



**PRE-DOCTORAL INTERNSHIP TRAINING PROGRAM IN CLINICAL PSYCHOLOGY
CHILDREN'S NATIONAL HEALTH SYSTEM
WASHINGTON, DC 20010-2970**

2017-2018

Children's National Health System (Children's National) offers a comprehensive internship program in child clinical and pediatric psychology to pre-doctoral students in psychology. The internship is fully accredited by the American Psychological Association, initially earning accreditation in 1970.

THE INSTITUTION

Children's National is a non-profit institution incorporated in 1870. The mission of Children's National is to be preeminent in providing pediatric healthcare services that enhance the health and well-being of children regionally, nationally, and internationally. Through leadership and innovation, Children's National strives to create solutions to pediatric healthcare problems.

The main hospital on the Sheikh Zayed Campus for Advanced Children's Medicine is located in Washington DC, adjacent to the Washington Hospital Center, National Rehabilitation Hospital, the Washington V.A. Hospital, Catholic University and Howard University. It is easily accessible from suburban areas. In addition, Children's National has 7 satellite outpatient clinics in Washington D.C., Maryland and Virginia, and is part of a complex of healthcare facilities for the entire Washington metropolitan area. Further information about the hospital and its programs is available at our website (www.childrensnational.org).

Psychology and Behavioral Health, led by Dr. Adelaide Robb, and Neuropsychology, led by Dr. Gerry Gioia, are both Divisions within the Center for Neurosciences and Behavioral Medicine, which is directed by Dr. Roger Packer, a neurologist. Other divisions in this center include Psychiatry, Neurology, Neurosurgery, Developmental Pediatrics, Genetics and Metabolism, Hearing and Speech, and Physical Medicine and Rehabilitation. This Center for Excellence structure was designed to stimulate multidisciplinary collaboration, in terms of both patient care and research, among disciplines and specialties with common interests. Psychology and Neuropsychology have particularly strong working relationships with Psychiatry, Developmental Pediatrics, and Neurology.

There are presently 38 faculty level psychologists at Children's National who engage in training, clinical service, and research in a variety of specialty areas, including Adolescent Medicine, Child Protection Services, Neonatology, Endocrinology, Hematology/Oncology, Allergy/Immunology, Pulmonary Medicine, Neurology, Obesity, Primary Care, Psychiatry, and Developmental Pediatrics. Psychology and Neuropsychology faculty are involved in virtually all of the other Centers of Excellence. Faculty for the training program is listed

later in this brochure. Facilities at the Sheikh Zayed campus include outpatient clinics, Child and Adolescent inpatient units, auditorium, laboratories, and research space. In addition, psychologists and neuropsychologists occupy outpatient offices in 4 suburban satellite clinics (Laurel, Maryland; Rockville, Maryland; Fairfax, Virginia; Spring Valley, D.C.).

Children's National is the pediatric teaching hospital for the George Washington University School of Medicine and Health Sciences. Psychologists at Children's National hold academic appointments in the Department of Psychiatry and Behavioral Sciences and the Department of Pediatrics at the medical school. Children's National offers a variety of training programs in various medical specialties, all of which are overseen by the Department of Medical Education and the Graduate Medical Education Committee of the medical staff. The Division of Psychology and the Division of Neuropsychology conduct post-doctoral, internship and practicum-level training for psychology students. Psychology interns are highly regarded within the hospital, participating in a wide range of clinical and academic activities with other specialties.

THE PRE-DOCTORAL INTERNSHIP TRAINING PROGRAM

Philosophy and Goals of the Program:

The goal of the internship program at Children's National is to train professional psychologists who have a particular interest in child clinical and/or pediatric psychology. The program is designed to encourage the development of clinical competence with children and families, with sensitivity to, and facility with, cultural differences, ethical issues, interdisciplinary relationships, and the changing environment of health care, including funding issues.

Goals of training include:

- I. To provide experiential training in child clinical and pediatric psychology with a variety of populations in a variety of settings.
- II. To promote professional development of psychologists in the present era of health care, including the interface of psychology with health policy, in terms of consultation, program development and service delivery.

