APA-Accredited
Doctoral Psychology Internship Program
Pembroke Pines, Florida

2018-2019
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Thank you for your interest in the doctoral psychology internship program at South Florida State Hospital. The psychology internship aims to produce ethical clinicians who can integrate science with practice, are multicultural sensitive, and provide quality assessment, and empirically based assessments and interventions to a severely mentally ill adult inpatient population. Through didactic training and supervised practice, interns will increase their knowledge and proficiency in the application of general psychological principles and will have an opportunity to work with a culturally diverse population. Through rotations, interns will have the opportunity to build specialized skills in the areas of forensics, cognitive assessment, and specialized behavioral treatment plans. Throughout training, interns will be included as a contributing member of the hospital’s multidisciplinary team. Responsibility for professional decision-making grows as interns’ clinical skills are demonstrated and refined. However, their primary role remains that of trainee, and supervision and training is a top priority of this program.

Our program is accredited by the American Psychological Association (APA) and the accreditation status of this program can be obtained from the APA Office of Program Consultation & Accreditation, 750 First Street NE, Washington, DC, 20002-4242, (202) 336-5979, and at its website www.apa.org/ed/accreditation.

We are also a member of the Association of Psychology Postdoctoral and Internship Centers (APPIC). We abide by APA and APPIC policies as well as participate in the APPIC Internship Matching Program. Applications and the Applicant Agreement can be obtained from the APPIC Web site at www.appic.org. Our program code is 1211.

We have three (3) funded Internship positions. This internship site agrees to abide by the APPIC policy that no person at this training facility will solicit, accept or use any ranking-related information from any intern applicant.

Please note that the sections that follow within this brochure provide information regarding our internship site. However, recognize that it is not feasible to answer all questions that may arise when reviewing this information. As such, we strongly encourage potential applicants to contact us directly, with any questions they may have.

Correct Care Recovery Solutions is an EOE/Minorities/Females/Vet/Disability Employer. Consideration for employment is provided without any discrimination in compliance with the Americans with Disabilities Act (ADA). Correct Care Solutions provides reasonable accommodations to all those with a disability as defined under the ADA.

THE HOSPITAL

South Florida State Hospital is a privately managed 341-bed state psychiatric hospital. The hospital provides services to adults of all ages from many cultural backgrounds. Most of the persons served (patients) in this facility have been committed for treatment pursuant to Florida’s civil commitment statute, known as the Baker Act. These persons served represent a broad spectrum of psychiatric disorders with the most frequent diagnoses being major thought and affective disorders, severe personality disorders (primary borderline) and substance use. Psychology staff and interns are responsible for assessment, individual and group psychotherapy, behavioral planning, training of and consultation with direct care staff, as well as participation in the interdisciplinary treatment teams.

The hospital has a strong commitment to providing training across a broad array of disciplines, including nursing, medicine, social work, pharmacy, and psychology. Trainees in these areas come from local universities such as University of Miami, Nova Southeastern University, Barry University, and Broward Community College. Interns
are provided with opportunities to interact with trainees from other disciplines while serving on treatment teams and attending Grand Rounds.

The recovery treatment model at SFSH is Illness Management & Recovery (IMR), which consists of a designated set of skills and knowledge to help persons served attain management of their illness and recovery. IMR is a step by step evidence based practice program that helps persons served to set meaningful goals for themselves, acquire information and skills to develop more sense of mastery over their psychiatric illness, and make progress towards their own personal recovery. However, what is consistent with the traditional medical model is that the psychiatrist is the head of the treatment team. The psychology department fulfills the roles of consultant, therapist, assessor, and behavioral analyst. We offer support to the treatment teams and the persons served.

The hospital is comprised of seven units, with each unit name representing an area or theme associated with the State of Florida. Four units (Las Olas, Okeechobee, Everglades, and Tequesta) are 50+ bed general population male units. One unit (Sanibel) is a 50+ bed female general population unit. Two units (Royal Palm and Vizcaya) are coed units.

### Geriatric/Medically Compromised Populations

Vizcaya, the geriatric unit, houses elderly and some physically vulnerable or medically compromised persons served. Due to the physical limitations of the persons served on the Vizcaya unit, and the difficulty ambulating to treatment/recovery programs, services are usually offered on the unit. This unit also offers opportunities for interns to conduct neuropsychological batteries that help elucidate the nature of cognitive deficits and help the treatment team design effective recovery plans. The Vizcaya unit has a 10-bed Medical wing that is used for acute medical conditions. Generally, persons served are here for brief periods of illness, although sometimes they have conditions that prevent them from returning to the general units. Psychology staff and interns conduct individual therapy with few of the persons served and help the staff provide support and comfort to the persons served.

### Forensic Population

There are forensic step-down beds allocated for forensic persons served at South Florida State Hospital. Generally, the persons served are from the 13 county service area and have been stepped-down from a secure forensic facility to this civil hospital, because they are regarded as no longer in need of a high security placement. There is no specific forensic unit, and the persons served are dispersed throughout the hospital units based on level of functioning and behavior.

