



Children's National®

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

2024-2025

Children's National Hospital (Children's National) offers a comprehensive internship program in child clinical and pediatric psychology to doctoral students in psychology. The internship program provides extensive training in the many roles and functions psychologists play in healthcare 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 and with a variety of patient populations. The program strives to develop psychologists committed to enhancing access to healthcare, valuing cultural diversity, and advocating on behalf of the patients, families, and communities they serve. The APA-accredited internship at Children's National Hospital offers a *Major Area of Study* in which 100% of the interns' time is dedicated to training in clinical child/adolescent psychology and pediatric psychology, including didactics and clinical experiences. The internship is fully accredited by the American Psychological Association, initially earning accreditation in 1970 (American Psychological Association Office of Program Consultation and Accreditation; <https://accreditation.apa.org/>; apaaccred@apa.org; (202) 336-5979)

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. Children's National Hospital is ranked the number 1 pediatric hospital in our region and one of the top 10 pediatric hospitals in the country by U.S. News & World Report. Through leadership and innovation, Children's National strives to create solutions to pediatric healthcare problems and promote health equity. Children's National works to create a culture that leverages our differences to achieve excellence. We promote and practice compassion, commitment and connection in order to create strong partnerships with the community, our staff members, our patients and their families. Children's National serves a diverse range of patients locally, nationally, and internationally.

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 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. Randi Streisand, and Neuropsychology, led by Dr. Lauren Kenworthy are both Divisions within the Center for Neurosciences and Behavioral Medicine, which is directed by Dr. Elizabeth Wells, 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 49 faculty level psychologists at Children's National who engage in training, clinical service, and research in a variety of areas, including Adolescent Medicine, Child Protection Services, Neonatology, Gastroenterology, Endocrinology/Diabetes, Hematology/Oncology, Allergy/Immunology, Trauma Surgery, Pulmonary Medicine, Neurology, Obesity, Pain Medicine, Primary Care, Psychiatry, Outpatient Psychology, and Developmental Pediatrics. Psychology and Neuropsychology faculty are involved in virtually all of the other Centers of Excellence. Faculty for the training program are listed later in this brochure. Facilities at the Sheikh Zayed campus include outpatient clinics, Child and Adolescent inpatient units, auditorium, laboratories, and research space. The Outpatient Psychology Department is located at the Takoma, DC satellite clinic, a newly renovated state-of-the-art therapy space. Psychologists and neuropsychologists also occupy outpatient offices in multiple suburban satellite clinics (Laurel, Maryland; Rockville, Maryland; Fairfax, Virginia; Friendship Heights, D.C.; Lanham, MD).

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. 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.

DIVERSITY AND HEALTH EQUITY

The Division of Psychology and Behavioral Health is committed to attracting and retaining interns and faculty from a diverse range of ethnic, racial, and personal backgrounds. Consistent with such efforts, it acts to ensure a supportive and encouraging learning environment appropriate for the training of diverse individuals and the provision of training opportunities for a wide spectrum of individuals. In addition, the Division of Psychology is committed to providing opportunities for interns to learn about cultural and individual diversity and the promotion of health equity as they pertain to the practice of professional psychology. To this end, the Division has established a Psychology Diversity Committee, whose mission is to promote awareness and inclusion across all areas of diversity including, but not limited to, race and ethnicity, religion, socioeconomic status, age, sexual orientation, gender identity or expression, language, disability, and illness. Interns have a dedicated Diversity Seminar series to further explore issues of diversity, equity, and inclusion (DEI) considerations in their clinical care and the systems within which they operate. If interested, interns are also invited to participate in the Diversity Committee work when opportunities are available. Children's National Hospital is committed to a culture of diversity, equity, and inclusion. Please see more about the institution's commitment and effort at <https://childrensnational.org/about-us/diversity-equity-and-inclusion>.

THE 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 healthcare, including funding issues.

The internship adheres to the nine Profession-Wide Competencies set out by the American Psychological Association's Standards of Accreditation for Health Services Psychologists. These standards are essential for performing all services in the field of psychology. These competencies include:

1. Research
2. Ethical and Legal Standards
3. Individual and Cultural Diversity
4. Professional Values, Attitudes, and Behaviors
5. Communication and Interpersonal Skills
6. Assessment

7. Intervention
8. Supervision
9. Consultation and Interprofessional/Interdisciplinary Skills

Interns develop these competencies through the well-rounded curriculum and by achieving the specific objectives for our program, as outlined below. Objectives of training include:

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.
2. Interns will develop skills in psychological intervention, including: environmental interventions, crisis intervention, short-term and long-term individual psychotherapy, group and family psychotherapy, and behavioral medicine techniques.
3. Interns will develop facility with a range of assessment techniques, including electives in: developmental testing, cognitive testing, achievement testing, assessment of behavior/emotional functioning, assessment of parent-child relationships and family systems, and neuropsychological evaluation.
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.
5. Interns will learn the clinical, legal, and ethical issues involved in documentation of mental health services within a medical setting.
6. Interns will integrate science and practice in assessment, intervention, and consultation. Interns are trained in empirically-supported treatments, behavioral medicine protocols, and empirically-supported assessment techniques. Interns are exposed to research in many of these areas in their work with psychology faculty.
7. Interns will 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.

