

Jersey Shore University Medical Center Hackensack Meridian *Health*Doctoral Internship in Health Service Psychology

2024-2025



Jersey Shore University Medical Center Hackensack Meridian Health 1945 Route 33, Neptune, NJ 07753

Phone: 732-775-5500 Fax: 732-776-4794

Overview of Hackensack Meridian Health Jersey Shore University Medical Center

Hackensack Meridian Health Jersey Shore University Medical Center (JSUMC) 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. JSUMC was recently verified to be a Level 1 Trauma Center and is the only Level II Pediatric Trauma Center in the region, and one of only three in the state. JSUMC'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. 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. JSUMC offers a comprehensive suite of mental health services for outpatients and inpatients across the lifespan.

Aim

The aim of the doctoral psychology internship at Jersey Shore University Medical Center is to provide broad-based clinical training that will prepare interns to be ethical, competent, and culturally sensitive practitioners within a healthcare setting.

Program Description

Hackensack Meridian Health Jersey Shore University Medical Center (JSUMC), located in Neptune, NJ, is a not-for-profit healthcare facility. The Department of Psychiatry of JSUMC, in conjunction with Hackensack Meridian Health, offers a one-year, full-time (2000 hours) internship in Health Service Psychology. The internship provides an individually tailored sequence of training experiences with the primary focus being on assuring breadth and quality of training. Interns' experience at JSUMC involves a broad range of supervised clinical work with patients across the lifespan in both inpatient and outpatient settings and throughout the medical facility. Patients seen within the JSUMC system are from diverse cultural, ethnic, and economic backgrounds and present with a broad range of diagnoses, mental health concerns, medical needs, and a variety of clinical needs. Interns gain experience providing a variety of clinical services and treatment modalities in a medical setting and acquire assessment experience using a range of assessment tools.

Internship Program Philosophy

The Internship Program at JSUMC provides interns with generalist training in order to prepare them for entry level clinical practice in a wide variety of clinical settings. The Internship Program follows the practitioner-scholar training model, characterized by intensive clinical experience supported by didactic programming and supervision that exposes interns to current research and literature relevant to their clinical work. As such, interns are encouraged to integrate clinical practice and science by utilizing clinical research and theory to guide clinical decisions. The program provides interns with a broad continuum of clinical training opportunities, including assessment, evaluation, consultation, and direct treatment in multidisciplinary, culturally diverse settings. The intern experience is designed to build upon previously acquired competencies and to facilitate the development of new clinical and professional skills while fostering a sense of professional identity.

Goals and Competencies of Training

Our goal at JSUMC is to recruit, select, and train qualified interns whose career goals include the provision of clinical services to a diverse patient population in healthcare settings. The Department of Psychology at JSUMC seeks to foster professional competence, develop cultural sensitivity, promote high standards of ethical practice,

and encourage a culture of collaboration with other disciplines. Training experiences will enable interns to refine previously acquired skills, facilitate the development of new clinical competencies, and foster personal and professional growth. Specific goals of the internship are to train interns to:

- Develop competence in psychological evaluation and assessment of children, adolescents, and adults who present a wide range of presenting problems and diagnoses
- Develop competence in psychological interventions with children, adolescents, and adults who present a wide range of presenting problems and diagnoses
- Demonstrate sensitivity to individual and cultural differences in order to provide effective psychological treatment for the individuals they serve
- Develop and apply the attitudes and skills needed to support lifelong learning and professional growth
- Develop a skilled interface between science and practice by applying scientific knowledge in clinical settings, be educated consumers of empirical research, and engage in research projects
- Conduct themselves in accordance with the highest ethical standards and legal guidelines
- Collaborate with other disciplines and convey psychological knowledge in a professional, appropriate manner

The goals are achieved through a combination of clinical experiences, supervision, and didactic trainings. The internship is organized around a core training curriculum that emphasizes the development and enhancement of skills in diagnosis, assessment, treatment, and research in clinical practice in both medical and behavioral health facilities. In addition to the core rotations, interns choose elective training areas for supplementary experiences in specific domains of psychology.

Program Structure

The Internship Program consists of required and elective components, and it is organized into two six-month rotations. Each intern is assigned a primary rotation, where they spend four days per week (with the exception of protected didactic and supervision time). Mid-year interns will switch major rotations. This provides interns an opportunity for a varied training experience and exposure to multiple supervisors. In addition to the primary rotation, each intern chooses a minor rotation, or "elective," where they spend the equivalent of one day per week.

The available primary rotations are:

1) Adult

- a) Consultation Liaison (CL): Interns provide consultation to medical units throughout the hospital. The CL program focuses on the care of patients with comorbid psychiatric and general medical conditions. Interns work closely with the psychiatric staff to improve their skills in the areas of diagnostic interviewing, psychopharmacology, and the medical-biological aspects of patient care. Consults come from a variety of referral sources throughout the hospital and include a range of service needs, including evaluation, treatment recommendations, supportive therapy (grief, trauma), behavioral issues, managing depression and anxiety symptoms secondary to medical issues and/or procedures, issues pertaining to bioethics, and familial support.
- b) Adult Inpatient Psychiatric Unit: The psychiatric inpatient 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 with a variety of psychiatric disorders. On this rotation, interns are expected to actively participate in multidisciplinary rounds regarding patient care and treatment planning. Interns will also be expected to provide both individual and group therapy to patients, refining their skills in brief, solution focused interventions with an acute psychiatric population.
- c) Outpatient services (Davis Avenue): Interns will maintain an active caseload of 6-8 adult therapy patients who they will see on an outpatient basis. This includes both individual and group therapy. Interns will also conduct intake evaluations for new patients. During this rotation, interns will refine their case conceptualization skills in addition to developing treatment goals and planning and implementing interventions. Interns are also expected to learn to manage cases appropriately; to maintain consultation with psychiatrists and other team members, and community resources; to document services appropriately; and to refer to appropriate community resources.
- d) **Psychological Assessment:** Interns will have the opportunity to conduct a variety of psychological assessments, including personality, diagnostic, functional skills/deficits, and intellectual functioning from multiple referral sources. Interns are expected to complete a *minimum* of 4 comprehensive batteries on this rotation.

Child and Adolescent

- e) Inpatient Pediatric Consult Liaison: The CL program focuses on the care of children and adolescents with adjustment issues, mental health disorders and symptoms secondary to a general medical condition. Interns will also work with parents, guardians and siblings as it relates to the patient's treatment, wellness and recovery. Interns work closely with the psychiatric staff to improve their skills in the areas of diagnostic interviewing, psychopharmacology, and the medical-biological aspects of patient care. Consults include a range of service needs, including evaluation, treatment recommendations, supportive therapy (grief, trauma), behavioral issues, and familial support.
- f) Children's Day Program (Davis Avenue): The Children's Day Program provides intensive clinical services for children ages 7 to 14 who are experiencing serious emotional, psychological and/or behavioral difficulties at home, in school, and in the community. The program provides treatment in a daily afternoon setting, with the goal of teaching and reinforcing appropriate behavior in the child. The program includes family therapy, group therapy, and individual therapy. Interns will conduct intake evaluations, develop treatment plans, participate in family sessions, and co-lead therapy groups. It is expected that interns will develop skills in behavioral therapy and behavioral management techniques with latency age children. Interns will also develop skills in planning and implementing group activities to address treatment goals. Interns will have an opportunity to collaborate and consult with a variety of systems of care (DCP&P, mentor network, probation, etc.)
- g) Therapeutic Nursery: The Therapeutic Nursery Program provides treatment for children ages 3 to 6 who are experiencing difficulties with aggression, impulsivity, and disruptive behaviors. The children and their caregivers attend separate weekly hour-long therapy sessions. The goals of the sessions are to modify and reinforce appropriate behavior in children and to provide parenting skills training and support to the caregivers. Interns will conduct intake evaluations, develop treatment plans, participate in family sessions and co-lead therapy groups. It is expected that interns will develop skills in behavioral therapy and behavior management techniques with young children. Interns will also gain a more comprehensive understanding of the cultural and economic factors that may influence a family structure. In addition, interns will work closely with involved systems of care (DCP&P, mentor network, early intervention specialists, etc.).

