

Psychology Internship Program

2022-2023

Jersey Shore University Medical Center

Hackensack Meridian *Health*



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Hackensack
Meridian *Health*
Jersey Shore University
Medical Center

**Jersey Shore University Medical Center
Hackensack Meridian *Health***

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Overview of Hackensack Meridian *Health* Jersey Shore University Medical Center

Hackensack Meridian *Health* Jersey Shore University Medical Center in Neptune, New Jersey stands out as the Jersey Shore's premier not-for-profit health care facility. Hackensack Meridian *Health* has consistently been rated among the top performing health systems in New Jersey for clinical quality. Jersey Shore University Medical Center's inpatient psychiatric unit (Rosa 2) is a 29-bed unit with 26 voluntary beds and 3 Short Term Care Facility (STCF), or commitment beds, which treat adults suffering from psychiatric and emotional disorders. Jersey Shore University Medical Center houses K. Hovnanian Children's Hospital, which provides a rich consult/liaison experience, pediatric neurology and sleep medicine rotations, and a busy psychiatric emergency room. The Hackensack Meridian health System currently consists of several licensed psychologists, both on staff or credentialed for consults, each with specific areas of specialized treatment focus. We serve our community as psychotherapists, evaluators, consultants, and supervisors for a broad range of programs. We are committed to evidenced-based therapeutic approaches, social justice, and diversity. Jersey Shore University Medical Center offers a comprehensive suite of mental health services for outpatients and inpatients. These include individual psychotherapy, dyadic therapy, family therapy, group psychotherapy, personality assessment, neuropsychological testing, substance abuse and trauma recovery program.

Aims and Competencies of Training

The aim of the training program is to provide Interns with a broad-based clinical training that will prepare Interns to be ethical, competent and culturally sensitive practitioners. Completion of the program requires a minimum of 2,000 hours of supervised clinical and research experience and learning over the course of the one-year contract. The training year is structured to provide a progressive experience such that Interns are expected to have mastered competencies which are key to effective functioning as general clinicians, and psychologists. Interns will be expected to meet the following competencies:

Note: The competencies and related elements are consistent with the Standards of Accreditation (SoA) outlined by American Psychological Association (APA) Commission on Accreditation (CoA). The elements under each competency are drawn from the IR C-8.I (Profession Wide Competencies). There are also some elements specifically defined by Jersey Shore University Medical Center, which will be noted with an asterisk (*).

Research

- Demonstrates the substantially independent ability to critically evaluate and disseminate research or other scholarly activities (e.g., case conference, presentation, publications) at the local (including the host institution), regional, or national level.

Ethical and Legal Standards

- Be knowledgeable of and act in accordance with each of the following:
 - the current version of the APA Ethical Principles of Psychologists and Code of Conduct; Relevant laws, regulations, rules, and policies governing psychology at the organizational, local, state, regional, and federal levels; and relevant professional standards and guidelines.
- Recognize ethical dilemmas as they arise, and apply ethical decision-making processes in order to resolve the dilemmas.
- Conduct self in an ethical manner in all professional activities.

Individual and Cultural Diversity

- An understanding of how their own personal/cultural history, attitudes, and biases may affect how they understand and interact with people different from themselves;

- Knowledge of the current theoretical and empirical knowledge base as it relates to addressing diversity in all professional activities including research, training, supervision/consultation, and service;
- The ability to integrate awareness and knowledge of individual and cultural differences in the conduct of professional roles (e.g., research, services, and other professional activities). This includes the ability to apply a framework for working effectively with areas of individual and cultural diversity not previously encountered over the course of their careers. Also included is the ability to work effectively with individuals whose group membership, demographic characteristics, or worldviews create conflict with their own
- Demonstrate the ability to independently apply their knowledge and approach in working effectively with the range of diverse individuals and groups encountered during internship.

Professional Values and Attitudes

- Behave in ways that reflect the values and attitudes of psychology, including integrity, deportment, professional identity, accountability, lifelong learning, and concern for the welfare of others.
- Engage in self-reflection regarding one's personal and professional functioning; engage in activities to maintain and improve performance, well-being, and professional effectiveness.
- Actively seek and demonstrate openness and responsiveness to feedback and supervision.
- Respond professionally in increasingly complex situations with a greater degree of independence as they progress across levels of training.

Communication and Interpersonal Skills

- Develop and maintain effective relationships with a wide range of individuals, including colleagues, communities, organizations, supervisors, supervisees, and those receiving professional services.
- Produce and comprehend oral, nonverbal, and written communications that are informative and well-integrated; demonstrate a thorough grasp of professional language and concepts.
- Demonstrate effective interpersonal skills and the ability to manage difficult communication well.

Assessment

- Demonstrate current knowledge of diagnostic classification systems, functional and dysfunctional behaviors, including consideration of client strengths and psychopathology.

