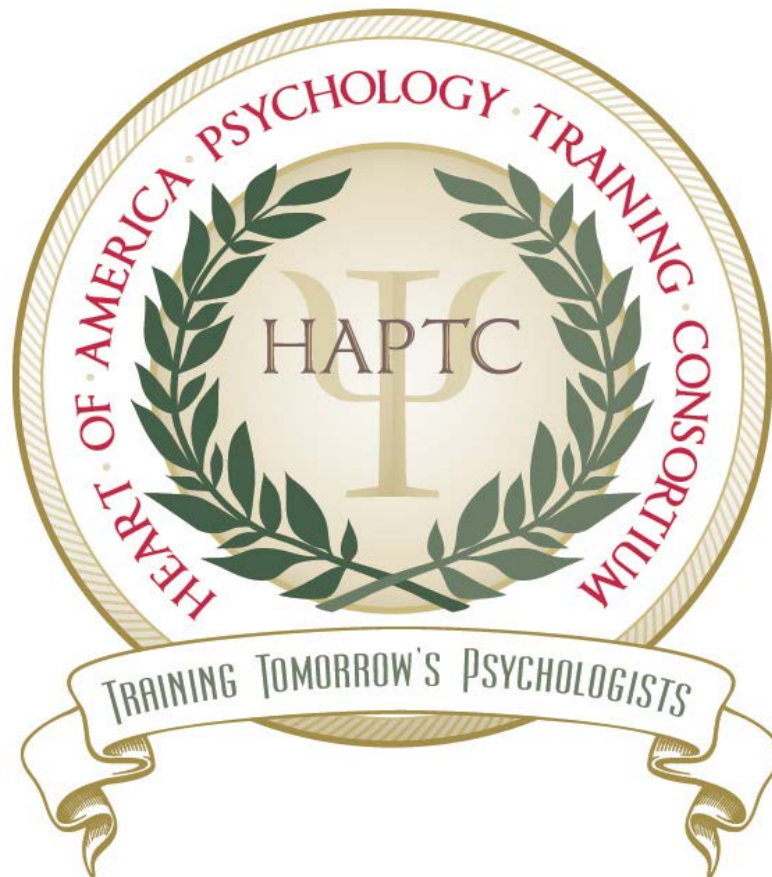


Heart of America Psychology Training Consortium



Central Region Internship Brochure

Revised November 2015

APA Accredited
APPIC Member

3557 South Avenue
Springfield, MO 65807
www.haptconline.org

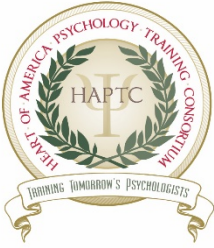
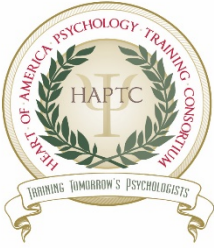


Table of Contents

TABLE OF CONTENTS	2
INTRODUCTION	3
Heart of America Psychology Training Consortium	3
Mission Statement.....	3
Long-Term Diversity Plan	4
PRE-DOCTORAL INTERNSHIP PROGRAM	7
Overview of Training Program	7
Philosophy of Training Program.....	7
Internship Program Learning Activities	10
Required Program Components	12
Intervention Experiences.....	12
Supervision Experiences	12
Psychological Assessment/Evaluation	12
Didactic Training	13
Self-Directed Journal Review	14
HAPTC-CENTRAL SETTINGS AND APPLICATION	15
Site Membership and Descriptions	15
Psychology Intern Stipend, Work Expectations, and Benefits	21
Eligibility, Application, and Selection Procedures	21
APPIC Match Information	23
GENERAL POLICIES AND GUIDELINES	24
APPENDIX A: APA ACCREDITATION	26
APPENDIX B: RURAL PSYCHOLOGY	27
APPENDIX C: COLLABORATIVE PRIMARY HEALTH CARE	28
REFERENCES	29



