



**DOCTORAL PSYCHOLOGY INTERNSHIP
TRAINING PROGRAM
Brochure
2019 - 2020**

Application deadline November 23, 2018

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**Jefferson Center
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4851 Independence St.
Wheat Ridge, CO 80033
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Association of Psychology Postdoctoral and Internships Center Member

JEFFERSON CENTER
Building Hope Changing Lives Strengthening Community

Accreditation Disclosure Statement

Jefferson Center is accredited by the Office of Program Consultation and Accreditation American Psychological Association and participates in the APPIC Internship Matching Program. Applicants must complete the APPIC on-line [APPI](#). This internship site agrees to abide by the APPIC policy that no person at this training facility will solicit, accept, or use any ranking-related information from any intern applicant.

Questions related to Jefferson Center Internship program accreditation status should be directed to the Commission on Accreditation:

Office of Program Consultation and Accreditation American Psychological Association
750 1st Street, NE, Washington, DC 20002
Phone: (202) 336-5979 / Email: apaaccred@apa.org
Web: www.apa.org/ed/accreditation

All other questions about the internship program may be directed to:

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Wheat Ridge, CO 80033

Kathy Baur, Ph.D.
Doctoral Psychology Internship Coordinator
Email: KathyB@jcmh.org or
Phone: 303.425.0300

Non-Discrimination Statement

Jefferson Center is committed to a policy of providing educational opportunities to all qualified students regardless of economic or social status, and will not discriminate on the basis of race, color, religion, sex, marital status, beliefs, age, national origin, sexual orientation, physical or mental disability or any other legally protected category. Jefferson Center is a Drug-Free and Tobacco Free Workplace.

Jefferson Center's Mission

To inspire hope, improve lives and strengthen our community by providing mental health and related solutions for individuals and families.

Jefferson Center's Vision

A community where mental health matters and care is accessible to all.

Overview of Jefferson Center

Jefferson Center (Jefferson Center) is a private 501(c) (3) not-for-profit community mental health center serving Jefferson, Clear Creek and Gilpin counties for more than 50 years. Jefferson Center's programs and services are designed to foster recovery and resilience for individuals of all ages who have mental health problems. As a private non-profit, Jefferson Center served more than 25,000 people in 2014. Our services are provided through numerous clinical locations in our three-county service area, in addition to schools, nursing homes, senior centers, and other partner locations throughout our community.

Jefferson Center recognizes that physical and mental health are linked. Research indicates that better integration of behavioral health and physical health care can have a positive impact on quality, costs and outcomes while also reducing health disparities. Since 1995, Jefferson Center has provided integrated health care to benefit clients through our successful partnerships with health care entities and organizations such as Federally Qualified Health Centers (FQHS's), substance abuse providers, school-based health clinics, and community primary care practices. Our wellness **now!** prevention program offers individualized coaching and classes.

To further our mission, we have chosen to participate in the ongoing training of new professionals by serving as an internship site, both for master's level and Ph.D./Psy.D. interns.

Clientele Served

Jefferson Center serves clients that are predominantly low-income, with health coverage through Medicaid, or who are uninsured or underinsured. Jefferson Center targets those most in need. In FY 2014, 90% of clients served had incomes below \$15,000, and 72% had serious mental illness or other disabilities. 26% of clients were children under the age of 18. However, Jefferson Center serves individuals of all income strata, with the full range of difficulties from mild or moderate to severe. The client population is diverse, including a relatively large Latino/Hispanic community; Center services stress cultural diversity awareness and appropriate skill bases among staff. For all clients, regardless of the program in which they are enrolled, Jefferson Center provides an array of services based upon individual needs: individual, group and family therapy, case management, medication evaluation and management, and emergency services, as needed. Through our Speaker's Bureau, the evidence-based Mental Health First Aid classes, wellness classes and other community outreach presentations, we raise awareness and dispel myths about mental illness, provide tips and tools for mental wellness, and help inform the community about ways to access

help, including the wide variety of services that the Center offers (e.g. wellness classes, specialized programs for children/youth, outreach to older adults, etc.).

Training Philosophy

The Jefferson Center Doctoral Psychology Internship Program seeks to train interns to become clinical psychologists with a firm foundation in health services psychology. Our philosophy is three-fold: (1) that training in health services psychology is a continual developmental process, (2) that providing a broad range of training opportunities is optimum for the growth of developing clinical skills, and (3) that clinical health services psychology is a science-based discipline and it is important to apply research to inform practice.

First, our philosophy emphasizes the continual professional development of our interns. Jefferson Center seeks to build on the skills developed during the doctoral education and practicum placements through systematic assessment and training. As interns progress through the internship rotations, they are given more and more complex cases in therapy and assessment. By the end of the internship year, interns should graduate as competent entry-level clinical psychologists who can function in a variety of settings and continue to develop professionally throughout their careers. Thus, our developmental approach ensures that training for practice in clinical psychology is sequential, cumulative, and graded in complexity.

Second, our philosophy provides a broad range of training opportunities for optimum development of clinical skills. Jefferson Center offers a broad range of training sites that cover the entire developmental spectrum. Through two major and four minor rotations, interns practice in a variety of settings that gives them a diverse set of clinical experiences and prepares them for work in a variety of professional positions.

Finally, our philosophy is that health services psychology must be a science-based discipline. We seek to further develop the appreciation of science as the foundation for the practice of clinical psychology throughout our training program. Research informs the practice of psychology at Jefferson Center from our use of the evidence-based Partnership in Change Outcome Management System, to our use of evidence based treatment practices (EBPs) throughout our programming, and ongoing outcome research in our Performance, Quality and Effectiveness (PQ&E) department. Our internship program exposes interns to ongoing use of research to inform treatment across all rotations and gives them experience in participating in the design and monitoring of outcomes research.

Training Program Description

Our internship program provides comprehensive training that is broad and general, developmental, and anchored in the practitioner-scientist model. Our training focuses on profession-wide competency areas derived through a multi-step process that are expected for entry-level practice. Ongoing evaluation of intern functioning in specific competency areas allows us to track progress and address areas that may require further training. Interns are evaluated on their demonstration of appropriate knowledge,

skills, and attitudes in the key competency areas.

Intern training is enhanced by early identification of individual training needs and interests. During the first month of training, all interns complete a self-assessment that provides information to develop an individualized training plan to address not only individual differences in prior training, but also clinical interests and career goals. Various training approaches are utilized across settings, including direct supervision by experienced clinical supervisor psychologists, direct observation (either live or video/electronic) of the intern, participation in co-therapy, utilization of role-play and enactment, observational learning, formal didactic training, and promotion of reflective practice through self-reflection and self-evaluation to facilitate continuous improvement of professional performance.

By incorporating a mentoring model coupled with experiential training under close supervision, our program is designed to nurture interns toward success. Training is sequential, cumulative, and increasing in complexity over the course of the internship. Interns are expected to move toward professional independence as they progress through the training year. This ensures that interns will be able to demonstrate the levels of competency that are necessary for entry-level practice or post-doctoral training at the end of their training.

