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THE CONTEXT OF THE TRAINING PROGRAM

The Mount Sinai Health System

In September 2013 the Boards of Trustees of the Mount Sinai Medical Center and Continuum Health Partners established an integrated health system called the Mount Sinai Health System. The health system includes the Icahn School of Medicine at Mt. Sinai, Beth Israel Medical Center, Beth Israel Brooklyn, The Mount Sinai Hospital, Mount Sinai Queens, New York Eye and Ear Infirmary, Roosevelt Hospital, and St. Luke’s Hospital.

The Mount Sinai Hospital

The Mount Sinai Hospital is located on the border between East Harlem and the Upper East Side of Manhattan. The hospital has more than 1,200 beds and approximately 150 outpatient clinics that provide services in all medical specialties and subspecialties. The outpatient department serves the community of Upper East Harlem, as well as a broad spectrum of individuals from local urban and suburban areas. As a result, a culturally and economically diverse population, reflective of metropolitan New York, is routinely seen for treatment at MSMC.

The Icahn School of Medicine at Mount Sinai

Since its founding in 1852 as an independent institution, the Mount Sinai School of Medicine (MSSM) has achieved national and International recognition for its programs in education, basic and applied research, and innovative patient care. A provisional charter from the Board of Regents of the State of New York was granted to the school in 1963. The charter, made absolute in 1968, authorized the school to grant the M.D. degree and to offer graduate instruction leading to Ph.D. degrees. At present, MSSM has numerous off-campus institutions in the metropolitan New York area, which are directly affiliated with the hospital and provide teaching resources for over 750 medical students, residents and fellows. These affiliates include: the Queens Hospital Center, The Jewish Home and Hospital for the Aged, North General Hospital in Manhattan, the Department of Veteran Affairs Medical Center in the Bronx, Elmhurst Hospital Center in Queens, and Englewood Hospital and Meadowlands Hospital in New Jersey.

The Alzheimer’s Disease Research Center

The Adult Clinical Psychology Internship Training Program is within the department of Psychiatry and is physically located within the Mount Sinai’s Alzheimer’s Disease Research Center (ADRC). Some of our testing referrals come from the ADRC and many clinical patients are referred to the ADRC to participate in clinical research trials. The ADRC, directed by Mary Sano, Ph.D., also an Internship faculty member, is a nationally renowned center of excellence since 1984. The ADRC is a comprehensive clinical program and research facility dedicated to the study, education, and treatment of normal aging, mild cognitive impairment, and Alzheimer’s disease.
The ADRC, with its team of experts in geriatrics, geriatric psychiatry and psychology, neurology, pathology, and radiology, diagnose, provide clinical research participation opportunities and refer patients with memory disorders for clinical care. Our clinicians and neuroscientists also conduct research into the causes and treatment of dementia, and sponsor educational programs for healthcare professionals and community groups. Caregiver programs and support groups are also available. All services are available in both English and Spanish.

Mount Sinai's clinical research programs are available to those with Alzheimer's disease as well as healthy seniors. Both our clinical and lab research are supported by the National Institute on Aging (NIA) and aim to improve diagnosis, delay disease progression, and enhance well-being of those affected by Alzheimer's disease, as well as to study the normal aging process.

**Adult Psychiatry Outpatient Services**

The Adult Psychiatry Outpatient Services (OPD) in the Department of Psychiatry has grown considerably over the past decade. Patient referrals to the Internship Program for testing and individual weekly psychotherapy are generated by the OPD.
The Training Program Mission

The Mission Statement of the Mount Sinai Medical Center commits to “the advancement of the art and science of medicine through clinical excellence. This central mission consists of high-quality patient care and teaching conducted in an atmosphere of social concern and scholarly inquiry into the nature, causation, prevention and therapy of human disease.” The mission of the Training Program is congruent with all tenets of the Mount Sinai Medical Center Mission Statement. To achieve its mission, the Psychology Training Program incorporates psychological perspectives from clinical psychology and neuropsychology.

Clinical Opportunities for Interns

Under supervision, Interns will participate in the following training experiences:

- Delivery of psychological and neuropsychological services to individuals of diverse cultural backgrounds.
- Participation as a psychologist-in-training within interdisciplinary teams on both the inpatient and outpatient psychiatry services.
- Participation in didactics offered within the Training Program, the Department of Psychiatry, and other departments within MSMC, and community-based conferences/workshops.
- Participation in Alzheimer’s research. Providing psychological and neuropsychological assessment for research purposes.