Introduction

Heart of America Psychology Training Consortium Central Region

The Heart of America Psychology Training Consortium-Central Region (HAPTC-Central), a pre-doctoral psychology internship, is a collaborative consortium consisting of psychological service centers throughout the Midwest focused on provision of services in rural health care. HAPTC-Central was founded in 2003 through a collaboration of The School of Professional Psychology at Forest Institute (hereafter referred to as “Forest Institute”) and Royal Oaks Hospital to create new internship positions in underserved areas. As of October 2013, HAPTC-Central received seven years accreditation by the Commission on Accreditation of the American Psychological Association (see Appendix A for more information about HAPTC-Central’s accreditation status). HAPTC-Central has also been an APPIC member since fall of 2004. The executive training staff of HAPTC-Central include the President/CEO, Adam Andreassen, Psy.D., Regional Assistant Training Director, Angela King, Psy.D., and Director of Accreditation and Compliance, Katherine Dixon, M.A. The Central Region of HAPTC is comprised of sites located in Missouri and Arkansas. The Executive Training Office for HAPTC is located in Springfield, Missouri.

The Heart of America Psychology Training Consortium is an applied training organization for individuals completing an education in the professional practice of psychology or for individuals who have recently completed a doctoral level academic program and are working to obtain licensure. HAPTC-Central provides psychological interns the opportunity to take substantial responsibility for fulfilling major professional and psychological functions in the context of appropriate supervisory support and professional role modeling. HAPTC-Central also partners with various organizations including academic programs, community agencies, private hospitals, and independent practitioners to provide a sequential, cumulative, and graded training environment. The objective of the internship is to prepare entry-level practitioners to function effectively in a variety of mental health settings and to provide services to a variety of populations in rural health care. HAPTC-Central has recently become partially affiliated with William James College in order to better provide these training opportunities and fulfill each program's mission statements.

Mission Statement

Training Tomorrow’s Psychologist in the Discipline and Practice of Psychology in Rural Health Care Settings

The mission of HAPTC-Central closely aligns with the vision and mission of the American Psychological Association's Committee on Rural Health (CRH). The mission of HAPTC-Central emulates that of the CRH in the following ways: 1) ensuring availability of behavioral and physical health services; 2) improving the availability and retention of psychologists; 3) increasing psychological services; and 4) encouraging collaborative care to reduce behavioral health care stigmas.

Long-Term Diversity Plan

HAPTC-Central is committed to promoting and infusing diversity into every facet of the training experience. HAPTC-Central adheres to the definition of diversity provided in the Commission on Accreditation-Guidelines and Principles (2012), Domain A, Section 5, as "personal and demographic characteristics. These include, but are not limited to, age, disability, ethnicity, gender, gender identity, language, national origin, race, religion, culture, sexual orientation, and social economic status." HAPTC-Central is dedicated to providing psychology interns with opportunities to work with populations in a variety of settings that promote and provide necessary exposure to diverse populations and issues. In addition, HAPTC-Central recognizes the importance of multicultural awareness and competence in the provision of professional service and strives to prepare entry-level practitioners to meet the needs of a progressively global and dynamic society.

With this in mind, HAPTC-Central has devised a long-term diversity plan to not only provide diversity training and experiences to its interns, but to also provide a safe, trusting, accepting atmosphere at its sites. In order to accomplish these goals, HAPTC-Central has outlined three main areas of program diversity:

1. Diversity Education

- a. HAPTC-Central's mission statement is to train psychologists in the discipline and practice of psychology in rural health care settings. All training sites are located in need-based areas and provide treatment to clients who represent various aspects of diversity, including age, religion, disability, and lower socioeconomic status. Supervisors provide interns with opportunities to work with diverse clients as cases become available.
- b. HAPTC-Central has made diversity and diversity training a core component of its program goals and objectives in order to provide the appropriate emphasis on diversity to interns and ensure they graduate with an appropriate respect for diversity in all its forms.
- c. HAPTC-Central values and emphasizes the importance of training in diversity and is committed to dedicating a two-hour seminar to diversity issues each month, as well as speakers from various areas of diversity when available.