The forensic persons served have been committed by the state criminal courts as Incompetent to Proceed (ITP) or as Not Guilty By Reason of Insanity (NGI). A variety of psychiatric conditions are seen with the most frequent diagnoses being major thought and affective disorders, severe personality disorder (primarily antisocial and...
Many of the ITP persons served have significant cognitive impairment that prevents them from being restored to competency.

DEMOGRAPHICS

Persons Served

Our population is comprised of 67% males and 33% females. The average age of our population is 47. Over 85% of persons served carry a diagnosis of schizophrenia, 7% have mood disorders, and 67% have substance use disorders.

The cultural fabric of the South Florida area is comprised of vibrant and diverse groups of individuals, each with a unique and strong sense of cultural identity. The diverse environment is considered one of many strengths of our program, and many of our interns have reported such an experience to add to their cultural competency and increases marketability when looking for post-doctoral employment.

The persons served population of SFSH is comprised of a significant proportion of individuals from the Caribbean islands (e.g., Haiti, Cuba, and Jamaica) and South America. While the largest proportion of individuals speak English, many are bilingual or monolingual in Spanish or Haitian Creole. Interns have the unique opportunity to work with persons served who recently immigrated to the United States. Seminars are provided to meet the unique needs of the South Florida population. As such, in addition to a variety of general clinical topics, interns attend multiple seminars provided by supervisors and local experts on immigration and acculturation.

Staff

Consistent with our persons served’s demographics, the employees at SFSH are a reflection of the diverse population in South Florida. The staff is comprised of 66% females and 34% males. There are 71% who are classified as Black, but who come from various ethnic groups, including Jamaica, Haiti, Caribbean islands and countries in Africa; 12% are White, 12% Hispanic, and 5% come from other backgrounds, such as Asia.

THE AREA

South Florida State Hospital is located in Pembroke Pines, Florida. The hospital is short drive from internationally renowned Miami/South Beach and Fort Lauderdale beaches. The climate in South Florida is tropical, with average winter temperatures ranging from 65 to 70 degrees.

The culturally rich and diverse population of South Florida is one of the unique and exciting aspects of the area and this is reflected in its variety of local dining and entertainment experiences. The area also offers popular shopping destinations, such as Sawgrass Mills Outlet Mall (the largest outlet mall in the country) and upscale shopping and entertainment destinations such as Las Olas, Hard Rock Casino and Entertainment Complex, and Coconut Grove. South Florida is also home to several professional sports teams, including the Miami Heat, Miami Dolphins, Florida Panthers, and Miami Marlins. Popular vacation destinations, such as the Florida Keys, Disney, and Universal Studios, are all a three hour drive away. South Florida is also home to the world’s busiest cruise ports. Additionally, Pembroke Pines is within driving distance from three international airports.
Interns have commented on the high quality of life while on internship in South Florida. Safe and relatively reasonably priced housing for a metropolitan area is within a 5-15 minute radius from the hospital. The State of Florida is also one of only nine states in the country to not have an individual state income tax.

**PSYCHOLOGICAL SERVICES**

Psychology trainee and supervisor offices are located within one central location. Each intern is assigned his or her own individual office with computers so that they may access the hospital’s convenient information system and electronic medical record system (EMR). The department can be best described as a friendly and cohesive group that values professionalism. The department gathers for holiday gatherings and team building (Murder Mystery/Themed Costume Party) activities outside of work at various points throughout the year.

The Psychology Department is comprised of 6 full-time licensed psychologists, one part-time licensed psychologist, one full-time postdoctoral resident, and multiple practicum students. The Psychology Department primarily provides consultation, assessment, and treatment services within the hospital.

**Psychology Staff**

**Sheila Santiago Schmitt, Psy.D.**
**Director of Psychology and Forensic Services/ Director of Internship Training**
**Post-doctoral Resident Supervisor**
Dr. Schmitt earned her doctorate in Clinical Psychology from Minnesota School of Professional Psychology. She completed her internship at Citrus Health Network in Miami, Florida. She has worked in community mental health centers, residential centers and private practice. Dr. Schmitt is also a reviewer for Behavioral Medical Interventions, where she conducts peer reviews for short-term and long-term disability cases. Her primary interests include multicultural/diversity issues, violence risk assessments, forensic services, mental health disabilities, and clinical supervision.

**Monique Mendez-Timmons, Psy.D.**
**Staff Psychologist – Interns’ Supervisor- Internship Forensic Rotation Supervisor**
Dr. Mendez-Timmons earned her doctorate in Clinical Psychology, with a concentration in Forensic Psychology, from Nova Southeastern University. She completed her internship in forensic psychology at the University of Medicine and Dentistry of New Jersey where she worked at a medium security prison for adolescents and with juvenile sex offenders in the community. She has worked in community mental health settings, program evaluation, correctional settings, and private practice with both adults and children. Her primary areas of research and interest consist of sexual offenders, victims and perpetrators of abuse and trauma, and mentally ill criminal offenders.