The program's training model promotes appreciation and understanding of diversity by ensuring nondiscrimination in all training approaches, by addressing diversity as a competency area, and by creating an environment that nurtures success for all interns.

In addition to experiential training, didactic seminars focus on providing current research-based education on the above goals. Interns participate in seminars related to professional development, ethics, culture and practice, theory of assessment, treatment of psychological disorders, and the relationship between psychological and physical health.

Training Goals

The Doctoral Psychology Internship Program at Jefferson Center is committed to training that emphasizes both the professional and personal development of interns in a community mental health setting. After the completion of the internship year, interns will have the skills necessary to enter the field of psychology based on the following goals:

Goal 1:

Interns will achieve competence appropriate to their professional developmental level in the area of evidence-based practice in intervention.

Goal 2:

Interns will achieve competence appropriate to their professional developmental level in the area of evidence-based practice in assessment.

Goal 3:

Interns will achieve competence appropriate to their professional developmental level in the area of ethical and legal standards.

Goal 4:

Interns will achieve competence appropriate to their professional developmental level in the area of individual and cultural diversity.

Goal 5:

Interns will achieve competence appropriate to their professional developmental level in the area of research.

Goal 6:

Interns will achieve competence appropriate to their professional developmental level in the area of professional values and attitudes

Goal 7:

Interns will achieve competence appropriate to their professional developmental level in the area of communications and interpersonal skills

Goal 8:

Interns will achieve competence appropriate to their professional developmental level in the area of consultation/inter-professional/interdisciplinary.

Goal 9:

Interns will achieve competence appropriate to their professional developmental level in the area of Supervision.

Each of these goals will be achieved through focus on specific objectives and the development of specific related competencies.

Training Schedule

The internship training year starts in September and concludes the last week of August the following year (52 weeks, excluding Personal Annual Leave and holidays). Interns are expected to work 45 – 50 hours per week (approximately 20 hours per week or 50% of time is spent in face-to-face contact) and must complete 2000 hours for successful completion of the internship program. The schedule below provides an *approximation* of the number of hours interns will spend each week in the following activities:

- **Major Clinical Rotations**

Each intern will participate in one 16 – 24 hour Major Clinical Rotation each six-month period. The Internship Program will attempt to match the interns with their major rotation of choice during each six-month rotation. In the event of competing interests, the desired rotations can be alternated at the end of the first six-month period, allowing interns to be matched with their area/s of interest. There may be consideration of individualized programs that include two three month rotations, for example, within the six-month block, depending on intern interest and program availability for a briefer rotation. Time for team meetings, group supervision, documentation and other paperwork is built into the rotation.

Major Clinical Rotation Options	Description	Length of Rotation	Number of Hours per Week
Adult Services	Outpatient - Intakes, Individual and Group Therapy; Specialized programs in older adult, DBT	6 months	16 - 24
Family Services	Outpatient - Intakes, Individual, Family and Group Therapy Specialized service opportunities in home based, early intervention	6 months	16 - 24
Integrated Care	Brief behavioral health interventions in a primary care setting; psycho-educational classes on health and wellness	6 months	16 - 24

- **Major Psychological Assessment Rotation**

Psychological Assessments	Psychological evaluation (testing, report writing, consultation and feedback).	12 months	6 - 8 hours
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- **Minor Rotations**

Each intern will participate in 2 minor rotations to provide experience in several key competencies of health services psychologists.

Minor Rotation	Description	Length of Rotation	Number of Hours per Week
Access / Emergency	Behavioral health assessment, crisis and emergency assessment and intervention	6 months	12 hours
Outcome Research	Research	12 months	4 hours

- **Supervision - 4 - 6 hours**
 - **2 hours** – Individual with primary supervisor
 - **2 hours** – psychological assessment supervisor
 - **1 hour** – Access rotation supervisor
 - **1 hour** – supervision of supervision

- **Didactic Training and Seminars – 2 hours**

- **Committee Involvement - optional**

Interns are also encouraged to participate on one of several Jefferson Center committees, as an added value to their experience, time and interest permitting.

Jefferson Center uses multidisciplinary teams across all settings. Interns will have the opportunity to interact daily with staff from virtually all mental health disciplines including social work, psychiatry, nursing, licenses counselors, and peer specialists. On our Integrated Care rotation, interns will work across most medical disciplines.

Sample Weekly Schedule

Weekly Schedule	September – February (6 Months)	March – August (6 Months)
16 - 24 HOURS Includes staff meetings, documentation, etc.	MAJOR CLINICAL ROTATION #1 Adult Outpatient – 18 -20 hours. There may be consideration of individualized programs that include two three-month rotations, for example within the six-month block, depending on intern interest and program availability for a briefer rotation.	MAJOR CLINICAL ROTATION #2 Integrated Care– 20 hours
8 HOURS	Access / Emergency Rotation	
4 – 6 HOURS	SUPERVISION. 2 hours – Primary 2 hours – psych assessment 1 hour – Access/ER supervision 1 hour - Research 1 hour - supervision of supervision	SUPERVISION. 2 hours – Primary 2 hours – psych assessment 1 hour - Research 1 hour - supervision of supervision
2 HOURS	Didactic Trainings	Didactic Trainings
6 - 8 HOURS	Psychological Assessments	Psychological Assessments
4 HOURS	Outcome Research and Evaluation	Outcome Research and Evaluation

** Each intern will be expected to complete 8 Psychological Evaluations (6 hours administer full battery, 4 hours to score & synthesize, 2 hours to review with supervisor, 4 hours to final write up; 1 hour to give feedback to client, 2 hours chart documentation, 1 hour to communicate with referral source = 20 hours total)*

Supervision

Each intern will be assigned a licensed psychologist as their primary clinical supervisor who will provide two hours per week of face-to-face, formal, individual supervision. After six months, interns will rotate supervisors in order to broaden their experience of supervisory styles. Supervision will focus on review of the intern’s caseload, discussion of specific cases, professional development, assessments, and evaluation of training progress. Interns will also receive supervision from on-site supervisors, specific to their major and minor rotations.

Training Seminars

Interns will attend at least two hours per week of didactic training. There are 4 monthly seminars covering professional issues, assessment, evidence based practices and journal club. There are also weekly didactics which cover a wide range of clinical topics. (Please see sample schedules in Appendix). Each intern is required to present three times over the course of the training year: 1) a formal case presentation supported by an empirical or theoretical foundation; 2) a research-focused presentation, such as their dissertation project, and 3) a presentation of their research study from the Outcome research rotation. Agency staff is invited to attend these presentations.

Psychological Assessment

The program recognizes that the ability to competently perform psychological evaluations is one of the distinctive features of practicing psychologists. Interns are expected to have acquired knowledge and technical skills in graduate school sufficient to accurately administer and score a full psychological battery of tests. The emphasis in the internship program is to further develop the intern's ability to integrate data and to write succinct, high quality reports.