- d. All interns are evaluated quarterly on their ability to work with clients from diverse backgrounds.
- e. As part of their core training expectations, Interns spend two hours each week in self-directed journal review, at least 10% of which must include diversity-related topics. Fulfillment of this guideline is monitored and verified monthly by the Site Training Director.
- f. HAPTC-Central's *Director of Diversity Enhancement* initiates and monitors HAPTC-Central's Long-Term Diversity Education Plan. This individual also presents diversity trainings, promotes diversity enhancement, consults with interns on diversity issues, and, if necessary, provides interns with referrals to other diversity experts.
- g. Four of HAPTC-Central's Central Region member sites provide regular diversity training for their employees. The remaining HAPTC-Central sites conduct informal discussions relating to diversity in their regular staff meetings and in supervisory or training activities. Information has been provided to these sites on various online trainings that are available to them to use.

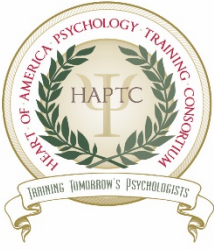
2. Psychology Intern Diversity Recruitment and Retention

- a. HAPTC-Central highlights the opportunities for diversity training through the training sites on its webpage and in the APPIC directory.
- b. To encourage applicants interested in working in rural, need-based areas, HAPTC-Central highlights sites which are members of the National Health Service Corps loan repayment program. This increases the potential of attracting diverse applicants interested in longer-term placements in high-need diverse areas.
- c. HAPTC-Central advertises available internship positions in the APA Division 35, APA Division 44, and APA Division 45 newsletters in order to encourage a more diverse applicant pool.
- d. HAPTC-Central advertises its program and available positions by sending its brochure to doctoral programs which have degree concentrations in Rural Psychology, for instance, Marshall University, University of North Dakota, East Tennessee State University, and University of Alaska.
- e. While it is likely that psychology interns will have a range of pre-existing attitudes and values related to diversity issues, acceptance to the training program is seen as a commitment to:
 - i. The social value of respect for diversity;
 - ii. Willingness to engage in self-disclosure, self-reflection and introspection;

- iii. Readiness to resolve or eliminate attitudes, beliefs, and behaviors that could have a negative impact on their ability to perform the functions of a mental health professional in accordance with the highest standards and principles of professional practice and ethics.

3. Staff/Supervisor Diversity Recruitment and Retention

- a. All HAPTC-Central member sites are encouraged to consider the following strategies when choosing staff and supervisors for their sites:
 - i. Advertise staff openings in venues targeting diverse applicants.
 - ii. Incorporate an inclusive diversity statement in all staff job advertisements.
 - iii. Request referrals and nominations of candidates from underrepresented groups completing doctoral programs.
 - iv. Allow/encourage support staff, supervisors and interns to attend diversity-oriented training and conferences.
- b. All HAPTC-Central member sites have non-discrimination policies in place within their organizations.
- c. HAPTC-Central expects that all members of the consortium will promote a safe, trusting, and accepting environment and strive to learn from each other in an atmosphere of mutual respect.
- d. It is also expected that all members of the consortium be supportive and respectful of all individuals, including, but not limited to, clients, staff, peers, administrators, and supervisors who are different from them in age, gender, gender identity, body size, race, ethnicity, culture, national origin, religion, spirituality, sexual orientation, disability, language, or socioeconomic status.



Pre-doctoral Internship Program Training and Psychology Intern Activities

Overview of Training Program

HAPTC-Central believes that the competent practice of psychology requires an integration of scientific and professional knowledge, skills, and attitudes. Thus, internship training incorporates diverse psychological theories, approaches, and perspectives that are designed to prepare psychology interns for a broad range of professional roles and activities. The training program is also attuned to the continually expanding scope and evolving nature of the field and the likelihood that clinical psychologists will engage in multiple roles over the course of their professional careers.

HAPTC-Central is committed to providing a clinical training experience that is sequential, cumulative, and graded in complexity. The training is conducted in a facilitative and supportive manner that provides each psychology intern with the opportunities to experience the practice of psychology in rural areas and as members of multidisciplinary collaborative primary care teams. Psychology interns are respected trainees who make valuable contributions that enhance the learning environment of the organization as a whole. Psychology interns are provided the opportunity to expand their understanding of theoretical principles and translate that knowledge into practice.