Former Interns:

Initial positions of the 96 interns who have completed the program since 1997:

Post-Doctoral Fellowships	82
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 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.

Rotational Schedule at a Glance

<p>12 Month Rotation Outpatient Psychotherapy (approximately 8 patients/week) 2 days per week</p> <p>*For those interested in pediatric psychology, this rotation can be composed primarily of pediatric cases for a full year of advanced pediatric psychology training</p>	
<p>Semester A 6 months</p> <p>Quarter A1 - 3 months</p> <p><u>Inpatient Psychiatry</u> – 4 half days/week</p>	<p>Semester B 6 Months</p> <p><u>Specialty</u> –1 day/week <u>Assessment</u> –1 day/week <u>Elective</u> –1 day/week</p>
<p>Quarter A2 - 3 months</p> <p><u>Primary Care</u> – 2 days/week <u>Pediatric Consult</u> –1 day/week</p>	<p>Intern selects either additional Specialty or Outpatient Assessment</p>

*Note that semesters are described as “A” and “B”, but these could occur in either order.

Full Year Rotation

Outpatient Therapy (Required)

Throughout the entire year, interns carry approximately 8 outpatient cases in the Outpatient Psychiatry Department located at the Takoma clinic or at the main hospital location. 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. Outpatient supervisors have wide range of expertise including mood, anxiety, pediatric psychology, and therapy with young children. This clinic provides training for psychology interns and externs, child psychiatry fellows, and general psychiatry residents. The patient population in the outpatient clinic is culturally and economically diverse and often includes families with multiple psychological, social and medical problems. Referrals to the outpatient clinics come from families, community physicians, schools, and other departments within the hospital.

Interns have flexibility in their selection of cases in order to tailor their training to their individual needs and interests. Although everyone is encouraged to maintain a varied caseload for optimal training, an intern with interests in clinical child training may take cases that include anxiety, ADHD, depression, and peer and school difficulties. Interns with particular interest in pediatric psychology could see cases from any of the specialty clinics to address issues that include adherence to medical regimen and adjustment to medical diagnosis.

It should be noted that training in issues of child abuse and neglect is provided throughout the outpatient and inpatient programs.

Semester A Rotations

Inpatient Experience (Required)

Interns spend 4 half days per week for 3 months on the Adolescent Inpatient Psychiatry Unit. This is a short stay facility for adolescents (ages 13-17) who have been deemed a danger to themselves or others. Patients on this unit usually have a history of self-injury, suicidal behavior, severe aggression, mania, or psychosis. Interns will collaborate with a dynamic multidisciplinary team including psychiatrists, medical trainees, social workers, nurses, expressive therapists, child life specialists, and child psychiatric specialists. Interns carry a caseload of 1-2 patients. They are responsible for conducting thorough diagnostic interviews, individual therapy, crisis management, and discharge planning. They will have the opportunity to participate in family meetings and morning patient rounds. Interns will have the opportunity to participate in the therapeutic milieu as

well as group therapy. Dialectical Behavior Therapy and Cognitive Behavioral Therapy techniques are generally utilized to achieve stabilization and create safety plans.

Primary Care Experience (Required)

Interns spend 2 days per week for 3 months performing consults and short-term therapy in one of the six community-based Children's National primary care centers. 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 the medical team. The opportunity for brief patient intervention is available and tailored to the interests and learning needs of the intern. For bilingual (English-Spanish) interns, there is opportunity to rotate through the primary care center that primarily serves the Latinx community.

Pediatric Consultation Service (Required)

During the 3 months that interns are rotating through the Primary Care Experience, they also spend 1 day per week 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, eating disorders, asthma, cystic fibrosis, renal disorders, toxic ingestion, burns, and trauma. Psychology interns and psychiatry residents participate together in clinical rounds and didactic education.

Semester B Rotations

Specialty Rotations

All interns complete at least one 6-month (1 day per week) specialty rotation. These rotations occur during the 6 months that interns are not placed on the Inpatient Psychiatric Unit, Primary Care, or Consult rotations. ***As noted above, an additional 6-month specialty rotation (or assessment rotation) is an option for the elective rotation.*** 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 Hematology, Oncology, and BMT rotation involves working as part of a multidisciplinary team. Interns will administer digital psychosocial screeners followed by brief consultation and intervention within our Long-term Follow-Up clinic for survivors of childhood cancer. Interns may also have an opportunity to

implement cognitive-behavioral and acceptance-based treatment to enhance pain management in our Sickle Cell Disease Integrative Pain Clinic. Lastly, the intern will carry a small caseload of weekly outpatient therapy cases. Typical presenting issues include difficulty coping with and adjusting to diagnosis, treatment, and transitions, anxiety (generalized, anticipatory, and procedural), depression, behavior problems, school reintegration, peer difficulties, nonadherence to medical treatment, and pain exacerbated by psychological stressors. Depending on interest and availability, there may be opportunities to conduct pre-BMT psychological evaluations.