Each intern will be required to complete six integrated psychological evaluations during the year. Referrals may come from Adult or Family Services teams. Evaluations will generally include a clinical interview; administering, scoring and interpreting a full battery of intellectual and personality assessments, including projective and objective measures; writing a report and providing feedback to the person being tested (for children, including parent/guardian) and referral sources.

Successful Completion of Internship

In order for interns to successfully complete the program they must:

- obtain ratings of at least a "3" (Entry Level Professional Mastery) on all items for each goal/competency area on their end-of-year Intern Performance Evaluation;
- complete 6 integrated psychological assessments;
- present a case study utilizing evidence-based interventions or assessments before the Doctoral Psychology Internship Training Committee;
- not be found to have engaged in any significant ethical transgressions.

Due Process for Intern Training Problems

The training program at Jefferson Center is committed to maintaining a positive working environment. Effective communication between an intern, supervisor and/or Training Director is essential to fostering a respectful and courteous environment. It is the right and responsibility of the intern to report problems with training and/or supervision. The Doctoral psychology internship is a program of Jefferson Center and as such, psychology interns are expected to abide by all agency policies, regulations and guidelines governing organizational practices and individual conduct. Interns are also expected to abide by the ethical standards and principles set forth by the American Psychological Association and Association of Psychology Postdoctoral and Internship

Centers (APPIC). Alleged intern misconduct or violation of organizational practices will come under the jurisdiction of the training program. Interns are subject to remediation and are protected by due process (please refer to Section 2: Policies and Procedures, Doctoral Psychology Intern Manual).

Administration of the Internship

The Doctoral Psychology Internship Training Director directs and organizes the training program and its resources, ensures the integrity and quality of the program, oversees the clinical aspects including the provision of quality care to clients. In the rare event of an unsuccessful internship resulting in a recommendation of termination from the program and Jefferson Center, the Chief Executive Officer of Jefferson Center has final responsibility.

The Internship Coordinator oversees the organizational and administrative aspects of the program; documents and maintains interns' training records, monitors and evaluates the training program's goals and activities, and seeks to ensure that the training program consistently meets all APA standards.

The Psychology Internship Training Committee members are responsible for the selection of interns, for provision of primary supervision by a licensed psychologist which includes clinical responsibility for all of the interns' clinical work and cases, and are significantly involved in the operation of the training program, including contributing toward the didactic training seminars.

This internship program agrees to abide by the APPIC policy that no person at this training facility will solicit, accept or use any ranking-related information from any intern applicant.

Stipend & Benefit

Jefferson Center currently has two Doctoral internship positions budgeted. The current stipend for the internship is \$25,000. In addition, the Center's benefit package is available. Psychology interns receive a full benefit package, including the Center's contributions toward health and dental insurance, a medical and dependent care flexible spending plan, life insurance, professional liability insurance, short and long-term disability insurance, an EAP program, 16 days of Personal Annual Leave (PAL) for vacation, personal, or sick leave, 4 "working" holidays (holidays when the Center is open and the individual may take that day or a subsequent day off in order to respect diversity of cultural/religious practice), and 8.5 holidays when the Center is closed.

**Financial and Other Benefit Support for Upcoming Training Year 2019 – 2020
Full time Interns (2)**

Annual Stipend/Salary for Full-time Interns	\$25,000	
Annual Stipend/Salary for Half-time Interns	n/a	
Program provides access to medical insurance for intern?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
If access to medical insurance is provided:		
Trainee contribution to cost required?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Coverage of family member(s) available?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Coverage of legally married partner available?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Coverage of domestic partner available?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Hours of Annual Paid Personal Time Off (PTO and/or Vacation)	160 PAL	
Hours of Annual Paid Sick Leave	0 - included in PAL	
In the event of medical conditions and/or family needs that require extended leave, does the program allow reasonable unpaid leave to interns/residents in excess of personal time off and sick leave?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Other Benefits (please describe): Dental insurance, vision insurance, a medical and dependent care flexible spending plan, life insurance, professional liability insurance, short and long-term disability insurance, an EAP program, 12 holidays		

Application Process and Selection Criteria for 2019 – 2020 Training year

Direct Hour Requirements

Total Direct Contact Intervention Hours	Yes	500 hours
Total Direct Contact Assessment Hours	No	N/A

Jefferson Center and its Doctoral Psychology Internship Program are committed to the recruitment of culturally and ethnically diverse interns. We encourage inquiries and applications from all qualified individuals.

Completed applications are to be received no later than **November 23, 2018** and are expected to meet the following requirements:

:

- Doctoral student in an APA-accredited Clinical or Counseling Psychology program or in a re-specialization training program in Clinical or Counseling Psychology within an APA-accredited program
- Approval for internship status by graduate program Training Director
- Academic coursework completed by the end of the academic year preceding the start of internship
- Cumulative GPA of 3.4 or greater

- Completion of 4 integrated psychological reports, including projective, objective and cognitive assessments:
 - minimum of 1 child/adolescent administered
 - minimum of 1 adult battery administered
 - minimum of 1 WISC or WAIS administered
 - preferred applicants with have a minimum of 2 Rorschachs administered, preferably to both an adult and child/adolescent (Exner scoring system preferred)
- Completion of at least 500 practicum intervention hours by the start of the internship including:
 - adults/older adults
 - children/adolescents
 - evidence based practices
- Approval of dissertation proposal by application deadline
- Dissertation defended by the start of the internship
- A de-identified psychological assessment report is required with the application

Applications are reviewed by members of the Training Committee. Our selection criteria are based on a "goodness-of-fit" with our practitioner-scientist model, and we look for Interns whose training goals match the training that we offer. The program looks not only at the total number of practicum hours but the quality of those hours in terms of the type of setting as well as experience with empirically supported treatments. If you have no Rorschach experience or limited Rorschach experience, please note how you would obtain experience should you be matched with our site. All students who submitted a completed application will be notified of their interview status by **December 6, 2018**.

Based on the quality of the application and the goodness of fit between the applicant's training goals and the internship program, approximately twenty-five applicants are invited for an interview. Interviews are conducted in January and although on-site interviews are preferred, we accommodate interviews via Skype when travel is not possible for the applicant.

Following the completion of the interviews, the Training Committee meets to rank order applicants, which is based on both the submitted application and the interview. The final ranking order is determined by consensus of the Training Committee. This internship site agrees to abide by the APPIC policy that no person at this training facility will solicit, accept, or use any ranking-related information from any intern applicant. Following the results of the APPIC Match, a letter confirming the match with Jefferson Center's Doctoral Psychology Internship will be sent to the incoming intern with a copy to the DCT of their program.

Results of the APPIC Match constitute a binding agreement between the matched applicants and the program. However, as stated in our listing in the APPIC directory,

final appointment of applicants to the internship at Jefferson Center is contingent on matched applicants passing a criminal background check. If not a US Citizen, you will be required to provide documentation to verify eligibility following match and before employment. .

Initial Post-Internship Positions (2014 – 2017)

	2014-2017	
Total # of interns who were in the 3 cohorts	6	
Total # of interns who did not seek employment because they returned to their doctoral program/are completing doctoral degree	0	
	PD	EP
Community mental health center	1	2
Federally qualified health center	0	3

Thank you for your interest in our internship program. Please feel free to contact Dr. Kathy Baur at (kathyb@icmh.org) with any questions about the Internship Program.

