Dear Applicant,

Thank you for your interest in training at Judge Baker Children’s Center for the 2019-2020 training year. Founded in 1917, Judge Baker is a Harvard Medical School affiliate whose mission is to promote children’s healthy development by bridging the gap between science and practice and improving access to the highest quality behavioral health care in community-based settings. The doctoral internship program at Judge Baker focuses on training professional psychologists in clinical and school specializations. Two interns a year are selected to participate in the program. The program is full-time (40 hours per week) for 12 months (2,000 hours). We offer no part-time positions. The intern year begins July 1, 2019. The current stipend is $24,500 and participation in Judge Baker’s health insurance plan is available to interns. Please note that this internship is not APA accredited and is not a member of APPIC. While our APPIC Membership application has been submitted, and it is the intention of the program to apply for APA accreditation in the very near future, applicants for the 2019-2020 academic year should understand that the program will not have APA accreditation. However, the curriculum is designed to conform to the Massachusetts Board of Registration of Psychologists requirements for internship experience.

Judge Baker Children’s Center improves the quality of children’s mental health care by translating research into programs and services that change lives. For over 100 years, Judge Baker has been instrumental in creating a continuum of care that supports children’s healthy development at the policy, systems, and practice levels. Our research, direct programs and services, training, and advocacy make Judge Baker a preeminent voice and active resource on issues of children’s mental health. At Judge Baker, the practices created and tested today will become the best practices of tomorrow. Our programs help children and families chart their own best course for developmental, emotional, and intellectual well-being in community-based settings. Judge Baker Children’s Center is an IRS certified 501C-3 non-profit with an independent Board of Trustees. Judge Baker has been an important partner in the implementation and delivery of evidence-based practices (EBPs) for children and families from a variety of racial and cultural backgrounds, including direct service programs and implementation initiatives in schools, community mental health centers, and for families involved in the child welfare system.

At Judge Baker, we promote the best possible mental health of children and families through the integration of research, intervention, training and advocacy.

- Through research we identify best practices.
- Through intervention we bring those practices to children and families of diverse communities.
- Through training we disseminate skills in research and quality care.
• Through advocacy we use scientific knowledge to expand public awareness and inform public policy.

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Judge Baker Children’s Center has a long history of training influential professionals in the field of children’s mental health. The original doctoral psychology internship was started at Judge Baker in 1949 and became one of the oldest internships accredited by the APA seven years later in 1956. In 1998, a change in institutional priorities at Judge Baker resulted in the transferring of the internship program to the leadership at Boston Children’s Hospital, where it continues today. However, Judge Baker has renewed its commitment to offering pre-doctoral training for professionals in psychology and initiated a new independent internship program in 2017.

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If you are interested in pursuing an internship at Judge Baker Children’s Center, applications must be submitted through the AAPI Online application system. Our AAPIC Program Number is 2479. Questions regarding the internship program can be directed to training@jbcc.harvard.edu or by contacting 617-278-4288.

Sincerely,

Daniel M. Cheron, Ph.D., ABPP
Director of Training, Judge Baker Children’s Center
Instructor in Psychology, Harvard Medical School
53 Parker Hill Avenue, Boston, MA 02120
www.jbcc.harvard.edu
THE DOCTORAL PSYCHOLOGY INTERNSHIP PROGRAM
AT JUDGE BAKER CHILDREN’S CENTER

2019 – 2020 Training Year Brochure
INTRODUCTION

Judge Baker Children’s Center has a long history of training influential professionals in the field of children’s mental health. The original doctoral psychology internship was started at Judge Baker in 1949 and became one of the oldest internships accredited by the APA seven years later in 1956. In 1998, a change in institutional priorities at Judge Baker resulted in the transferring of the internship program to the leadership at Boston Children's Hospital, where it continues today. However, Judge Baker has renewed its commitment to offering doctoral training for professionals in psychology and initiated a new independent internship program in 2017.

Aim and Goals of the Training Program

Our approach to professional training helps improve the quality of services for children and their families by developing trainees into outstanding professionals. Using competency-based learning strategies, interns spend the year embedded in our direct service programs building advanced skills to help children succeed. The overall aim for the internship at Judge Baker is to train professional psychologists to develop the skills and knowledge in clinical and school psychology to support the healthy development of children and families. The training program follows a scientist-practitioner model in which clinical practice is informed by science and empirically supported treatments which, in turn, leads to the generation of further research and evaluation.