Training Goals and Objectives

Six goals and objectives to be achieved by the completion of the Training Program year are summarized below:

Goal I: Prepare Interns for future positions in the field of clinical psychology.
Objective: Build Interns’ competence in clinical assessment and psychological treatment of individuals from diverse cultural backgrounds and with disabilities. This goal will be accomplished via seminars and supervised clinical experiences in an outpatient setting.

Goal II: Prepare Interns for future positions in the field of neuropsychology.
Objective: Build Interns’ competence in clinical neuropsychological assessment and interventions for individuals presenting with cognitive and emotional impairments. This goal will be accomplished via supervised clinical experiences and seminar participation.
Goal III: Prepare Interns to be research scientists

Objective: Build Interns’ competence in areas of research by participating in clinical research studies within the ADRC. Responsibilities include neuropsychological test administration.

Goal IV: Prepare Interns to function as members of an interdisciplinary team.

Objective: Build Interns’ competence as consultants to other mental health professionals via supervised clinical experience in outpatient settings, participation in team evaluations, rounds/meetings, and seminars.

Goal V: Prepare Interns to function as professionals who are sensitive to issues of cultural and ethnic diversity in relation to aging.

Objective: Build Interns’ competence in understanding the impact of culture and diversity on aging. This goal will be accomplished via seminars on cultural sensitivity, supervised clinical experiences with individuals from diverse backgrounds, and ongoing case discussions during supervision and psychology staff meetings.

Goal VI: Prepare Interns to function as ethical professionals within clinical practice.

Objective: Build Interns’ competence in ethical principles as applied to clinical psychology. This goal will be accomplished via modeling of professional roles by faculty members and ongoing supervised clinical case discussions.
THE PREDOCTORAL INTERNSHIP EXPERIENCE

The Pre-Doctoral Internship is a full-time, one year commitment. A minimum of two Interns are admitted to the Training Program each year. The training follows a scientist-practitioner model of professional development. The Internship commences on July first (or the first weekday following July first, if that day should fall on a weekend) and ends on the last weekday of the following June. Interns typically spend forty hours per week in professional activities related to their Internship. Eighty percent of this time is devoted to clinical responsibilities (e.g., neuropsychological assessment, adult psychotherapy, supervision and didactics) and twenty percent to research activities (e.g., data collection for grant-funded memory research studies). Upon successful completion of the training year, Interns will have completed 1750 hours of supervised clinical experience which can be applied towards licensure.

Clinical Training Experiences

Under supervision, Interns engage in a wide variety of assessments and interventions appropriate to the role and function of a beginning clinical psychologist. These experiences include:

- **Individual interventions**: adult weekly psychotherapy
- **Individual assessment techniques**: including psychological screening
- **Individual neuropsychological assessment techniques**: including brief cognitive and memory assessments and in-depth neuropsychological assessment.
- **Interdisciplinary team membership experiences**: including participation in patient evaluations, team conferences, and interdisciplinary team meetings.
- **Clinical Research Participation**: including interviewing and cognitive and psychological assessment for lab research are supported by the National Institute on Aging and aim to improve diagnosis, delay disease progression, and enhance well-being of those affected by Alzheimer’s disease, as well as to study the normal aging process.

Clinical Supervision

Clinical supervision is the primary training modality for development of professional expertise. An integrative treatment approach that utilizes psychodynamic, cognitive behavioral, interpersonal, family-systems, ethno-cultural, developmental, medical model, and other perspectives is emphasized. Intensive clinical supervision is provided in the training program to help broaden Interns understanding of psychopathology and treatment and neuropsychological assessment. Interns receive:

- A minimum of one hour per week of ongoing individual supervision for adult psychotherapy cases. Interns are assigned one clinical supervisor for the duration of the training year and build a collegial and professional relationship with this supervisor.
- A minimum of two hours per week of individual supervision in psychodiagnostic interviewing, neuropsychological test administration and interpretation, and report writing.
• A minimum of one hour of group supervision related to clinical case discussions with multiple faculty supervisors and the director of training.

**Clinical Case Assignments**

Interns are ensured a rich multicultural experience during the training year with more than 55% of individuals seen for treatment coming from diverse cultural and socio-economic backgrounds. Interns are also assured diversity of experiences across the age span (young adult to geriatric), and with a variety of medical and cognitive diagnoses. Supervisors in the Training Program provide oversight experiences for each Intern. For testing and assessment, Interns will see primarily older adults with dementia and other cognitive disorders with a smaller caseload of young and middle aged adults. Other disorders such as Depression, Anxiety, Somatoform Disorders, ADHD, Learning Disorders, and various medical illnesses that may impact cognitive functioning, will also be seen for assessment through our training program. A minimum of three long-term psychotherapy cases per Intern from the outpatient psychiatry clinic are included in the clinical training.