Appendix

Seminar Schedule from Training Year 2016/17

Training Site Descriptions

2016-2017 Doctoral Internship - Weekly Didactic & Monthly Seminars				
Date Time	Presenter	Title	Description	Learning Objectives
9/22/16 1:00-2:30	Larry James, PsyD, J.D	Ethical and Legal Issues in the Practice of Psychology	Review, compare, and apply the following: 1. APA Ethical Principles of Psychologists and Code of Conduct. 2. Colorado Mental Health Practice Act (C.R.S. 12-43-101, et seq.). 3. Colorado State Board of Psychologist Examiners Regulations (3CCR 721-1). 4. Colorado State Board of Psychologist Examiners Policies.	1. Apply APA ethics code to legal responsibilities of psychologists in Colorado.
9/22/16 3:00-4:00 Prof Issues Seminar	Kristen Anderson, PhD	Transition from Graduate School to the Professional World	Open discussion of interns' expectations for the training years and what to expect during this important transition year.	1. Explore issues that commonly occur when during the internship year.
9/22/16 3:00-4:00 EBP Seminar	Jill Kauffman, PhD	MMSE - The Folstein	Understand the importance of assessing mental status and learn how to use the Folstein MMSE to assess.	1. Practice using Folstein MMSE for assessing mental status
9/29/16 1:00-5:00 EBP Seminar	Kathy Baur, PhD	Acceptance and Commitment Therapy (ACT)	Acceptance and Commitment therapy is a cognitive behavioral approach with the goal of creating psychological flexibility rather than symptom reduction. Looking at Relational Frame theory as the underpinning of ACT, learn how the processes relate to change and practice strategies in class.	1. Understand the underlying theory of ACT. 2. Define the 6 processes of ACT and how they relate to therapy. 3. Demonstrate application of ACT processes in therapeutic setting.
10/6/16 3:00-5:00 Assess Seminar	Katie Greisch, PsyD	Performing a culturally sensitive Community needs assessment for Developing Relevant programming Cultural/ Diversity Training	Seminar will focus on the steps in the first phase of program development, including conducting a needs assessment, environmental scan, and interviews with community stakeholders and key informants.	1. Interns will gain understanding of the phasic process of program development and be able to identify the steps necessary to create effective community-based programming. 2. Interns will learn how to plan and conduct a community needs assessment.
10/13/16 3:00-4:00 Journal Club	Masha (Maria) Zarlengo, PhD	Introduction to Journal club	Discuss expectations for journal club and identify topics for the next 2 months.	1. Understand the purpose of journal club as it relates to ongoing scholarly inquiry

Date Time	Presenter	Title	Description	Learning Objectives
10/13/16 4:00 - 5:00p	Kathy Baur, PhD	Theories and Models of Supervision	Review of current models of clinical supervision exploring similarities and difference. Learn the important differences in how clinical supervision differs from administrative supervision and how to strike a balance. Discuss supervisor transference and countertransference issues and how to explore them with supervisees.	<ol style="list-style-type: none"> 1. Identify the role of supervision in clinical work. 2. Review existing models of clinical supervision. 3. Explore developmental models of supervision. 4. Understand the impact of culture and diversity factors in the supervision relationship
10/20/16 3:00-5:00 EBP Seminar	Matthew Enright, PsyD Jill Kauffman, PhD	Panic Control Therapy	Panic Control Therapy is considered the gold standard of treatment for panic disorders. Following the protocol by Kraske and Barlow learn the fundamentals and how to apply it clinically.	<ol style="list-style-type: none"> 1. Review the mechanisms of anxiety and those that maintain avoidance response. 2. Understand the 3 phases of treatment in Panic Control Therapy. 3. Learn the importance of exposure in the treatment of panic disorder.
10/27/16 3:00-4:00 Prof Issues Seminar	Elissa Stein, PhD Kristen Anderson, PhD	After the Doctoral Internship – Part I -Post Docs -Common Interview Mistakes -How to Present your Skills, Experience and Strengths	Post Docs Common Interviewing Mistakes How to Present your Skills, Experience and Strengths	<ol style="list-style-type: none"> 1. Identify experiences that enhance your CVs. 2. Learn strategies to manage interview anxiety.
10/27/16 4:00-5:00	Ann Kelly, LCP	Mandated Reporting	Review of mandated reporting basics, including, JCMH procedures, with emphasis on application of Colorado reporting standards and discussion of exceptions to standard reporting situations.	<ol style="list-style-type: none"> 1. Identify personnel responsible for reporting 2. Identify responsibilities of reporting parties 3. Apply knowledge to unusual client scenarios which might generate challenging ethical dilemmas.
11/3/16 3:00-5:00 Assess Seminar	Kimberly Bertelsen, PsyD	Writing Recommendations That Work Cultural / Diversity Training	This didactic is aimed at helping the interns learn how to write comprehensive and effective recommendations based on psychological testing results. Special attention will be paid to contextual issues that impact the client including cultural and diversity issues.	<ol style="list-style-type: none"> 1. Interns will learn about the components necessary for comprehensive and effective recommendations 2. They will practice these skills by reviewing example reports of results and creating recommendations based on those results 3. Will provide question/answer period around particularly difficult cases and how to provide necessary recommendations in those types of cases
11/10/16 3:00-4:00 Journal Club	Masha (Maria) Zarlengo, PhD	New perspective: psychologists in primary care.	Discussing changing roles of psychologist in the advent of integrated care.	

Date Time	Presenter	Title	Description	Learning Objectives
11/10/16 4:00-5:00	Susan Seda, LCSW	Understanding the Disability System	Provides overview of the history and development of the system. Understanding the disability process and the role of mental health.	1. Understand how the disability application process works. 2. Identify obstacles for clients when dealing with disability system.
11/17/16 3:00-4:30	Elissa Stein, PhD Kristen Anderson, PhD	Models and Theories of Clinical Consultation Cultural/Diversity Training	Consultation is one of the core roles of a clinical psychologist. An understanding of the underlying theories and models of consultation is critical to providing appropriate and effective service to the consultee. The importance of taking a contextual approach in consultation to provide culturally appropriate services will also be discussed.	1. Learn the basic theories and models of consultation as they relate to psychologists. 2. Understand the application of consultation in a behavioral health setting. 3. Identify perceptions of consultation by requesting parties in order to provide appropriate and effective service.
11/24/16		Thanksgiving Holiday		
12/1/16 3:00-5:00 Assess Seminar	Kimberly Bertelsen, PsyD	Assessment feedback: Keeping it within context Cultural/ Diversity Training	In order for an assessment to be truly effective, the findings must be relayed to the referring party and family effectively. Core components of feedback will be discussed and with the opportunity to role play a feedback session.	1. Understand the importance of feedback in helping referring party make the most use of the assessment. 2. Learn contextual approach to providing feedback with sensitivity to cultural and diversity factors.
12/8/16 3:00-4:00 Journal Seminar	Masha (Maria) Zarlengo, PhD	Psychotherapeutic approaches to treatment of chronic pain	Discussion of interns' experience in working with clients with chronic pain. Review of articles focusing on nonmedical approaches to treatment of chronic pain.	
12/8/16 4:00-5:00	Kat Crocker, BA. RT	InShape: An interdisciplinary approach to health in the SPMI population	Learn about an EBP "InSHAPE" and its impact on the SPMI population. This program will be starting at the Center this summer.	1. Learn how to increase program effectiveness with community collaboration and inter-disciplinary teams 2. Understand the impact of exercise on mental health disorders
12/15/16 3:00-5:00 Prof Issues Seminar	Elissa Stein, PhD Kristen Anderson, PhD	Strengths Finder	Leading from your strengths. Review of individual strengths profiles.	1. Understand personal strengths.