**Mirelis Peraza, Psy.D.**
**Staff Psychologist – Interns’ Supervisor – Internship Specialized Behavior Plan Rotation Supervisor**
Dr. Mirelis Peraza earned her Doctorate in Clinical Psychology, with a concentration in Forensic Psychology, from Carlos Albizu University, in Miami Florida. She completed her doctoral internship and postdoctoral residency at South Florida State Hospital. Dr. Peraza has over twelve years of experience providing therapeutic services to children to older adults. She has been in private practice since 2013, focusing primarily on adults with a history of affective disorders, traumatic experiences and women’s issues. Her main areas of research and interest include criminal behavior, behavior modification, and immigration and acculturation issues.
Kelly D’Ottavio, Psy.D.  
**Staff Psychologist – Interns’ Supervisor – Internship Assessment Rotation Supervisor**  
Dr. D’Ottavio earned her doctorate in Clinical Psychology, with a concentration in Forensic Psychology, from Nova Southeastern University. She completed her internship at the Haymount Institute for Psychological Assessment in Fayetteville, North Carolina, conducting comprehensive psychological and psychoeducational evaluations with children to older adults. The majority of her clinical work has been within forensic settings, including corrections, forensic hospitals, and court-appointed evaluations. Her primary areas of research and interest consist of psychological expert testimony, violence risk assessment, and mentally ill criminal offenders.

Taylor Phillips, Psy.D.  
**Staff Psychologist – Practicum Students’ Supervisor**  
Dr. Phillips earned her doctorate in Clinical Psychology, with a concentration in Forensic Psychology, from Nova Southeastern University. She completed her internship at Arkansas State Hospital in Little Rock, Arkansas, providing inpatient treatment and conducting comprehensive psychological and forensic evaluations with adolescents and adults. Further, Dr. Phillips completed her postdoctoral residency at a private practice in Palm Beach, mainly conducting comprehensive parental fitness evaluations for parents involved in the dependency court system. The majority of her clinical work has been with severe and persistent mental illness within multiple settings, including inpatient, outpatient, and forensic settings. Her primary areas of research and interest consist of trauma, violence risk assessments, and mentally ill criminal offenders.

George Kallas, Psy.D.  
**Staff Psychologist – Practicum Students’ Supervisor**  
Dr. Kallas became a Licensed Psychologist in September of 2008, and prior to that had been a Licensed Mental Health Counselor since March of 1999. Dr. George Kallas opened his private practice, The Orion Center for Psychotherapy, Inc., in 1999. He became certified as a sex therapist in August of 2003 by AACS and fulfilled the State of Florida requirements for the practice of sex therapy at that time. Dr. George Kallas graduated from Carlos Albizu University with a Psy.D. in Clinical Psychology. He also attended a doctoral program simultaneously at Maimonides University where he earned a Ph.D. in Clinical Sexology and became a certified sex therapist.

Jacqueline Valdes, Ph.D.  
**Staff Psychologist Consultant**  
**Neuropsychological Evaluations Supervisor**  
Dr. Valdes completed her doctorate degree from Nova Southeastern University. She completed her internship at Columbia Presbyterian Medical Center in New York City, and a 2 year residency at the North Broward Neurological Institute and Sunrise Rehabilitation Center specializing in neuropsychology. Following her training, Dr. Valdes became the Director of Neuropsychology at Memorial Regional Hospital and also provided neuropsychological services and consulted with various hospital, the Brain Injury Association of Florida, physicians and attorneys. She is the past president of the Neuropsychology Division of the Florida Psychological Association, past president of the Broward Psychological Association and Past secretary of the Hispanic Neuropsychological Society and has also been on the board and part of the ethnic minority affairs committee of the Florida Psychological Association. Dr. Valdes has been involved in research and pharmaceutical studies related to dementia and also has published in the area of appropriate neuropsychological assessment of Hispanic patients and forensic issues. She currently consults with the NFL trust and the Cleveland Clinical Hospital in assessing retired NFL players with a history of concussion and neuropsychologically evaluates patients with head trauma, Multiple Sclerosis, dementia psychiatric disorders as well as other developmental and neurological disorders in the private practice and hospital settings.
PSYCHOSOCIAL REHABILITATION PROGRAM

The programs offered at South Florida State Hospital are based on the Illness Management & Recovery (IMR). The main goal is to help persons served to set meaningful goals for themselves, acquire information and skills to develop more sense of mastery over their psychiatric illness, and make progress towards their own personal recovery. The majority of these programs are located in the Town Center in the center of the hospital campus. Program staff consists of bachelor and master level practitioners from counseling and social work backgrounds.

Programs

All persons served are encouraged to attend programs, and every effort is made to find a good match between what is available and the needs of the person served. Each person served is assessed upon admission to establish which stage of change they are considered to be at and placed in a group tailored for that particular stage. The different stages include: Precontemplation, contemplation, preparation, action and maintenance. The majority of persons served fall within precontemplation and contemplation stages during their hospitalization. Supplementary programs include the Co-occurring Disorders Program (CODEP), and Enrichment Activities, such as music, art therapy, as well as other activities that may facilitate person’s served transition back to the community, such as adult education, computer training, cooking skills, and horticulture. There is also a therapeutic job program for those person served interested to work within the hospital setting. The precontemplation groups’ goal is to get the persons served to consider they have a problem; contemplation groups’ goal is to raise awareness of the problem by observation of the behavior; preparation groups’ is to encourage these steps and support change process; and commit to make change a top priority; action groups’ goal is to make action plan suggestions, reinforce changes, and provide support and guidance; maintenance groups’ goals are to support continued change and help with relapse prevention.