**Neuropsychological Assessment**

To solidify an Intern’s clinical expertise in administration, integration of test results, and comprehensive report writing, Interns will spend the year completing comprehensive neuropsychological assessments within the outpatient setting. Faculty members will supervise test administration, written reports and feedback sessions. Interns also complete neuropsychological evaluations of inpatients during their training.

**Clinical Didactics**

Formal didactics are provided for the entire training year. The didactics begin with an initial one week of orientation, during which Interns are provided with an overview of the facility, the Psychology Service, and the Training Program itself. All didactics are mandatory for Interns to ensure a solid foundation of knowledge about both clinical psychology and neuropsychological assessment and the function of the ADRC. Core didactics in clinical psychology and neuropsychology are taught throughout the training year. Additional seminars are introduced to meet the current needs of the Interns. Didactics are taught by faculty, adjunct faculty, interdisciplinary team members, and invited speakers. Didactics on differential diagnoses (e.g. other dementias vs. Alzheimer's disease, dementia vs. depression and other psychiatric disorders, cognitive impairments in schizophrenia) are presented by faculty from the Department of Psychiatry and the ADRC. Finally, Interns attend departmental grand rounds, in-services, and lectures in other departments of MSMC as appropriate to training.

**Research Opportunities**

While direct involvement in clinical research within the Alzheimer’s Disease Research Center is not the focus of the clinical Internship training experience, Interns will have the opportunity to expand their knowledge of research specific to Alzheimer's Disease by attending select ADRC Research Seminars, consensus meetings, and through participation in clinical research projects in the Department of Psychiatry.
Benefits and Stipend

Interns receive a stipend of $20,000 for the training year. Trainee benefits include 19 days of paid time off which include personal time off, vacation and sick leave. In addition, trainee benefits include 8 major holidays. Hospital policy dictates when and how these benefits can be utilized within the training year. Medical insurance is offered. Disability insurance is provided under the umbrella policy of the hospital.
THE TRAINING PROGRAM FACULTY

The Training Program faculty consists of five licensed psychologists on site and four adjunct faculty members, in addition to supplementary faculty from the Psychiatry department who participate/lecture in the didactic program. The diversity of clinical training and academic backgrounds, as well as clinical, research, and teaching interests of the faculty ensure Interns a stimulating and culturally rich training environment. All of the faculty provide individual and group supervision and serve as speakers for seminars. Attending and adjunct faculty serve as guest lecturers and teachers in their areas of respective clinical expertise. Together, the faculty shares the collective responsibility for the success of the training program.

A clear chain of managerial responsibility has been established within the Training Program. Mary Sano, Ph.D., as Chief Psychologist, provides administrative support to Jane Martin Ph.D., a staff (Attending) psychologist who is the Director of Training. Dr. Martin is responsible for the overall quality and integrity of the Predoctoral Psychology Internship program. Dr. Martin oversees all supervised experience of Interns for neuropsychological assessment and clinical psychotherapy. She directs and organizes the training program, which includes organizing the year-long didactic s program and assigning cases for psychotherapy and neuropsychological testing, and overseeing individual and group supervision experience. She is responsible for organizing and directing the program’s resources, the selection of Interns, monitors and evaluates the training program’s goals and activities, and documents and maintains Interns’ training records.

Selected On-Site Faculty Members

Jane Martin, Ph.D.: Dr. Martin is an Assistant Clinical Professor in the Department of Psychiatry at MSMC. She is the Director of the Neuropsychology Service and the Adult Psychology/Neuropsychology Training Program in the department of Psychiatry at the Icahn School of Medicine at Mount Sinai. She is also the Director of the Division of Clinical Neuropsychology in the department of Psychiatry. Her research interests include Alzheimer’s disease and healthy aging in the elderly. She teaches in the Memory Enhancement Program, a wellness program for older adults, and also maintains a neuropsychological evaluation and psychotherapy practice. Dr. Martin is also a neuropsychologist, supervisor, and researcher in Mount Sinai’s Alzheimer’s Disease Research Center (ADRC). Dr. Martin received her Doctorate in Psychology from New York University.