- h) New Jersey Pediatric Psychiatry Collaborative (NJPPC): The PPC is a state funded grant program where Hackensack Meridian Health, Cooper University Health Care, and the Atlantic Health System partner to provide support, evaluations, and referrals for children with behavioral and emotional health issues. The program is available for children up to age 18 or older if the patient is still seeing their pediatrician who is registered with the NJPPC. The NJPPC is a regionalized system of psychiatric and behavioral consultation teams to assist pediatricians in managing their patient's mental health needs. It brings pediatricians into the fold in a collaborative partnership with child and adolescent psychiatrists to broaden children's access to evidence-based mental health care. The NJPPC is designed to educate pediatricians on mental health care, help them screen for and identify mental health concerns, and get timely access to a consultation with a child and adolescent psychiatrist. The psychology intern works alongside a psychiatrist to conduct evaluations and when clinically warranted, comprehensive psychological assessments to assist in diagnosis, emotional-social functioning, cognitive/intellectual functioning, etc. Alongside members of the PPC team, the intern will identify treatment needs and appropriate behavioral health treatment referrals.
- i) Assessment: Interns will have the opportunity to conduct a variety of psychological assessments, including personality, diagnostic, functional skills/deficits, and intellectual functioning from multiple referral sources. Interns are expected to complete a minimum of 4 comprehensive batteries on this rotation. Interns will also have the opportunity to conduct Comprehensive Health Evaluation for Children (CHEC), which identifies physical, developmental and mental health treatment needs for children entering out of home placements as a partnership between DCP&P and Medicaid evaluations.
- 2) Neuropsychology: The Neuropsychology Service is housed within the Medical Psychology & Neuropsychology Department. The service is closely aligned with the Neuroscience program and works collaboratively with neurology and neurosurgery. Interns work directly with neuropsychologists, neurologists, neurosurgeons, and other trainees including practicum students, residents, and fellows. Interns will have the opportunity to engage in neuropsychological service delivery under the supervision of fellowship trained neuropsychologists. interns will be trained in a variety of neuropsychological measures, receive formal didactic training in neuropsychological testing, and will obtain extensive experience in working with patients in assessment, report writing, feedback and multidisciplinary team consultation. The Neuropsychology Services is primarily an outpatient practice but interested interns will have opportunities for inpatient consultations. Patients are referred from the neurology and

neurosurgical programs and cover the range of neurological conditions. Interns are expected to complete 2 testing days per week and participate in multidisciplinary team conferences in support of the brain tumor, DBS, and epilepsy programs. Additional training opportunities will include neuroscience grand rounds, journal club, neuroanatomy lectures and case conferences.

In addition to the primary rotation, each intern chooses a minor rotation, or "elective," where they spend the equivalent of one day per week. The available electives are:

- 1. Upper Extremity Trauma Clinic: The ARMS (Amputation Rehabilitation Medicine and Surgery) Clinic is a holistic, multidisciplinary approach to assist individuals undergoing upper extremity surgery/reconstruction in acquiring appropriate aftercare services, including mental health services. Together, a team of experts work to provide comprehensive care to individuals who have been affected by limb loss or an amputation. They meet once a month (last Friday of the month) with patients from all over the state to provide a comprehensive, collaborative, integrated care environment composed of a prosthetics team, physical therapist, nurses, physician assistant, and a behavioral health team. On average, the program will see between 10 and 15 patients each day. Interns will be responsible for screening individuals on several psychological domains and determining appropriate referral services. In addition, interns, along with a psychologist, will facilitate group therapy for patients to provide support, processing, and social engagement among the patients. Interns will also have the opportunity to see patients from the clinic for individual outpatient therapy. Interns will be part of a multidisciplinary team, including the surgeon, physical therapist, nurses, physician assistant, and prosthetists to ensure all aspects of the patient are accounted for following the procedure and throughout their recovery.
- 2. Project Heal: Project Heal is a grant funded program at Jersey Shore University Medical Center that helps people in Monmouth and Ocean County who have experienced violence in their lives. Project Heal provides individuals who have experienced violence a space to heal in addition to a myriad of services that help an individual navigate needs. A dedicated team made up of case managers, counselors, and medical staff work together to provide counseling, case management, healthcare coordination. The intern will work alongside providers to assist in providing services to individuals who experienced violence, including individual and group therapy.

Core Experiences

- 1. Psychological Assessment All interns are expected to refine their psychological assessment skills over the course of the internship year. Therefore, within each rotation, interns will be assigned a variety of psychological assessments from throughout the hospital. Interns are expected to further develop their ability to select, administer, score, and interpret psychological measures to address a variety of referral questions. Interns are also expected to write clear, concise, well-integrated reports that appropriately answer referral questions. Interns will also communicate test results to other professionals to inform treatment and services. Interns are expected to complete at least 8 comprehensive psychological assessments as part of their core training over the course of the year.
- **2.** Therapy and Intervention Interns will have the opportunity to provide psychotherapeutic services to individuals across the life span in both inpatient and outpatient settings.
 - Individual Therapy: Interns are expected to maintain a caseload of 6 to 10 individual therapy patients. Through didactics, supervision, and direct practice, interns will become proficient in case conceptualization and the provision of evidence-based interventions to individuals presenting with a variety of issues and diagnoses. In addition, interns will be expected to manage cases appropriately, maintain consultation and liaison with psychiatrists and other team members, to document services timely, and to make appropriate community referrals.
 - Group Therapy: There are several options for providing group therapy and the intern should consult with his/her supervisor to determine which group experiences will most enhance the intern's training given their individual goals and the patient population's needs. Possible group experiences include: social skills training, process oriented groups, trauma and recovery groups, psychoeducation, positive psychology, coping skills, and anger management. If the intern has a particular interest in implementing a specific group, the process for designing and implementing a group can be discussed with the intern's supervisor.
- **3. Supervision** (minimum of 4 hours/week). Supervision is a core element of the internship program. Supervision provides interns with guidance and models for professional conduct and activities. Each supervisor is a licensed clinical psychologist and will provide regularly scheduled weekly supervision sessions. At the start of the rotation, interns and their supervisor will meet to select two dates and times (1.5 hours in duration) each week to meet for regularly

scheduled supervision. In addition, members of other disciplines at the intern's various rotation sites, will supervise interns in consultation and collaboration with the intern's supervisors. To ensure a varied supervisory experience and to broaden awareness of diverse styles of competent practice, interns switch supervisors mid-year at the end of their first rotation. At a minimum, interns will spend three hours per week in individual supervision by a licensed psychologist. In addition to regularly scheduled supervision sessions, supervisors will be available to address any issues that arise between sessions. Interns' work will be observed in vivo on at least one occasion each rotation in areas of both assessment and therapy. Supervisors will provide direct feedback to the intern on observed sessions. In addition to individual supervision, interns will also participate in a combination of content and process-based focused group supervision facilitated by members of the training committee. This is a regularly scheduled group supervision that occurs weekly for one (1) hour.