Science and practice are integrated within the internship program in a number of ways, including: didactic seminars on theories and techniques of assessment, theories and techniques of intervention, empirically-supported treatments, theories and techniques of consultation, and current scientific knowledge regarding diagnostic classifications and special populations; discussions during supervision of clinical material in light of scientific literature; encouragement of critical thinking (and empirical hypothesis-testing) in treatment and systemic consultation; encouragement of interns' use of the hospital online library and periodical collections; and a required presentation for each intern at Psychiatry and Behavioral Medicine Grand Rounds.

Objectives of training include:

(I-1) Interns will develop facility with a range of diagnostic skills, including: interviews, history taking, risk assessment, child protective issues, diagnostic formulation, triage, disposition, and referral.

(I-2) Interns will develop further skills in psychological intervention, including: environmental interventions, crisis intervention, short-term, goal-oriented individual, group and family psychotherapy, exposure to long-term individual psychotherapy, behavioral medicine techniques, exposure to psychopharmacology, case management, and advocacy.

(I-3) Interns will develop facility with a range of assessment techniques, including: developmental testing (elective), cognitive testing, achievement testing, assessment of behavior/emotional functioning, assessment of parent-child relationships and family systems, and neuropsychological evaluation (elective). Assessment training across domains will include both current functioning and changes in functioning.

(I-4) Interns will develop facility with psychological consultation, through individual cases and participation in multidisciplinary teams, including consultation to: parents, mental health staff (e.g., psychiatrists, social workers) medical staff (e.g., physicians, nurses, PT, OT, etc.), school systems, and the legal system. Consultation training occurs in both the inpatient and outpatient setting, both downtown and in the suburbs, and ranges from primary to tertiary care.

(I-5) Interns will learn the clinical, legal, and ethical issues involved in documentation of mental health services within a medical setting.

(I-6) Interns will learn to promote the integration of science and practice, related to the theories and practice of assessment, intervention, and consultation. Interns are trained in empirically-supported treatments (e.g., parent training groups, inpatient treatment protocols for school avoidance, eating disorders), behavioral medicine protocols (e.g., medical noncompliance, pain management, headache treatment, toilet training), and empirically-supported assessment techniques. Interns are exposed to research in some of these areas by Children's National faculty.

(II-1) Interns will be able to develop assessment batteries, treatment goals, and consultative relationships based on the clinical issues at hand, while also considering potential limitations imposed by managed care and health policy and other issues of third party or family payment for mental health services. Interns will appreciate the range of vehicles for service delivery (e.g., primary care versus specialty clinics), which allow access to a variety of populations with social, financial and other obstacles to mental health.

In summary, the program provides extensive training in the many roles and functions psychologists play in health care today. The intended result of this training is a broadly

experienced child clinical/pediatric psychologist who can succeed in a variety of settings, including hospitals, clinics, universities or the broader community.

Former Interns:

Initial positions of the 76 interns who have completed the program since 1997:

Post-Doctoral Fellowships	54
Return to University to Complete Dissertation	10
Research Position	7
Clinical Position	3
Teaching Position	2

Training Experience:

This internship provides the trainee with the opportunity to take substantial responsibility for carrying out his or her major professional functions in the context of appropriate supervisory support. The program is arranged on both a longitudinal and rotational basis. It is designed around a fundamental curriculum, which focuses on intern competencies in assessment, diagnostic interviewing, intervention, case management and triage, consultation, and critical thinking about clinical case material. Interns are exposed to training in empirically supported treatments for a range of pediatric conditions. Intern participation in multidisciplinary teams and specialty clinics affords them the opportunity for limited supervision of and role-modeling for, psychology externs and medical students. Each intern's schedule is *individualized* according to his/her special interests and training needs.

Full Year Rotation

Outpatient Therapy

Throughout the entire year, interns devote 20% of their time to providing outpatient therapy in a clinic located at the Sheikh Zayed campus. This clinic provides training for psychology interns and externs, child psychiatry fellows, and general psychiatry residents. The patient population in the outpatient clinic at the hospital is economically diverse and often includes families with multiple psychological, social and medical problems. Referrals to the outpatient clinics come from community physicians, public and private schools, and other departments within the hospital.

Interns obtain closely supervised practice in therapeutic intervention, including individual child therapy and family therapy. There may be opportunities for work in group therapy settings as well. A varied caseload is assigned to each intern. Interns are encouraged to individualize their caseloads according to their special interests. They typically carry 10 outpatient cases throughout the year.