Mary Sano, Ph.D.: Dr. Sano is a neuropsychologist and the Principal Investigator and director for the Mount Sinai School of Medicine Alzheimer’s Disease Research Center (ADRC). She is also a Professor of Psychiatry and the Director of Research and Development at the James J Peters VA Medical Center, Bronx, NY. Her work is in characterizing the clinical and biological aspects of cognitive impairment and dementia in adult and aging populations. She has particularly specialized in designing and conducting clinical trials assessing cognition and dementia. Her work includes developing unique methodologies to assess behavioral and neuropsychological function in the elderly, and she has conducted trials and studies in those with cognitive impairment and Alzheimer’s disease and co-morbidities, including injury, surgery, vascular disease, diabetes and renal disease. Other areas of interest include the role of depression in cognitive impairment and dementia, women’s attitudes about prevention of memory loss, and measuring quality of life in diseases of aging. Dr. Sano is the Chief Psychologist in the Department of Psychiatry at the Icahn School of Medicine at Mount Sinai.
Margaret C. Sewell, Ph.D.: Dr. Margaret C. Sewell is an Assistant Professor of Psychiatry and the Director of the Education Core of the ADRC. In 1999, Dr. Sewell joined the faculty of Mount Sinai School of Medicine specializing in geriatric psychiatry. Dr. Sewell is the Director of the Memory Enhancement Program, a wellness program aimed at memory improvement in older healthy adults. In 2000 she won Mount Sinai's Zinberg Award for her contribution to women's issues in psychiatry. Dr. Sewell conducts studies on the relationship between decisional capacity and end-of-life care choices in those with mild Alzheimer's disease. She is also involved in longitudinal research concerning neuropsychological predictors of conversion to Alzheimer's disease. Dr. Sewell is a supervisor and teacher in the adult Psychology/Neuropsychology Training Program. She also maintains a neuropsychological evaluation and psychotherapy practice. Dr. Sewell received her Ph.D. in clinical psychology from New York University (1996). She was Chief Postdoctoral Fellow at Cornell Medical Center where she specialized in psychiatric treatment and clinical research for those with AIDS. Her research concerned treatment adherence and cognitive performance in those with HIV-1 infection. She won the Eugene Jerez Fellowship Award and the Stonewall Fellowship Award for research in AIDS in 1995.

Susan Uysal, Ph.D., ABPP-CN
Dr. Suzan Uysal is an Assistant Professor with joint appointments in the Departments of Anesthesiology and Psychiatry. She is a clinical neuropsychologist and conducts neurocognitive outcomes research in the Department of Anesthesiology, and teaches a course in functional neuroanatomy in the Department of Psychiatry. She has been an adjunct faculty member at New York University since 1991, where she teaches a graduate level course in neuropsychology. She has a clinical practice in adult neuropsychological evaluation in Westchester County with a primary focus on neurologic disorders and age-related diseases. Dr. Uysal earned her Ph.D. in Experimental Psychology from New York University, and completed her postdoctoral fellowships in clinical neuropsychology at New York University Medical Center, Departments of Neurology and Psychiatry and Mount Sinai Medical Center, Department of Rehabilitation Medicine. She teaches a twice monthly Neuroscience course to the Psychology Interns in the Training Program throughout the training year.

Clara Li, Ph.D.
Dr. Li is an Assistant Professor of Psychiatry at the Icahn School of Medicine at Mount Sinai and a clinical researcher in Mount Sinai's Alzheimer's Disease Research Center (ADRC). Dr. Li graduated from State University of New York (SUNY) at Stonybrook and earned her doctorate in clinical psychology from Ferkauf Graduate School of Psychology. Dr. Li is interested in cognitive impairment in aging populations, recruitment of minorities in clinical research trials, and developing neuropsychological testing norms for various ethnic populations. Dr. Li provides supervision for neuropsychological assessment to Interns in the Adult Psychology training program.

Adjoint Faculty Members

Additional Clinical Supervisors:
Sheila Ehrlich, Ph.D., Assistant Clinical Professor, Psychiatry
Jeffrey Golland, Ph.D., Associate Clinical Professor, Psychiatry

Stanford Singer, Ph.D., Assistant Clinical Professor, Psychiatry

Jeanette Wasserstein, Ph.D., ABPP-CN, Assistant Clinical Professor, Psychiatry
THE TRAINING CURRICULUM

Orientation

The initial first week of the training year focuses on an orientation to the Mount Sinai Health System, the department of Psychiatry, the Alzheimer’s Disease Research Center (ADRC), the scope of services provided by the Geriatric Psychiatry and Psychology Service, the role/expectations of predoctoral Interns, and an overview of therapeutic challenges faced by individuals with cognitive decline. The orientation includes a basic overview of: Internship philosophy, policies and procedures, outpatient clinic experience, EPIC electronic medical record, and other clinical documenting procedures, emergency policies and procedures, introduction to psychopharmacology, neuropsychological testing battery, and current research in Mount Sinai’s ADRC.