- The Endocrinology/Diabetes rotation involves working as part of a multidisciplinary team that provides services to a diverse population of young children through young adults with type 1 diabetes (T1D), type 2 diabetes (T2D) as well as other endocrine disorders. 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 diagnosed with T1D, T2D and a variety of other endocrine disorders. Consultations include meeting with children/families: around the time of diagnosis, at medical outpatient clinic visits, and as medical inpatients following periods of management difficulties. Outpatient treatment cases present with a variety of concerns including adjustment to illness, medical adherence challenges, mood concerns, and family conflict.
- The Behavioral Sleep Medicine rotation provides interns with the opportunity to work within the multidisciplinary Sleep clinic that is housed in the Division of Pulmonary & Sleep Medicine. The Sleep clinic team consists of psychologists, pulmonologists, nurse practitioners and sleep technologists who work together to assess, diagnose and treat childhood sleep disorders. Interns participating in this rotation will receive didactic training in the normal development of sleep across the lifespan and gain clinical experience in the diagnosis and treatment of sleep disorders. The location of the clinic in the Main DC Children's National facility affords interns the opportunity to work with a diverse patient population. By the culmination of this rotation interns will be familiar with the various types of childhood sleep disorders, common mental health comorbidities, and empirically support treatment strategies.
- The Obesity rotation involves providing psychosocial services including consult and assessment for youth undergoing bariatric surgery. A rotation in the Obesity subspecialty involves conducting pre- and post-surgical assessment for bariatric surgery readiness, providing consult-liaison services for the medical team prior to and following surgery, and providing any ongoing support needed by the surgery patients. The patient population

served in this rotation is highly diverse with regard to race/ethnicity, socioeconomic status, and psychosocial functioning.

- The Division of Allergy and Immunology provides services to a diverse population of children and adolescents who are diagnosed with food allergies, eosinophilic esophagitis, environmental allergies, asthma, eczema, and primary immunodeficiency disorders. The Allergy and Immunology Division serves a wide patient population who live throughout DC, MD, and VA. Interns will have the opportunity to collaborate with a social worker to assist families from lower income backgrounds and interpreters to assist with non-English-speaking families. Interns may pick one of two rotation options with the Division of Allergy and Immunology.

A. Oral Food Challenge Clinic + Outpatient Therapy. During this rotation, interns will conduct consultation-liaison services during weekly oral food challenge clinics. Interns will see approximately 3-6 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 may also see 2-3 outpatients/week.

B. Eosinophilic Esophagitis Clinic + Outpatient Therapy. During this rotation, interns will conduct consultation-liaison services during monthly multidisciplinary eosinophilic esophagitis (EoE) clinics, which provide patients diagnosed with EoE the opportunity to meet with allergy, gastroenterology, nutrition, and psychology in one clinic. In this clinic, interns will see approximately 6-8 patients/month ranging in age from young child to young adulthood. Primary concerns during this clinic are patient and parent stress, anxiety, and depressive symptoms related to illness management, which may include elimination diets or daily medication management. Interns who participate in this rotation will see 4-5 outpatients/day on non-EoE clinic weeks.

The primary mental health concerns addressed during outpatient therapy in both rotations are anxiety and depressive symptoms related to food allergies, EoE, and primary immunodeficiency disorders (generally school-age children), adherence to medical routines, needle phobia, and adjustment to new diagnosis. Interns may also have the opportunity to engage in feeding therapy for anxiety related to food allergy or mild ARFID cases. Interns may also complete brief consultations with parents of young children who are navigating a new diagnosis or need assistance with a developmental transition related to their child's medical diagnosis (e.g., preparation for school). Therapy includes medical psychoeducation and CBT and exposure techniques.