Interns also have the opportunity to participate in the provision of supervision to psychology externs. Specifically, interns engage in direct practice acting as a senior peer supervisor with psychology externs. Interns are paired with an extern, with whom they work throughout the course of the year, meeting on an individual basis twice a month for one hour. The interns will implement these roles under the supervision of a licensed psychologist.

- **4. Didactics** (minimum 8 hours/month) Didactic training will occur weekly (on Wednesdays from 11:00 am to 1:00pm). Didactic trainings will be divided into four broad categories: Supervision, Diversity, Assessment, and Professional Development. Each broad category will be covered once a month with specific topic presentations relevant to the category.
 - Diversity (2 hours/month): The diversity series focuses on assisting interns in increasing their cultural competencies in psychological treatment and assessment by incorporating the Multicultural Competency Guidelines adopted by the American Psychological Association, which includes Awareness, Knowledge, and Skills. The goal of the seminar is to increase interns' awareness of their own attitudes and beliefs and how their own cultural backgrounds have influenced their attitudes, stereotypes, preconceived notions, and behavior. Through case presentations and research articles, interns will increase their knowledge of ethnically and racially different individuals. Interns' skills for working with diverse populations will be fostered by enhancing their ability to recognize cultural issues, increasing their abilities to deal

- with clients in ways that are flexible and sensitive, and increasing their abilities to deal with their own reactions to clients.
- Supervision (2 hours/month): The supervision series focuses on preparing interns to become effective clinical supervisors via teaching various supervisory models and skills. Interns will be paired with an extern, which allows interns to practice utilizing various supervisory models, to impart experiential guidance on clinical and professional issues as these emerge from their clinical experience at JSUMC and provide mentoring about professional development and/or other relevant issues. Their supervisory experiences will be discussed throughout the supervision didactic series.
- Assessment (2 hours/month): The assessment series focuses on interpretation of various psychological assessments and their use within a healthcare setting. Further, the second half of the year focuses on specific projective assessments and neuropsychological assessments.
- Ethics and Professional Development (2 hours/month): This series includes various topics related to early career psychology and professional development. For the first half of the year, the Ethics and Professional Development didactic focuses on specific ethical standards. The standards are reviewed and interns are expected to apply the standards to their own clinical experiences in a thoughtful, meaningful discussion. In between didactic sessions, interns are encouraged to keep an "ethics journal," which logs ethical dilemmas they faced in their clinical practice, potentially with other professionals, options they considered, and how they ultimately resolved the issue. Interns are expected to cite specific APA principles that were involved. In the second half of the year, topics will focus on "brown bag items" pertaining to professional development. Examples include issues related to early career psychologists, the imposter syndrome phenomenon, the EPPP, establishing a private practice, etc. This didactic series gives interns the opportunity to engage in open, honest discussions with psychologists about important issues in the field that are relevant to their professional development, facilitating the transition from trainee to an independent psychologist.

In addition, interns will attend the Department of Psychiatry Grand Rounds, which occurs weekly (excluding the first Wednesday of each month) for 1.5 hours. Lastly, interns will participate in a bi-weekly psychotherapy case

conference seminar with psychiatry residents led by a psychiatrist and a psychologist.

- 5. Professional Role Development The internship focuses on helping interns develop a positive professional identity as future psychologists. Part of this focus is creating an environment where interns work alongside, and with, multidisciplinary treatment staff to learn how psychology operates within a larger health care facility and the unique role psychologists bring to patient care. This is achieved through encouraging intern observation, engagement, and interaction with professional role models. Over the course of the year, interns will have the opportunity to enhance their skills in professional consultation as well as provide consultative guidance to other health care professionals on their respective treatment teams, including members of other professional disciplines.
- 6. Research JSUMC Research Day is an annual event that provides opportunities for healthcare professionals, residents, and students affiliated with Hackensack Meridian Health to present original research studies and vignettes to the academic and professional communities. It is conducted to enable healthcare professionals to maintain proficiency in evaluating critical scientific data, and to promote and present examples of practice-based learning. Interns are expected to participate in Research Day with either an independent research topic or a group intern research project. In addition, interns will participate in a monthly journal club in which they are assigned to present research articles relevant to the clinical work they are doing and the populations they serve. Further, if interested, interns are supported in pursuing research projects of areas they are interested in.

Cultural and Individual Differences and Diversity

Our goal is to create a welcoming, affirming and inclusive environment for all our staff and interns to grow together as professionals. The internship program at JSUMC is committed to the provision of multicultural training opportunities, including clinical opportunities, didactics/training, and in individual and group supervision.

Hackensack Meridian *Health* is dedicated to creating an inclusive environment that delivers culturally competent, patient-centered care. We value and celebrate the contribution of our team members and acknowledge that everyone deserves to be treated with dignity and respect. Through our Diversity & Inclusion program, interns have an opportunity to foster an inclusive environment that embraces different perspectives and that values the contributions of each individual and promotes

diversity at every level throughout our network through the Team Member Resource Group (TMRG), which is a strategic initiative of Diversity & Inclusion. Through this program, interns can link up with coworkers from similar backgrounds and identities to make a difference in the workplace and help achieve their goals.

Current TMRGs include:

- ABILITIES Team Member Resource Group
- Aspiring Women Leaders Team Member Resource Group
- Black Team Member Resource Group
- Multicultural Individuals Team Member Resource Group
- Pride & Allies Team Member Resource Group
- Veterans Team Member Resource Group
- Women in Leadership Team Member Resource Group
- Young Professionals Team Member Resource Group

Multidisciplinary Case Presentation

Interns will attend a bi-weekly multi-disciplinary case presentation meeting with the psychiatry residents facilitated by a psychologist and a psychiatrist. At this meeting, interns and residents present clinical cases. A discussion of diagnostic issues and recommendations for appropriate levels and types of treatment interventions are discussed along with cultural and diversity considerations, transference and countertransference reactions, and ethical considerations. Interns and residents present and discuss the ongoing development of treatment, use of ancillary referrals and services in the treatment process, and the relationship between therapist and client as it affects the therapeutic process. Using a psychologist and a psychiatrist to co-facilitate enhances the multidisciplinary nature of the presentation and allows for multiple perspectives to be explored. The psychiatrist-psychologist dyad rotates to further enhance the opportunity for multiple perspectives and approaches.