This is accomplished through five main foundational goals for the internship:

1. To foster competence in the application of research and evidence-based principles to the practice of all professional psychology activities;
2. To develop the communication and interpersonal interactions skills necessary to facilitate change in children and families;
3. To enhance ethical and legal decisions-making skills;
4. To demonstrate the awareness, knowledge, and skills to facilitate sensitive practice toward cultural and individual differences in working with diverse individuals, groups, and communities;
5. To nurture professional values, attitudes, and behaviors consistent with the field of professional psychology.

The training aim is also accomplished through four functional goals for the internship:

6. To train psychologists competent in the clinical diagnostic assessment of children, adolescents, and families in a range of clinical and school settings;
7. To train psychologists competent to provide evidence-based programs and practices for children, adolescents, and families;
8. To train psychologists competent in the knowledge of supervision models and the skills necessary for effective supervision;
9. To train psychologists competent in the consultation and inter-professional skills to facilitate effective collaboration with other professionals.
Judge Baker Children’s Center embraces workplace diversity and is dedicated to the achievement of equality of opportunity for all its trainees without regard to race, color, religion, sex, sexual orientation, marital status, age, national origin, disability, veteran status or any other protected group status under federal, state or local law. Judge Baker is an Equal Opportunity/Affirmative Action Employer.

OVERVIEW OF THE TRAINING PROGRAM

The doctoral internship program is full-time (40 hours per week) for 12 months (2,000 hours). The internship year begins July 1, 2019 and concludes June 30, 2020.

Training Placements

All interns participate in all placements during the training year. The Manville School and the Center for Effective Child Therapy (CECT) are major placements lasting the entire training year. The Summer Enrichment Institute (SEI) is a minor placement and lasts 7 weeks in the summer. Interns arrive for internship on July 1 and immediately begin their minor placement at SEI. Following the conclusion of SEI, interns begin their major rotations at CECT and Manville.

The Manville School: Manville is a therapeutic day school for students in grades K-10 who experience emotional, neurological and/or learning difficulties that have impacted their ability to succeed in previous school settings. Manville offers a comprehensive array of clinical services and supports based on best practices that promote healthy development and educational success, including psychoeducational and diagnostic assessments, individual, family, and group therapy, parent coaching and support groups, case management, and speech and language and occupational therapy. The environment is designed to build skills, expand potential, and overcome the difficulties and failures of previous school placements.

The student body at Manville is rich in diversity. While the majority of students are male, there are a number of students of color, various religious backgrounds, some in foster care, some who were adopted, and some who are questioning their gender identity or who are gender non-conforming. The staff at Manville strives to create and promote a safe and inclusive environment for all.

With respect to documented mental health and educational challenges, all students are designated eligible for special education services on their Individual Education Plans. Most students present with a complex array of learning difficulties, executive functioning challenges, and some type of emotional/behavioral disorder. Just under 40% of the student body qualifies for an Autism Spectrum Disorder diagnosis, and many within that group have accompanying sensory integration difficulties. Most of the remaining 60% of the population have documented trauma histories, anxiety disorders, mood disorders, and ADHD. Though it is far less frequent, some students also have documented thought disorders. It is not uncommon that a student carries multiple diagnoses. Finally, and perhaps most importantly, all of our students have a unique personality and constellation of strengths. We have wonderfully involved parents who are dedicated to helping their children find success in the educational environment and throughout their lives.
Interns at the Manville School can expect to encounter a broad spectrum of mental health and education challenges among the students for whom they provide clinical services. Interns will have the opportunity to provide individual, group, and family therapy services, as well as parent guidance. They will also hone their skills in psychological assessment (for educational planning and for personality assessment), diagnostic interviewing, and classroom/milieu consultation. With regard to the latter, one of the most valuable experiences of working in a therapeutic school is the opportunity to help a student generalize the skills being learned in sessions to the classroom environment. This is achieved through interns assuming the role of facilitator of team meetings, assisting classroom teams with the development of behavioral plans inclusive of the targeted therapeutic skills, and collaborating with other specialists (such as Speech/Language Pathologists, Occupational Therapists, and Board Certified Behavior Analysts).