- The Behavioral Pain Medicine Program at Children’s National is a multidisciplinary outpatient program specializing in pediatric chronic pain conditions. The intern will receive training in evaluation and treatment for youth with chronic and complex pain conditions including recurrent abdominal pain, musculoskeletal pain, complex regional pain syndrome, headaches/migraines, and postural orthostatic tachycardia syndrome (POTS), in addition to various somatic symptom related disorders. Physicians, psychologists, physical therapists, nurses, and interns work collaboratively to address the complex needs of these patients and their families with the goal of increasing patients’ functioning and improving overall quality of life. Treatment utilizes a multimodal approach with an emphasis on cognitive, behavioral, parent training, biofeedback, and acceptance and mindfulness-based interventions. Extensive collaboration with schools is an integral piece of the program.
- The Trauma and Burn Surgery rotation consists of providing outpatient and inpatient services to patients experiencing injuries (e.g. burns, motor vehicle accidents, dog bites) and their families. The internship rotation consists of inpatient consultation/liaison, multidisciplinary ambulatory clinic participation, and short-term therapy. Interns participate in psychosocial screening, brief intervention, and referrals within the multidisciplinary clinic. Common presenting concerns include adjustment to injury, procedural anxiety and trauma, posttraumatic stress, mood concerns, adherence difficulties, body image concerns, and parenting/family support. There are opportunities for training in Trauma-Focused Cognitive Behavioral Therapy in this rotation. The trauma service serves diverse and underserved populations across the District of Columbia, Maryland, and Virginia and provides training experiences with families from a variety of cultural and psychosocial presentations.
- The Solid Organ Transplant (cardiology and nephrology) rotation involves participation in multidisciplinary teams that provide pre- and post-transplant care to young children through young adults with chronic kidney disease and advanced cardiac diseases. Interns participating in this clinic will receive training in evaluation, consultation, and treatment for children receiving renal replacement therapy (dialysis and transplantation) and advanced cardiac therapies. The rotation consists of intervention services related to coping with chronic illness, motivational support to promote adherence, and behavioral management in the inpatient unit, cardiac ICU, outpatient clinic, and dialysis unit. Both nephrology and cardiology teams are comprised of faculty and staff from diverse backgrounds, serve diverse and underserved populations, and are committed to training opportunities with exposures to a variety of racial/ethnic, SES, and psychosocial presentations.

- The Gastroenterology rotation involves working with patients with a wide range of gastrointestinal disorders such as celiac disease, inflammatory bowel disease, and functional abdominal pain. Across the rotation, interns will provide diagnostic, consultation, and short-term therapy services to families with varied cultural, ethnic and socioeconomic backgrounds. There will be opportunities to observe and conduct brief consultations as part of a multidisciplinary team alongside physicians, education specialists, and dietitians, such as in the Celiac Disease Clinic. Outpatient behavioral medicine and therapy services are also provided to assist with medical, emotional, and behavioral management of illness. Common referral issues include psychoeducation, gut-brain dysregulation, coping with chronic illness, medical management barriers, anxiety, depression, eating and feeding disorders, and family conflict.
- The Pediatric Dermatology clinic is an embedded subspecialty clinic that provides services to a diverse population of young children through young adults with a variety of dermatological conditions. Interns will gain experience in assessment and intervention skills focused on child and family adherence to medical regimens, symptom management, and psychosocial adjustment to a chronic medical condition. Common referral questions include excessive scratching, medical non-adherence, needle phobia, anxiety, and depression. Interns have opportunities to provide behavioral consults, short-term treatment, and consultation with the medical team comprised of dermatologists, medical residents, and nurse practitioners.
- As a new offering for the 2024-2025 academic year, interns may pursue the optional Gender Health rotation through the [Division of Adolescent and Young Adult Medicine](#). The rotation will include conducting psychosocial consultations and providing short- and long-term therapy based on the unique needs of the patient and their family. Interns will have substantial opportunities to engage in a multi-disciplinary process as a part of this experience.
- The Early Childhood Behavioral Health Outpatient Treatment Rotation involves providing intervention to young children (0-6 years of age) and their families through the Division of Psychology. The intern would receive didactics in [Parent Child Interaction Therapy](#) (PCIT) and live supervision in implementing PCIT with families from an L1 Certified PCIT trainer. While we cannot guarantee certification as a PCIT-therapist following the training year, this may be a possibility for some interns. The intern can also gain experience implementing intervention with young children presenting with developmental delays and autism spectrum disorder, including individual treatment and group work. While this is a treatment-focused rotation, interns can also gain experience conducting initial intake interviews and brief consultations with young children and their families. Interns have the opportunity to gain experience

working with families with a range of backgrounds with regard to race, ethnicity, and insurance status. Training occurs in the Takoma clinic. Certain cases that are started while on this rotation may be continued as part of the intern's outpatient therapy caseload for the duration of the year.

- The Mood Disorders Program in OPD is a multidisciplinary outpatient program that provides services to a diverse population of children and adolescents diagnosed with mood disorders (e.g. major depression, pediatric bipolar disorder, disruptive mood dysregulation disorder), and their families utilizing CBT and DBT techniques. Interns will gain experience in the evaluation and treatment of mood disorders through individual, family, and group therapy (optional). The intern will see approximately 3-4 patients on their rotation day. During this rotation, the intern will also receive supervised training in our Comprehensive Outpatient DBT program, which will include seeing individual patients, participating in weekly consultation team meetings, phone coaching, and co-leading skills groups.