Program Completion Requirements

Minimal requirements to complete the internship include:

- 1. Good Standing rating for all evaluations
- 2. A minimum of 2000 hours of training, as documented and signed off on by the interns' primary supervisor
- 3. Completion of all assigned clinical documentation and administrative record keeping
- 4. Completion of a minimum of 8 psychological assessment batteries
- 5. Attendance at 90% of required educational seminars
- 6. Completion of all supervisor evaluation forms and internship evaluation forms.

Recruitment and Selection

Applicants for the JSUMC Internship in Health Service Psychology must be doctoral students in good standing at an American Psychological Association (APA) or Canadian Psychological Association (CPA) accredited graduate program in the fields of clinical and/or counseling psychology. Further, applicants must be approved by their University Training Director for the start of internship. Candidates will only be considered for the Psychology Internship Program if they have completed adequate and appropriate training for the position prior to application outlined below:

- The Candidate has completed their formal academic coursework toward a doctoral degree in professional psychology (e.g. clinical or counseling)
- The Candidate has successfully completed their institution's qualifying/comprehensive exams
- The Candidate has successfully proposed their dissertation or program equivalent project
- The Candidate has participated in at least three training years of closely supervised experiential clinical training in practicum or externship placements.

Application requirements include: Cover letter, Curriculum Vitae, three letters of recommendation from faculty or other professionals who are well acquainted with the applicant's clinical work and qualifications, a statement from the applicant's graduate program's DCT documenting his/her eligibility for internship, status as a student on track to complete necessary requirements, and whether any remediation plans or probational actions have been initiated, and one official copy of graduate school transcripts.

JSUMC strongly adheres to APPICs Internship Selection Guidelines. We utilize the online APPIC Application For Psychology Internship (AAPI) form available through APPIC (www.appic.org). The deadline for applications is December 1, 2024. Interviews will take place in January. Interview offers and appointments will be made by email in accordance with APPIC uniform notification guidelines.

Selection criteria will also include the applicant's prior training experiences, interests and expressed internship goals, as they relate to the aims of the program and the training experiences offered in the internship program. The type and number of supervised, face-to-face clinical contact hours will also be considered to determine adequacy and appropriateness of prior practicum training. The applicant's statement of training and professional goals and career interests will also be considered. Our interviewing and applicant rating process is designed to be as objective as possible and unbiased with regard to cultural and individual diversity. During the interview, the

applicant's ability to discuss their clinical experiences and interests as it relates to JSUMC's internship in health service psychology will also be considered.

Communication with Graduate Program

Throughout the internship year, the internship program provides the intern's graduate program with feedback regarding the intern's progress. Such feedback will occur formally via the completed Competency Assessment quarterly during the training year. At the end of the internship year, the graduate program will receive a letter indicating whether the intern has successfully completed the program. In the event that a problem arises causing concern that the intern may not be able to successfully complete the internship program, or requires a Growth Plan, the Director of Internship Training will inform the graduate program and possibly request input to assist in resolving the problem. Specific forms required by graduate programs will also be completed, as needed.

Pre-Employment Requirements

If offered an internship with JSUMC, we require completion of a criminal background check, at no cost to the applicant. Similarly, applicants are expected to submit to a urinalysis drug screen. Further, New Active Employed Team Members are required to comply with HMH's vaccination policies and as recommended by the regulating bodies thereafter. As a condition of appointment or employment, new staff must receive the COVID-19 vaccine during the appointment or pre-employment process, OR within 3 weeks of eligibility, which may be after employment has commenced, OR provide proof that they are fully vaccinated, unless approved for a Medical or Religious/Sincerely Held Belief exemption. In addition, all Team Members must receive an annual influenza vaccination or possess an approved exemption.

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. Further, interns are granted five Wellness Days to use at their discretion (and approval of the Training Director) throughout the training year. The annual salary for the 12 month training period is \$34,590.

Accreditation Status

JSUMC Internship in Health Service Psychology is <u>not</u> currently accredited by the Commission on Accreditation of the American Psychological Association.

*Questions related to the program's accredited 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 / E-mail: apaaccred@apa.org Web: www.apa.org/ed/accreditation

Malpractice Insurance

Interns must provide evidence of malpractice insurance (\$1 million occurrence/\$3 million aggregate) either through their graduate school or with an individual policy. Certificates of insurance must be received by our office prior to the beginning of the internship. Interns are required to maintain this policy for the duration of the training year. Interns are required to notify the internship program if the insurance policy is terminated or changed in any way throughout the training year.

We Care

The WeCare Program is a confidential, peer-to-peer support network that is available 24 hours a day, 7 days a week to team members facing stressful situations or in need of additional support. The WeCare program provides one-on-one peer support in a non-judgmental caring and supportive environment, provides a "safe zone" to express thoughts and reactions to facilitate safe and effective coping, explores normal reactions and feelings that often occur after a stressful or traumatic event and ensures that the information shared is confidential. For 24/7 confidential support, call: 1-844-642-2665.

Training Director Contact

If you have any further questions about our program or the application process, please contact:

Gina Radice-Vella, Psy.D.
Chief Psychologist, Internship Training Director
Jersey Shore University Medical Center
1945 State Route 33
Neptune, NJ 07753
gina.radicevella@hmhn.org
732-776-3756

Peggy L. Robles
Program Coordinator
Jersey Shore University Medical Center
peggy.robles@hmhn.org
732-776-4167

JSUMC Psychology Internship Training Committee

Supervisors

Jasdeep S. Hundal, PsyD, ABPP-CN
Board Certified Clinical Neuropsychologist
Director of Medical Psychology and Neuropsychology

Dr. Hundal is a board certified clinical neuropsychologist and the new Director of the Medical Psychology and Neuropsychology for the Southern Region of the Hackensack Meridian Medical Group. His primary practice location is at the Jersey Shore University Medical Center where he supports the neuroscience and behavioral health programs. Dr. Hundal completed his residency/fellowship training at the HMH JFK-Johnson Rehabilitation Institute and remained for several years to be an attending neuropsychologist at the JFK NJ Neuroscience Institute. After a brief diversion as the Director of Neuropsychology at Rutgers Robert Wood Johnson Medical School, where he was also an Associate Professor of Neurosurgery and Neurology. He now returns to lead the Medical Psychology and Neuropsychology programs for the Southern Region of HMH through his clinic at the Jersey Shore University Medical Center. Over the course of his career, Dr. Hundal has worked closely with neurologists, neurosurgeons, psychiatrists, oncologists, and other medical professionals in providing comprehensive care to individuals experiencing changes in cognition. He is a passionate clinician, medical educator, and clinical researcher. Dr. Hundal hopes to draw from his experiences working with different medical professionals across distinct geographical regions to expand and integrate the Neuropsychology Service Line within the Southern Region of the Hackensack Meridian Health Network to maximize patient care and their overall quality of life.