Each intern is assigned two primary supervisors. The goal of the supervisory relationship is to maximize the opportunity for the psychology interns to develop a constructive, collaborative working alliance that supports growth, learning, and quality care provision. Through collaborative modeling with supervisors, psychology interns are socialized into the profession and develop an appreciation for continuing professional development and lifelong learning.

Philosophy of Training Program

The Heart of America Psychology Training Consortium seeks to train entry-level clinicians to the discipline and practice of clinical psychology by employing an empirically-informed competency-based practitioner-scholar model. The program provides experiences in clinical learning environments that are responsive to the diverse and changing needs of the human community.

As psychological practice is inarguably based on science, the program firmly believes the competent, evidence-based practice of psychology requires an integration of both scientific and professional knowledge, skills and attitudes. Our training model not only emphasizes the importance of broad and general training in clinical psychology but also prioritizes the integration

of science and practice via implementation of the practitioner-scholar as a “local clinical scientist.” As described by Trierweiler and Stricker (1992), this perspective emphasizes:

- being a generalist of knowledge and method as opposed to a specialist;
- focusing on local realities in which data are gathered as they apply to a particular case but may be limited in the extent to which they generalize to other cases; and
- developing an active inquiring mind as opposed to concentrating on technical expertise with scientific methods (p. 104).

The training program goals, objectives, and competencies are guided by consortium values that include:

- Broad and general practice with the opportunities to move into new, emerging areas;
- Multiples ways of knowing, sources of knowledge, and values;
- Commitment to life-long learning;
- Valuing of human diversity;
- Self-awareness, open-mindedness, flexibility, personal integrity, and honesty;
- Guidance by professional ethics and standards of conduct.

These values serve as the frame within which the goals and learning objectives for the Internship Program are structured.

Program Goal 1: To provide broad and general training in clinical psychology with emphasis on applied empirical knowledge.

Competencies Expected for the Stated Objectives

Objective 1: Use psychological theory and research to develop as local clinical scientists

1. Demonstrates an ability to develop, administer, track, and measure intervention outcomes effectively.
2. Demonstrates an initiative to research relevant empirical literature, evaluate the methodology and relevance of outcome to clinical practice, discriminate the appropriate application of research evidence, and show an appreciation for evidence-based treatment modalities and intervention.
3. Demonstrates an ability to clarify theoretically-based client conceptualizations and treatment plans in supervision.
4. Demonstrates an ability to incorporate an empirical and theoretical knowledge base as well as an awareness of empirical and theoretical bases regarding client treatment issues.
5. Demonstrates an awareness and command of evidence-based supervisor competencies.

Objective 2: Accurately select, administer and score clinical assessment techniques and interpret and report their results.

1. Demonstrates an ability to administer, score, and interpret assessment instruments.
2. Demonstrates an ability to elicit relevant history and appropriately use collateral information.
3. Demonstrates competence in formulating DSM diagnoses and an ability to revise conceptualization as new data emerges.
4. Writes concise, yet appropriately comprehensive, timely intake reports and evaluations.

Objective 3: Identify, plan, administer and evaluate intervention strategies designed to enhance the positive functioning and well-being of clients.

1. Demonstrates an ability to competently conduct individual therapy, including use of well-timed, effective and evidence-based interventions.
2. Demonstrates an ability to competently conduct group therapy, including use of well-timed, effective and evidence-based interventions.
3. Demonstrates an ability to competently conduct family and/or couples therapy including use of well-timed, effective and evidence-based interventions.
4. Demonstrates an ability to utilize interpersonal interventions such as exploration of problematic relationship patterns, client-therapist relationship, therapeutic self-disclosure, transference and counter-transference, and self as an instrument as well as addressing other "therapy interfering behaviors" including silence, coming late, avoidance of meaningful topics, etc.
5. Demonstrates an ability to competently conduct crisis interventions with clients presenting with a variety of psychosocial problems including use of well-timed, effective and evidence-based interventions.
6. Demonstrates appropriate levels of knowledge and skill in theories and methods of consultation, evaluation, and supervision.

Program Goal 2: To prepare Psychology Interns to competently address the needs of diverse populations with emphasis on underserved.