Date Time	Presenter	Title	Description	Learning Objectives
12/22/16 EBP Seminar	Computer based Training	TF-CBT	TF-CBT addresses the multiple domains of trauma impact including but not limited to Posttraumatic Stress Disorder (PTSD), depression, anxiety, externalizing behavior problems, relationship and attachment problems, school problems and cognitive problems. TF-CBT includes skills for regulating affect, behavior, thoughts and relationships, trauma processing, and enhancing safety, trust, parenting skills and family communication.	1. Complete online training to be certified in TF-CBT
12/29/16 EBP Seminar	Computer based Training	CPT	CPT is a manualized therapy used by clinicians to help people recover from posttraumatic stress disorder (PTSD) and related conditions. It includes elements of cognitive behavioral therapy (CBT) treatments. CPT has proven effective in treating PTSD across a variety of populations, including combat veterans, sexual assault victims, and refugees. CPT can be provided in individual and group treatment formats. CPT incorporates trauma-specific cognitive techniques to help individuals with PTSD more accurately appraise these "stuck points" and progress toward recovery.	1. Complete online training to be certified in CPT
1/12/17 3:00-4:00 Journal Club	Masha (Maria) Zarlengo, PhD	Psychological approach to refugee crisis Cultural/Diversity Training	Discussion of interns' experience and thoughts working with refugee clients. Review of articles focusing on related psychological issues.	
1/12/201 74:00- 5:00	Kathy Baur, PhD	Presentation Skills for Psychologist	In the many roles psychologists fill, the need to be able to clearly and succinctly present information is a critical skill. Whether it is consultation with colleagues or feedback to families, how one communicates can have a significant impact on the message being conveyed. The presentation skills learned in this workshop will be used in the upcoming career talks to be given at local area high schools.	1. Learn how to present information in a succinct manner targeted to the audience. 2. Build confidence for presenting to groups of professionals

Date Time	Presenter	Title	Description	Learning Objectives
1/19/17 3:00-5:00 EBP Seminar	Margaret Lackey, MD	Diagnoses and Adult Psychopharmacology	This presentation will review the different classes of medications used with the SPMI population and use case examples to illustrate efficacy, side effects, and impact on treatment.	<ol style="list-style-type: none"> 1. Understand the different classes of medication for adults with severe and persistent mental illness. 2. Learn the basic mechanisms by which these medications work and their contraindications.
1/26/17 3:00-5:00 Prof Issues Seminar	Dr. Angela Green, PhD Director of Behavioral Health, MCPN, MCPN 3701 S Broadway, Englewood CO	“So you’re a psychologist; now what?”	Psychologist Roles The field of psychology has grown and changed dramatically over the last decade. Dr. Green will address current career paths in the field with emphasis on behavioral services in medical settings.	<ol style="list-style-type: none"> 1. Review career paths in psychology. 2. Learn about the field of behavioral medicine and integrated health care.
2/2/17 3:00-5:00 Assess Seminar	Kimberly Bertelsen, PsyD	Ethical and Legal Issues in Psychological Assessment	This didactic is aimed at helping the interns understand the ethical considerations in providing psychological assessments. Focus will be on reviewing the APA guidelines and applying them to case examples.	<ol style="list-style-type: none"> 1. Interns will review APA guidelines as they relate to ethical consideration for psychological assessment. 2. Interns will use case studies to apply principles to assessment cases.
2/9/2017 3:00-4:00 Journal Club	Masha (Maria) Zarlengo, PhD	Exploring and using client’s spirituality in therapy Cultural/Diversity Training	Interns will read and review articles on spirituality, religiosity, and the use these concepts in psychotherapeutic interventions	
2/9/17 4:00 - 5:00	Carl Lafaro, LCSW	Important Clinical Considerations when Serving Veterans Cultural/Diversity Training	Stories about veterans struggling with mental health challenges appear daily in the news. Veterans experience mental health challenges and complete suicide at higher rates than the peers in the general population. Research consistently shows mental health providers as feeling ill-equipped to effectively serve the population. Armed with additional knowledge about the veteran population, clinicians will be better prepared to engage, assess, and assist this high-risk, high-need population.	<ol style="list-style-type: none"> 1. Attendees gain overview of differences and commonalities among different cohorts of the veteran population. 2. Attendees made aware of barriers to accessing care. 3. Attendees provided with evidence-based tools to engage veterans. 4. Attendees gain information about suicide trends in this population. 5. Attendees learn of additional resources to improve their ability to deliver mental health services to this population.

Date Time	Presenter	Title	Description	Learning Objectives
2/16/17 8:30-4:00 2/17/17 8:30-4:00 EBP Seminar	Heather Trish, NCC, LPCfacilitator	Applied Suicide Intervention Skills Training (ASIST)	ASIST is a standardized and customizable two-day, two-trainer, workshop designed for members of all caregiving groups. The emphasis is on teaching suicide first-aid to help a person at risk stay safe and seek further help as needed. Participants learn to use a suicide intervention model to identify persons with thoughts of suicide, seek a shared understanding of reasons for dying and living, develop a safe plan based upon a review of risk, be prepared to do follow-up, and become involved in suicide-safer community networks.	<ol style="list-style-type: none"> 1. Recognize that caregivers and persons at risk are affected by personal and societal attitudes about suicide. 2. Discuss suicide in a direct manner with someone at risk. 3. Identify risk alerts and develop related safe plans. 4. Demonstrate the skills required to intervene with a person at risk of suicide. 5. List the types of resources available to a person at risk, including themselves.
2/23/17 3:00-4:00 Prof Issues Seminar	Dr. Bechtold Dr. Poletti	Psychiatry and Psychology - How to Work Together Collaboratively	Discussion of the training and background of physicians and psychiatrists and how best to collaborate with psychologists	1. Understand differences in training and viewpoint between psychiatry and psychology
2/23/17 4:00-5:00	Rhonda Hornsby, LCSW	Assertive Community Treatment with the SPMI population	Assertive Community Treatment (ACT) is an evidence-based practice that improves outcomes for people with severe mental illness who are most at-risk of homelessness, psychiatric crisis and hospitalization, and involvement in the criminal justice system. ACT, a multidisciplinary team approach with community outreach, is one of the oldest and most widely researched evidence-based practices in behavioral healthcare for people with severe mental illness.	<ol style="list-style-type: none"> 1. Learn the components of ACT and how they are applied 2. Understand the impact of community based services with the SPMI population
3/9/17 3:00-4:00 Journal Club	Masha (Maria) Zarlengo, PhD	Therapy with clients with cognitive and physical disability Cultural/Diversity Training	Interns will read and discuss articles on working with clients with disabilities and ways to apply the research to their existing clients.	