The Observation Groups and Enrichment Program are designed to engage persons served who may not have sufficient social skills to interact effectively with others. It is meant to provide services for persons served who are not ready to participate in other programs. It offers recreational activities that require less intellectual functioning than would a more educational setting. Persons served can play sports, engage in music therapy or art therapy, or just relax while in the presence of their peers. The Co-occurring Disorders Program is a substance abuse recovery program. While this is not a drug rehabilitation hospital, the need to help persons served recover from addiction is a high priority. All persons served are screened for any history of substance abuse and referrals are made to this program when deemed necessary. Persons served are educated on the problems of substance use, including nicotine. They are provided with institutional AA and Double Trouble meetings.

Events/Parties

In addition to programmatic groups, several events for persons served are hosted by program staff throughout the year. Events include field days, talent shows, holiday parties, fashion shows, puppet shows, art shows, and plant sales. Many of these events include activities for persons served such as scavenger hunts, face painting, snow cones and cotton candy, ring tosses, volleyball, dancing. For the art shows, persons served are able to sell their own art work as a means of earning money. Many of our interns have remarked on how these activities greatly increase the quality of life for the persons served, and interns are encouraged to attend these events in support of persons served.

Psychology Department Halloween’s pumpkin contest
INTERNSHIP TRAINING

Psychology Internship Mission
Internship training takes place within the Scholar-Practitioner model with a goal of producing ethical clinicians who can integrate science with practice, are multiculturally sensitive, and provide quality assessment, diagnosis and empirically based interventions to a severely and persistently mentally ill adult inpatient population. Through didactic training and supervised practice, the intern will increase his/her knowledge and proficiency in the application of general psychological principles and will have an opportunity to work with a culturally diverse population. Through rotations, the intern will have the opportunity to build specialized skills in the areas of forensics, psychological assessment, and specialized behavioral plans.

Throughout training, the intern will be included as a contributing member of the hospital’s multidisciplinary team. Responsibility for professional decision-making grows as the intern’s clinical skills are demonstrated and refined. However, his/her primary role remains that of a trainee, and supervision and training is a top priority of this program.

Internship Program Aims

- To Prepare Interns to Demonstrate Intermediate to Advanced Professional Competence with the Severe Mentally Ill Population.
- To Prepare Interns to Demonstrate Intermediate to Advanced Professional Competence in the provision of supervision to other professionals
- To Prepare Interns to Demonstrate Intermediate to Advanced Professional Competence of integration of science and practice

Profession-Wide Competencies (PWCs)
This internship program emphasizes promotion of profession-wide competencies as articulated by the Standards of Accreditation. The clinical and non-clinical training experiences are designed to promote attainment of profession-wide competencies within the context of our specific program aims. It is our goal to ensure that interns achieved these profession-wide competencies and become more independent in their delivery of services by the end of their internship year: Research; Ethical and Legal Standards; Individual and Cultural Diversity; Professional Values and Attitudes; Communication and Interpersonal Skills; Assessment; Intervention; Supervision; and Consultation and Interprofessional/interdisciplinary Skills.

General Duties
Throughout the duration of the training year, interns provide a wide breadth of clinical activities, including individual therapy (4-5 individuals; up to 5 hours of therapy per week), two weekly therapy groups per rotation, and initial and annual psychological assessments. Interns will be able to spend up to two hours each week attending and participating in treatment team meetings on the various hospital units. This allows them to be an active participant in the multidisciplinary treatment process and to build on their clinical knowledge as well as professional identity. In addition, all interns are expected to attend the monthly psychology department meeting; on a quarterly basis, each intern will present a research article relevant to the internship setting and/or population.
Orientation

Interns are expected to attend the hospital orientation and the psychology orientation at the beginning of Internship. The hospital orientation takes place over several days and covers information necessary for safety and adequate work performance during the internship year.

Interns will also participate in a Psychology Department orientation presented by the Psychology Faculty. This orientation will provide an introduction to the program and an overview of some of the specific knowledge and skills, which will provide a strong foundation for growth and development during the year. Interns will then be assigned to a Coordinating Supervisor, with whom they will meet for an hour each week throughout the internship year. This supervisor will be their primary supervisor and will be responsible to provide evaluations to the intern and the director of training, who will inform the intern’s doctoral program.

After the orientations, interns will be assigned an initial psychological assessment case, while receiving close supervision from their Coordinating Supervisor. This will allow supervisors to gain a clear view of the intern’s assessment strengths and areas of growth, and will help them and the supervisor to construct, collaboratively, a set of goals tailored to their needs. Learning during the internship will occur in a developmental fashion. As the year progresses, the interns’ assignments will be increasingly complex and they will function with greater independence.

It is expected that during the first few weeks interns will have many questions and/or concerns. Training Supervisors and the Director of Training are always available outside formal supervision and training to answer any questions or concerns.