It should be noted that training in issues of child abuse and neglect is provided throughout the outpatient and inpatient programs. Interns who have a special interest in this area may be assigned to a psychology supervisor in the Freddie Mac Child and Adolescent Protection Center.

Clinical Child Semester Rotations

Inpatient Experience

Interns spend 50% of their time for 3 months on the Psychiatry Inpatient Units. Specifically, interns spend 4 half days per week on the Units, with 1 half day protected for paperwork. These are short stay facilities for seriously disturbed younger children (ages 5-13) or adolescents (ages 14-18). The Units have an eclectic orientation including psychodynamic, behavioral, and family components. Interns rotating on this service become case managers and therapists, and participate in the diagnostic assessment of children who are strikingly uncommunicative, withdrawn, depressed or hyperactive. Interns are also expected to consult with the psychiatry, child life, nursing staff, and the education staff in the design and implementation of the milieu treatment programs on this unit. Interns carry a caseload of 2 patients at a time.

Primary Care Experience

Interns spend 50% of their time for 3 months performing consults and short-term therapy in the Child and Adolescent Health Clinics. Specifically, interns spend 4 half days per week in primary care, with 1 half day protected for paperwork. This rotation involves providing mental health consultation within a primary care setting as part of multi-disciplinary team. Direct services are provided to children, adolescents, young adults and families. Consultations for patients include initial assessment, service referrals, and follow-up to help ensure linkage to mental health care. Consultation is also provided to medical providers. The opportunity for brief patient intervention is also available and tailored to the interests and learning needs of the intern.

Assessment/Medical Specialty Semester Rotations

Outpatient Assessment Experience

During the 6 months that interns are not rotating through the Inpatient Psychiatric Units and Primary Care, they complete 2 assessment rotations. Interns spend one full day per week on each assessment rotation ***Please note that it may be possible to substitute an additional medical specialty rotation in lieu of 1 testing day, based on intern preference.*** It should also be noted that several assessment rotations occur at satellite clinics, which are not readily accessible by public transportation.

Interns are responsible for writing 2 full outpatient assessment reports per month for each assessment rotation. Assessment rotations are described below:

- The Hyperactivity, Attention and Learning Problems (HALP) Clinic is an evaluation and treatment program for children and adolescents with a variety of school problems, including ADHD, learning disorders, and disruptive behavior disorders. The intern's role includes conducting intake and feedback sessions, administration and interpretation of a variety of psychological tests, presentation of results at team meetings, and report writing. The HALP Clinic is located at the Regional Outpatient Center in Fairfax, Virginia.
- The Division of Pediatric Neuropsychology is headquartered at the Shady Grove Regional Outpatient Center and also serves patients at the Sheikh Zayed campus and in other outpatient centers in Northern Virginia and Maryland. The Division provides outpatient evaluations to children of all ages, infancy through young adult. Children commonly seen for neuropsychological services include those with known neurological disorders (e.g., epilepsy, brain tumor, leukemia, sickle cell, traumatic brain injury, hydrocephalus, brain infections), as well as those with medical/neurodevelopmental disorders, including learning disabilities, ADHD, and autism spectrum disorders. The Pediatric Neuropsychology rotation involves training in a process-oriented, hypothesis-testing model of assessment including supervised experience in the administration, scoring, interpretation, and report writing of a comprehensive battery of neuropsychological tests. Supervision is provided by one of our neuropsychology faculty members (see faculty list below). Interns are invited to participate in the weekly Pediatric Neuropsychology seminar and other didactic opportunities. An enhanced pediatric neuropsychology experience can be made available to those for whom this is a specialty interest area or who wish to prepare for a future postdoc in neuropsychology. Please let us know if this is an area of interest. Interns may be exposed to one or more of the following specific clinical populations:
 - General medical/developmental disorders
 - Attention and Executive Function Disorders
 - Mild Traumatic Brain Injury/ Sports Concussions
- The Center for Autism Spectrum Disorders, located at the Shady Grove Regional Outpatient Center, within the Division of Pediatric Neuropsychology, provides multidisciplinary evaluation and treatment services for children with autism spectrum disorders and their families. The Center specializes in serving children with High-Functioning Autism and Asperger's Syndrome. Interns completing this rotation will be involved in assessing young children having or suspected of having autism spectrum disorders, and may also have the opportunity to participate in providing treatment. Interns will administer and interpret developmental tests, write assessment reports, conduct school consultations, and present results at both multidisciplinary meetings and in feedback sessions with families. In addition, the program offers intervention services for families, including behavior management, social skills groups for children, parent education groups and school planning assistance. Interns may choose to spend part of their afternoons involved in these focused treatment programs within the Center.