Specific to the delivery of individual and family therapy services, there is no required model for trainees to follow. Part of the task of assessing the student and family is determining the therapeutic approach to which he/she/they will be most amenable. It is required that interns learn to conceptualize the case from a well-established paradigm that explains the development of psychopathology. From there, interns are encouraged to utilize best practices and evidence-based practices in delivering interventions. Our clinical supervisors are trained in Cognitive Behavioral Therapy (CBT), the Modular Approach to Therapy for Children (MATCH), Trauma-Focused Cognitive-Behavioral Therapy (TF-CBT), Dialectical Behavior Therapy (DBT), the Cognitive-Behavioral Intervention for Trauma in Schools (CBITS), and non-directive play therapy.

The Center for Effective Child Therapy (CECT): CECT at Judge Baker provides mental health assessments and focused short-term treatments for children and their families. CECT promotes the best possible mental health of children by using scientifically proven treatments in the assessment and treatment of children and families of diverse communities. CECT also trains mental health professionals in our treatment models to increase the quality of care throughout our communities. We expand public awareness and inform public policy through the use of research, data and advocacy with local child and adolescent organizations.

Clients from a variety of backgrounds and with a number of different emotional and behavioral challenges seek services at CECT. Clients are 49.9% female and range from 2.5 to 19 years old. They are 77% White, 10% Black, 9% Multiracial, and 4% Asian. The majority of clients travel 5 miles or less to attend services, but up to 10% of clients travel more than 25 miles to Judge Baker for their services. Approximately 50% of clients have an anxiety disorder, 45% have a disruptive behavior disorder, 25% have a depressive disorder, 20% have an attentional disorder, and 15% have a traumatic stress disorder. A number of other problem areas are represented in the CECT population, and 65% of clients have at least two diagnoses. 42% of CECT clients receive special education services through their local school district and 12% have had a prior psychiatric hospitalization.

The use of evidence-based practices and programs and practices are prioritized at CECT. Youth and families seeking services receive a comprehensive assessment using multiple tools including the
Kiddie Schedule for Affective Disorders and Schizophrenia (KSADS). A majority of clients receive psychotherapy using the Modular Approach to Therapy for Children (MATCH), which was developed at Judge Baker and is listed in the National Registry of Evidence-Based Programs and Practices (NREPP). Young children at CECT (ages 2 to 6 years old) are typically provided psychotherapy services using the Parent Child Interaction Therapy (PCIT) model, also listed on NREPP. A variety of other EBPs are utilized at CECT, including Behavioral Parent Training, Exposure and Response Prevention, Trauma-Focused CBT (TF-CBT), Comprehensive Behavioral Intervention for Tics (CBIT), Organizational Skills Training (OST), and Problem Solving Skills Training (PSST).

Summer Enrichment Institute (SEI): The Summer Enrichment Institute at Judge Baker Children's Center is a five-week day program that teaches children ages 6-12 effective ways to manage ADHD and other behavior issues. SEI is based on the Summer Treatment Program (STP), named a Model Program in Child and Family Mental Health by the American Psychological Association and the Substance Abuse and Mental Health Services Administration (SAMHSA), and a program of the year by Children and Adults with ADHD (CHADD), the national parent advocacy group for children with ADHD. SEI helps children make new friends, improve sports and art skills, and develop relationships with staff members. SEI is a highly structured and supportive program that leads to behavioral gains, improved social skills, and helps prevent against summer erosion of school year functioning.

Intern Orientation
At the beginning of the training year, interns receive an orientation to the training site and structure of the training experience. Next, they begin their formal training in the first direct service program, the Summer Enrichment Institute program. They receive instruction in the daily activities and behavioral strategies they will utilize throughout the program. They then serve as lead counselors in the SEI program for the remainder of the summer. At the end of August, interns attend a week of orientation sessions at the Manville School to prepare for the upcoming school year. They receive information regarding the daily school schedule, activities, and resources available. Interns are trained in conflict resolution and physical safety and management skills, CPR and first aid, and how to respond to emergency situations. In the following four weeks of school, interns are presented with details regarding policies, procedures, clinical goals and orientations, and vital operating procedures via individual and group supervision meetings. During that same month long orientation process, interns receive orientation to their work in the outpatient department. They are presented with policies and procedures, receive instruction on scheduling and meeting clients, tracking contact hours, billing for services, and documenting clinical services. Interns also receive extensive didactic instruction in child-focused evidence-based assessment and treatment practices.

