. Interns are encouraged to work with their supervisors to identify developmentally appropriate steps towards the objectives in each of the above areas.

Intern Evaluation of Supervisors and Training Program:

Supervisees are encouraged to provide regular informal feedback and evaluation of their training experience to their supervisors and the Training Director, either in individual or group supervision, and will complete formal feedback at the midpoint and end of internship. Mid-year intern ratings of supervisors and the program are completed after supervisors have given their mid-year ratings of interns, and are compiled by administrative staff in order to be deidentified as

much as is possible. End of year ratings by interns are sealed until after final evaluations of the intern have been submitted to their respective schools.

Successful Completion of the Program

Interns will complete at least 2000 hours of work in a full-time experience of no less than 12 months. Approximately 1000 hours will be spent in direct client care in the form of interview, assessment, and treatment. Interns will complete at least 2 hours of weekly individual supervision led by licensed psychologists, 2-3 hours weekly of group case conference and supervision led by licensed psychologists and over 100 hours of didactic training. Interns will complete one monthly individual comprehensive psychological assessment and approximately 3 assessments per month as part of team-based multidisciplinary clinics. Interns will present a capstone training on the specialty area of their choosing (appropriate to the NNH clinical environment) to the NNH clinical staff. Interns will achieve passing progressing or better ratings, as defined by the Intern Evaluation Form in all areas listed as critical in the evaluation section.

Internship Logistics and Information

Application Requirements and Interview Process

For the upcoming year, NNH will be accepting up to 4 doctoral interns. NNH is an APPIC member program. As a relatively new program, NNH is not yet an APA-accredited program, but seeks to align our program goals and methods to meet or exceed APPIC standards for clinical experience, training, and supervision.

Applicants must complete the AAPI online. Applicants offered online interviews will also be asked to submit a deidentified psychological assessment (comprehensive or neuropsychological), and three letters of reference (in addition to any letter of readiness and recommendation from the school Director of Clinical Training) in their supplemental material.

NNH suggests, but does not require, that applicants have a minimum of 300 hours combined face-to-face assessment and therapy experience. Successful candidates will be proficient in the administration and scoring of several common testing measures and will be expected to increase their range of proficiency rapidly upon commencement of internship. Applicants should also highlight any additional

training or certifications they have achieved in evidence-based treatment modalities.

The Training Team will review applications. Qualified candidates will be offered interviews via online video conference. Following interviews, suitable candidates will be ranked for match. Matched candidates will be notified in accordance with APPIC procedures and timelines.

APPIC Match Policy 6b states that appointments of applicants to internship positions may be contingent upon the applicants satisfying certain employment eligibility requirements. Idaho requires successful completion of fingerprinting and enhanced background checks. (See <https://chu.dhw.idaho.gov/> for a list of disqualifying offenses.)

Compensation, Time Off, Hours Worked

Intern positions will be compensated with a stipend of \$22,000 per year paid bi-monthly on the 5th and 20th. Interns are expected to be on-site 40-45 hours per week. Interns are given 10 days (80 hours) of personal leave and 8 paid holidays. Professional leave days (2 maximum) are available to attend conferences. All leave must be requested and approved by the interns' primary supervisor and the NNH Training Director.

It is very important to plan your leave days wisely. You will likely need several days towards the end of the internship year for interviews, dissertation defense, graduation, and moving. If you use all of your leave days early in the year, you are not guaranteed time off at the end of the year. Any additional time off should be arranged with your supervisor with the understanding that the hours will need to be made up. Interns cannot "flex" hours to leave internship several weeks early.

Depending on the current status of COVID spread rates in the Treasure Valley and client need/suitability, interns may utilize telehealth methods for some services, with prior guidance, training, and approval. Interns are expected to be on-site for the administration of telehealth services, and clients must be within the state of Idaho at time of service. Masks and physical distancing are currently required in all public/shared spaces in the building, though these requirements will be reviewed as rates and guidance from CDC and local health districts change. Interns are required to be fully vaccinated (as currently defined by the CDC).

Due Process and Grievance Policies

Most internship difficulties can be handled informally in the due course of intern-supervisor interactions. Whether the issue is a supervisor being concerned about the performance or professionalism of an intern, or an intern being dissatisfied or concerned about some aspect of their training experience, the first step is almost always a mutually respectful conversation with the person. In the event these conversations are insufficiently fruitful, NNH has policies and procedures in place for more formal grievances or due process for disciplinary matters. These policies and procedures are written in accordance with APPIC and APA guidance and are provided to interns on the first day of orientation.