- Demonstrate understanding of human behavior within its context (e.g., family, social, societal and cultural). Demonstrate the ability to apply the knowledge of functional and dysfunctional behaviors including context to the assessment and/or diagnostic process.
- Select and apply assessment methods that draw from the best available empirical literature and that reflect the science of measurement and psychometrics; collect relevant data using multiple sources and methods appropriate to the identified goals and questions of the assessment as well as relevant diversity characteristics of the service recipient.
- Interpret assessment results, following current research and professional standards and guidelines, to inform case conceptualization, classification, and recommendations, while guarding against decision making biases, distinguishing the aspects of assessment that are subjective from those that are objective.
- Communicate orally and in written documents the findings and implications of the assessment in an accurate and effective manner sensitive to a range of audiences.

Intervention

- Establish and maintain effective relationships with the recipients of psychological services.
- Develop evidence-based intervention plans specific to the service delivery goals.
- Implement interventions informed by the current scientific literature, assessment findings, diversity characteristics, and contextual variables.
- Demonstrate the ability to apply the relevant research literature to clinical decision making.
- Modify and adapt evidence-based approaches effectively when a clear evidence-base is lacking.
- Evaluate intervention effectiveness, and adapt intervention goals and methods consistent with ongoing evaluation.

Supervision

Supervision involves the mentoring and monitoring of trainees and others in the development of competence and skill in professional practice and the effective evaluation of those skills. Supervisors act as role models and maintain responsibility for the activities they oversee. Trainees are expected to:

- Apply this knowledge in direct or simulated practice with psychology trainees, or other health professionals.

Consultation and Interprofessional/Interdisciplinary Skills

- Apply this knowledge in direct or simulated consultation with individuals and their families, other health care professionals, interprofessional groups, or systems related to health and

behavior. Direct or simulated practice examples of consultation and interprofessional/interdisciplinary skills include but are not limited to:

- role-played consultation with others
- peer consultation, provision of consultation to other trainees

Training Experiences

The training itself consists of a one year contract, with a minimum of 40 hours a week, meeting a minimum of 2000 training hours beginning on July 1 of the calendar year. More than 25% of Interns' time is spent in providing direct services.

Training is delivered through the following Learning Activities:

Psychological Evaluations: Interns will observe and conduct mental health screenings and psychological evaluations for all age ranges infant - geriatric. Interns will gain experience in systemic and cultural issues that can directly or indirectly influence these evaluations resulting in recommendations. Interns will have the opportunity to identify areas of interest in specialties such as Addiction Medicine and Geriatric Psychiatry. Upon graduation, Interns will be competent in these areas of assessment.

Therapy: At the start of training, Interns will begin to build a caseload of patients. Interns will provide Psychotherapeutic services to those who are experiencing psychological distress. Through didactics, supervision, and direct practice, Interns will become proficient in the treatment of patients experiencing psychological distress through evidence-based and other interventions.

Didactics: Trainees will participate in an extensive didactic lecture series. The Psychology Internship will partner with the General Psychiatry Residency at Jersey Shore University Medical Center and Interns will participate in a shared Case Conference and Psychopathology & Psychopharmacology lecture series with the General Psychiatry Residents. In addition, the Psychology Internship has an Intern Seminar that reviews the following: History and Systems of Psychology, Affective, Biological, Cognitive, Developmental, and Social Aspects of Behavior, Advanced Integrative Knowledge of Basic Discipline, Research Methods and Psychometrics. The Interns will participate in the Department of Psychiatry Grand Rounds which covers a vast amount of topics including Professionalism and Diversity. On a weekly basis, Interns will have at least two (2) hours dedicated to didactics.

Resources: The training committee consists of full-time psychologists and is supported by the Department of Psychiatry - a multidisciplinary team of Psychiatrists, Residents, Fellows, Social Workers, Nurses, other medical staff and a variety of support staff. Interns will be provided with a shared workspace with computers that have access to the electronic medical record. Additionally, Interns have

access to the medical library and Hackensack Meridian School of Medicine Resources. The Psychology Internship will partner with the Psychiatry Residency and Fellowship Programs for additional learning tools and resources.

Supervision and Evaluation of Progress: At a minimum, Interns will spend two hours per week in individual supervision by a licensed psychologist. This supervision will be regularly scheduled and in person. Interns will also participate in a combination of content and process-based focused group supervision facilitated by members of the training committee. Interns will receive regular feedback through the course of supervisions and formal written evaluations. Formal written evaluation will be completed by the Training Director on a quarterly basis. The Training Director will meet with the Intern in person upon completion of the formal evaluation on a quarterly basis. Training Directors will also be contacted at any other time when a training concern emerges so they will be able to assist in addressing the concern, including development of a remediation plan. Interns will be encouraged to discuss disagreements or lack of understanding regarding any aspect of the evaluation.

Applicant Requirements: For consideration for the JSUMC Psychology Internship position, applicants must have completed adequate and appropriate training for the position prior to application. As such, candidates will only be considered if they have completed their formal academic coursework toward a doctoral degree in professional psychology (e.g. clinical, counseling, school), successfully completed their institution's qualifying/comprehensive exams, and have participated in closely supervised experiential clinical training in practicum or externship placements. If offered an internship with JSUMC, we require completion of a criminal background check, at no cost to you. While employment is contingent upon successful completion of a background check, a criminal conviction does not automatically prohibit employment. Eligibility for employment will be determined by the administration, in consultation with Human Resources. Similarly, applicants are expected to submit to a urinalysis drug screen.