Outpatient Assessment Experience Rotations

During the 6 months that interns are not rotating through the Inpatient Psychiatric Units, Consult, and Primary Care, they complete at least one assessment rotation (1 day per week). ***As noted above, an additional 6-month outpatient assessment rotation is an option for the elective rotation.*** 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. Interns choose from the following, although not all are guaranteed to be offered each year. Assessment rotations are described below:

- The Division of Pediatric Neuropsychology provides outpatient evaluations to children from preschool through young adulthood. Children commonly seen for neuropsychological services include those with known medical or neurological disorders (e.g., epilepsy, brain tumor, leukemia, sickle cell, genetic conditions, congenital heart disease, concussion, as well as those with neurodevelopmental disorders. Interns will gain experience in clinical interviewing, test administration, scoring, interpretation, report writing, and verbal communication of results to families and other professionals, supervised by a neuropsychologist. Interns are invited to participate in the weekly Pediatric Neuropsychology seminar and other didactic opportunities. The standard rotation (1 day/week for 6 months) can be described as an *exposure* to clinical neuropsychology using the taxonomy for education and training guidelines. An enhanced pediatric neuropsychology *experience* (2 days/week for 6 months; 2 rotations in neuropsychology and/ or CASD) 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. Interns may be exposed to one or more of the following specific clinical populations:

- General medical/ neurodevelopmental disorders
 - Attention and Executive Function Disorders (Executive Function Clinic)
 - Mild Traumatic Brain Injury/ Sports Concussion

- The Center for Autism Spectrum Disorders (CASD), within the Division of Pediatric Neuropsychology, provides multidisciplinary evaluation and treatment services for children with autism spectrum disorders and their families, with a particular specialty in working with high-functioning forms of autism. Interns completing this rotation will be involved in assessing individuals having, or suspected of having, ASD. Interns completing this rotation will administer and interpret tests, write assessment reports, conduct school consultations and present results at both multidisciplinary meetings and in feedback sessions with families. In addition, CASD offers intervention services for families, including behavior management, social skills and executive function 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 standard rotation in CASD (1 day/week for 6 months) provides an *exposure* to this population (per the taxonomy for education and training guidelines). An enhanced *experience* (2 days per week for 6 months) may be available to interns with a particular interest in autism spectrum disorders or neuropsychological assessment (2 rotations within CASD or can combine CASD with another Neuropsychology rotation). Options in this rotation include:
 - Developmental or diagnostic assessment of younger children
 - Neuropsychological assessment of children and adolescents (for interns with prior experience in neuropsychology and/ or autism assessment)
 - Diagnostic evaluation of Autism Spectrum Disorders (ADOS)
 - Individual/group intervention targeting executive functioning skills in children/adolescents diagnosed with ASD

- The Child Development Program, located at the main hospital, provides developmental evaluation and diagnostic assessment of children ages birth to 4. Interns are supervised in administration, scoring, interpretation and feedback with instruments that are specialized for this young population (e.g., Bayley Scales, DAS-II, ADOS-2). Children referred for evaluation may have a wide range of conditions affecting development, including genetic conditions, birth complications, neurologic injury, chronic illness, or may be on an atypical path of social 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 as part of this rotation.

Didactics:

The internship program features a variety of didactic seminars and conferences on development, psychopathology, clinical techniques, medical conditions, health care delivery systems, health equity, diversity, and research. Didactics include the Intern Seminar Series, Diversity Seminar Series, and Psychiatry and Behavioral Sciences Grand Rounds. Interns have the opportunity to develop professional skills by giving a Behavioral Health Grand Rounds presentation at the end of the training year on a topic of their interest or expertise. Interns spend approximately 10% of their time in didactic seminars.

Spanish Training Emphasis Program (STEP)

The *Spanish Training Emphasis Program's* (STEP) mission is to address mental health disparities for Latinx children, adolescents, young adults, and their families by increasing the availability of bilingual psychologists who are trained in the provision of bilingual, culturally competent therapy and assessment services. Through formalized training activities, this program is designed to be inclusive for all psychology interns who wish to increase their confidence, competence, and comfort in serving Spanish-speaking families who receive care at Children's National Hospital. All interns will receive didactic training in multicultural competency, with special consideration of common challenges for Latinx families, such as varying levels of acculturation, issues related to immigration status, barriers to care, and stress related to intersecting minoritized identities. Interns are also invited to join the optional monthly STEP meetings, which include more didactic content (relevant to all trainees) as well as process groups for bilingual trainees to increase their clinical vocabulary, allow for space to consult on culturally sensitive case conceptualizations, and promote self-reflection regarding bilingual and multicultural care. Additionally, there may be coordinated opportunities for direct service provision (therapy, consultation, assessment) to Spanish-preferring families through multiple clinics, including Integrated Primary Care, Child Development Clinic, Outpatient Psychology, Neuropsychology, and Center for Autism Spectrum Disorders. Bilingual trainees will have the opportunity to receive supervision in Spanish with a licensed bilingual psychologist. Further, STEP aims to improve overall care for the Latinx community by increasing the availability of training materials, resources, manuals on therapy modalities, and treatment worksheets in the Spanish language. For those interested, the DMV region allows for trainees to pursue advocacy and program development opportunities with the help of our STEP team.

Research and Advocacy:

Interns who have completed their dissertation research are able to become involved in research programs or advocacy efforts if they desire. Research opportunities are available with many faculty members, depending on an intern's special interests. Many of the Psychology faculty are affiliated with the Children's Health Advocacy Institute at Children's National and interns could be involved in projects such as the Community Health Improvement Week, training in advocacy on the federal level, or Advocacy Day at the Capital Area Food Bank.