Training Program Seminars/Didactics

Professional Development

- **Professional Development as a Psychologist** – The faculty as clinicians, researchers, and teachers serve as a role model of the clinical psychologist. Interns attend lectures presented by faculty in MSSM & MSMC and the community. Interns are involved in the interviewing process for future trainees for the Internship training program and conduct peer supervision for externs. Issues of professional development are routinely addressed within individual supervision and in the peer processing seminars. An Intern’s personal career path is reviewed in ongoing meetings of the Intern and the Training Director throughout the training year.

- **Ethics** – APA ethical guidelines are reviewed within orientation. Ethical issues that present within the ADRC setting are routinely addressed in faculty lectures, case presentations within individual supervision, during peer supervision, and in Psychology Service staff meetings.

- **Cultural Diversity** –Ongoing seminars address the impact of culture, age, socio-economic backgrounds and religious diversity on treatment.

- **Consultant Role within the Team** - Seminars addressing the unique roles and functions of members of the interdisciplinary team are presented early in the training year. The role of the psychologist as consultant to families, the medical center, and in particular, to the ADRC, Geriatric Medicine, and Geriatric Psychiatry treatment is highlighted. Interns attend interdisciplinary team meetings in the neurology and geriatric psychiatry departments regularly.

- **Introductions to ADRC Research** – Interns are introduced to key findings emerging from ADRC research (clinical research trials focused on normal aging and cognitive disorders) conducted within the Department.
Clinical Psychology Seminars

● **Treatment Issues**
  Several seminars are devoted to increasing the Interns’ understanding of the breadth of psychotherapy and their knowledge of various treatment modalities including Cognitive Behavioral Therapy and Psychodynamic Psychotherapy.

● **Personality Assessment**
  A complete lecture series is provided which focuses on enhancing the Interns’ understanding of the breadth of personality assessment and disorders. A Rorschach Workshop, held for a few consecutive weeks, provides Interns with an intensive didactic experience; other personality assessment measures are reviewed.

● **Psychopharmacology**
  Interns are introduced to the psychotropic medications frequently utilized in patients with cognitive disorders and dementia, as well as psychiatric medications used with geriatric patients in general.

Neuropsychology Seminars

● **Clinical Neuroscience Seminar** – Interns attend a bi-monthly, year-long clinical neuroscience seminar where they expand their knowledge of functional neuroanatomy, neuropathology, and neurodiagnostic methods. The sequelae of symptoms resulting from dementia, vascular injury, and other cognitive disorders, as well as the relationship of these disorders to neuropsychological assessment are discussed. Interns may attend lectures about Neuroimaging (e.g., MRI, PET) and bench science brain research within the Psychiatry and Neuroradiology Department and the Friedman Brain Institute.

● **Neuropsychological Assessment** – Neuropsychological test interpretation seminars are continuous throughout the training year. Initial seminars focus on intake approaches, test administration, data interpretation, report writing and testing feedback. Assessments of protocols are critiqued during supervision. Seminars focus on identification of premorbid cognitive functioning, and of cognitive strengths and weaknesses, as well as functional treatment plan recommendations. In addition, Interns attend a monthly neuropsychology course that covers topics such as dementia, ADHD, delirium, stroke, and other disorders and includes case conferences.

● **Neuropathology Case Conference (Brain cutting):** Interns have the opportunity to attend the weekly brain cutting conference in the autopsy suite with neuropathologists, medical residents, post doctoral fellows, and Interns.
Interns are presented with numerous training opportunities within the context of our large teaching institution. Broadly defined, MSMC resources include the diversity and breadth of professionals within the Department as well as the expertise/technical materials/supports provided within the Mount Sinai Health System complex itself. These resources are briefly described below.

**ADRC Professionals within the Department of Geriatric Psychiatry**

Predoctoral Interns become part of an interdisciplinary outpatient psychiatry team comprised of psychiatrists, psychologists, and social workers.

**Training Program Library, Testing and Computer Resources**

The Psychology Service has an extensive library of books, journals and audio/visual materials pertinent to the field of Clinical Psychology. Library and testing materials are available for all trainees. Computers and desk space are available within the Psychology Service and as well as in the MSMC Levy Library system with access to the Internet.

**Hospital-wide Didactic Lectures**

All Interns attend select conferences within the Psychiatry Department and other Departments within the hospital, which are arranged at the discretion of the Training Director. Interns have the opportunity to attend various departmental Grand Rounds.