Competencies Expected for the Stated Objectives

Objective 1: Identify and understand critical issues related to individual and cultural differences.

1. Demonstrates an ability to develop useful case formulations that acknowledge individual and cultural differences impacting client presentation and/or pathology.
2. Demonstrates an appropriate sensitivity to the influences of individual differences such as cultural, religious, gender issues, sexual orientation, and disability on client care and demonstrates an ability to challenge premises and biases to expand awareness in addressing issues of diversity.
3. Demonstrates an ability to create an accepting and nonjudgmental atmosphere by communicating warmth, genuineness, caring and congruency while demonstrating good attending behaviors and listening skills.
4. Demonstrates an appreciation for the level of influence inherent in one's position relative to both clients and staff.
5. Independently articulates, understands, and monitors own cultural identity in relation to work with others.
6. Regularly uses knowledge of self to monitor and improve effectiveness as a professional.
7. Critically evaluates feedback and initiates consultation or supervision when uncertain about diversity issues.
8. Articulates an integrative conceptualization of diversity as it impacts clients, self, and others.
9. Seeks consultation regarding addressing individual and cultural diversity as needed.
10. Uses culturally relevant best practices.

Program Goal 3: Socialize Psychology Interns to utilize critical thinking, problem solving and meaningful self-reflection to facilitate life-long professional development.

Competencies Expected for the Stated Objectives

Objective 1: Develop and sustain productive professional relationships with clients, colleagues, supervisors and others.

1. Demonstrates an ability to establish a working alliance with clients, supervisors, and other service recipients such as consultation consultees, educators, supervisees, and related health care professionals.
2. Demonstrates an ability to recognize interactional dynamics present in the relationship, including transference and counter-transference reactions; recognize boundaries with clients; recognize material that seems important to the client; and discriminate own needs from client's needs.
3. Demonstrates responsibility for key client care tasks, autonomously ensuring that tasks are completed promptly.
4. Demonstrates punctuality and an ability to manage time such as timeliness of documentation, proactive management of workload, ending sessions on time, and attendance of meetings and seminars, etc.
5. Demonstrates preparation for supervision, is able to articulate goals for supervision, and is able to maintain up-to-date, supervisor-signed case notes, intakes, and termination notes.
6. Demonstrates openness to supervisor feedback and is able to integrate feedback into practice.

Objective 2: Understand and abide by various ethical and legal guidelines (e.g., APA, state board) in all professional and academic settings.

1. Demonstrates good knowledge of and commitment to following APA ethical principles and consistently applies them appropriately.
2. Demonstrates an ability to use supervision effectively, including an awareness and acknowledgment of potential problem areas such as conflicts, skill deficits, counter-transference reactions, etc. and understanding when to seek consultation versus when to act autonomously.
3. Demonstrates an awareness of one's personal and professional strengths and limitations.
4. Demonstrates personal and professional maturity.
5. Demonstrates appropriateness of attire.

Objective 3: Understand evolving professional developments and regularly consume and apply pertinent findings from current literature to clinical practice.

1. Demonstrates a reasonable understanding of developmental issues and avoids over-pathologizing.
2. Demonstrates an awareness of one's progress and development as a psychologist in training.
3. Demonstrates an ability to recognize client progress.
4. Demonstrates an awareness of when to consult with other professionals in the treatment or management of a client through general familiarity with the practices of other professions such as physicians, psychiatrists, and social workers; ability to communicate effectively with referral sources eliciting relevant information and explaining psychological issues; ability to summarize and deliver information in a clear, useful manner; and ability to frame the relevant psychological issues in ways to meet client needs.