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 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 unit and the Pediatric Consultation service. Supervision varies in clinics; always includes case discussions, with 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 twelve-month rotations. Supervisors rate interns on a set of scales designed to evaluate their performance on the nine Profession-Wide Competencies and discuss feedback with the interns. These evaluations are primarily designed to ensure that the interns are making optimal use of their training year. The interns meet individually with the Training Directors at the training year onset to develop specific short- and long-term training goals. Interns also follow up with quarterly meetings with the Training Director(s) to review and revise goals over time. Letters are sent to the director of each intern's doctoral training program mid-way through the training year and at the completion of the internship.

The internship is conceptualized as an evolving training program, with continuous self-review and quality enhancement. Interns, training directors and supervisors engage in

consistent evaluation of individual training goals throughout the internship year. Interns complete regular 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 and COVID-19

Our training program is committed to ensuring the health and well-being of our interns while ensuring continuing our high-level training and breadth of training opportunities. We have been able to successfully pivot between fully in-person, fully virtual, and hybrid models of training since the beginning of the pandemic. Our fully virtual model allowed for a transition to telehealth and virtual supervision for all rotations, including inpatient care. Hybrid training consists of in-person clinical care for some services and virtual clinical care for others. Interns are encouraged to communicate any extenuating circumstances that may alter their ability to provide in-person services. The Infection Control Department at Children's National provides training for incoming interns on safety in the workplace with regard to COVID-19. Interns at Children's National fall under the purview of the Psychology and Behavioral Health Division and rules and guidelines are therefore established specifically for them by the Training Directors and Division to ensure their safety. As we were able to do successfully this past year, we are confident in our ability to continue training in all rotations under any conditions. Interns in the 2019-2020 class were able to shift all services to virtual delivery starting in March, 2020. Interns in the 2020-2021 class experienced a blended hybrid model. More of the rotations were in-person for internship in the 2021-2022 cohort, and the 2022-2023 and 2023-2024 cohorts are primarily in-person. We are experienced with the shifting priorities and equipped to modify training needs should the pandemic worsen or improve.

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.

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Washington, DC 20002-4242

STIPEND AND BENEFITS

Interns receive a yearly stipend of \$48,006 plus the fringe benefit package for all trainees at Children's National. In addition, interns receive a professional fund of \$1,000 and will receive a \$500 stipend for moving expenses. 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 doctoral internship is a full-time experience for the calendar year, beginning July 1, 2024 and ending June 30, 2025.

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 though strong candidates from other programs will be considered. 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, 2023. 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 3 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, 2023**. Interviews will be conducted entirely virtually this year on 2 dates: **January 10th and 17th, 2024**. 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.

REQUIREMENTS FOR MATRICULATION

All Occupational Health requirements and pre-employment requirements must be satisfied prior to June 30. The District of Columbia Municipal Regulation Title 22 requires new employees/trainees to have a physical health screen. In addition, Children’s National requires proof of immunity for Tdap (Tetanus, Diphtheria, Pertussis), Flu (seasonal), and COVID-19. All applicants must complete the required labs and urine drug screening, which will test for the following: ETOH, amphetamines, barbiturates, benzodiazepines, cocaine metabolites, marijuana metabolites, opiates and phencyclidines. A positive result for any of these substances will potentially make the candidate ineligible for hire. A background check is also required, which will pull information from the following databases below. Under DC law, Children’s National is barred from hiring anyone with a conviction within the prior 7 years related to abuse, illegal substances or theft. Children’s National is prohibited from hiring anyone who is a registered sex offender, or who has been excluded from federal health care programs. Therefore, any history related to these prohibitions will make the candidate ineligible for hire. Inability to verify stated previous employment or education will also make the candidate ineligible for hire.

Sterling Background Check

- SSN Trace
- County Criminal Record
- State Criminal Record
- Federal Criminal Record
- Driver’s Record
- Employment Verification
- Education Verification
- FACIS L3 – Fraud and Abuse Control Information System
- DOJ Sex Offender Search

- Extended Global Sanctions

Psychology Faculty

Kaushal Amatya, Ph.D., 2015, Virginia Polytechnic Institute and State University, Assistant Professor, Divisions of Nephrology and Cardiology

Lilia Andrew, Ph.D., 2017, Wayne State University, Assistant Professor, Director of Research, Anxiety Disorders Program (ADP), Division of Psychology and Behavioral Health

Ellen Bartolini, Psy.D., 2016, Widener University-Delaware Law, Assistant Professor, Developing Brain Institute, Prenatal Pediatrics Institute, Psychology and Behavioral Health

Molly Basch, Ph.D. 2021, University of Florida. Assistant Professor, Youth Pride Clinic, Division of Adolescent and Young Adult Medicine.