Michele Koschin, Psy.D.
Supervising Psychologist
Jersey Shore University Medical Center

Dr. Koschin is a licensed clinical psychologist in New Jersey and Pennsylvania. She received her undergraduate degree in Psychology from The College of New Jersey and her Master's degree and Psy.D. in Clinical Psychology from LaSalle University in Philadelphia, Pennsylvania. As a Supervising Psychologist at Jersey Shore Medical Center, Dr. Koschin provides clinical and didactic instruction within the psychiatry residency program and is the psychotherapy supervisor for the Geriatric Psychiatry Fellowship at the hospital. Dr. Koschin has held various administrative and clinical positions in behavioral health and forensic settings, most recently within the state

correctional system. Her clinical experiences have been concentrated in the provision of psychological services, including individual psychological intervention, emergency risk assessment, and forensic evaluation, to individuals with serious behavioral health issues and personality disorders. She has been fortunate to receive post-graduate training in forensic risk assessment, Dialectical Behavioral Therapy (DBT), and Acceptance and Commitment Therapy (ACT). Dr. Koschin has a strong commitment to clinical supervision, having previously served as the associate training director of an APA-accredited psychology doctoral program

Tara Lally, Ph.D
Supervising Psychologist
Associate Training Director
Jersey Shore University Medical Center

Dr. Lally serves as a Supervising Psychologist at Hackensack Meridian Health at the Jersey Shore University Medical Center and Ocean University Medical Center campuses. She obtained her undergraduate degree in Psychology from West Chester University in West Chester, Pennsylvania, her Master's degree and Post-Master's certificate in Psychological Counseling from Monmouth University in West Long Branch, New Jersey and her Ph.D. in Counseling Psychology from Temple University in Philadelphia, Pennsylvania. Dr. Lally's experience includes work within community based mental health clinics and agencies, federally qualified patient-centered medical homes, in-home settings, hospital based intensive outpatient settings and private practice treating children, adolescents, and adults. For over 15 years, Dr. Lally has worked with mentally ill adolescents and adults incarcerated within the Juvenile Justice Commission and Department of Corrections providing individual, group and family therapy as well as psychological evaluations, crisis management and clinical monitoring of suicidal and homicidal offenders. As a result of this work with marginalized and disenfranchised populations, she is passionate about a social justice informed therapeutic approach that will bring about systematic and societal changes. Dr. Lally has over fifteen years of teaching experience at the undergraduate and graduate level (Masters and Doctoral) and enjoys supporting students and novice clinicians in supervision, identity development and strengthening their case conceptualizations. Dr. Lally is an Assistant Professor in the Hackensack Meridian School of Medicine and is actively involved in supervising and training psychiatry residents. Dr. Lally is a licensed psychologist and a licensed professional counselor in the State of New Jersey and maintains an Approved Clinical Supervisor certification.

Elisabeth Polnyj, Psy.D. Child/Adolescent Psychologist Jersey Shore University Medical Center

Dr. Polnyj is a licensed psychologist and certified school psychologist. She earned a Bachelor's degree in Psychology, a Master's degree in School Psychology, and a Doctorate in School Psychology. Dr. Polnyj was previously a school psychologist. She evaluated and provided services to students with special needs including attention deficit hyperactivity disorder (ADHD), autism spectrum disorder (ASD), intellectual disabilities, and specific learning disorders. Now, at Jersey Shore University Medical Center, Dr. Polnyj is a child/adolescent psychologist for the Comprehensive Health Evaluation for Children (CHEC) program for the Division of Child Permanency and Protection (DCP&P). Her primary responsibility is completing comprehensive mental health assessments (CMHA) for children entering out of home placements. In addition, Dr. Polnyj provides individual and group therapy for children and adolescents.

Gina Radice-Vella, Psy.D. Chief Psychologist, Psychology Internship Training Director Jersey Shore University Medical Center

Gina Radice-Vella is the Director of Internship Training at Jersey Shore University Medical Center. Dr. Radice-Vella is a New Jersey licensed clinical psychologist. She received her Doctor of Psychology from Xavier University, Cincinnati, OH. Prior to her employment at JSUMC, she worked as the associate director of an APA accredited internship program at a state psychiatric hospital. In addition, she supervised doctoral level interns. Dr. Radice-Vella is an Assistant Professor of the Hackensack Meridian School of Medicine and is actively involved in the Psychiatry Residency training program, including providing individual and group supervision to residents at various levels of training. Further, she is a course director for various courses related to psychological principles, providing a variety of didactics to residents. Clinically, Dr. Radice-Vella has experience working with individuals with severe and persistent mental illness in both correctional and psychiatric inpatient settings and with individuals involved in the legal system, conducting forensic evaluations. In addition, she has worked in outpatient therapy settings, utilizing a client-centered and integrative approach to care.

Benjamin Steinberg, Psy.D., ABPP Board Certified Clinical Psychologist Supervising Psychologist Jersey Shore University Medical Center

Dr. Steinberg is a board certified clinical psychologist with a focus primarily on child and adolescent mental health. He obtained his bachelor's degree from Montclair State University and Doctor of Psychology with a concentration in child and family psychology from Florida Institute of Technology. Dr. Steinberg has treated patients across the lifespan in settings such as a dual-diagnosis outpatient clinic, day-habilitation for adults with co-occurring developmental disabilities, in-home behavioral therapy for children with behavioral problems, and incarcerated adults. In his role as a psychologist with Hackensack Meridian Heath, Dr. Steinberg worked closely with the Department of Children and Families in conducting evaluations for children placed in foster care. He has transitioned to providing outpatient interventions including psychological evaluations, individual psychotherapy, and group In his role as a supervising psychologist and Assistant Professor at the Hackensack Meridian School of Medicine, Dr. Steinberg is responsible for providing training and supervision in Psychiatry Residency training program as well as the Child and Adolescent Psychiatry Fellowship.

Affiliated Faculty Grace Hickey, Ph.D

Director, Behavioral Health Services - Southern Region, Hackensack Meridian Health Manager, Clinical Operations, Jersey Shore University Medical Center

Stacy Doumas, M.D., M.B.A

Chair, Department of Psychiatry, Jersey Shore University Medical Center Southern Region Chair of Psychiatry, HMH Vice Chair & Associate Professor, Department of Psychiatry, Hackensack Meridian School of Medicine Clinical Associate Professor, Psychiatry, Rowan SOM Assistant Professor, Psychiatry, St. George's University SOM

Internship Admissions, Support, and Initial Placement Data

Program Disclosures

Does the program or institution require students, trainees, and/or staff (faculty) to comply with specific policies or practices related to the institution's affiliation or purpose? Such policies or practices may include, but are not limited to, admissions, hiring, retention policies, and/or requirements for completion that express mission and values.	Yes XNo			
If yes, provide website link (or content from brochure) where this specific information is presented:				

Internship Program Admissions

Briefly describe in narrative form important information to assist potential applicants in assessing their likely fit with your program. This description must be consistent with the program's policies on intern selection and practicum and academic preparation requirements:

Applicants for the JSUMC Internship in Health Service Psychology must be doctoral students in good standing at an American Psychological Association (APA) or Canadian Psychological Association (CPA) accredited graduate program in the fields of clinical and/or counseling psychology. Further, applicants must be approved by their University Training Director for the start of internship. Candidates will only be considered for the Psychology Internship Program if they have completed adequate and appropriate training for the position prior to application outlined below:

- The Candidate has completed their formal academic coursework toward a doctoral degree in professional psychology (e.g. clinical or counseling)
- The Candidate has successfully completed their institution's qualifying/comprehensive exams
- The Candidate has participated in closely supervised experiential clinical training in practicum or externship placements.