Psychology Internship Benefits and Salary: Interns will be on site for 40 hours each week. Each intern will be a full time employee of Hackensack Meridian Health Network and will have to comply with the HMHN onboarding process which includes physical examination and background check. The interns are provided a full benefit package which includes medical, dental, and prescription coverage. Interns are also provided three weeks paid time off (PTO) and six hospital holidays. The annual salary for the 12 month training period is \$34,320.

Application Process: Please provide a letter of interest, current Curriculum Vitae, and two letters of recommendation to JSUMCpsychologyinternship@hmn.org



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Proposed Schedule Educational Conferences

The following schedule provides a general schedule for Educational Conferences throughout the year. Every Wednesday (excluding the first Wednesday of the month), interns will attend the Department of Psychiatry Grand Rounds. Interns will have dedicated didactic time on Thursday afternoons in which they will partner with the Jersey Shore University Medical Center Residency Program on Case Conference, Psychopathology & Psychopharmacology Lectures. Interns will participate in a wide variety of topics specific to the Psychology Internship.

Week	Day	Course	Course Title	Course Director	Hours
Week 1	Orientation				
Week 2	W	Department of Psychiatry Grand Rounds	Various	Various	1.5
	TH	Intern Seminar	History and Systems of Psychology Part 1	Angelica Wills, Ph.D & Gina Radice-Vella, Psy.D	1
Week 3	W	Department of Psychiatry Grand Rounds	Various	Various	1.5
	TH	Intern Seminar	History and Systems of Psychology Part 2	Angelica Wills, Ph.D & Gina Radice-Vella, Psy.D	1
Week 4	W	Department of Psychiatry Grand Rounds	Various	Various	1.5
	TH	Intern Seminar	Affective Aspects of Behavior Part 1	Angelica Wills, Ph.D & Gina Radice-Vella, Psy.D	1
Week 5	W	Scholarly Activity/Research QI	Various	Various	1.5
	TH	Intern Seminar	Affective Aspects of Behavior Part 2	Angelica Wills, Ph.D & Gina Radice-Vella, Psy.D	1
Week 6	W	Department of Psychiatry Grand Rounds	Various	Various	1.5
	TH	Intern Seminar	Biological Aspects of Behavior Part 1	Angelica Wills, Ph.D & Gina Radice-Vella, Psy.D	1
Week 7	W	Department of Psychiatry Grand Rounds	Various	Various	1.5



	TH	Intern Seminar	Biological Aspects of Behavior Part 2	Angelica Wills, Ph.D & Gina Radice-Vella, Psy.D	1
Week 8	W	Department of Psychiatry Grand Rounds	Various	Various	1.5
	TH	Psychopharmacology	History of Psychopharmacology	Matthew Way, MD	1
Week 9	W	Department of Psychiatry Grand Rounds	Various	Various	1.5
	TH	Intern Seminar	Cognitive Aspects of Behavior Part 1	Angelica Wills, Ph.D & Gina Radice-Vella, Psy.D	1
Week 10	W	Scholarly Activity/Research QI	Various	Various	1.5
	TH	Intern Seminar	Cognitive Aspects of Behavior Part 1	Angelica Wills, Ph.D & Gina Radice-Vella, Psy.D	1
Week 11	W	Department of Psychiatry Grand Rounds	Various	Various	1.5
	TH	Intern Seminar	Developmental Aspects of Behavior Part 1	Angelica Wills, Ph.D & Gina Radice-Vella, Psy.D	1
Week 12	W	Department of Psychiatry Grand Rounds	Various	Various	1.5
	TH	Intern Seminar	Developmental Aspects of Behavior Part 2	Angelica Wills, Ph.D & Gina Radice-Vella, Psy.D	1
Week 13	W	Department of Psychiatry Grand Rounds	Various	Various	1.5
	TH	Intern Seminar	Social Aspects of Behavior Part 1	Angelica Wills, Ph.D & Gina Radice-Vella, Psy.D	1
Week 14	W	Scholarly Activity/Research QI	Various	Various	1.5
	TH	Intern Seminar	Advanced Integrative Knowledge of Basic Discipline Part 1	Angelica Wills, Ph.D & Gina Radice-Vella, Psy.D	1
Week 15	W	Department of Psychiatry Grand Rounds	Various	Various	1.5
	TH	Intern Seminar	Advanced Integrative Knowledge of Basic Discipline Part 2	Angelica Wills, Ph.D & Gina Radice-Vella, Psy.D	1
Week 16	W	Department of Psychiatry Grand Rounds	Various	Various	1.5
	TH	Psychopharmacology	Pharmacokinetics/Pharmacodynamics and Neurotransmitters	Kristen Clark, MD	1
Week 17	W	Department of Psychiatry Grand Rounds	Various	Various	1.5