Chelsey Bowman, Ph.D., 2021, Boston University, Wheelock College of Education and Human Development, Assistant Professor, Chronic Pain, Headache, Division of Psychology and Behavioral Health

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

Shayna Coburn, Ph.D., 2015, Arizona State University, Associate Professor, Celiac Disease Program

Lauren Clary, Ph.D., 2010, Saint Louis University, Associate Professor of Pediatrics & Psychology and Behavioral Health, Division of Endocrinology & Diabetes; Training Director

Megan Connolly, Ph.D., 2016, Northwestern University, Assistant Professor, Divisions of Hematology, Oncology, and Bone Marrow Transplant

Gretchen Cruz Figueroa, Psy.D., 2016, Carlos Albizu University, Clinical Assistant Professor, Ryan White Program (HIV Services)

Melissa R. Dvorsky, Ph.D., 2018, Virginia Commonwealth University, Assistant Professor, Division of Psychology and Behavioral Health

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

Angelica Eddington, Ph.D., 2012, Oklahoma State University, Associate Professor, Division of Endocrinology & Diabetes

Erica Eisenman, Psy.D. 2013, Xavier University. Assistant Professor, Whole Bear Care: Primary Care Behavioral Health Services

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

Dana Footer, Psy.D., 2015, Roosevelt University, Assistant Professor, Divisions of Hematology, Oncology, and Bone Marrow Transplant

Laura Gray, Ph.D., 2014, The George Washington University, Assistant Professor, Behavioral Pain Medicine, Division of Anesthesiology

Leandra Godoy, Ph.D., 2013, University of Massachusetts Boston, Associate Professor of Pediatrics & Psychology and Behavioral Health, Child Health Advocacy Institute

Tyish Hall Brown, Ph.D., 2008, University of Maryland, Associate Professor, Director of Behavioral Sleep Medicine within the Division of Pulmonary and Sleep Medicine

Serene Habayeb, Ph.D., 2018, Catholic University of America. Assistant Professor, Early Childhood and Autism

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

Amanda Hastings, Psy.D. 2013. Argosy University. Assistant Professor, Early Childhood Behavioral Health Program, Psychology and Behavioral Health

Linda Herbert, Ph.D., 2011, University of Maryland Baltimore County, Associate Professor, Division of Allergy and Immunology

Julie E. Heier, Ph.D., 2018, University of Texas at Austin. Assistant Professor, Division of Psychology and Behavioral Health; Division of Colorectal, Dermatology, and Pediatrics, Whole Bear Care: Primary Care Behavioral Health Services

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

Melissa O'Connell Liggett, Ph.D., 2007, University of Maryland Baltimore County, Assistant Professor, Child Development Clinic, Coordinator NICU Fellows Follow-Up

Maria Lauer, Psy.D., 2018, Lehigh University. Assistant Professor, Whole Bear Care: Primary Care Behavioral Health Services

Eleanor Mackey, Ph.D., 2007, University of Miami, Associate Professor, Director of Mental Health Services, Bariatric Surgery, Division of Psychology and Behavioral Health

Britlan Malek, Psy.D., 2003, George Washington University School of Medicine, Assistant Professor, Child Development Program & Diagnostic Assessments, Division of Psychology and Behavioral Health

Donna Marschall, Ph.D., 2002, George Mason University, Clinical Associate Professor, Director, Whole Bear Care: Primary Care Behavioral Health Services

Haley Meagher, Ph.D. 2020, Catholic University of America. Assistant Professor. Child Development Clinic.

Stephanie Merwin, Ph.D., 2018, University of Maryland College Park, Assistant Professor, Hematology, Oncology, Bone Marrow Transplant

Michael Mintz, Psy.D., 2011, George Washington University, Clinical Associate Professor, Associate Training Director of the Child Development Clinic

Sharde Pettis, Psy.D., 2021. Xavier University. Assistant Professor, Whole Bear Care: Primary Care Behavioral Health Services.

Nikita Rodrigues, Ph.D., 2019, Georgia State University, Assistant Professor, Whole Bear Care: Primary Care Behavioral Health Services

Mi-Young Ryee, Ph.D., 2005, University of Virginia Curry School of Education, Assistant Professor, Division of Psychology and Behavioral Health; Associate Training Director

Erin M. Sadler, Psy.D., 2018, Yeshiva University, Clinical Assistant Professor, Division of Psychology and Behavioral Health, Co-Director, Mood Disorders Program

Komal Sharma-Patel, Ph.D., 2009, St. John's University, Assistant Professor, Psychology & Behavioral Health

Sharon Shih, Ph.D., 2021, Georgia State University, Assistant Professor, Whole Bear Care: Primary Care Behavioral Health Services

Avante Smack, Ph.D. 2018, Northwestern University, Assistant Professor, Whole Bear Care: Primary Care Behavioral Health Services

Hannah Snyder, Ph.D., 2018. George Washington University, Division of Psychology and Behavioral Health.