Selection criteria will also include the applicant's prior training experiences, interests and expressed internship goals, as they relate to the aims of the program and the training experiences offered in the internship program. The type and number of supervised, face-to-face clinical contact hours will also be considered to determine adequacy and appropriateness of prior practicum training. The applicant's statement of training and professional goals and career interests will also be considered. Our interviewing and applicant rating process is designed to be as objective as possible and unbiased with regard to cultural and individual diversity. We also have a section in our Internship Initial Applicant Screening

Guide designed to help screeners attend to cultural and individual differences and diversity when selecting applicants to interview. During the interview, the applicant's ability to discuss their clinical experiences and interests as it relates to JSUMC's internship in health service psychology will also be considered.

Does the program require that applicants have received a minimum number of hours of the following at time of application? No

Total Direct Contact Intervention Hours: No

Amount: n/a

Total Direct Contact Assessment Hours: No

Amount: n/a

Describe any other required minimum criteria used to screen applicants:

Application requirements include: Cover letter, Curriculum Vitae, three letters of recommendation from faculty or other professionals who are well acquainted with the applicant's clinical work and qualifications, a statement from the applicant's graduate program's DCT documenting his/her eligibility for internship, status as a student on track to complete necessary requirements, and whether any remediation plans or probational actions have been initiated, and one official copy of graduate school transcripts.

Financial and Other Benefit Support for Upcoming Training Year

Annual Stipend/Salary for Full-time Interns	\$34,590	
Annual Stipend/Salary for Half-time Interns	N/A	
Program provides access to medical insurance for intern?	Yes	
Trainee contribution to cost required?	No	
Dental and prescription coverage?	Yes	
 Coverage of family member(s) available? 	Yes	
 Coverage of legally married partner available? 	Yes	
 Coverage of domestic partner available? 	No	
Hours of Annual Paid Personal Time Off and Sick	120 hours (15 days)	
In the event of medical conditions and/or family needs that require extended leave,	Yes	

does the program allow reasonable unpaid leave to interns/residents in excess of personal time off and sick leave?	
Other benefits (please describe): N/A	

Initial Post-Internship Positions (aggregate tally for 3 preceding cohorts)

	2020-2023	
Total # of interns who were in the 3 cohorts	n/a	
Total # of interns who did not seek employment because they returned to their doctoral program/are completing doctoral degree	n/a	
	Postdoctoral Residency	Employed Position
Academic teaching	n/a	n/a
Community Mental Health Center	n/a	n/a
Consortium	n/a	n/a
University Counseling Center	n/a	n/a
Hospital/Medical Center	n/a	n/a
Veterans Affairs Health Care System	n/a	n/a
Psychiatric Facility	n/a	n/a
Correctional Facility	n/a	n/a
Health maintenance organization	n/a	n/a
School District	n/a	n/a
Independent Practice	n/a	n/a
Other	n/a	n/a

Legal Notices, Disclaimers and Relevant Policies

Nondiscrimination Policy
Equal Employment Opportunity & Americans with Disabilities Act (ADA) statement
Disability information
Statement of Nondiscrimination
Due Process and Grievance
Supervision
Telesupervision
Maintenance of Records

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).

Equal Employment Opportunity and Americans with Disabilities Act (ADA)

Hackensack Meridian Health is committed to the principles of equal employment opportunity and affirmative action. It conducts all hiring and employment practices strictly in accordance with applicable fair employment practices laws and regulations. Discrimination in employment on the basis of any classification protected under federal, state, or local law is a violation of our policy and is illegal. To the extent protected by applicable law, Hackensack Meridian Health does not discriminate in hiring or employment on the basis of:

- age
- ancestry
- color
- creed
- citizenship status
- ethnicity
- gender identity or expression
- genetic information
- marital status or domestic partnership status
- mental or physical disability (including HIV and AIDS)
- national origin
- pregnancy

- race
- religion
- sex
- affectional or sexual orientation
- veteran status
- atypical cellular or blood trait
- Or other categories defined by federal, state, or local law.

This policy applies to all terms and conditions of employment, including, but not limited to, recruitment and hiring, upgrading, classification, placement, promotion, termination, reductions in force, recall, transfer, leaves of absence, and compensation.

HMH is committed to complying with the Americans with Disabilities Act (ADA), as amended, and applicable state and local laws providing for non-discrimination in the employment of qualified individuals with covered disabilities. Many individuals with disabilities can perform the essential functions of their jobs without any reasonable accommodation. However, in some situations, an individual may need a reasonable accommodation

in order to perform his or her job. It is HMH's policy to:

- Ensure that qualified individuals with disabilities are treated in a non-discriminatory manner in the pre- employment process and that employees with covered disabilities are treated in a non-discriminatory manner in all terms of employment.
- Keep all medical-related information confidential in accordance with the requirements of the ADA and applicable state or local laws, and retain such information in separate confidential files. If any employee feels that their confidentiality has been breached, we ask that the employee report this to Human Resources immediately. We take such concerns very seriously.
- Reasonably accommodate applicants and employees with covered disabilities, except where such an accommodation is unreasonable, would not otherwise eliminate a direct threat to the employee or others, or would otherwise create an undue hardship on HMH. Reasonable accommodations may include, but are not limited to, making existing facilities readily accessible to and usable by individuals with disabilities, acquisition or modification of equipment or devices, provision of qualified readers or interpreters, appropriate adjustment or modification of examinations, training materials or policies, part-time or modified work schedules, job restructuring (reassignment of non-essential job functions), unpaid leave, and reassignment to a vacant position. If you have a disability and believe you need a reasonable accommodation to perform the essential functions of your job, you should contact Human Resources to request

- an accommodation. HMH will engage in an interactive dialogue with you to identify possibilities for reasonable accommodation. HMH reserves the right to have the disability and/or accommodation verified by a doctor of its choosing.
- Notify individuals with covered disabilities that HMH provides reasonable accommodation to qualified individuals with disabilities.

Policy: Due Process in Evaluation and Remediation and Grievance

Effective Date: July 1, 2023

This document sets forth guidelines for evaluation of interns, grievance procedures, and the management of problematic performance or conduct. The guidelines are consistent with accreditation standards of the American Psychological Association and because interns are considered employees of HMH, these guidelines also incorporate JSUMC policy and procedure. These guidelines emphasize due process and assure fairness in the program's decisions about interns, and they provide avenues of appeal that allow interns to file grievances and dispute program decisions.

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.

The below guidelines are an elaboration of the steps by which concerns can be addressed within the training program 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 immediate steps to remediate situations in which an Intern exhibits continued serious difficulties and does not function effectively in a clinical or professional interpersonal situation. Examples can include but are not limited to:

- A marked deficiency in skills, for example if an Intern receives a rating of 1 "Needs Remedial work" 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 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

These problems or deficiencies will be addressed through plans of remedial action. The following procedures will be initiated to ensure that the handling of such issues is not arbitrary or biased.