- The Child Development Program, located at the main hospital, provides developmental evaluation and diagnostic assessment of children ages birth to 3. Interns are supervised in administration, scoring, interpretation and feedback with instruments that are specialized for this young population (e.g., Bayley Scales, DAS-II). Children referred for evaluation may have a wide range of conditions affecting development, including genetic conditions, birth complications, neurologic injury, chronic illness, etc., or may be on an atypical path of development. Patients reflect a broad cross-section of sociocultural circumstances. Parent education/training is emphasized as part of the assessment process. The intern may choose to participate in inpatient consultation or in the Down Syndrome Clinic as part of this rotation.

Pediatric Consultation Service

During the 6 months that interns are not rotating through the Inpatient Psychiatric Units and Primary Care, they spend 1 day per week (20% of their time) for 3 months on the Pediatric Consultation Service. This is a busy clinical service that provides mental health consultation and liaison to medical teams. Referrals include a vast array of mental health concerns for children with acute and chronic illnesses, such as gastrointestinal illness, asthma, cystic fibrosis, renal disorders, toxic ingestion, burns, and trauma. Psychology interns and psychiatry residents participate together in clinical rounds and didactic education.

Medical Specialty Rotation

All interns complete a 3 month medical specialty rotation. These rotations occur during the 6 months that interns are not placed on the Inpatient Psychiatric Units. Interns devote 1 day per week (20% of their time) to this rotation. ***As noted above, a 6 month medical specialty rotation may be added in lieu of 1 day of outpatient assessment.*** It should be noted that consultation and treatment skills are similar with the different medical populations, though the clinical issues may vary. Interns choose from the following, although not all are guaranteed to be offered each year:

- The Sleep Disorders clinic is a multidisciplinary clinic, housed in the Pulmonary Department. Sleep disorders affect children and their families at all stages of development and are increasingly recognized as important causes of affective, behavioral, and attentional regulation. Interns participating in this clinic will receive didactic training in the normal development of sleep, and experiential training in the diagnosis and treatment of sleep disorders.
- The Endocrinology (diabetes) rotation involves working as part of a multidisciplinary team that provides services to young children through young adults with type 1 and type 2 diabetes. The disciplines involved in children's care include medicine, nutrition, nursing, social work, and psychology. Interns on this rotation have the opportunity to participate in consultation and treatment for children primarily diagnosed with type 1 diabetes. Consultations include meeting with children/families: around the time of diagnosis, at medical outpatient clinic visits, as medical inpatients

following periods of management difficulties, and when transitioning to more intense medical regimens. Outpatient treatment cases present with a variety of problems including adjustment to illness, poor adherence to the regimen, mood concerns, and family conflict.

- The Obesity rotation involves providing psychosocial services for youth needing support for weight management. A rotation in the Obesity subspecialty involves providing short-term behavioral management and motivational support to promote adherence to medical recommendations and assessment for bariatric surgery readiness.
- The allergy and immunology rotation involves providing services to a diverse population of children and adolescents who are diagnosed with food allergies, environmental allergies, asthma, eczema, and primary immunodeficiency disorders. During this rotation, interns will conduct consultation-liaison services during the oral food challenge clinic. Interns will see approximately 4-6 patients/week ranging in age from infancy to young adulthood. Primary concerns during this clinic are patient and parent anxiety related to potentially experiencing an allergic reaction during the oral food challenge. Interns who participate in this rotation will also see 2-3 outpatients a week. Primary mental health concerns among this population are anxiety and depressive symptoms related to food allergies and primary immunodeficiency disorders (generally school-age children) and behavior management related to eczema treatment (generally preschool-age children). Interns may also complete brief consultations with parents of young children who need assistance transitioning their child to the school setting for the first time. Therapy includes medical psychoeducation and CBT techniques.
- The Pain & Medically Unexplained Physical Symptoms (MUPS) rotation involves providing consultation-liaison services for the Pain Medicine Team. Interns work with the inpatient consultation liaison team to educate and help improve function and quality of life in patients and families with recurrent hospital admissions associated with chronic pain and physical symptoms of stress. The disciplines involved in the child's care include medicine, psychiatry, nursing, physical therapy, occupational therapy, social work, and child life. Interns who participate in this rotation will also see 2-3 outpatients a week. Primary behavioral health interventions will target psychological and physical functional disability (i.e., pain-related avoidance behaviors, school attendance, peer difficulties, sleep difficulties and associated anxiety and depression). Therapy includes medical psychoeducation and CBT techniques.