**The Levy Library**

Interns have access to the medical school library. The library includes approximately 130,000 volumes and 3,500 audiovisual and microcomputer software programs in the biomedical sciences that can be accessed through the LS 2000 Online Public Access Catalog (OPAC) and CD ROM database (e.g., PSYCHLIT, MEDLINE). Materials not in the collection can be obtained through the interlibrary loan networks in which the library participates. Computer assistance labs are available within the library setting.

**The Friedman Brain Institute**

The Friedman Brain Institute, directed by Eric Nestler, M.D., Ph.D., is an interdisciplinary clinical and research hub for defining the mechanisms behind brain and spinal cord disorders and for translating those findings into preventative or restorative interventions. The Institute represents a large multidisciplinary effort involving numerous basic science and clinical departments on campus. Located in New York City, the Institute focuses on neural injury and repair, cognitive function and neuropsychiatry. By taking advantage of the growing body of knowledge about brain and spinal cord disorders, we are poised to drive revolutionary advances in the clinic by developing more effective diagnostic tests, treatments and preventions.
The Seaver Autism Center

The Seaver Autism Center offers comprehensive assessment and care for people with autism spectrum conditions. The multidisciplinary team of experts uses genetics, molecular biology, model systems, neuroimaging, and experimental therapeutics to treat each patient. The Center also provides opportunities to participate in an integrated series of research studies aimed at understanding the causes of autism spectrum conditions and developing treatments.

The Surrounding Neighborhood

MSMC is located between Madison and Fifth Avenues on the Upper East Side of Manhattan, just south of revitalized Harlem and the northern edge of Carnegie Hill. Central Park, eateries to suit any budget and many museums are within walking distance along Fifth Avenue to the north and south of Mount Sinai. Inquiries about affordable sublets and apartments within the local area can be made through the Medical School Real Estate Office, at 1240 Park Avenue (Tel. 212-659-9630). Car, train, subway or bus from all of the surrounding boroughs and the tri-state metropolitan area easily reaches Mount Sinai. Parking at MSMC is available at a reduced monthly fee and may be arranged through the Security Office. Hotel and travel discounts in addition to reduced-priced tickets to Broadway and off-Broadway shows, music concerts, sports events, family entertainment, and weekend getaways are available through the Recreation Office at 19 East 98th Street, room 1E. (Tel. 212-241-6660).
A major goal of the Training Program is to increase the autonomy of the Interns as their competencies evolve during the training year. The Training Program utilizes a variety of training approaches to ensure that each Intern achieves the professional skills and competencies of a psychologist during the training year. In keeping with the goals and objectives of the training program (see pgs. 6-7), these training experiences are structured by level of growth for each Intern. In brief, these approaches are as follows:

**Progression in Supervision** – It is expected that an Intern will move from more intensive and directed supervision to more collaborative consultation with supervisors during the training year. In addition, the intern is expected to increase his/her understanding of principles of supervision through didactics and peer supervision of externs.

**Progression within Didactic Seminars** – An Intern is expected to advance from a passive role in seminars to a more collaborative role during the training year. During the second half of the training year, Interns will present clinical and neuropsychological assessment cases to the team.

**Progression in Clinical Interventions** – Clinical cases are assigned by supervisors with concern for the complexity of each referral and the Intern’s ability to address treatment needs. It is expected that an Intern will be more comfortable with handling more complex clinical assignments by the end of the training year and have more of a role in considering diagnoses and treatments.

**Progression as an Interdisciplinary Team Member** – The Intern is expected to increase his/her consultation skills and become an integrated member of the team by the end of the training year.

**Progression within Development of Evidenced Based Knowledge** - Early in the training year, an intern is provided basic foundation knowledge in the area of clinical assessment and practice. As the year progresses, the intern is exposed to more intensive evidenced based research and theory as applied to clinical practice. By the end of the year, the intern is expected to research and present evidenced based knowledge to the team under clinical supervision.

**Progression in Understanding Ethical Issues in Clinical Practice** - The intern is expected to increase his/her understanding of ethical issues as they emerge within clinical practice during the training year. It is expected that an intern will utilize supervisory input early in the year, and become more comfortable with handling complex ethical dilemmas by the end of the training year in consultation with supervisors.
It is expected that all Interns will demonstrate clinical competencies necessary to function as a Clinical Psychologist by the completion of the training year. Clinical competency is assessed every six months via joint (supervisor and trainee) discussion and written evaluation. These ongoing evaluations serve to clarify strengths and weaknesses of each Intern as related to expansion of knowledge of clinical issues and psychotherapy, growth in neuropsychological assessment, professional/ethical development and cultural sensitivity. Mutual evaluations permit timely discussion and consensual validation of progress by both the Interns and their primary supervisors. When supervisory ratings of an Intern’s performance across several domains of training or professional development fall below the average range, the Intern is placed on probation, a written plan of corrective action is initiated and the student’s academic institution is notified. The Intern is evaluated on a monthly basis until adequate performance is achieved, or the Intern is terminated.