Rotation Specific Duties

Interns are required to complete all three of the rotations described below (i.e., forensic, assessment, and specialized behavioral plan rotations). Interns will begin their first sixteen-week rotation following completion of the psychology orientation. While on the rotation, interns meet for at least one hour of individual supervision per week with their rotation supervisor and will devote approximately sixteen hours to that rotation’s subspecialty.

Forensic Rotation (16 weeks). The forensic rotation provides interns the opportunity to evaluate and treat individuals who have been adjudicated Not Guilty by Reason of Insanity (NGI) or Incompetent to Proceed (ITP). Interns perform competency evaluations and risk assessments, conduct competency and NGI groups, and write reports to the court. The intern on this rotation also participates in treatment teams as a liaison/consultant for the Psychology Department for all forensically committed persons served, at least twice a month. All interns participate in a three day Florida Forensic Examiners training (FFET) at the start of internship, which helps prepare interns for forensic evaluations/assessments on the rotation. Interns have reported the FFET to an exceptionally valuable training experience. The rotation ends with a mock-trial where the intern will have an opportunity to present expert testimony about one of their forensic cases.

Assessment Rotation (16 weeks). During the assessment rotation interns will complete at least five (5) comprehensive assessments, using mainly personality, IQ, and/or adaptive functioning measures. In addition, they will be asked to complete shorter assessments that answer specific referral questions (i.e., appropriateness for a trauma or DBT group). The interns will have an opportunity to complete full neuropsychological batteries. Interns will also complete substance use screeners for new admissions and will make referral for services, as appropriate.
Specialized Behavior Plan Rotation (16 weeks). While on the specialized behavior plan rotation interns will learn to develop, implement, and track the effectiveness of individualized behavior plans. They will help train staff in the implementation of the behavior plans and provide continued consultation to the teams in regards to the behavior plans. They will have the opportunity to observe and collect data in the setting where the behavior occurs most often, distribute rewards to the patients who earned them, and provide support to treatment teams who are monitoring on-unit plans. In addition, all interns will be conducting hospital-wide training twice a year, regarding implementation of behavior plans and interventions to decrease aggression among the mentally ill.

Additional Experiences

Interns also take part in field trips to South Florida State Hospital’s operating company’s (Correct Care Recovery Solutions) various facilities, such as South Florida Evaluation and Treatment Center, which is a secure forensic facility and Florida Civil Commitment Center, which houses Sexually Violent Predators. On these field trips, interns learn about relevant topics to these facilities as well as employment opportunities within these facilities. Interns are also encouraged to visit the Miami/Dade or Broward county courthouses to observe supervisors present expert testimony. South Florida State Hospital’s operating company (Correct Care, LLC) also has a strong commitment to retaining its trainees and career opportunities to remain within the company may be available at the various Correct Care, LLC operated facilities across the country.

Supervision

Interns will participate in at least two hours of individual face-to-face supervision with a Licensed Psychologist each week. One hour will be with the intern’s Coordinating Supervisor, who will meet with the intern throughout the internship year to provide consistency and to allow for a perspective on their development over the year. Another hour of individual supervision each week is provided by another psychologist and will emphasize the activities on the intern’s assigned rotation. In addition, interns will also receive two to three hours of weekly group supervision (including a case conference, a DBT consultation meeting, supervision of supervision, and neuropsychology group supervision) and two hours or more of didactic training within the Psychology Department. The weekly didactic training covers a variety of subjects directly related to the field of Psychology. Some of the topics that will be taught in the didactic training include: multicultural education, research and practice; ethics; forensic psychology; neuropsychology; behavioral medicine; treatment strategies for severely mentally ill persons served; individualized behavioral planning; and personality assessment. An important part of this seminar is the examination and application of recent and relevant research articles to the practice of psychology. During the course of the year, interns will frequently present cases (therapy, assessments, and behavior plans) at the case conference (approximately every two months) and during group supervision. Interns will present a research article once per rotation during the psychology department meeting. Interns will also present on a multicultural topic of their choice and on a research topic (this can be dissertation/directed study) during the Psychology Seminar Series.
**Evaluation Process**

The psychology internship program assesses the interns’ performance and conduct on an ongoing basis. Feedback from supervisors facilitates their professional growth by acknowledging strengths and identifying performance or conduct that needs improvement.

At the end of each of the rotations, three (3) times during the internship year, the Coordinating Supervisor along with other supervisors and professional staff, completes a written evaluation. The Coordinating Supervisor, Training Director and Rotation Supervisor will meet with interns to discuss their performance. In this feedback session, differences between their views and their supervisor’s appraisals may surface and in most cases are resolved through discussion. The interns and the supervisor sign the written evaluation to acknowledge that the evaluation has been discussed and then forward it to the Training Director. Based on the evaluations, interns and their Coordinating Supervisor may modify their training plan to better meet their training needs and the training program’s requirements. If interns disagree with the evaluation, they need to put their objection in writing. Their response will be attached to the evaluation in their file and will be presented to the Training Director and their graduate program. Interns will also be asked to evaluate the program and their supervisors at the end of each rotation.

The Training Director is responsible for communicating with the interns’ home graduate program about their activities and progress. Early in the year, the graduate program receives information about their training activities. At the end of the internship year, the academic program receives copies of supervisors’ evaluations of interns’ skills and professionalism. At any time, if problems arise, the interns’ graduate program will be notified.