Sample Rotational Schedule

12 Month Rotation			
Outpatient Psychotherapy (10 patients/week)			
Clinical Child 6 Month Semester		Assessment/Med Specialty 6 Month Semester	
<u>Inpatient</u> 3 month	<u>Primary Care</u> 3 month	<u>Consult</u> 3 month	<u>Med Specialty</u> 3 month
Both rotations are half a day for 5 days /week		Rotations are 1 day/week	
		<u>Outpatient Assessment</u> 6 month Rotation is 2 days/week	
		**Note—an intern may elect to add a medical specialty rotation in lieu of 1 of their 2 days of assessment.	

Didactics:

The program is rounded out with a variety of didactic seminars and conferences dealing with development, psychopathology, clinical techniques, medical conditions, health care delivery systems, and research. Didactics include the Psychology Seminar and Psychiatry and Behavioral Sciences Grand Rounds. Interns spend approximately 10% of their time in didactic seminars.

Research:

Interns who have completed their dissertation research are able to become involved in research programs if they desire. Research opportunities are available with many faculty members, depending on an intern's special interests. Involvement in research is particularly appropriate for those interns who expect to stay in the D.C. area for post-doctoral training.

Supervision & Mentor Program:

Interns receive 4-5 hours of supervision per week, with 1 supervisor assigned for each rotation. The program strives to provide interns with a variety of supervisors in order to take advantage of the many roles, talents and theoretical viewpoints of the faculty. Supervision is interdisciplinary, with psychology interns being supervised by psychiatrists

on the Inpatient units and the Pediatric Consultation service. Supervision is primarily case discussion. However, some clinics offer live supervision and role-modeling by supervisors within multidisciplinary or vertical teams. Facilities include one-way mirrors and videotaping capability, depending on the location.

At the start of the training year, each intern is assigned a faculty *mentor*, who does not serve as a supervisor, who is able to focus on the intern's professional development (e.g., assist with time management issues, the development of self-confidence, etc.). Along with the training director, mentors play a special role in helping interns with future career plans.

Evaluation:

Interns are evaluated formally by their supervisors at the end of each rotation or semi-annually on year-long rotations. Supervisors rate interns on a set of scales designed to evaluate their performance in treatment, consultation, case management, assessment, and professional development, and discuss feedback with the interns. These evaluations are primarily designed to ensure that the interns are making optimal use of their training year. Letters are sent to the director of each intern's doctoral training program at the completion of the internship.

The internship is conceptualized as an evolving training program, with continuous self-review and quality enhancement. Interns and staff engage in periodic evaluation of the program's goals and its method of implementing these goals. Interns complete annual evaluations on seminars, supervisors and rotations. The training director has regular meetings with both the training staff and the interns to discuss and evaluate the program.

Training Staff

Psychology Faculty Supervisors

Laura Anthony, Ph.D., 1997, University of Illinois at Chicago, Associate Professor, Center for Autism Spectrum Disorders

Kathleen Atmore, Psy.D., 1992, Minnesota School of Professional Psychology, Assistant Professor, Developmental Neuropsychologist, Center for Autism Spectrum Disorders

Madison Berl, Ph.D., 2002, George Mason University, Associate Professor, Division of Neuropsychology

Angela Bollich, Ph.D., 2001, University of Florida, Assistant Professor, Center for Autism Spectrum Disorders

Tara Brennan, Psy.D., 2006, Georgia School of Professional Psychology at Argosy University/Atlanta, Assistant Professor, Child Development Clinic

Lauren Clary, Ph.D., 2010, Saint Louis University, Assistant Professor, Division of Endocrinology & Diabetes

Michele Dadson, Ph.D., 2000, University of Miami, Assistant Professor, Psychiatric Clinical Trials Program

Lisa Efron, Ph.D., 1995, Duke University, Associate Professor, Director of Training in Professional Psychology, Director, Hyperactivity and Learning Problems (HALP) Clinic