Date Time	Presenter	Title	Description	Learning Objectives
3/9/2017 4:00-5:00	Megan Ray, LPC	EPIC - effective Early Intervention for first episodes of psychosis	The Early Psychosis Intervention Clinic (EPIC) works with young people with psychotic disorders. These disorders can cause acute distress and confusion in a young person, as well as for their family and friends, and professionals. EPPIC aims to facilitate the early identification and treatment of psychosis and therefore reduce the disruption to the young person's functioning and psychosocial development. This training will review the development of this program, treatment modalities, and outcomes.	<ol style="list-style-type: none"> 1. Understand the rationale for the development of EPIC 2. Identify treatment modalities in the program 3. Review outcome data as to the effectiveness of the program
3/16/17 3:00-5:00 EBP Seminar	Harlan Austin, PhD	Understanding Addiction Through the Bio-Psychosocial Lens	This didactic is designed to provide interns an introduction to the complex nature of addiction. Interns will be provided a theoretical lens through which they can view addiction, the assessment of addiction, and the treatment of addiction.	<ol style="list-style-type: none"> 1. Gain an understanding of how addiction is viewed through a bio-psycho-social conceptualization. 2. Learn about assessment and treatment interventions aimed at treating addiction through the bio-psycho-social model.
3/23/17 3:00-4:00 Prof Issues Seminar	Elissa Stein, PhD Kristen Anderson, PhD	Self-Care	Internship year can be exciting, but full of stress. Identify self-care skills and create a self-care plan.	<ol style="list-style-type: none"> 1. Identify self-care skills 2. Create a self-care plan
3/24/17 8:30-3:00	Jefferson County Health and Human Services	SafeTALK Suicide Alertness Training and GLBTQ Information Cultural/Diversity Training	SafeTALK is a half-day alertness training that prepares anyone over the age of 15, regardless of prior experience or training, to become a suicide-alert helper. Second half of day focused on special considerations for the LGBTQ community.	<ol style="list-style-type: none"> 1. The simple yet effective TALK steps: Tell, Ask, Listen, and KeepSafe 2. Hands-on skills practice and development 3. Understanding sexual and gender orientation issues
4/6/17 3:00-5:00 Assess Seminar	Dan Fishbein, PhD	Pre-surgical Psychological (PPS) Assessments	This presentation reviewed some literature on Pre-Surgical Psychological Screening (PPS) to inform two questions: a) Is there research validation for various applications of PPS in successfully predicting outcome to surgery and post-surgical follow up? b) What is the scope of PPS, what functions might it provide, and how is it best used to help the client and the provider?	<ol style="list-style-type: none"> 1. Learn what PPS involves, how it is done, and how to design and frame a valid and appropriate pre-surgical psychological screening. 2. Learn about validation and reliability as it relates to certain outcomes and applications of PPS, in order to guide practice to stay ethical and supported by the data.
4/13/17 3:00-4:00 Journal Club	Masha (Maria) Zarlengo, PhD	Impact of Race on the Therapeutic Relationship Cultural/Diversity Training	Interns will read and discuss articles on the impact of race on the therapeutic relationship and apply the research to their existing clients.	

Date Time	Presenter	Title	Description	Learning Objectives
4/13/17 4:00-5:00 EBP Seminar	Leah Krusich, PsyD	Brainwise	Brain Wise is an interactive evidence-based program for building critical thinking and decision making skills in children and youth. It provides children, youth, parents, and staff with a common language to learn about and identify ways to problem solve. This creative and adaptable curriculum allows for use in various settings such as schools, group therapy, individual therapy, and juvenile justice. Brain Wise is used in all of Jefferson Center’s school-based and prevention team schools, The Road, Crossroads, and is being incorporated into Juvenile Mental Health Court.	1. Become familiar with the main concepts and terminology in order to participate in dialogue with children, youth, and families who have been exposed to Brain Wise through Jefferson Center. 2. Learn how to infuse your creativity and behavioral concepts into the learning experience, especially when working with youth who find some of the terminology “silly”.
4/27/17 3:00-4:00 Prof Issues Seminar	Elissa Stein, PhD Kristen Anderson, PhD	Ethical Issues in the Real World	Discussion of ethical issues in the workplace with special emphasis on transitioning to entry level psychologist positions.	1. Review of APA Ethical Code and its application in internship. 2. Increase awareness of the role of ethics in day to day clinical work.
4/27/17 4:00-5:00	Vance Wagner, LPC & Richard Miccio, LPC	Crisis Services at Jefferson Center: An Insider’s Perspective	Jefferson Center and Colorado Crisis Center provide 24/7 mobile and walk in services for our community. Learn about how crisis services are organized and provided through case studies and discussion.	1. Learn about the inception of CCC and the services it provides. 2. Understand how CCC services for our clients are coordinated back with the Center.
5/8/17 8:00am- 4:15pm	MultiplePresenters	The Rosenberry Conference: Fostering Health and Well-Being: Supporting Transgender and Gender Non-conforming Children and Adolescents Cultural/Diversity Training	Research examining the healthcare concerns and the healthcare needs of transgender children and youth indicates that all training for healthcare and social service professionals must include education about transgender people. The ultimate goal for such training is to reduce vulnerability and promote wellness among these children. This course will offer opportunities to increase competence, understanding, and skills to support the development, adjustment, and coping of transgender children, youth, and their families. Specifically, the course will focus on ways to reduce stigma and promote health and well-being within medical, school, and behavioral healthcare settings.	1. Upon completion of this conference, participants should be able to: 2. Explain key concepts of gender identity, transgender, and gender nonconforming identities in children and youth 3. Identify how acceptance promotes wellness among transgender and gender nonconforming children and youth 4. Describe ways to adapt school and community settings to be more inclusive of transgender and gender nonconforming children and youth 5. Identify strategies to incorporate gender supportive practices for the well-being of children and youth 6. Describe effective prevention and treatment strategies to improve wellbeing in transgender and gender nonconforming children and youth