	TH	Intern Seminar	Social Aspects of Behavior Part 2	Morgan Peltier, Ph.D	1
Week 18	W	Scholarly Activity/Research QI	Various	Various	1.5
	TH	Psychopharmacology	Pharmacogenomic Testing	Tiffani Stewart, PhD	1
Week 19	W	Department of Psychiatry Grand Rounds	Various	Various	1.5
	TH	Intern Seminar	Research Methods Part 1	Morgan Peltier, Ph.D	1
Week 20	W	Department of Psychiatry Grand Rounds	Various	Various	1.5
	TH	Psychopharmacology	Pharmacological Treatment of MDD Part 1	Kristen Clark, MD	1
Week 21	W	Department of Psychiatry Grand Rounds	Various	Various	1.5
	TH	Intern Seminar	Research Methods Part 2	Morgan Peltier, Ph.D	1
Week 22	W	Department of Psychiatry Grand Rounds	Various	Various	1.5
	TH	Psychopharmacology	Pharmacological Treatment of MDD Part 2	Kristen Clark, MD	1
Week 23	W	Scholarly Activity/Research QI	Various	Various	1.5
	TH	Psychopharmacology	Anxiety Disorders: Panic, GAD, OCD, PTSD	Matthew Way, MD	1
Week 24	W	Department of Psychiatry Grand Rounds	Various	Various	1.5
	TH	Psychopharmacology	Treatment of Bipolar Illness	Kristen Clark, MD	1
Week 25	W	Department of Psychiatry Grand Rounds	Various	Various	1.5
	TH	Intern Seminar	Statistical Analysis Part 1	Morgan Peltier, Ph.D	1
Week 26	W	Department of Psychiatry Grand Rounds	Various	Various	1.5
	TH	Case Conference	Case Conference	Meera Wells, MD	1
Week 27	W	Scholarly Activity/Research QI	Various	Various	1.5
	TH	Psychopharmacology	Supplements/Herbals/Integrative	Matthew Way, MD	1
Week 28	W	Department of Psychiatry Grand Rounds	Various	Various	1.5



	TH	Psychopharmacology	Psychosis and Schizophrenia	Kristen Clark, MD	1
Week 29	W	Department of Psychiatry Grand Rounds	Various	Various	1.5
	TH	Psychopharmacology	Substance Use Disorders	Hugo Franco, MD	1
Week 30	W	Department of Psychiatry Grand Rounds	Various	Various	1.5
	TH	Psychopathology	Dissociative Disorders	Peter Litwin, MD	1
Week 31	W	Scholarly Activity/Research QI	Various	Various	1.5
	TH	Psychopathology	Depressive Disorder	Saba Afzal, MD	1
Week 32	W	Department of Psychiatry Grand Rounds	Various	Various	1.5
	TH	Psychopathology	Personality Disorders	Syed Tirmazi, MD	1
Week 33	W	Department of Psychiatry Grand Rounds	Various	Various	1.5
	TH	Case Conference	Case Conference	Daniel Carrero, MD	1
Week 34	W	Department of Psychiatry Grand Rounds	Various	Various	1.5
	TH	Psychopathology	Sexual Dysfunctions and Gender Dysphoria	Syed Tirmazi, MD	1
Week 35	W	Scholarly Activity/Research QI	Various	Various	1.5
	TH	Psychopathology	Sleep Wake Disorder	Peter Litwin, MD	1
Week 36	W	Department of Psychiatry Grand Rounds	Various	Various	1.5
	TH	Psychopathology	Disruptive, Impulse Control and Conduct disorders	Lauren Kaczka-Weiss, DO	1
Week 37	W	Department of Psychiatry Grand Rounds	Various	Various	1.5
	TH	Psychopathology	OCD and related Disorders	Matthew Way, MD	1
Week 38	W	Department of Psychiatry Grand Rounds	Various	Various	1.5
	TH	Intern Seminar	Statistical Analysis Part 1	Angelica Wills, Ph.D & Gina Radice-Vella, Psy.D	1
Week 39	W	Department of Psychiatry Grand Rounds	Various	Various	1.5



	TH	Case Conference	Case Conference	Meera Wells, MD	1
Week 40	W	Scholarly Activity/Research QI	Various	Various	1.5
	TH	Psychopathology	Feeding and Eating Disorders	Saba Afzal, MD	1
Week 41	W	Department of Psychiatry Grand Rounds	Various	Various	1.5
	TH	Psychopathology	Elimination Disorders	Lauren Kaczka-Weiss, DO	1
Week 42	W	Department of Psychiatry Grand Rounds	Various	Various	1.5
	TH	Psychopathology	Anxiety Disorders	Matthew Way, MD	1
Week 43	W	Department of Psychiatry Grand Rounds	Various	Various	1.5
	TH	Case Conference	Case Conference	Meera Wells, MD	1
Week 44	W	Scholarly Activity/Research QI	Various	Various	1.5
	TH	Psychopathology	Neurodevelopmental Disorders, Paraphilic Disorders, Medication Induced Movement Disorders and Other Adverse Effects	Lauren Kaczka-Weiss, DO	1
Week 45	W	Department of Psychiatry Grand Rounds	Various	Various	1.5
	TH	Psychopharmacology	Delirium, Dementia and Agitation	Robert Stern, MD	1
Week 46	W	Department of Psychiatry Grand Rounds	Various	Various	1.5
	TH	Psychopathology	Somatic Symptoms and Related Disorders	Peter Litwin, MD	1
Week 47	W	Department of Psychiatry Grand Rounds	Various	Various	1.5
	TH	Case Conference	Case Conference	Meera Wells, MD	1
Week 48	W	Department of Psychiatry Grand Rounds	Various	Various	1.5
	TH	Intern Seminar	Psychometrics Part 1	Angelica Wills, Ph.D & Gina Radice-Vella, Psy.D	1
Week 49	W	Scholarly Activity/Research QI	Various	Various	1.5
	TH	Case Conference	Case Conference	Meera Wells, MD	1
Week 50	W	Department of Psychiatry	Various	Various	1.5