Angela Fletcher, Psy.D., 2007, American School of Professional Psychology, Assistant Professor, Director Behavioral Pain Management Program

Gerard Gioia, Ph.D., 1984, University of North Carolina at Chapel Hill, Professor and Chief, Division of Pediatric Neuropsychology, Director, Neurobehavioral & Psychosocial Evaluation Core Lab of Clinical and Translational Science Institute, Director, Neurobehavioral Evaluation Core of Intellectual and Developmental Disabilities Research Center

Penny Glass, Ph.D., 1985, George Washington University; Associate Professor, Director, Child Development Clinic

Leandra Godoy, Ph.D., 2013, University of Massachusetts Boston, Assistant Professor of Pediatrics, Diana L. and Stephen A. Goldberg Center for Community Pediatric Health, Assistant Director, DC MAP (Mental Health Access in Pediatrics)

Yael Granader, Ph.D., 2012, Ferkauf Graduate School of Psychology, Yeshiva University, Assistant Professor, Division of Neuropsychology

Laura Gray, PhD, 2014, The George Washington University, Assistant Professor, Behavioral Pain Medicine, Division of Anesthesiology, Sedation, and Perioperative Medicine

Kristina Hardy, Ph.D., 2000, Duke University, Associate Professor, Division of Neuropsychology

Steven Hardy, Ph.D., 2012, University of North Carolina at Charlotte, Assistant Professor, Divisions of Hematology, Oncology, and Bone Marrow Transplant

Linda Herbert, PhD, 2011, University of Maryland Baltimore County, Assistant Professor, Division of Allergy and Immunology

Stacy Hodgkinson, Ph.D., 2010, Howard University, Assistant Professor, Director of Mental Health and Research, Generations Program, Diana L. and Stephen A. Goldberg Center for Community Pediatric Health

Sarah Hornack, Ph.D., 2014, American University, Assistant Professor, Department of Psychology and Behavioral Health

Laura Kenealy, Ph.D., ABPP-CN, 2001, Loyola University Chicago, Assistant Professor, Training Director in Neuropsychology

Lauren Kenworthy, Ph.D., 1993, University of Maryland, Associate Professor, Director, Center for Autism Spectrum Disorders

Daniel Lewin, Ph.D., ABSM, 1998. Rutgers University, Associate Professor, Sleep Clinic

Eleanor Mackey, Ph.D., 2007, University of Miami, Assistant Professor, Associate Director of Training in Professional Psychology, Director of Mental Health Services, Obesity Institute

Donna Marschall, Ph.D., 2002, George Mason University, Assistant Professor, Director, HIV Services Mental Health Program

Catherine McGill, Psy.D., 2011, American School of Professional Psychology, Assistant Professor, Division of Neuropsychology

Maureen Monaghan, Ph.D., 2006, University of Virginia, Assistant Professor, Center for Translational Sciences

Julie B. Newman, Ph.D., 2009, Wayne State University, Assistant Professor, Division of Neuropsychology

Deborah Potvin, Ph.D., 2013, University of Texas, Assistant Professor, Center for Autism Spectrum Disorders, Division of Neuropsychology

Cara Pugliese, Ph.D., 2013, Virginia Tech, Assistant Professor, Center for Autism Spectrum Disorders, Division of Neuropsychology

Mi-Young Ryee, Ph.D., 2005, University of Virginia Curry School of Education, Assistant Professor, Divisions of Gastroenterology, Hepatology, & Nutrition and Psychology & Behavioral Health

Maegan Sady, Ph.D., 2010, University of Houston, Assistant Professor, Division of Neuropsychology

Jacqueline Sanz, Ph.D., 2008, UCLA, Assistant Professor, Co-Director, Cardiac Neurodevelopmental Outcome Program (CANDO)

Randi Streisand, Ph.D., 1998, University of Florida, Associate Professor, Director of Psychology Research

Amanda Thompson, Ph.D. 2007, University of Pittsburgh, Assistant Professor, Medical Director, Patient Support Services, Center for Cancer and Blood Disorders

Herman Tolbert, Ph.D., 1979, The American University, Assistant Professor, Assistant Director, Clinical and Administrative Services, Freddie Mac Child and Adolescent Protection Center