Intern Schedules
Since the combined school/outpatient track requires delivering services in three environments, it is important that interns are aware of the unique scheduling requirements of the site. During the 7 weeks of the Summer Enrichment Institute, interns are expected to be attending to SEI activities full
time from 8:00 AM through 4:00 PM. Once the school year begins in September, interns are expected to be attending to school activities on Mondays, Wednesdays, and Fridays from 8:15 AM through 4:15 PM (with, on average, one Wednesday per month extending to 5:00 PM). Interns are expected to be attending to outpatient activities on Tuesdays and Thursdays from 10:00/11:00 AM through 6:00/7:00 PM depending on the need to schedule clients. This schedule is to account for the fact that students at Manville School are present in the mornings and early afternoons while clients at the outpatient center typically receive services after school hours. Overall, interns can expect to spend approximately 11-12 hours per week providing direct face-to-face assessment and psychotherapy services and approximately 2-3 hours engaged in face-to-face milieu therapy services, resulting in total face-to-face hours of approximately 13-15 hours.

<table>
<thead>
<tr>
<th>Summer Program</th>
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<tbody>
<tr>
<td>Didactic training in Summer Treatment Program (35 hours/first week)</td>
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<tr>
<td>Lead group-based behavioral summer program (30 hours per week)</td>
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<tr>
<td>Individual supervision (2.5 hours per week)</td>
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<tr>
<td>Complete administrative work and documentation (e.g., notes, reports, treatment plans, summaries; 6.5 hour/week)</td>
</tr>
<tr>
<td>Supervision with the Director of Training (1 hour per week)</td>
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<tr>
<th>Outpatient</th>
<th>School</th>
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<tbody>
<tr>
<td>Conduct structured clinical diagnostic interview (1.5 hours/week)</td>
<td>Conduct individual psychotherapy (4 students/week – 4 hours)</td>
</tr>
<tr>
<td>Conduct individual psychotherapy (6 clients/week – 6 hours)</td>
<td>Conduct Case management (4 students/week – 6 hours)</td>
</tr>
<tr>
<td>Complete administrative work and documentation (e.g., notes, reports, treatment plans, summaries; 5 hour/week)</td>
<td>Participate in milieu therapy (2.5 hours/week)</td>
</tr>
<tr>
<td>Attend individual supervision (1 hour/week)</td>
<td>Complete administrative work and documentation (e.g., notes, reports, treatment plans, summaries; 6.75 hour/week)</td>
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<tr>
<td>Attend assessment seminar (1 hour/week)</td>
<td>Attend individual supervision (1 hour/week)</td>
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Supervision

During the course of the year, interns are assigned 2-3 supervisors for their work across all programs and receive a minimum of 3 hours per week of individual supervision from doctoral level licensed psychologists. In addition, 1 hour of group supervision is provided in conjunction with seminars in order to discuss cases in the context of the seminar topics. Interns receive a total minimum of four hours of supervision per week. Supervision is provided by the Manville School Clinical Director or staff psychologists in the Manville School clinical department for school cases. Supervision is provided by the Director of Clinical Services or CECT staff psychologists for outpatient cases. Supervision for SEI interns is provided by the Associate Director of SEI. Interns also meet weekly with the Director of Training for supervision. All supervisors take both a developmental and competency-based theoretical approach to supervision as well as various intervention-based supervision models (e.g., cognitive-behavioral, systems). Video recording equipment is utilized extensively in supervision at CECT, and interns can expect to video record all of their direct service outpatient work and receive video review in supervision in CECT. Additionally, interns may
participate in live co-therapy with a supervisor at CECT for select cases and may also receive live
observational supervision using audio earpieces to facilitate live coaching.

**Seminars**
Throughout the course of the training year, interns spend at least 4 hours per week engaged in
structured learning activities designed to facilitate the development of the program competencies.
These structured learning activities include case conferences, seminars on clinical issues, and group
supervision.

**Intern Seminar.** During this weekly learning activity, interns join other professionals working in the
Manville School for a rotating series of didactic presentations focused on pertinent issues in special
education clinical service delivery. Topics include the application of evidence-based programs to the
school setting and creating and using special education information such as Individualized
Education Programs (IEPs) and classroom behavior plans to facilitate clinical progress. The Intern
Seminar is led by a rotating instructor from the Judge Baker faculty (or occasionally visiting faculty)
with expertise in the subject matter presented that week.

**Assessment Seminar.** During this weekly learning activity, interns join the entire faculty of the Center
for Effective Child Therapy to deliver case presentations on the diagnostic assessments of outpatient
clients. Interns present their own cases approximately twice a month, and participate in diagnostic
discussions on the cases of other faculty members and trainees. The focus of this structured learning
activity is enhancing trainee competency in the area of evaluation and assessment. The Assessment
Seminar is led by the Director of the Center for Effective Child Therapy.