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		Grand Rounds			
	TH	Intern Seminar	Psychometrics Part 2	Angelica Wills, Ph.D & Gina Radice-Vella, Psy.D	1
Week 51	W	Department of Psychiatry Grand Rounds	Various	Various	1.5
	TH	Intern Seminar		Angelica Wills, Ph.D & Gina Radice-Vella, Psy.D	1
Week 52	W	Department of Psychiatry Grand Rounds	Various	Various	1.5
	TH	Intern Seminar		Angelica Wills, Ph.D & Gina Radice-Vella, Psy.D	1



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**PSYCHOLOGY INTERN
EVALUATION FORM**

Name of Intern:

Date:

Supervisor:

Evaluation Period:

Interns will receive regular verbal feedback through the course of supervisions and formal written evaluations completed by intern supervisors and other members of the care team, at the end of each rotation. Formal written evaluation will be completed by the Training Director on a quarterly basis and reviewed directly with the Intern. Intern supervisors and the Training Director will meet regularly, and when a training concern emerges, in order to address any concerns. This includes the development of a learning plan or remediation plan to ensure Intern progression and success in the program.

1-Significant improvement needed (significant improvement needed to meet expectations, fails to meet expectations, remediation required)

2-Developing skill level (expected level of competency pre-internship, marginally meets expectations, close supervision required on most cases)

3-Intermediate skill level (expected level of competency for an intern at mid-point of internship, routine or minimal supervision required on most cases)

4-Advanced skill level (expected level of competency for an intern at completion of internship, exceeds expectations, able to function largely autonomously)

5-Seasoned professional skill level (rare rating for internship, exceeds expectations, functions autonomously with a skill level representative of experience)



N/A- Not applicable at this time

RESEARCH

		1	2	3	4	5	NA
	<i>Trainees are expected to demonstrate the substantially independent ability to critically evaluate and disseminate research or other scholarly activities (e.g., case conference, presentation, publications) at the local (including the host institution), regional, or national level.</i>						
1	Demonstrates the ability to independently formulate research or other scholarly activities (e.g., critical literature reviews, dissertation, efficacy studies, clinical case studies, theoretical papers, program evaluation projects, program development projects) that are of sufficient quality and rigor to have the potential to contribute to the scientific, psychological, or professional knowledge base.						
2	Demonstrates the ability to critically evaluate and disseminate research or other scholarly activity via professional publication and presentation at the local, regional, or national level.						
	Elaboration on strengths and challenges:						

ETHICS AND LEGAL STANDARDS

		1	2	3	4	5	NA
	<i>Trainees are expected to respond professionally in increasingly complex situations with a greater degree of independence across levels of training.</i>						
1	Demonstrates awareness of relevant national (APA) and state (NJ) ethical principles and laws in forensic and clinical practice.						
2	Demonstrates methods for resolving ethical dilemmas.						
3	Develop self-awareness of how one's history, values and vulnerabilities impact delivery of treatment						
4	Recognizes the ethical responsibility for cultivating appropriate self-care						



	Elaboration on strengths and challenges:
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INDIVIDUAL AND CULTURAL DIVERSITY

		1	2	3	4	5	NA
	<i>Effectiveness in psychology requires that trainees develop the ability to conduct all professional activities with sensitivity to human diversity, including the ability to deliver high quality services to an increasingly diverse population. Therefore, trainees must demonstrate knowledge, awareness, sensitivity, and skills when working with diverse individuals and communities who embody a variety of cultural and personal background and characteristics.</i>						
1	Recognizes and values individual and group differences, diversity, and culture, and appreciates their impact.						
2	Recognizes the effect their own cultural worldview and biases have on their professional work.						
3	Demonstrates an awareness of the need to educate oneself about unfamiliar cultures and subcultures; provides examples of efforts to gain awareness of and minimize impact of personal biases						
	Elaboration on strengths and challenges:						

PROFESSIONAL VALUES, ATTITUDES and BEHAVIORS

		1	2	3	4	5	NA
	<i>Trainees are expected to conduct themselves in ways that demonstrate integrity, accountability and concern for others</i>						
1	Continues to develop an identity as an early career professional as related to General Psychology						
2	Engages in self-reflection in both personal and professional functioning; actively involved in activities that maintain and improve performance, well-being and professional effectiveness						