**Due Process in Evaluation and Remediation**

The training program follows due process guidelines to ensure that decisions are not arbitrary or discriminatory. The program uses the same procedures to evaluate all interns and the due process guidelines include the following:

1. Interns will receive written information regarding program expectations for professional functioning at the beginning of internship.
2. Evaluation procedures are clearly stipulated, including when and how evaluations will be conducted.
3. The procedures and actions for making decisions about problematic performance or conduct are outlined in written statements given to interns.
4. Performance Improvement /Remediation plans are outlined for identified inadequacies, and the plans include time frames for remediation and specify consequences for failure to rectify the inadequacies.
5. Interns will receive a written description of procedures they may use to appeal the program’s actions.
6. Decisions or recommendations regarding interns’ performance or conduct are based on input from multiple professional sources.
7. Program actions and their rationale are documented in writing to all relevant parties.

Consistent with SFSH policy, the internship program uses a progressive discipline procedure in instances where an intern engages in problem behavior.

1. If interns display behaviors that concern their supervisor, but do not meet the criterion for verbal counseling (see below), the supervisor will discuss the issue with the intern in supervision. If the problem improves, no further action will be taken. If the problem is not resolved, verbal counseling will be instituted. The Director of Training will be informed of the situation and may notify the concerns to the intern’s school training program.

2. In cases where unintentional carelessness and/or minor instances of misconduct or performance are identified, the Coordinating and/or Rotation Supervisor and the Director of Training will meet with the intern to discuss the proper action to correct the problem and/or ensure that it will not reoccur. Interns will be given an opportunity to provide
an explanation to the concerns. The supervisor will document the verbal counseling, along with their response, and will provide a copy to the intern and their doctoral program and the Clinical Director will be informed.

3. If the problem behavior occurs again or if an initial problem behavior is considered by the supervisor to be of a more serious nature, a written warning will be initiated. The Coordinating and/or Rotation Supervisor and the Director of Training will meet with the intern and discuss the issues pertaining to the warning. The intern will be given an opportunity to be heard and provide explanations to the concerns, which should be done verbally and in a written format within 24 hours. The supervisors will meet after this meeting to review all documentation. If supervisors agree that a written warning is necessary, a Disciplinary Action Recommendation will be prepared and entered into his/her file. A copy of the written warning will be provided to the Clinical Director and the Human Resources Director. When a written warning is issued, the intern will be given the opportunity to respond or appeal the decision in writing. All written warnings will have a specified time frame for improvement. The intern’s training program will receive a copy of the Disciplinary Action Recommendation.

**Termination from the internship program**

Failure to achieve improvement within the specified time frame or continued problem behavior could result in termination from the internship program. Serious misconduct and/or repeated violations can also result in termination from the internship program. If the misbehavior was unusually egregious, the Director of Training will involve the doctoral program and the Human Resources Department immediately to discuss termination.

When, as a result of disciplinary proceeding, a termination has been recommended by the supervisor and Director of Training, the intern has the right to an administrative review of the disciplinary process by the Hospital Administrator, or her/his designee. A ruling on the review is the final step in the process.

**Intern Grievance Procedure**

If interns have a grievance of any kind, including a conflict with a peer or other hospital staff, they can take their concerns to their Coordinating Supervisor. He or she will try to resolve the problem. If this intervention fails, or if the conflict is with the Coordinating Supervisor, the next step would be to approach the Director of Training. If the problem is still not resolved to their and/or the Director of Training’s satisfaction, the Human Resources department will be contacted in order to take any necessary steps to bring about resolution. At any point, the Director of Clinical Training at their doctoral program may be consulted.

**Stipend, Hours and Time Off**

Interns begin their workday at 8:00 AM, conclude at 4:30 PM, and are entitled to 30 minutes of lunch in the middle of the day. Interns are expected to complete their work within a 40 hour work-week, and working over 40 hours per week is highly discouraged. In the rare event that an intern works over 40 hours per week (e.g., working lunches; field trips), they will be compensated by being paid overtime.

Interns are considered temporary employees at SFSH and have a stipend of $20,800 per year and are paid biweekly. Interns are eligible for employee benefits, including medical insurance, dental insurance, vision insurance, flexible spending accounts, direct deposit, 401k plan, and Aflac voluntary products. Additional benefits are provided to interns such as free lunch at the employee cafeteria. Additional benefits are provided to interns such as free lunch at the employee cafeteria. It is expected that all interns will complete 2,000 hours onsite. Interns will receive all holidays observed by the hospital, and 10 days of personal time off (PTO). All interns are given five (5) days of professional leave (i.e., conferences), two (2) of which can be allotted for dissertation defense, if applicable.
Seminars/Didactics

Seminars are conducted by supervising psychologists, as well as regional psychologists, professionals, and experts in various areas. Below is a list of some of the seminars/didactics offered; however, it is important to note that this is not an exhaustive list.