**Evidence-Based Practice Seminar.** During this weekly learning activity, interns join all clinical trainees at
Judge Baker for didactic presentations on relevant evidence-based programs and practices that can
be utilized in the clinical, school, or summer programs. During the course of the year, each intern
will present a current case, conceptualized using a framework grounded in one or more evidence-
based programs. The focus of this structured learning activity is on enhancing the interns’ capacity
to apply evidence-based principles across all functional competency areas. Didactic topics may also
be requested based on intern need, and prior topics have included:

- Sleep Disorders
- Child-Parent Psychotherapy
- Organizational Skills Training
- Comprehensive Behavioral Intervention for Tics
- Autism diagnosis and assessment
- Dialectical Behavior Therapy
- Motivational Interviewing
- Models of supervision
- Enuresis and encopresis treatments
- Treatment Engagement strategies
- Trauma-Focused Cognitive-Behavioral Therapy
- Maintaining integrity to EBPs

**Diagnostic Seminar.** During this weekly learning activity, interns join other trainees at the Manville
School for didactic presentations as well as live clinical interviews (observed through a one-way
mirror) focused on the psychodiagnostic evaluation of youth in special education settings. Issues
pertinent to the mental health assessment of individuals with special education needs, and their unique diagnostic profiles, are discussed. The focus of this structured learning activity is on enhancing the interns’ competency in the areas of assessment, consultation, and providing feedback to students and families. Interns will have the opportunity to present cases in Diagnostic Seminar and receive group supervision, and it is led by the Manville School’s Clinical Director.

Psychoeducational Testing Seminar. In this monthly structured learning activity, interns joins other psychology trainees at the Manville School for didactic presentations and case presentations focused on psychoeducational testing and complex cognitive/learning profiles. Topics covered include planning and conducting school-based psychological testing; test selection, administration, and interpretation; integration of data and report writing; communication of results to diverse audiences; domains assessed and related measures (e.g., cognitive/intellectual, achievement, language and socio-pragmatics, visual-motor, construction, and spatial, attention and executive functioning, memory, behavioral and social-emotional functioning, adaptive functioning, personal adjustment and personality); specific learning profiles and intervention recommendations (e.g., ASD, ADHD, LDs); professional ethics in assessment and decision-making; cultural competency/ diversity. It is led by the Manville School’s Director of Assessment.

Child Mental Health Forum. The Child Mental Health Forum is one of the longest continuously running lecture series in the country. On the first Wednesday of the month, Interns join multiple faculty and trainees from both Judge Baker and other surrounding institutions for monthly lectures. Forum presenters are renowned clinical, research, and academic leaders in child and adolescent mental health. The Forum aims to provide intellectually stimulating information on scientific advances and evidence supporting clinical practice and research. The focus of this structured learning activity varies depending on the presenter, and provides interns with knowledge and skills designed to span their functional and foundational competencies. A sample of recent forum presenters and topics is listed below:

- **Addressing the Impact of Trauma on Children from Brain to Policy: State and National Efforts to Make a Difference.** Lisa Amaya-Jackson, M.D. Professor, Department of Psychiatry & Biobehavioral Sciences, Duke University School of Medicine. Associate Director, UCLA-Duke National Center for Child Traumatic Stress. Training Director, Center for Child & Family Health
- **The Science and Practice of Social and Emotional Learning in Preschools and Schools.** Stephanie M. Jones, Ph.D. Professor, Harvard Graduate School of Education
- **Promoting Best Practices in Supervision in Systems of Care.** Michael A. Hoge, Ph.D. Professor and Director of Clinical Training in Psychology Department of Psychiatry, Yale University School of Medicine
- **The Childhood and Adolescent Obesity Epidemic: The Most Cost-Effective Prevention Strategies.** Steven Gortmaker, Ph.D. Professor of the Practice of Health Sociology, Department of Social and Behavioral Sciences, Harvard TH Chan School of Public Health
- **Leveraging Neuroscience to Strengthen the Building Blocks of Mental Health in the Early Years.** Jack Shonkoff, M.D. Julius B. Richmond FAMRI Professor of Child Health and Development. Harvard T.H. Chan School of Public Health and Harvard Graduate School of Education.
Professor of Pediatrics, Harvard Medical School and Boston Children’s Hospital Director, Center on the Developing Child at Harvard University