Olivia Soutullo, Ph.D., 2018, University of Florida, Assistant Professor of Pediatrics & Psychology and Behavioral Health, Child Health Advocacy Institute

Randi Streisand, Ph.D., 1998, University of Florida, Professor and Chief, Division of Psychology & Behavioral Health; Center for Translational Research

Carrie Tully, Ph.D., 2015, Virginia Commonwealth University, Assistant Professor, Psychology and Behavioral Health, Division of Trauma and Burn Surgery, Associate Training Director

Tracy Vozar, Ph.D., IMH-E (IV-R) CPSY, 2008. The University of Iowa. Clinical Director, Perinatal Behavioral Health.

Noelle Wolf, Psy.D., 2019, University of Indianapolis, Assistant Professor, Whole Bear Care: Primary Care Behavioral Health Services

Deborah Zlotnik, Ph.D., 2013, St. John's University, Clinical Instructor, Inpatient Psychiatry

Neuropsychology Faculty

Kathleen Atmore, Psy.D., 1992, Minnesota School of Professional Psychology, Assistant Professor, Autism Behavioral Consultation Service (ABC)

Madison Berl, Ph.D., ABPP-CN, 2002, George Mason University, Professor, Director of Research and Scholarship, Division of Neuropsychology

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

Gerard Gioia, Ph.D., 1984, University of North Carolina at Chapel Hill, Professor, Division of Pediatric Neuropsychology; Director, Safe Concussion Outcome, Recovery & Education (SCORE) Program

Cole Hague, Ph.D., 2019, University of Texas Southwestern, Assistant Professor, Division of Neuropsychology.

Anne P. Inge, Ph.D., 2009, University of Miami, Assistant Professor, Center for Autism Spectrum Disorders; Clinical Director Division of Neuropsychology; Training Director, Leadership Education in Neurodevelopmental and Related Disabilities (LEND) Program

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

Lauren Kenworthy, Ph.D., 1993, University of Maryland, Professor; Chief, Division of Neuropsychology Director, Center for Autism Spectrum Disorders

Hayley Loblein, PhD, 2019, The University of Texas at Austin, Assistant Professor, Assistant Clinical Director, Division of Neuropsychology

Marissa Miller, Ph.D., 2017, University of South Carolina, Assistant Professor, Center for Autism Spectrum Disorders, Division of Neuropsychology.

Ashley Muskett, Ph.D., 2021, Virginia Tech, Assistant Professor, Center for Autism Spectrum Disorder, Division of Neuropsychology

Julie B. Newman, Ph.D., ABPP-CN, 2009, Wayne State University, Assistant Professor, Assistant Training Director in Neuropsychology

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

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

Allison Ratto, Ph.D., 2014, University of North Carolina at Chapel Hill, Assistant Professor, Center for Autism Spectrum Disorder, Assistant Clinical Director, Division of Neuropsychology

Srishti Rau, PhD., 2016, Catholic University of America, Assistant Professor, Assistant Training Director, Center for Autism Spectrum Disorders and Division of Neuropsychology

Rod G. Salgado, Ph.D., 2020, University of Oregon, Assistant Professor, Center for Autism Spectrum Disorders, Division of Neuropsychology

Jacqueline Sanz, Ph.D., ABPP-CN, 2008, UCLA, Associate Professor, Division of Neuropsychology; Co-Director of Cardiac Neurodevelopmental Outcome Program (CANDO)

Jyssa Seebeck, Ph.D., 2021, Seattle Pacific University, Assistant Professor, Center for Autism Spectrum Disorders, Division of Neuropsychology

Leigh Sepeta, Ph.D., 2010, UCLA, Director, Inpatient Neuropsychology, Assistant Professor, Division of Neuropsychology

Yuri Shishido, Ph.D., 2018, Georgia State University, Assistant Professor, Division of Neuropsychology

John Strang, Psy.D., 2009, George Washington University, Associate Professor, Center for Autism Spectrum Disorders and Gender Development Program, Division of Neuropsychology

Christina Thomas, Ph.D., 2021, University of Houston, Assistant Professor, Division of Neuropsychology
Christopher Vaughan, Psy.D., 2007, Loyola University in Maryland, Assistant Professor, Assistant Director of SCORE Program, Division of Neuropsychology

Karin S. Walsh, Psy.D., 2004, Loyola University in Maryland, Associate Professor, Assistant Director of Research and Scholarship, Division of Neuropsychology, Brain Tumor Institute & Gilbert Neurofibromatosis Institute

Psychiatry

Elana Neshkes, M.D., 2016, George Washington University School of Medicine and Health Sciences. Assistant Professor, Psychiatry & Behavioral Sciences.

Colby Tyson, M.D., 2013, George Washington University School of Medicine and Health Sciences, Assistant Professor, Psychiatry & Behavioral Sciences.

Priya Punnoose, M.D., 2014, American University of Antigua, Instructor, Psychiatry & Behavioral Sciences.

Nasima Nusrat, M.D., 2001, Eastern Virginia Medical School, Assistant Clinical Professor, Psychiatry and Behavioral Sciences.

Adelaide Robb, M.D., 1987, John's Hopkins University, Professor, Chief, Psychiatry & Behavioral Sciences.