3	Actively seeks and demonstrates an openness and responsiveness to feedback and supervision.						
4	Appropriately balances the need for supervision with increased professional autonomy. Responds professionally in increasingly complex situations with a greater degree of independence as they progress across levels of training						

COMMUNICATION, CONSULTATION, AND INTERPERSONAL SKILL

		1	2	3	4	5	NA
<i>Communication and interpersonal skills are foundational to education, training, and practice in psychology. These skills are essential for any service delivery/activity/interaction, and are evident across the program's expected competencies.</i>							
1	Develops and maintains effective relationships with a wide range of individuals, including colleagues, communities, organizations, supervisors, supervisees, and those receiving services.						
2	Produces and comprehends oral, nonverbal, and written communications that are informative and well-integrated; demonstrates a thorough grasp of professional language and concepts.						
3	Demonstrates effective interpersonal skills and the ability to manage difficult communication well.						
4	Expresses disagreements and responds to feedback and criticism with composure and in a professional manner.						
5	Exhibits a respectful and unbiased attitude toward patients.						
6	Respects the impact of individual and cultural differences.						



Elaboration on strengths and challenges:

ASSESSMENT

		1	2	3	4	5	NA
	<i>Trainees demonstrate competence in conducting evidence-based assessment consistent with the scope of Psychology.</i>						
1	Demonstrate current knowledge of diagnostic classification systems, functional and dysfunctional behaviors, including consideration of client strengths and psychopathology.						
2	Select and apply assessment methods that draw from the best available empirical literature and that reflect the science of measurement and psychometrics; collect relevant data using multiple sources and methods appropriate to the identified goals and questions of the assessment as well as relevant diversity characteristics of the service recipient.						
3	Interpret assessment results, following current research and professional standards and guidelines, to inform case conceptualization, classification, and recommendations, while guarding against decision making biases, distinguishing the aspects of assessment that are subjective from those that are objective.						
4	Communicate orally and in written documents the findings and implications of the assessment in an accurate and effective manner sensitive to a range of audiences						



INTERVENTION

		1	2	3	4	5	NA
	<i>Intervention is being defined broadly to include but not be limited to psychotherapy. Interventions may be derived from a variety of theoretical orientations or approaches. The level of intervention includes those directed at an individual, a family, a group, a community, a population or other systems.</i>						
1	Establish and maintain effective relationships with the recipients of psychological services.						
2	Develop evidence-based intervention plans specific to the service delivery goals.						
3	Implement interventions informed by the current scientific literature, assessment findings, diversity characteristics, and contextual variables.						
4	Demonstrate the ability to apply the relevant research literature to clinical decision making.						
5	Modify and adapt evidence-based approaches effectively when a clear evidence-base is lacking						
6	Evaluate intervention effectiveness, and adapt intervention goals and methods consistent with ongoing evaluation.						

SUPERVISION

		1	2	3	4	5	NA
	<i>Supervision involves the mentoring and monitoring of trainees and others in the development of competence and skill in professional practice and the effective evaluation of those skills. Supervisors act as role models and maintain responsibility for the activities they oversee. Trainees are expected to apply this knowledge in direct or simulated practice with psychology trainees, or other health professionals.</i>						



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1	Trainee applies knowledge in direct or simulated practice with psychology trainees, or other health professionals. (<i>Examples of direct or simulated practice examples of supervision include, but are not limited to, role-played supervision with others, and peer supervision with other trainees</i>).						
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This intern has demonstrated satisfactory performance during this period:

☐ Yes ☐ No. If no – suggested course of action.

Comments/Remarks by Intern:

Intern _____

(Signature)

Date:

Supervisor _____

(Signature)

Date:

Guidelines for Addressing Issues in Training

All interns are full time employees of Hackensack Meridian Health and as such, are provided the Hackensack Meridian Health (HMH) Code of Conduct at the onset of employment. The interns are required to sign the Code of Conduct, indicating that they have read the Code of Conduct and agree to comply with the expectations outlined within. As noted in the Dispute Resolution policy (PolicyStat ID: 8124499) "Hackensack University Medical Center encourages open lines of communication by urging employees to bring questions, concerns or problems to the attention of their immediate supervisors. Most inquiries can be answered and problems solved when the supervisor and employee communicate. The supervisor has the responsibility to listen to employees' concerns and to discuss with them the means of resolving any questions before they become serious problems." The HMH Guidelines for Cooperation and Discipline (PolicyStat ID: 7542965) identify the HMH procedure for violations of the HMH Code of Conduct as well as departmental rules and guidelines. The Guidelines for Cooperation and Discipline dictate possible repercussions for infractions based on a two tier method. Level 1 responses include 1st written corrective action, 2nd written corrective action, final warning with suspension, and termination. In cases involving a level 2 gross infraction where suspension or discharge from staff is requested, a four-step process will be followed including initial investigation, possible suspension, further investigation, and disciplinary review process meeting. Comprehensive information related to the Guidelines for Cooperation and Discipline are available in print form at AHCH as well as on the HMH intranet which is accessible by all interns. The below guidelines are an elaboration of the steps by which concerns can be addressed within the training program and AHCH at the immediate supervisory level. Again, these guidelines are not designed or intended to supersede or conflict with relevant hospital policies, and it is the interns' right to take matters to the Human Resources Department at any time they desire to do so. Additionally, the training program invites interns to seek the assistance of the Training Director from their doctoral education training program to assist and/or represent their concerns if doing so is preferred. The HMH Code of Conduct, Guidelines for Cooperation and Discipline, and the Dispute Resolution policies are provided to Interns at the time of hire and remain available on the HMH intranet.