- **Post Traumatic Stress Disorder: Life Course Burden Within and Across Generations.** Karestan Koenen, Ph.D. Professor of Psychiatric Epidemiology. Departments of Epidemiology and Social and Behavioral Sciences. Harvard School of Public Health

- **Language Deprivation Syndrome in Deaf and Hard of Hearing Children and Adolescents: An Under-Appreciated Clinical Entity and its Mental Health Implications.** Sanjay Gulati, M.D. Assistant Professor of Psychiatry, Harvard Medical School

**Evaluation**

Interns are formally evaluated two times per year by all of their supervisors. Each placement supervisor completes the formal evaluation form in October, February, and June. Additional, less formal, student evaluations take place throughout the year; students receive feedback about any concerns raised during these faculty discussions in one-on-one meetings with the Training Director. All evaluations, grievance and due process procedures are outlined in the Intern Handbook and distributed during orientation. Twice a year, the Training Director also sends an evaluation letter to each Intern’s Academic Director of Training. Interns are also asked to evaluate their supervisors and the overall program twice a year. Successful completion of the internship requires that, by the end of the internship year, students obtain grades of 4 or above on the 5-point scale noted below for all competencies in the program description and goals using any of the following methods:

- Direct Observation
- Videotape
- Audiotape
- Case Presentations
- QA Data or Clinical Measures
- Discussion of Work
- Review of Documentation
- Feedback from Staff & Supervisors
- Feedback from Clients & Families
- Feedback from Peers
- Review of Other Written Work

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<tr>
<th>RATING</th>
<th>1 Beginning Proficiency</th>
<th>2 Basic Proficiency</th>
<th>3 Developing Proficiency</th>
<th>4 Intermediate Proficiency</th>
<th>5 Advanced Proficiency</th>
</tr>
</thead>
<tbody>
<tr>
<td>Typical developmental level:</td>
<td>Early or mid-practicum</td>
<td>Internship entry</td>
<td>Internship mid-year</td>
<td>Internship completion</td>
<td>Post-Internship</td>
</tr>
<tr>
<td>Skill level:</td>
<td>Learning basic skills</td>
<td>Has acquired basic skills</td>
<td>Developing more advanced skills</td>
<td>Flexibly integrating a range of skills</td>
<td>Competence at an advanced level</td>
</tr>
<tr>
<td>Supervision required:</td>
<td>Extensive with close observation</td>
<td>Routine</td>
<td>Minimal</td>
<td>Functions independently in entry-level situations</td>
<td>Functions independently in advanced situations</td>
</tr>
<tr>
<td>Nature of supervision:</td>
<td>Supervisor sets agenda</td>
<td>Supervisor sets agenda with fellow input</td>
<td>Agenda set jointly by supervisor &amp; fellow</td>
<td>Fellow largely sets agenda with supervisor input</td>
<td>Seeks consultation on an as needed basis</td>
</tr>
<tr>
<td>Direction required:</td>
<td>Very frequent &amp; explicit</td>
<td>Frequent &amp; explicit</td>
<td>Moderate and decreasing</td>
<td>Occasional</td>
<td>Infrequent</td>
</tr>
<tr>
<td>Structure required:</td>
<td>Very high</td>
<td>High</td>
<td>Moderate</td>
<td>Low</td>
<td>Very minimal</td>
</tr>
</tbody>
</table>
Benefits
During their training, interns receive a stipend to cover expenses incurred during the training year. The current stipend is $24,500 annually for full time interns. There are no part-time internship placements available. Interns are eligible to participate in the Judge Baker health insurance plan. A trainee contribution is required for participation. Coverage for family members, legally married partners, and domestic partners is available. Interns receive 12 holidays annually as well as 10 sick days, 10 vacation days, and 3 personal/professional days off. Interns do not follow the school vacation schedule. For example, during the five days of February vacation week, an intern would be expected to report to CECT on Tues/Thurs, and would need to use 3 vacation days if he/she chose to take Mon/Wed/Fri off from Manville.