<table>
<thead>
<tr>
<th>Seminar Title</th>
<th>Course Title</th>
</tr>
</thead>
<tbody>
<tr>
<td>Introduction to Intellectual Assessment</td>
<td>Cognitive-Behavioral Therapy for Suicidal Clients</td>
</tr>
<tr>
<td>Introduction to Adaptive Functioning Measures</td>
<td>Motivational Interviewing</td>
</tr>
<tr>
<td>Florida Forensic Examiner Training</td>
<td>Violence Risk Assessments</td>
</tr>
<tr>
<td>Introduction to the Personality Assessment Inventory/MCMI-III</td>
<td>Psychotropics</td>
</tr>
<tr>
<td>Introduction to MMPI-2-RF/MMPI-2 as a therapeutic intervention</td>
<td>Self-injury Across Cultures</td>
</tr>
<tr>
<td>Introduction to Group Therapy</td>
<td>Treatment for OCD</td>
</tr>
<tr>
<td>Introduction to Malingering</td>
<td>Clinical Supervision</td>
</tr>
<tr>
<td>Sex Therapy</td>
<td>Developmental Disabilities</td>
</tr>
<tr>
<td>Application of Statistics</td>
<td>Program Evaluation</td>
</tr>
<tr>
<td>Treatment for Sex Offenders</td>
<td>Professional Development (EPPP &amp; Private practice)</td>
</tr>
<tr>
<td>Rapid Trauma Resolution Therapy</td>
<td>Antisocial Personality Disorder</td>
</tr>
<tr>
<td>Cross Cultural Differences in Schizophrenia</td>
<td>HIV</td>
</tr>
<tr>
<td>Psychotherapy Termination</td>
<td>Methamphetamine</td>
</tr>
<tr>
<td>Immigration, Acculturation, and its Consequences</td>
<td>Diversity Issues with GLBTQ population</td>
</tr>
<tr>
<td>Assessment and Treatment of Individual Differences</td>
<td></td>
</tr>
</tbody>
</table>

The following is an approximation of a typical weekly schedule for interns

**Monday**
- Individual Therapy (4-5 hours)
- Note writing, consult

**Tuesday**
- 10-12 Treatment team meetings, behavior plans
- 12:30-4:30 ½ day assessment

**Wednesday**
- 8:00 – 9:00 – case conference
- 11:30 – 12:00 DBT group supervision
- 1/2 day rotation

**Thursday**
- 1 hr. individual supervision rotation Supervisor
- 1/2 day rotation, annual(initial psychological assessment
- 3:00 – 4:00 – cognitive assessment group supervision

**Friday**
- 8:30-10:30 Seminar
- 1 hr. individual supervision with coordinating Supervisor
- Report writing

Every weekday after lunch a Cuban coffee-break is encouraged 😊
PREVIOUS INTERNS

Given the breadth of training offered at our site, interns have successfully obtained employment in a variety of settings.

Class of 2006-2007
Intern 1  Bradley Hospital, Rhode Island
Intern 2  National Institute of Health (NIH), Washington, DC
Intern 3  Behavioral Medicine Postdoctoral Fellowship at Cambridge Health Alliance – Harvard Medical School

Class of 2007-2008
Intern 1  Pine Belt Mental Healthcare Resources, Mississippi (CMHC)
Intern 2  Nova Southeastern University, Postdoctoral Psychology Resident, Florida
Intern 3  Department of Corrections, Florida

Class of 2008-2009
Intern 1  Private Practice, Community Mental Health Center, Indiana
Intern 2  Citrus Health Network, Florida
Intern 3  Private Practice, Florida

Class of 2009-2010
Intern 1  Mount Holyoke College Counseling Service, South Hadley, MA
Intern 2  Emory University School of Medicine, Georgia
Intern 3  Arizona Psychology Consultants, Arizona

Class of 2010-2011
Intern 1  South Florida State Hospital, Florida
Intern 2  Private Practice, Florida
Intern 3  Emory University School of Medicine, Georgia

Class of 2011-2012
Intern 1  Chrysalis Community Mental Health Center, Florida
Intern 2  Jacqueline Valdes, Ph.D., Inc., Postdoctoral Neuropsychology Fellow, Private Practice, Florida
Intern 3  South Florida State Hospital, Florida

Class of 2012-2013
Intern 1  Private Practice, Florida
Intern 2  Gateways Forensic Community Treatment Program, California
Intern 3  Private Practice, Georgia

Class of 2013-2014
Intern 1  Correct Care, LLC/South Florida State Hospital, Florida
Intern 2  Tulane University School of Medicine/ Postdoctoral fellow, Louisiana
Intern 3  University of California, Los Angeles, California

Class of 2014-2015
Intern 1  Correct Care, LLC/South Florida State Hospital, Florida
Intern 2  Forensic Private Practice, Florida
Intern 3  The Center for Behavioral Medicine, Kansas City, MO
**Class of 2015-2016**

Intern 1  
Augusta University East Central Regional Hospital, GA

Intern 2  
Forensic Private Practice, Florida

Intern 3  
Mississippi State University, Mississippi

**INTERNSHIP APPLICATION REQUIREMENTS**

Application materials should be submitted through the APPIC website. Our program code is 1211.