- Level 1: An area of weakness or issue of performance or conduct is identified by the supervisor.
 - Action: (Informal Review): The supervisor will meet with the intern, as early as is feasible, to notify the intern verbally that a problematic behavior has been identified in an attempt to informally resolve the problem. The supervisor and intern will discuss the problem and attempt to arrive at a mutually acceptable solution or plan for remediation. The areas needing intervention, an approach to resolution (e.g.; increased supervision, readings, additional cases), the allotted time frame, and the required outcomes will be identified. This process should be documented in writing in supervision notes and discussed with the Director of Internship Training and Supervisory Committee but will not become part of the intern's professional file.

Level 2: The issue has not been resolved within the allotted time frame discussed in Level 1.

- Action: (Formal Review):
 - Step 1: Notice of Formal Review: The intern will be notified in writing as soon as is feasible that the issue has not been resolved and has been raised to a formal level of review, and a Hearing will be held.

- Step 2: Hearing: The supervisor or faculty/staff and Director of Internship Training will hold a hearing with the intern within 10 working days of issuing a Notice of Formal Review to discuss the problem and determine appropriate actions to address the issue. If the Director of Internship Training is the intern's primary supervisor, an additional supervisor and member of the supervisory committee will attend the hearing. The intern will have the opportunity to provide a written statement in response to the problem.
- Step 3: **Outcome and Next Steps:** Following the hearing, the supervisor will complete a Competency Evaluation form to identify the specific areas requiring remediation. The intern will have the opportunity to provide a statement of his/her response to the rating or identified problem areas within seven (7) working days of receipt of the written concern; these comments will be considered in the development of a Growth Plan.
- A Growth Plan is then developed by the supervisor and is shared with the Director of Internship Training, the intern, and the intern's University Training Director within two business days of development. Both the intern and the University Training Director are provided with copies. The Growth Plan is implemented immediately and the supervisor provides weekly feedback and documentation to the intern, Director of Internship Training, and University Training Director about the progress of the intern as rated by measures on the Competency Assessment, including a statement about whether or not the supervisor anticipates the intern meeting minimal standards by the end of the rotation. All Growth Plans will include objective, measurable goals and the time frame needed to complete them.
 - The time frame of the Growth Plan will depend upon the nature of the problem and will be determined by the supervisor and Director of Internship Training but will be defined in writing on the Growth Plan.
 - At the end of the designated Growth Plan time frame, the Director of Internship Training will provide a written statement indicating whether the problem has been remediated. The resolution will be communicated to the intern's University Training Director.
 - If the rating or the Growth 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.
- Level 3 (The issue is not resolved at Level 2 as indicated by the supervisor's written evaluation/documentation. The intern is not anticipated to meet minimal requirements by the end of the rotation or the limits identified in the Growth Plan).
 - If the issue is not resolved through the aforementioned processes, the intern's position may be terminated. The decision to terminate an intern would be made by the Supervisory Committee and a representative of Human Resources. The decision to terminate would be made during a meeting within 5 days of

notification that the problem has not been resolved in Level 2. The Director of Internship may decide to temporarily suspend the intern's engagement in clinical activities during this time. In the event of termination, the intern's University Training Director would be notified within two working days.

If an 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 policies and procedures, it will need to be actively and systematically monitored by the faculty, through the supervisors and Training Director. 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.

If termination is initiated by either Human Resources or the Supervisory Committee, the intern is responsible for completing all patient documentation prior to leaving. The intern's University Training Director will be notified within two working days of dismissal.

Appeals. At any point, the intern has the right to appeal the decisions and/or actions taken by the program if they are in disagreement. The intern may request an Appeals Hearing in writing to the Director of Internship Training within five working days of notification. If requested, the Appeals Hearing will be conducted by a review panel to include the Director, the intern's primary supervisor, and at least two additional members of the supervisory committee. The Appeals Hearing will be held within 10 working days of the intern's request. The review panel will review all written materials and will interview the parties involved and any additional individuals with relevant information. The review panel may uphold previously made decisions or may modify them. The review committee has the final discretion regarding the outcome.

Grievance Procedures

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.

Level 1: An intern identifies a complaint or grievance about a supervisor, staff member, trainee and Director of Internship Training or training program.

- Action (Informal Review): The intern will raise the issue with the supervisor, staff member, other trainee, or Director of Internship Training in an effort to resolve the problem, as soon as is feasible. If the concern is not resolved to the intern's satisfaction, the concern should be raised with the Director of Internship Training (if the Training Director is not the grieved party). The Director of Internship Training will attempt to resolve any concerns through informal mediation and/or consultation.

Level 2: The complaint/grievance is not resolved at Level 1 or the intern is either uncomfortable or deems it inappropriate to address with the other individual.

- Action (Formal Review): If the issue cannot be resolved using informal measures, the
 intern may submit a formal grievance in writing to the Director of Internship Training. If
 the Director of Internship Training is the grieved party, the intern should submit a
 written grievance to another member of the Supervisory Committee.
- The grieved party will be asked to submit a written response.
- The Director of Internship Training (or member of the Supervisory Committee, if the individual being grieved is the Director of Internship Training) will hold a meeting with the intern and the individual being grieved within 10 working days. It may be appropriate to meet with the two parties separately prior to a joint meeting.
- At the joint meeting, a plan of action to resolve the issue will be developed, which will include specific steps to remedy the issue and procedures designed to ascertain whether the problem has been adequately resolved.
- The outcome of the meeting will be documented in writing.

- Individuals involved (the intern and the individual being grieved) will be asked to respond in writing whether the issue has been resolved within 14 working days of the joint meeting.

If the issue is not resolved, the Director of Internship Training (or Supervisory Committee member), will convene a review committee to include the Director, the intern's primary supervisor, and at least two additional members of the supervisory committee within 10 working days. The review panel will review all written materials and will interview the parties involved and any additional individuals with relevant information. The review committee has the final discretion regarding the outcome.

If the review committee determines that the grievance is not appropriate to be resolved internally, or cannot be resolved internally, the issue will be turned over to the employer agency to resolve via employment policies. If the review committee determines that the issue can be resolved internally, a second plan of action will be developed in writing. The process and outcome of the review committee meeting will be documented in writing. Individuals involved (the intern and the individual being grieved) will be asked to respond in writing whether the issue has been resolved within 14 working days of the joint meeting. If the issue is not resolved following the second plan of action, the issue will be turned over to the employer agency.

Should an intern be the subject of or witness of any inappropriate workplace behaviors (i.e. sexual harassment, discrimination, etc.), he/she may inform the Employee Relations Office or may inform the Director of Internship Training and/or the Chief Psychologist who will facilitate informing the Employee Relations Office. The matter will then be addressed through designated JSUMC policies.

Policy: Supervision

Effective Date: July 1, 2023

Supervision is a core element of the internship program. Supervision provides interns with guidance and models for professional conduct and activities. Each intern is assigned a primary supervisor who will oversee the intern's clinical work. In addition, members of other disciplines at the intern's various rotation sites, may supervise interns in consultation and collaboration with the intern's supervisors. At a minimum, interns will spend three hours per week in individual supervision. In addition to regularly scheduled supervision sessions, supervisors will be available to address any issues that arise between sessions. As this is an academic medical facility, it is also expected that there will be many opportunities for direct/live supervision. Formally, interns' work will be observed in vivo on at least two occasions per rotation in areas of both assessment and therapy. Supervisors will provide direct feedback to the intern on observed sessions, which will be incorporated into the 3-month and 9-month Competency Assessments. Interns will also participate in a combination of content and process-based focused group supervision facilitated by members of the training committee. This is a regularly scheduled, weekly one-hour group supervision. To ensure a varied supervisory experience and to broaden awareness of diverse styles of competent practice, interns switch supervisors mid-year at the end of their first rotation. Consistent with the standards of the New Jersey State Board of Psychological Examiners, at least four hours of supervision each week is provided by a psychologist who has been licensed in New Jersey for more than two years.