Predoctoral Intern Competency Expectations

The following domains of competency are evaluated biannually for each Intern, with increasing competencies expected as the training year progresses:

Psychotherapy Domain: includes evaluation of the Intern’s ability to establish rapport and maintain empathic contact with patients, conceptualize treatment and long term goals, provide psychotherapy to facilitate adjustment to diagnosis, utilize psychodynamic and other therapeutic interventions as necessary, and appropriately deal with diversity issues and suicidal and homicidal ideation.

Psychological Assessment Domain: includes evaluation of the Intern’s ability to collect relevant psychological information, administer and interpret psychological and cognitive measures, assess change in cognitive functioning over time, assess impact of medication and physical problems on cognitive functioning, adapt testing to address a patient’s limitations, evaluate the impact of psychological or emotional stressors, comprehensive report writing, and preparation for feedback sessions.

Interdisciplinary Team Functioning: includes evaluation of the Intern’s ability to appropriately consult with medical professionals, develop collegial relationships with other medical and support staff, build a presence as a team member, and prepare for case conferences.

Documentation: includes evaluation of the Intern’s ability to complete an integrated and cohesive cognitive evaluation, complete chart notes in a timely manner, and complete concise documentation of all patient contact.

Growth As a Professional: includes evaluation of the Intern’s ability to demonstrate professional responsibility, present professional demeanor to peers, staff, and other team members, consistently dress appropriately, accurately evaluate their own level of competency, view supervision as professionally enriching, and develop a sense of personal identity as a psychologist.
**Interpersonal Communication Skills:** includes evaluation of the Intern’s ability to effectively resolve disagreements between peers, team members, or supervisors, build rapport and form immediate and effective relationships with others, empathize, attend to, and respond to others’ thoughts, actions, and feelings, communicate effectively with patients, families, and other team members, and communicate respectfully with support staff and other members of the hospital community.

**General Clinical Skills:** includes evaluation of the Intern’s ability to effectively integrate information from multiple sources, formulate differential diagnosis, show sensitivity to ethical issues, demonstrate knowledge of cultural and other diversity issues, and implement effective clinical interventions with patients different from oneself.

**Research Integration Skills:** includes evaluation of the Intern’s ability to use knowledge of current theoretical and empirical literature to inform decisions, actively expand knowledge base through reading, literature reviews, etc., identify a theoretical/conceptual perspective to guide clinical activity, and willingness to share knowledge with peers and supervisors.

When Interns have successfully met the above competencies, at the end of their training year, a certificate of training completion is conferred.
The Training Program aims to protect the personal and professional welfare of Interns and faculty and the integrity of the profession of psychology at large. The Program encourages courteous, respectful and collegial rapport between Interns and the faculty. The program is organized to facilitate this milieu of Intern-faculty trust, learning, identification with more experienced colleagues and mentors, consolidation of professional identity, and successful integration of program graduates into the profession. The faculty is committed to serving as clinical mentors and as role models through supervised clinical work and seminar presentations. By mutual consent, faculty and trainees often work collaboratively on special assignments, projects and professional presentations.

Communication with the Trainee’s Doctoral Program

The Training Director maintains ongoing communication with the Intern’s academic institution throughout the training year. The Training Director provides written feedback with the academic institution of each Intern after six months and at completion of the training year. The Training Director will notify the student’s academic institution whenever an Intern is placed on temporary probation, with corrective actions discussed. At successful completion of the training year a letter of completion stating satisfactory completion of 1750 hours of supervised experiences will be sent to the Intern’s academic institution. Additional feedback to the Intern’s doctoral program consists of a) copies of final written evaluations completed by supervisors; b) an exit summary containing areas of professional growth and suggestions for continued professional development for each graduate; and c) a copy of a certificate of Internship completion.

Due Process/Appeal Process/Grievance Process

At times there may be disagreements regarding performance or other issues between a supervisor and an Intern that cannot be informally settled. Due Process is a written procedure that comes into use when an Intern’s behavior is problematic. First, the Intern must be notified that problematic behavior has been identified and that the Internship program is addressing the issue. In such circumstances, the Intern has the right to seek counsel from the Director of Training and/or the Chief of the Psychology Service, where an agreement or recourse on any matter related to the training experience can be reached. In addition, the identified problematic Intern will have a hearing within the training program in order to have the opportunity to hear concerns and respond to concerns.