Licensure criteria
The training program at Judge Baker is designed to provide interns who successfully complete the program the experience to fulfill the Massachusetts Board of Registration of Psychologists requirements for internship as indicated below:

- The internship is designed as an organized training program and is not a supervised experience or on-the-job training;
- A licensed psychologist is responsible for the integrity and quality of the program;
- There are two or more licensed psychologists on the staff as supervisors;
- Training in the program is conducted at post-clerkship, post-practicum, and post-externship level;
- Supervision is conducted by a licensed professional who carries full legal and clinical responsibility for cases being supervised;
- At least half of the hours of supervision are delivered by one or more psychologists;
- The program provides training in a range of approaches to assessment and intervention;
- At least 25% of the trainee's time is spent in direct contact with clients seeking assessment or treatment (minimum 400 hours);
- Supervision is provided at a minimum ratio of one hour of acceptable supervision per sixteen hours of work;
- The program provides at least four hours per week of structured activities such as case conferences, seminars on clinical issues, group supervision, and additional individual supervision;
- There were at least two psychology interns at the internship training level during the applicant's period;
- Trainees will have the title "psychology intern", which clearly indicates their training status;
- The program has a written statement describing goals and content of the program, and expectations for quantity and quality of trainee's work. This statement is available prior to onset of program.
APPLICATION INSTRUCTIONS

Please note that while this internship is a member of APPIC, it is not APA accredited. It is the intention of the program to seek APA accreditation in the coming academic year. However, we cannot guarantee that our application for accreditation will be successful, and applicants for the 2019-2020 academic year should understand that the program may not have APA accreditation. The curriculum is designed to conform to the Massachusetts Board of Registration of Psychologists requirements for internship experience.

If you are interested in pursuing an internship at Judge Baker Children’s Center, applications must be submitted through the AAPI Online application system. Our AAPIC Program Number is 2479. Questions regarding the internship program can be directed to training@jbcc.harvard.edu or by contacting 617-278-4288.

The deadline for applications is Friday, November 1, 2019 at 11:59 PM. Qualified candidates will be invited for an interview in January. All material should be sent to:

QUALIFICATIONS FOR INTERNSHIP

Applicants must be currently enrolled in an APA or CPA accredited Ph.D. / Psy.D. / Ed.D (or foreign equivalent) in Clinical, Counseling, or School Psychology. Applicants are expected to have completed at least three years of graduate training with coursework in psycho-diagnostics, psychopathology, psychological assessment, and psychotherapeutic interventions at a minimum prior to internship training. Applicants must have passed their graduate program’s comprehensive or qualifying exam and have their dissertation proposal approved by the application deadline and receive formal approval of their Director of Clinical Training as part of the application process. Clinical training and experience with children, adolescents, or families, including case management, is required. A minimum of 450 face-to-face hours of assessment and intervention combined at time of application is necessary. Utilization of evidence-based practices, particularly cognitive-behavioral therapy for children and adolescents is strongly preferred. Strong applicants will also have excellent interpersonal, organizational, communication, and computer skills.

PROGRAM STAFF

Daniel Cheron, Ph.D., ABPP is the Director of Training and Chief Psychologist at Judge Baker Children’s Center. His work focuses broadly on the training, supervision, and implementation of evidence-based programs for students and community providers, outcomes evaluation, and implementation research. He has significant expertise in providing direct clinical service to children and their parents. Dr. Cheron has served on numerous projects to develop and test interventions for children and adolescents with anxiety, co-morbid traumatic stress and substance abuse, and other multi-problem youth. Dr. Cheron directs several student trainees in evidence-based practice for children and adolescents 2-19 experiencing anxiety, depression, traumatic stress, or conduct
problems. He is a MATCH-ADTC Master Trainer and has trained hundreds of clinicians in the model, providing ongoing consultation to enhance clinical skills development and build a sustainable infrastructure of evidence based practice for students and trainees. Dr. Cheron provides these training and consultation services for students, interns, fellows, and community providers in both rural and urban settings to a racially and ethnically diverse group of clinicians and families. He also has significant experience using electronic monitoring and feedback systems to enhance the quality of clinical training. Dr. Cheron is also a certified Parent-Child Interaction Therapy therapist, and also has formal training in Trauma-Focused Cognitive Behavioral Therapy, Trauma Systems Therapy, and Comprehensive Behavioral Intervention for Tics, which are all evidence based practices.