Initiation of remediation of problems with an Intern, detected by a Faculty Member

Faculty have the responsibility to continually assess the progress of each Intern. The program has a responsibility to take steps to remediate situations in which an Intern exhibits continued serious difficulties and does not function effectively in a clinical or professional interpersonal situation. Any such instances will be communicated in writing to the Intern's educational institution. Examples can include but are not limited to:

- A marked deficiency in skills, for example if an Intern receives a rating of “developing skill level [2]” or lower from any of the evaluation sources, or if one or more supervisors raises significant concerns about an Intern
- A marked deficiency in motivation
- Inability to function due to emotional problems or substance use
- Professional misconduct
- Failure to fulfill educational and administrative obligations
- Persistent tardiness
- Circumstances which are in conflict with the HUMC policies prohibiting discrimination, harassment, sexual violence or retaliation.
- Circumstances such as health, which may be beyond the Intern’s control, but which prevent completion of the training program.
- When situations arise which may constitute criminal misconduct

The remedy for handling such problems must have sufficient flexibility to protect the program and the public, while providing the Intern with the opportunity for appropriate support and remedial training. The following procedures will be initiated sequentially:

- A. The Intern’s supervisors will meet with the Intern to discuss the problem and attempt to arrive at a mutually acceptable solution or plan for remediation. This situation is not unusual, and in the vast majority of the instances, would require no further action. However, these concerns and the resulting plan will be communicated to the Intern’s Director of Clinical Training. The areas needing intervention, an approach to resolution (e.g.; increased supervision, readings, additional cases), allotted time frame, and the required outcomes will be identified.
- B. If the local intervention plan does not result in a satisfactory solution or if a pervasive pattern is noted to exist, then the issue will be discussed with the Training Coordinator. The Intern’s supervisor will meet the Training Coordinator to discuss the rating or identified problem area and determine what actions need to be taken.
- C. If the training issue is deemed to require remediation, the Intern will be notified, in writing, that such a review is occurring and the intern will have the opportunity to provide a statement related to his/her response to the rating or identified problem area. This notification to the Intern will occur within seven days of receipt of the documented issue. In turn, the Intern’s statement must be submitted to the Training Coordinator within seven days of receipt or the written concern. These comments will be considered in the development of a remediation plan. Remediation plans will include objectives, schedule, expectations and a corrective action plan. The Remediation period lasts 3 months. It is understood that within this time period, some

issues related to training may require immediate rectification by the Intern, while other issues or deficits will require a longer period to remedy.

- D. A hearing will be held within 14 days of the written notification to review outcomes and possible resulting actions. These include (1) complete remediation of the problem and, therefore, no further action taken, (2) incomplete remediation, improvement noted in some or all of target areas, with remediation plan extended to be re-evaluated at a specified time (3) continued employment with the potential to not successfully complete the training program, (4) formal disciplinary action, and (5) termination. All remediation plans will include objective measurable goals and the time frame needed to complete them. The Intern may choose to accept these conditions or may choose to challenge the action. If the training committee determines that the Intern has engaged in a sufficiently serious violation, or has failed to meet the requirements despite remediation, the committee will invoke the HMH Guidelines for Cooperation and Discipline process (PolicyStat ID#: 7542965).
- E. It is expected that the status of the rating will be reviewed no later than the next formal evaluation period or no later than the time limits identified in the written statement, whichever date is sooner. If the rating or the remediation plan has been rectified to the satisfaction of the faculty, the Intern and other appropriate individuals will be informed and no further action will be taken.
- F. The Intern has the right to appeal the actions taken by the program if they are in disagreement. Appeals will be filed with the Mental Health Director within 14 days of the hearing and decisions will be communicated, in writing within 14 days of the appeal. If the Dispute Resolution policy (PolicyState ID: 8124499) is not then utilized, decisions of the Lead/Psychologist/Section Chief are final and binding.
- G. While the Intern may have completed a calendar year of training, failure to demonstrate appropriate competencies and remediate previously documented issues in training will result in AHCH declining to issue a certificate of completion.
- H. If the issue is determined to warrant serious action, as evidenced by either (1) a problem that is jeopardizing patient care, (2) a persistent problem that the Intern fails to address adequately at the previous level, (3) a significant violation of professional standards, (4) an irremediable deficit in professional competence, (5) significant personal factors that seriously affect professional functioning, or (6) a clear violation of Medical Center policies and procedures, it will need to be actively and systematically monitored by the faculty, through the supervisors and Training Coordinator. As noted above, more serious or egregious behaviors (e.g. substance abuse, criminal conduct) will immediately trigger the HMH Guidelines for Cooperation and Discipline. The conclusion of a Human Resources inquiry can be a verbal warning, written warning,

suspension, or termination depending on severity, frequency, and intent of the offense. In the event that an Intern is not in agreement with the finding established by the Human Resources investigation, they may initiate an appeal as outlined in the HMH Dispute Resolution policy (PolicyStatID: 8124499)