In the event that an Intern is experiencing significant difficulties in the training program experience, the Intern will be notified in writing that he/she will be placed on probation for three months and his/her academic institution will be notified in writing. Interns have the right to appeal the probation decision and any decision made by the Chief of the Psychology Service and/or the Director of Training to the Chair of the Psychiatry Department within five business days from notification and the Intern will receive a written answer about the appeal within five business days. If the issue is not resolved, the Intern may bring his/her grievance to the attention of the House Staff Affairs Committee of the MSMC within five business days. If placed on probation, the Intern will receive more intensive supervision, and will be evaluated monthly. If the Intern continues to experience difficulty in the training program after three months, termination will proceed according to MSMC employee termination procedures. In situations concerning a breach of conduct and professionalism unbecoming an Intern, the matter is
brought to a joint meeting of the Chief of the Psychology Service, the Director of Training, and other supervisors involved within five business days. At that time, clarification, discussion and corrective (or disciplinary) action will be made in accordance with Departmental and institutional policy of Mount Sinai Medical Center, APA Ethical Principles and Code of Conduct, and respect for the individuals involved.

The Mount Sinai Medical Center intranet, which is available to all employees including Interns, has a Human Resources (HR) Policy Manual which details the steps to be taken when the Intern has a grievance. The grievance procedure is a process that is invoked when an Intern has a complaint against the training program. If the Intern has a grievance regarding the training experience he/she should follow the following Steps in order to resolve his/her grievance:

Step 1: The Intern should submit a written grievance and discuss the problem with his or her supervisor within a reasonable time (30 calendar days). The Intern receives an answer within five working days.

Step 2: If the grievance is not settled in Step 1, the grievance may, within five business days after the answer in Step 1, be presented to the Training Director and/or the Chief Psychologist of the internship program. As in Step 1, the Intern shall receive a written answer within five business days. If the grievance is not able to be settled in a timely manner, the Chief Psychologist and/or Training Director of Adult Psychology will meet with the intern.

Step 3: If the grievance is not settled in Step 2, the Intern may present the problem to the Chair of the Psychiatry Department within five business days.

Step 4: If the grievance is not settled in Step 3 with the Department Chair, the Intern may present the problem to the Labor Relations Office, Vice President of Labor Relations or designee. The employee receives a written answer within five working days from the date of the grievance hearing.

Mount Sinai Medical Center Harassment Policy

A major principle of MSMC, the Department of Psychiatry, and the Psychology Service is that discrimination or bias of any nature is not tolerated. Behaviors such as, harassment, violence, and discrimination are inherently destructive to healthy student-faculty relationships and are not tolerated. Grievances pertaining to sexual harassment, threat to do harm or violence, sexual or racial discrimination, and abuse of power to exploit or dominate another may be made by a faculty member, student, staff or any other member of the Icahn School of Medicine. Formal complaints are handled by the Harassment Committee and Grievance Board of the institution, according to the bylaws of the Medical Center and New York State Law. Departmental policy holds that any staff member, trainee, or faculty member who is found guilty of misconduct pertaining to sexual harassment, threat to do harm or violence, or abuse of power over others, may be immediately terminated.

Internship Policies and Procedures

Policies and procedures for the training program are available at request of a program applicant. Key policies and procedures are reviewed with Interns during orientation, and copies of the policy manual are kept in the Intern office.
Admission/Application Information

Step One: Provide the following materials by December 12, 2016:

- Application
- Cover letter
- Two letters of recommendation (including teachers or supervisors who are familiar with your graduate work, and at least one, with your clinical skills)
- Graduate school transcript
- Recent neuropsychology report (de-identified for confidentiality)

Step two: Interviewing and visiting our Internship Training Program site.

- Applicants will be notified by December 22, 2016 as to whether or not they will be invited for an in-person interview.
- Mid-late January, 2017: Required in-person interviews. In-person interviews include an orientation to the program, a tour of the facility, and individual interviews with faculty members.
- Internship Match #: NMS # 2376

Internship Qualifications:

- Being a doctoral student in good standing from an APA-accredited Ph.D. or Psy.D. doctoral program in clinical, counseling, or combined clinical-school psychology
- Having completed all academic course work and comprehensive examinations leading to a doctoral degree at start of the internship.
- Dissertation proposal must be completed prior to the start of the training year.
- A minimum of 500 hours of combined intervention and assessment experience is required prior to start of the internship.
  - Experience conducting individual psychotherapy
  - Having administered, scored, interpreted and written neuropsychological reports

If you have questions regarding your application, please contact:

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