Christopher Vaughan, Psy.D., 2007, Loyola University in Maryland, Assistant Professor, SCORE Clinic

Karin S. Walsh, Psy.D., 2004, Loyola University in Maryland, Assistant Professor, Depts. of Pediatrics and Psychiatry & Behavioral Sciences, Brain Tumor Institute & Gilbert Neurofibromatosis Institute

Multidisciplinary Faculty

David Call, MD, Assistant Professor, Department of Psychiatry and Behavioral Sciences

Lisa M. Cullins, MD, Director, Outpatient Psychiatry Clinic, Director, Child & Adolescent Psychiatry Fellowship Program

Bhavin Dave, MD, Assistant Professor, Attending Psychiatrist, Inpatient Child and Adolescent Psychiatry Units, Associate Director of Infant and Toddler Mental Health Program

Julia Dorfman, MD, Assistant Professor, Division of Psychology and Behavioral Health

Mary Gabriel, MD, Assistant Professor, Attending Psychiatrist, Division of Psychiatry and Behavioral Sciences

Paramjit Joshi, MD, Professor and Endowed Chair, Division of Psychiatry and Behavioral Sciences

Finza Latif, MD, Assistant Professor, Director of Pediatric Consultation-Liaison Service

Nasima Nusrat, MD, Assistant Professor, Medical Units Directors

Haniya Raza, MD, Assistant Professor, Medical Director, Center for Autism Spectrum Disorders

Adelaide Robb, MD, Professor, Chair, Division of Psychology and Behavioral Health

Faith Rowland, MD, Assistant Professor, Attending Psychiatrist, Inpatient Child and Adolescent Psychiatry Units

Martine Solages, MD, Assistant Professor, Associate Director, Child & Adolescent Psychiatry Fellowship Program, Director, Pediatric Consult Liaison Service

ACCREDITATION

The Children's National internship program is fully accredited by the American Psychological Association. Applicants may contact the American Psychological Association's Office of Program Consultation and Accreditation for additional information pertaining to our accreditation.

Phone: 202 336-5979
Address: 750 First Street, N.E.
Washington, DC 20002-4242

STIPEND AND BENEFITS

Interns receive a yearly stipend of \$25,000.00 plus the fringe benefit package for all trainees at Children's National. Interns have 4 weeks of paid vacation, 8 national holidays and 12 days of sick leave. Subsidized health insurance and parking are available.

An administrative assistant for Psychology and Behavioral Health is available to support the internship program. The clinical services are also supported by the COR staff in the Outpatient Psychiatry Department who assist interns in scheduling families, do all insurance authorization, and facilitate the patient check-in process.

DATES

The pre-doctoral internship is a full-time experience for the calendar year, beginning July 1, 2017 and ending June 30, 2018.

REQUIREMENTS FOR ADMISSION

This program is designed specifically for students matriculated in a doctoral training program who have completed at least 3 years of full-time graduate study in clinical psychology, including practicum level experience in diagnostic assessment, various intervention modes, and specific experience with children and families. Preference is given to students in APA-approved doctoral programs in clinical psychology. In order to be considered for internship, dissertation proposals must be defended by the application deadline.

The Division of Psychology represents multiple theoretical approaches, and thus preference is given to applicants who are broadly prepared in child psychotherapy as well as in cognitive, behavioral and educational evaluations.

APPLICATION PROCEDURE AND DEADLINES

Applications must be received on or before November 1, 2016. As a member of the Association for Psychology Postdoctoral and Internship Centers (APPIC) and In accordance with its policies, our application constitutes the AAPI Online Form. We require 2 letters of recommendation in addition to the letter from the training director of your program.

INTERVIEWS

Interviews are by invitation only. In order to be considered for an interview, your **completed application must be received by November 1, 2016.** Interviews and tours will be conducted on *only 2* dates: **January 4th and 11th, 2017.** We will *not* be able to conduct individual interviews on additional dates. Invitations for interviews will be sent before December 15. **Please do not call before December 15th.**

OFFERS AND ACCEPTANCES

The Internship Program at Children's Hospital is a member of the Association of Psychology Postdoctoral and Internship Centers (APPIC). This site agrees to abide by the APPIC policy that no person at this training facility will solicit, accept or use any ranking information from any intern applicant. Children's National will be participating in the APPIC Internship Matching Program; applicants should register for the match.