- I. The above procedures serve as a guideline for resolving disputes. It is the right of any involved party to inform Human Resources of a matter and begin utilizing the Dispute Resolution policy (PolicyStatID: 8124499). The Dispute Resolution policy is available on HMH PolicyStat intranet site. The procedure for dispute resolution includes an initial Department Executive review, followed by a Senior Leader Review from a different department, and finally a Panel of 3 Leader review (used when managing a recommendation for suspension or termination)

Guidelines for situations in which Interns raise a formal complaint or grievance about a supervisor, staff member, trainee, or program.

There may be situations in which the Intern has a complaint or grievance against a supervisor, staff member, other trainee, or the program itself and wishes to file a formal grievance. Examples of problems include:

- Faculty member has a serious deficit in knowledge or skill
- Faculty member has emotional difficulty or substance use which impairs or compromises expected standards of performance
- Faculty member does not provide sufficient attention to the training needs of the Intern
- Faculty member acts in unprofessional manner or displays inappropriate behavior
- Faculty member displays behaviors which are in conflict with the HUMC policies prohibiting discrimination, harassment, sexual violence or retaliation.
- Circumstances such as health, which may be beyond the faculty member's control, but which prevent adequate attention to trainees.
- Situations arise from the faculty member which may constitute criminal misconduct
- Intern perceives they are not receiving the level of training necessary for development of clinical skills.
- Intern is not receiving the required hours of supervision.
- Intern is being asked to engage in responsibilities beyond the scope of their abilities or requiring excessive time beyond that which is appropriate for the training experience.
- Intern is not provided with appropriate level of research or didactic training.
- Intern perceives evaluation or assessment, whether formally or informally, is unjust, discriminatory, or not accurate in reflection of the Intern's performance.

In the event of such an occurrence, the Intern should:

- A. Raise the issue with the staff member or other trainee in an effort to resolve the problem. If the problem remains uncorrected, the faculty member and Intern are unable to reach an acceptable solution, or the problem is of such severity that additional contact between the trainee and faculty member is not advised, the issue should be brought to a supervisor, staff member, or Training Coordinator.
- B. If the Training Coordinator is the object of the grievance, or unavailable, the issue should be raised with the Mental Health Director. If the Training Coordinator cannot resolve the matter, the Training Coordinator will bring the issue to the psychology training committee and to the attention of the Mental Health Director.
- C. If mediation is not possible, a subcommittee consisting of the Training Coordinator, Chief Psychologist and an additional staff member is convened. This subcommittee will meet within fourteen days of the unsuccessful mediation.
- D. All proceedings at this level will be documented in writing and filed accordingly. Based on the subcommittee review, one of the following recommendations is proposed: (1) no disciplinary action, (2) reprimand with remediation action plan. If the Intern does not feel comfortable continuing with the supervisor, an alternate supervisor will be assigned to the Intern. (3) Referral to human resources department of HUMC for remediation plan and consequences.
- E. If a remediation plan is recommended, it will be reviewed by the Mental Health Director, documented and reviewed with the faculty member. This will occur within 7 days of the development of the remediation plan.
- F. Once this formal remediation has been distributed, the Intern or faculty member can appeal in writing within 7 days. If the matter is raised within the AHCH and mediation has failed or the issue cannot be adequately resolved, the formal Dispute Resolution policy (PolicyStatID: 8124499) should be utilized.
- G. If the faculty member disagrees with the remediation decision, the member has the right to appeal. The Faculty member can appeal in writing to the Mental Health, Medical Director, or human resources department at HUMC.
- H. Interns who pursue grievances in good faith will not experience any adverse personal or professional consequences.

In the event that the Intern is not receiving the compensation (financial/benefits) as indicated at the time of accepting the internship, the Intern should:

- A. Inform their direct supervisor who will consult with the Training Coordinator.

- B. The Intern, Supervisor and Training Coordinator will meet to discuss the perceived discrepancy and clarification will be provided if the Intern's perception is not accurate.
- C. If the Intern's concern is accurate, the Training Coordinator will assist the Intern in contacting the benefits department, within Human Resources at Hackensack University Medical Center.
- D. Interns will be reminded that they may include the Training Director from their institute of higher education at any time during the process.

Nondiscrimination Policy

Hackensack Meridian Health does not discriminate against persons in its admission, services, or employment on the basis of age, race, color, ethnicity, national origin (including immigration status and English language proficiency), religion, culture, language, physical or mental disability, socioeconomic status, sex, pregnancy, childbirth and related medical conditions, sex stereotyping, sexual orientation, and gender identity or expression (including with respect to access to facilities).

Hackensack Meridian Health operates its program in compliance with Title VI of the Civil Rights Act of 1964, Section 504 of the Rehabilitation Act of 1973 and the Age of Discrimination Act of 1975, and the Regulations of the Department of Health and Human Services implementing these laws.



Hackensack
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