**Applicant Documentation Required**

1. APPIC Application (located at [http://www.appic.org](http://www.appic.org))
2. Curriculum Vitae
3. One sample of an integrated report from a practicum site
4. Three letters of recommendation (at least two from clinical supervisors)
5. Official Transcripts (Graduate)

For more information, please contact Dr. Sheila Santiago Schmitt at (954) 392-3120 or E-mail sschmitt@correctcarers.com.
Internship Admissions, Support, and Initial Placement Data
Date Program Tables are updated: 07/31/2017

Internship Program Admissions

This internship is accredited by the American Psychological Association and adheres to the Scholar-Practitioner model of training. We have three (3) funded internship positions. It is the goal of the program to help interns to become competent and knowledgeable psychologists working with a severely mentally ill adult inpatient population. The facility provides treatment using a multidisciplinary psychiatric rehabilitation model. The clinical training provides each intern with a unique opportunity to gain practical experience in assessment and intervention with a diverse patient population. In addition to the more generalist training experiences, interns will participate in each of the three following rotations: (1) Forensic (2) Psychological Assessment and (3) Specialized Behavior Plan. All interns will co-lead Dialectical Behavior Therapy (DBT), psychoeducational, and forensic groups. They will also design and implement behavior plans, conduct individual therapy, and complete forensic, intellectual and personality assessments. Interns will also participate in multidisciplinary treatment team meetings.

The following requirements must be met in order to be considered for our program:

- U.S. citizenship
- Doctoral student in clinical or counseling psychology from an APA-accredited program.
- Completion of the APPIC application and one sample of an integrated report from a practicum site
- Certification of internship readiness by graduate program training director
- Completion of graduate program’s comprehensive/qualifying examinations by ranking submission date
- Successful applicants come with an average of 1,000 practicum hours in psychotherapy and assessment skills combined. Additional work experience with a severely mentally ill population will also be considered in the review process.
- Any offer of employment, including psychology internship, is contingent upon, but not limited to, the successful completion of the following: Level 2, Florida Department of Children and Families Background Investigation; Drug testing and pre-employment physical including Tuberculosis screening; Proof of measles, mumps and rubella (MMR) vaccination if born after 1957; Mandatory 5 day facility Orientation which includes certification in “MANDT,” our verbal de-escalation training process and Certified Pulmonary Resuscitation.

Selected applicants are invited to interview during the month of January, usually Monday and Wednesday mornings. The interview lasts approximately 2-3 hours. The applicants first meet with the current post-doctoral resident as a group to have a general orientation about the program and site. Then, each applicant meets individually with various staff psychologists. Finally, the group of applicants meets with a current psychology intern for a Q&A session and a tour of the facility.

The program requires that applicants have received a minimum number of hours of the following at time of application:

| Total Direct Contact Intervention Hours | 400 |
| Total Direct Contact Assessment Hours   | 75  |

Describe any other required minimum criteria used to screen applicants: Minimum of 600 hours of Supervision and Support Activities combined
Financial and Other Benefit Support for Upcoming Training Year*

Annual Stipend/Salary for Full-time Interns: $20,800
Annual Stipend/Salary for Half-time Interns: Not Applicable

Program provides access to medical insurance for intern? Yes
If access to medical insurance is provided
Trainee contribution to cost required? 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 (PTO and/or Vacation):
Hours of Annual Paid Sick Leave: Not Applicable

In the event of medical conditions and/or family needs that require extended leave, does the program allow reasonable unpaid leave to interns in excess of personal time off and sick leave? Negotiated on a case by case basis

Other Benefits (please describe): Dental Insurance, Disability Insurance, Health Insurance, Professional Development Time, Free Lunch at Hospital’s Cafeteria

Initial Post-Internship Positions

<table>
<thead>
<tr>
<th></th>
<th>PD</th>
<th>EP</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total # of interns who were in the 3 cohorts:</td>
<td>9</td>
<td></td>
</tr>
<tr>
<td>Total # of interns who did not seek employment because they returned to their doctoral program/are completing doctoral degree</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>Community mental health center</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>Federally qualified health center</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>Independent primary care facility/clinic</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>University counseling center</td>
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</tr>
<tr>
<td>Veterans Affairs medical center</td>
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<td>N/A</td>
</tr>
<tr>
<td>Military health center</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>Academic health center</td>
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<td>N/A</td>
</tr>
<tr>
<td>Other medical center or hospital</td>
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<td>N/A</td>
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<tr>
<td>Psychiatric hospital</td>
<td>4</td>
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<tr>
<td>Academic university/department</td>
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<tr>
<td>Community college or other teaching setting</td>
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<tr>
<td>Independent research institution</td>
<td>N/A</td>
<td>N/A</td>
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<tr>
<td>Correctional facility</td>
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<td>School district/system</td>
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<td>Independent practice setting</td>
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<td>2</td>
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<tr>
<td>Not currently employed</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>Changed to another field</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>Other</td>
<td>1</td>
<td>N/A</td>
</tr>
<tr>
<td>Unknown</td>
<td>N/A</td>
<td>N/A</td>
</tr>
</tbody>
</table>

Note: “PD”—Post-doctoral residency position; “EP” = Employed Position