Supervisors are accessible to interns in a myriad of ways. At the start of each rotation, supervisors and interns will schedule two days and times (duration of 1.5 hours each, total 3 hours per week) to meet for regularly scheduled, in person individual supervision. These agreed upon days/times are to be prioritized above other training opportunities and clinical tasks, as supervision is highly valued and regarded as the foundation of our training program. If supervision has to be canceled due to intern or supervisor's absence or an emergent situation, all efforts should be made by both parties to reschedule for that week.

In addition to regularly scheduled supervision sessions, supervisors are available by phone, text, and e-mail. Further, supervisors maintain an open door policy, meaning that

interns are welcome to stop by supervisors' offices should they have an issue they would like to discuss.

When a supervisor is scheduled to be out, there will be a covering psychologist should an intern need clinical assistance. Interns will be made aware of who the covering psychologist is so they know who to contact. In addition, the Program Coordinator will be aware of which psychologists are out and who is covering and will communicate the coverage schedule or last minute coverage needs to the interns via email.

Policy: Telesupervision

Effective Date: July 1, 2023

As defined by the Commission on Accreditation, Implementing Regulations:

- **Telesupervision** is supervision of psychological services through a synchronous audio and video format where the supervisor is not in the same physical location as the trainee.
- **In-person supervision** is supervision of psychological services where the supervisor is physically in the same room as the trainee.

Guidelines and Limits:

- Telesupervision may not account for more than one hour (50%) of the minimum required (as defined in the SoA) two weekly hours of individual supervision, and two hours (50%) of the minimum required (as defined in the SoA) four total weekly hours of supervision.
- Supervision beyond the minimum number of required hours may utilize methods or modalities that are deemed appropriate by the accredited program.

The JSUMC Internship Program requires a minimum of three hours of face to face individual supervision per week (plus one hour, in person group supervision). However, particularly in light of the Covid-19 pandemic, we recognize that issues arise in which telesupervision may be more appropriate or safe to protect the health and well-being of trainees, supervisors, and patients. As such, telesupervision is reserved for those situations in which either the intern or supervisor is sick or physically off site due unforeseen, unavoidable circumstances. Consistent with IR C-15 I, telesupervision will not account for more than two hours (50%) of the minimum required four total weekly hours of supervision.

Rationale:

Telesupervision is utilized as an alternative form of supervision when in-person supervision is not practical or safe. Telesupervision allows for continuation of training and supervision in extenuating circumstances that might preclude in-person supervision.

Consistency with Training Aims and Outcomes:

Our program's training aims focus on the training and professional development of our interns to be ethical, competent, and culturally sensitive practitioners within a healthcare setting. Supervision is a core part of our training and is viewed as essential to monitoring the quality of professional services offered to the clients that interns see as and serving as a gatekeeper for those who are to enter the particular profession. We strongly value regular and consistent supervision to ensure the quality of both trainee development and patient care. Telesupervision allows our program to continue to place supervision as a top priority, meeting the needs of our

trainees and patients, even in the face of circumstances that preclude in person meetings. We recognize potential drawbacks of telesupervision (competing demands, environmental distractions, technological issues, etc.) and discuss these challenges openly at the outset of the supervisory relationship and throughout the training year as needed. We work to brainstorm solutions to offset any challenges that may arise and ensure the quality of supervision and the integrity of the supervisory relationship remains intact. We work with our trainees to establish clear expectations and training goals at the start of each rotation and regularly and consistently check in on these throughout the training relationship.

How and When Telesupervision is Utilized in Clinical Training:

Telesupervision is an alternative to in-person supervision when meeting in person is not possible or is not safe. Examples include unforeseen illness or injury, emergent familial obligations, major life event, and public health emergency situations. It is important to note that telesupervision will be reserved for cases of unforeseen and unavoidable occurrences, not solely for convenience. We implement telesupervision by using a videoconferencing platform, Zoom Healthcare. Supervisors and supervisees may access telesupervision either from their individual offices or if needed, from a secure and confidential space within a home.

Trainee Participation:

All trainees are able to participate in telesupervision as an alternative for in-person supervision when telesupervision is indicated as described above.

Establishing the Supervisory Relationship:

In-person supervision sessions are encouraged except in the cases of rare, unforeseen and unavoidable circumstances. At the start of the supervisory relationship, supervisors and supervisees are expected to establish clear expectations, supervision guidelines, and training goals. These are developed through the intern's Training Plan and reviewed quarterly, or as often as needed throughout the supervisory relationship. Both supervisors and supervisees are encouraged to provide open, honest, and timely feedback, particularly if issues arise in the supervision dyad, including issues related to telesupervision. Adjustments to the established supervision expectations should be made if needed in order to ensure an ongoing, collaborative, and supportive supervisory relationship.

Supervisor Responsibility of Clinical Cases:

Whether on-site or remote, the primary supervisor continues to have full oversight and professional responsibility for all clinical cases discussed. In the event of a supervisor's absence, a covering psychologist on-site is available for any immediate consultative or supervisory needs of the trainee or client care.

Management of Non-scheduled Consultation and Crisis Coverage:

In the event of emergent clinical needs or non-scheduled consultation, supervisors are available by email, text, phone, or Zoom. In addition, other psychologists and other clinical team members are available on site or via email, phone, or Zoom to discuss any emergent client care issues should the intern's primary supervisor be immediately unavailable. Interns are informed of hospital policies related to crisis situations and will be advised of the necessary channels of communication should they need to communicate a crisis to appropriate personnel. When a supervisor is scheduled out, a covering psychologist will be assigned to the intern's supervision and clinical case needs, assuming responsibility for those services in the primary supervisor's absence.

Privacy/Confidentiality of Clients and Trainees:

Telesupervision involving confidential patient information or information that is personal and/or sensitive to the trainee should only occur in settings where privacy and confidentiality can be maintained. Our videoconferencing platform, Zoom Healthcare, provides end-to-end encryption and meets HIPAA standards.

Technology Requirements and Education:

Telesupervision will occur via Zoom Healthcare. Zoom can be accessed from a computer, laptop or cellphone. During intern orientation, we will discuss telehealth expectations, including telesupervision.

Policy: Maintenance of Records

Effective Date: July 1, 2023

In accordance with the Standards of Accreditation, the internship program maintains documentation on Intern Performance and on Intern Complaints and Grievances. All intern records, including performance records and formal complaints, are stored confidentially in locked file cabinets, in the Training Director's office. All interns' training evaluations will be permanently maintained. In the event of a Complaint or Grievance, the internship program will permanently maintain records of all formal complaints and grievances that have been filed against the program and/or against individuals associated with the program. These will be confidentially stored in the Training Director's Office. Electronic copies of intern records will also be maintained, stored in a private electronic folder.