**Anne Cangello, Psy.D.** is the Clinical Director at the Manville School. Prior to coming to Manville, while employed at SUNY Upstate Medical University in Syracuse, NY Dr. Cangello developed expertise in in direct clinical care with children and families, clinical supervision and training, and program development. Also during her time in Syracuse, Dr. Cangello conducted numerous trainings for a wide variety of audiences across the region. Topics on which she has presented include working with high-risk teens, and the effective communication between schools and parents. Dr. Cangello also provided in-house consultation within the Upstate University Hospital system in order to help nursing staff better understand and care for psychiatrically impaired youth admitted to medical units. Dr. Cangello completed her doctorate in clinical psychology at University of Hartford, and her pre-doctoral internship at Hutchings Psychiatric Center in Syracuse. Her doctoral dissertation project was the development of a training manual for direct care staff working with youth in milieu settings (such as the one at Manville). She has worked in hospital, residential, and outpatient settings with youth and families, focusing on the assessment and treatment of significant mental health problems. Dr. Cangello’s background in milieu care, trauma and foster care work, assessment, and consultation are the pillars that support the growth and development of the clinical department at Manville.

**Rhea Chase, Ph.D.** is the Director of Early Childhood Programs. She specializes in psychotherapy and training in the Parent Child Interaction Therapy (PCIT). She is a Master Trainer endorsed by PCIT International and is highly active in the PCIT community, acting as Secretary on the PCIT Board of Directors and as a member of the PCIT International training task force. She works to develop and implement effective prevention and treatment programs for families with young children with behavioral health concerns, including both internalizing and externalizing disorders. In addition to her training role, Dr. Chase focuses on the dissemination of evidence based treatments to traditionally underserved populations and the translation and sustainability of evidence-based treatments in community settings. Dr. Chase has previously served as a lead clinical faculty for statewide implementation of PCIT to community agencies throughout North and South Carolina.

**Veronique Parent, Psy.D., BCBA-D.** is the Director of Assessment at the Manville School. Dr. Parent specializes in the assessment and treatment of children and adolescents with complex learning and behavioral/emotional challenges, including autism spectrum disorders. She is responsible for the coordination and supervision of the psychological assessments conducted at the
Manville School, as well as for program development and educational efforts in this area. In addition, she supervises and provides comprehensive therapeutic and consultation services to children, adolescents and their families, such as individual and group therapy, parent skills training, and consultations. Dr. Parent’s professional interests encompass psycho-educational assessments (including neuropsychological tests), cognitive behavioral therapies and their adaptation to special populations, professional ethics, crisis intervention, and skill generalization. Dr. Parent is a bilingual (French/English) Licensed Clinical Psychologist and Doctoral-Level Behavior Analyst, with academic and professional credentials from CPA- and APA-accredited programs in Canada and the United States. Her expertise is reflected in professional, teaching, and scientific contributions (e.g., journal papers, clinical workshops, program development) in the fields of clinical psychology and special education.

**Chelsey Soliz, LICSW** is a staff social worker at Judge Baker Children’s Center, where she provides direct services to children and adolescents experiencing anxiety, depression, trauma, and conduct programs using the MATCH model. She has significant experience with a number of other evidence-based treatments, including TF-CBT, PCIT, Child-Adult Relationship Enhancement (CARE), and Child-Parent Psychotherapy (CPP). She is a therapist on the School Outcomes of Integrative Mental Health Services program supported by the Institute for Education Sciences. Ms. Soliz also trains early education providers in the Brookline Early Education program as well as through the Center on the Social and Emotional Foundations for Early Learning (CSEFEL).

**Sarah Tannenbaum, Psy.D.,** is the Associate Director of the Summer Enrichment Institute (SEI) and a staff psychologist at Judge Baker Children’s Center in the outpatient center. Dr. Tannenbaum has extensive experience working with children and families ages 2-18. Her work has focused on early childhood interventions, the treatment of traumatized populations, and the diagnosis and treatment of autism spectrum disorders. In addition, Dr. Tannenbaum is trained in a number of evidenced-based treatment approaches, including Cognitive Behavior Therapy (CBT), Dialectical Behavior Therapy (DBT), Child-Parent Psychotherapy (CPP), MATCH-ADTC, and the Summer Treatment Program (STP). She is currently working towards her certification in Parent-Child Interaction Therapy (PCIT). Dr. Tannenbaum has practiced in a wide array of clinical settings, such as residential treatment centers, partial hospital programs, and community mental health centers where she has done both in-home and school-based treatment as well as school consultations and trainings. In her role at SEI, Dr. Tannenbaum provides clinical supervision to the undergraduate and graduate staff members, oversees program development, manages program operations, and conducts didactic trainings for parents and staff members.