Date Time	Presenter	Title	Description	Learning Objectives
5/11/17 3:00-5:00 EBP Seminar	Carol Prue, LPC	Eye Movement Desensitization Reprocessing (EMDR)	EMDR is a powerful tool for treating trauma. This training will provide an Overview of EMDR and how it is used in with trauma.	<ol style="list-style-type: none"> 1. Receive an introduction to EMDR Therapy. 2. Learn how EMDR Therapy works to reduce distress and symptoms of trauma. 3. Learn who may be a candidate for this therapy.
5/18/17 3:00-5:00	Amanda Koran & Tarah Pringle	Interns Dissertation Study presentations		
5/25/17 9:00-11 EBP Seminar	Anne Obermann, LCSW	Assessing cultural and diversity issues in family therapy Cultural/Diversity Training	Using a systems approach, the seminar works on understanding the contextual impact of social systems, culture, and diversity in family therapy.	<ol style="list-style-type: none"> 1. Explore family therapy from a systems perspective 2. Examine how your identity interacts with clients using a contextual framework.
5/25/17 3:00-4:00 Prof Issues Seminar	Lisa Fisher, MS, LPC Ann Meade, RN Elissa Stein, PhD Kristen Anderson, PhD	Integrated Health and Working on a Multidisciplinary Team	Discussion of the different disciplines in a multidisciplinary team and the unique role of a psychologist.	<ol style="list-style-type: none"> 1. Review of consultation models and the psychologist role.
6/1/17 3:00-5:00	Kimberly Bertelsen PsyD	Cultural and diversity issues in Assessment Cultural/Diversity Training	A consideration of culture is essential in the assessment of culturally diverse individuals with additional layers of complexity when compared with assessment of nonminority patients. In this seminar we will review issues of test bias and the importance of using culturally appropriate testing processes	<ol style="list-style-type: none"> 1. Understand bias in psychological assessment 2. Understand the impact of culture and diversity issues on the ethical delivery of psychological assessment 3. Identify culturally appropriate testing processes
6/8/17 3:00-4:00 Journal Club	Masha (Maria) Zarlengo, PhD	The importance of self-care for psychologists	Interns will read and discuss articles on the importance of self-care and discuss its protective factors regarding compassion fatigue.	
6/8/17 4:00-5:00	Wendy Morrison, PhD	Mindfulness in Schools: Pilot Study and Lessons Learned	This training will review the growing practice of school-based mindfulness programs for middle and high school students, and provides an example of a mindfulness pilot program development and implementation in a Jefferson County public school.	<ol style="list-style-type: none"> 1. Review the theory and research on school-based mindfulness programs 2. Identify the steps involved in creating a new school-based mindfulness program 3. Discuss the successes and challenges that emerged and the lessons learned for future school-based mindfulness programming initiatives

Date Time	Presenter	Title	Description	Learning Objectives
6/15/17 3:00-5:00 EBP Seminar	Paula R Prentice, PhD	Brief Trauma Treatment Protocol: for use in brief therapy	The Brief Trauma Treatment is a three session protocol meant for implementation in primary care settings. This presentation will be an introduction and discussion about BTT.	1. Review the existing criteria for PTSD and the Evidence-Based treatments for this diagnosis 2. Learn and discuss how primary care interventions improve access to behavioral health services 3. Introduce the Brief Trauma Treatment three session protocol and discuss the research 4. Review a case example in which the BTT was useful 5. Discuss ways in which this protocol could be helpful for interns now and in the future
6/22/17 3:00-4:00 Prof Issues Seminar	Marketing Dept Elissa Stein, PhD Kristen Anderson, PhD	Social Media Dos and Don'ts	Discussion of how the constant evolution of social media can make it tough to stay on top of best practices	1. Understand how social media presence affects one's job and professional reputation 2. Understand importance of boundaries and confidentiality in context of social media
6/22/17 4:00-5:00	Alexander Rhone	Collaborative Management of Client Care	The training provides a real life example of collaborating with outside providers. The case presented gives the facilitators experiences and insights to joining a treatment team. We will explore the benefits and challenges to working with people from other organizations. The training also provides strategies to consider when faced with collaboration challenges.	1. Identify the benefits to the client and Jefferson Center to coordinating care with outside agencies 2. Identify the challenges to care coordination and discuss strategies to address them
6/29/17 3:00-5:00	Tarah Pringle, MA Amanda Koran, MA	Case Presentations		
7/6/2017		4 th of July Holiday		
7/13/17 3:00-4:00	Masha (Maria) Zarlengo, PhD	Privilege and Depression: Variables to Consider Cultural/Diversity Training	Interns will read and discuss articles on interaction of Privilege and depressive mood in disenfranchised populations.	
7/13/17 4:00-5:00	Paula R Prentice, PhD	Creating and Promoting an Evidence-Based Tobacco Cessation Program: The Value of a Peer Support Model	This presentation will inform interns regarding evidence-based treatments for tobacco cessation, as well as the intricacies and nuances of moving toward a tobacco free culture at a mental health center.	1. Learn best practice in tobacco detection and referral (Ask, Advise, Assess, Assist, Arrange) 2. Review research and success stories regarding peer coaching for tobacco cessation 3. Discuss the challenges of changing a culture for wellness

Date Time	Presenter	Title	Description	Learning Objectives
7/20/17 3:00-5:00	Lauren Reedy, LPC, LAC	Narcotic/Opioid Abuse	This training will increase your knowledge of the current public health concern regarding prescription opioid and heroin abuse.	<ol style="list-style-type: none"> 1. Increase knowledge of Narcotics 2. The Epidemic-National and local statistics of opioid abuse 3. Impact on physical health Short-Term and Long-Term Effects 4. Impact on mental health disorders 5. Public Health Concerns 6. Recognizing opioid addiction and tips for treatment of this substance use disorder
7/27/17 3:00-4:00	John Talbot, PhD Jeanette Waxmonsky, PhD Elissa Stein, PhD Kristen Anderson, PhD	Where the Field of Psychology and the Behavioral Health Field is Going	Over the next ten years, Medicaid expansion, insurance company consolidation, and accountability requirements will reshape the field of psychology.	<ol style="list-style-type: none"> 1. Learn about the changing dynamics in the field of psychology, how to be ahead of the curve regarding reimbursement and data driven outcome requirements. 2. Become familiar with how to assess an agency for its readiness for all the changes in the field of psychology and behavioral health.
8/3/17 3:00-5:00 Assess Seminar	Kimberly Bertelsen, PsyD	Assessing for Malingering	Review of literature on assessing for malingering, discussion of ethical issues in assessing and case studies.	<ol style="list-style-type: none"> 1. Distinguish between malingering, factitious disorder, and somatization disorder. 2. Discuss research on how to assess for malingering. 3. Learn and practice with assessment tools for detecting malingering.
8/10/17 3:00-4:00 Journal Club	Masha (Maria) Zarlengo, PhD	Sexual Diversity in Clinical Practice Cultural/Diversity Training	Discussion of Diversity issues in the LGBTQ community and how it applies to clinical practice.	
8/10/17 4:00-5:00	Kathy Baur, PhD	Experiential Supervision Strategies	This workshop focuses on developing experiential strategies to help new therapists become more attuned to their internal experiences in the therapy room.	<ol style="list-style-type: none"> 1. Learn experiential strategies to increase new therapist awareness of their emotional responses to their clients 2. Practice these strategies in role plays to increase mastery of the skills
8/17/17 3:00 - 4:30	Amanda Koran & Tarah Pringle	Psychology Interns' Research Presentation		
8/24/17 3:00-4:00	Elissa Stein, PhD Kristen Anderson, PhD	How to Stay on Top of Best Practices	Discussion of staying current in the literature that informs our field and ways to accomplish this important aspect of being a psychologist.	<ol style="list-style-type: none"> 1. Identify systematic ways to stay current. 2. Discuss benefits of membership in professional organizations.
8/31/17		Graduation Ceremony		

Training Site and Rotation Descriptions

The Doctoral Psychology Internship offers three major rotations, including a choice of specialty programs within the Family Services and Adult Outpatient rotations. There are three minor rotations.

Major Clinical Rotations

1. Adult Outpatient – Independence Office

Population: Adult Outpatient Services (AOP) is the largest clinical network at Jefferson Center. It provides individual and group therapy to adults 18 yrs. and older who have been diagnosed with a Serious Mental Illness or Severe and Persistent Mental Illness, and who meet a level of acuity appropriate for a relatively brief episode of treatment (approximately 35 sessions annually). The majority of consumers have co-morbid illnesses, including addictions, personality disorders, developmental disorders and medical illnesses, and treatment is integrated and comprehensive. In FY 13, 2,661 clients were served, 97.5% adults and 2.5% children or adolescents. The race/ethnic breakdown of clients was: American Indian or Alaskan Native = 2.5%, Asian = 0.6%, Black or African-American = 2.9%, Hispanic/Latino = 18.3%, Native Hawaiian = 0.3%, White = 89.6%, and Other = 6.8%.

The highest represented diagnoses were depression and bipolar disorders. The primary diagnosis breakdown was as follows: ADHD = 1.4%, Adjustment d/o = 4.8%, Anxiety d/o = 11.6%, Bipolar d/o = 20.6%, Depression = 45.9%, Organic/Development Disorder = 0.3%, Other = 7.8%, Other Childhood Disorder = 0.4%, Psychotic Disorder = 5.9%, and Substance Related = 1.3%.

Training experiences: Interns are responsible for doing same-day intakes to assess needs. Depending on interns' training needs, they may either follow the case or transfer it to another clinician. Interns provide evidence-based treatments for a variety of behavioral health disorders and have the opportunity to participate in a dialectical behavior therapy skills group. Interns participate in team meetings and group supervision.

3. Family Services Outpatient – West Colfax office

Population: Clients are children, adolescents and families. The number of clients enrolled in FY13 was 1,612, with 17.4% adults, and 82.6% children/adolescents. Ethnic diversity was: American Indian or Alaskan Native = 2.6%, Asian = 2.1%, Black or African-American = 6.5%, Hispanic Latino = 26.6%, Native Hawaiian = 0.6%, White = 90.6% and Other = 4.5%. The most frequent diagnoses were adjustment disorders, depression and ADHD. The primary diagnosis breakdown was as follows: ADHD = 18%, Adjustment d/o = 26.3%, Anxiety d/o = 13%, Bipolar d/o = 1.8%, Depression = 19%, Organic/Development Disorder = 0.8%, Other = 10.7%, Other Childhood Disorder = 8.5%, Psychotic Disorder = 1.5%, and Substance Related = 0.5%.

Training experiences: Interns are responsible for doing same-day intakes to assess the needs of children, adolescents, and their families. Depending on interns' training needs, they may either follow the case or transfer it to another clinician. Interns provide evidence-based treatments for a variety of behavioral health disorders and can participate in a variety of groups. Interns participate in team meetings and group supervision.

5. **Integrated Care - MCPN**

Population: medical patients of Metro Community Provider Network (MCPN), the local Federally Qualified Health Center, co-morbid physical and behavioral health, mostly adult – some geriatric and few adolescent cases, diverse cultural backgrounds, underserved populations, Medicaid/Medicare common. The number of clients seen in FY13 in the internship program was 159, with 91.8% adult clients and 8.2% child/adolescent clients. The race/ethnic breakdown of clients was: American Indian or Alaskan Native = 0.6%, Asian = 1.9%, Black or African-American = 3.1%, Hispanic Latino = 17%, Native Hawaiian = 0%, White = 90.6% and Other = 5.7%. Depression was the most common diagnoses. The primary diagnosis breakdown was as follows: ADHD = 3.1%, Adjustment d/o = 18.2%, Anxiety d/o = 10.7%, Bipolar d/o = 1.9%, Depression = 25.2%, Organic/Development Disorder = 0%, Other = 35.8%, Other Childhood Disorder = 0%, Psychotic Disorder = 0.7%, and Substance Related = 1.3%.

Training experiences: Interns have direct contact with individuals with a variety of mental health issues for intake/evaluation, brief therapy, referral, care coordination, phone outreach and intervention, consultation with medical providers, and group/classes development and provision.

Major Psychological Assessment Rotation

Psychological Assessment – Independence office – primary location

Population: Primarily child and adolescent clients with some adult assessments for the purpose of differential diagnoses and for treatment recommendations in complex cases.

Training experiences: Interns participate in assessment seminars and complete a minimum of 6 integrated batteries over the course of the year.

Minor Rotations

1. **Access/Emergency – Crisis and Recovery Center**

Population: children, adolescents and adults in Jefferson, Gilpin and Clear Creek counties. In FY 13 the population using Access/ Emergency services were 25.8% children or adolescents and 74.2% adults. The ethnic diversity was: American Indian or Alaskan Native = 2.2%, Asian = 1.1%, Black or African-American = 5.4%, Hispanic/Latino = 11.8%, Native Hawaiian = 2.2%, White = 94.6%, and Other = 0%.

The highest represented diagnoses were depression and psychotic disorders,. The primary diagnosis breakdown was as follows: ADHD = 2.2%, Adjustment d/o = 10.9%, Anxiety d/o = 7.6%, Bipolar d/o = 9.8%, Depression = 28.3%, Organic/Development Disorder = 2.2%, Other = 20.7%, Other Childhood Disorder = 1.1%, Psychotic Disorder = 16.3%, and Substance Related = 1.1%.

Training experiences: Interns provide thorough evaluations on clients in crisis at the Jefferson Center's Crisis and Recovery office and at the Juvenile Assessment Center. These evaluations are used to determine appropriate level of care. Evaluations should be comprehensive and provide ample justification of their determinations and recommendations, which may include admitting the client to a hospital or alternative facility. Interns function as professionals alongside staff at these various facilities. Many of these crisis evaluations involve use of Motivational Interviewing and a Solution-Focused approach to helping the client develop a safety plan, manage their crisis, and plan for follow-up services. Interns collaborate with clients, family members, and/or other interested individuals. Interns also conduct intakes on clients referred from local psychiatric hospitals.

2. **Research – Independence office**

Training experiences: Jefferson Center's internship program supports the continued development and refinement of interns' research skills through promotion of their identity as practitioner-scientists and the integration of research skills with clinical experience. A minor rotation of 4 hours per week provides the intern with the opportunity to work in the area of program evaluation by participating in the Center's Performance, Quality and Effectiveness team. Interns may assist in program evaluation for various evidenced-based programs within the Center.