Internship Program Learning Activities

A unique focus of the program is the intersection between rural psychology and collaborative primary care. HAPTC-Central provides various activities designed to establish the psychology intern's competence in engaging in evidence-based practice, serving diverse populations and demonstrating professionalism and ethical decision making. Some of the assignments immerse the intern in direct service delivery (e.g., outpatient intervention), while other experiences provide training and support (e.g., individual supervision or didactics). These training activities are structured in terms of sequence, intensity, duration and frequency, allowing the intern to

develop mastery at each step before progressing to the next. Interns are provided with a combination of required and elective activities during the internship to prepare them to deliver a variety of psychological services. Interns actively participate in the selection of learning activities with respect to the number and intensity of activities completed. Performance in program assignments is monitored and supported through the individual supervision process. At the beginning of the training year, the Site Supervisor/Site Training Director will meet with the intern to generate a learning plan, specifically the Individual Learning and Training Plan (ILTP), which designates the assignments necessary to complete the internship. The ILTP reflects both required and elective activities for the specific internship site. The table below lists examples of recent training opportunities available at our various sites.

TABLE 1: Examples of Training Opportunities

	1	2	3	4	5	6	7	8	9
Individual Child/Adolescent Therapy	X	X	X	X	X	X		X	X
Individual Adult Therapy	X	X	X	X	X	X	X	X	X
Group Therapy	X	X	X	X	X		X	X	X
Marital/Couples Therapy	X		X	X	X	X	X		X
Family Therapy	X	X	X	X	X	X		X	X
School Consultation	X	X	X		X	X		X	
Crisis Intervention	X	X	X	X	X	X	X	X	X
Substance Abuse/Addictions Treatment	X	X	X	X	X	X	X	X	X
Sexual Abuse Treatment	X	X		X	X	X		X	X
Teaching/Psychoeducation	X	X	X	X	X				X
Supervision by Intern	X			X					
Intake Evaluation	X	X	X	X	X	X		X	X
Learning Disability Evaluation	X	X	X	X	X	X		X	X
ADHD Evaluation	X	X	X	X	X	X		X	X
Assessments (Cognitive, Objective, Projective)	X	X	X	X	X	X	X	X	X
School Assessment	X	X	X			X			
Forensic Assessment			X		X	X			
Psychiatric Assessment		X		X			X		X
Acute Inpatient Care							X		X
Other – See web for full list		X					X	X	

1. Burrell Behavioral Health Center	6. Midwest Assessment & Psychotherapy
2. Clark Community Mental Health Services	7. Ozark Center/Freeman Health Systems
3. Family Psychological Center, P.A.	8. Pathways
4. Family Psychology of Springfield	9. Royal Oaks Hospital
5. Greater Ozarks Rural Psychologists, LLC	

Required Program Components

Intervention Experiences

Intervention is considered foundational to the training experience. It is a core experience including an ongoing caseload of adult, adolescent, or childhood clients. The psychology intern is expected to obtain a minimum of 10 face-to-face patient contact hours (25% of time) per week. Client contact hours for this component accumulate through a variety of treatment modalities, depending on site placement. Potential modalities include: inpatient or outpatient, individual, group, couples and family therapy, and assessment administration. The intern's performance is assessed at the outset of the internship, and clients are assigned consistent with the intern's developmental readiness. As proficiency increases, interns are assigned more complex and challenging cases. Interns conduct co-therapy and participate in direct observation or other training opportunities with their primary and/or secondary supervisors when possible.

Supervision Experiences

Two hours of individual face-to-face intensive supervision are provided each week (one hour from each primary supervisor). Supervision focuses on assessment, relationship building, clinical interview and intervention skills, application of theory to practice, and integration of the aforementioned functions with the intern's developing professional style. Self-as-instrument, herein defined as how the psychology intern's idiosyncratic presence impacts the client and the therapeutic environment, becomes the crucible through which knowledge, skills and attitudes are forged to form the intern's professional identity. This supervision includes in-vivo supervision, video- or audiotaped supervision, process notes, and case discussion. The form of supervision chosen by the supervisor depends on the particular intern's supervision needs. While supervision remains intense throughout the internship year, interns are afforded more autonomy as their skills progress. The following are examples of topics addressed throughout the intern's individual supervision:

- Assessment
- Clinical Interview Skills
- Application of theory to practice
- Integration of therapeutic modalities with the developing personal and professional style of the psychology intern
- Progression with respect to the psychology intern's use of self within sessions
- Development of consultation skills
- Integration of research data into practice

Psychological Assessment/Evaluation

Evaluation assignments are a required and core experience of the internship. They are designed to enhance the already-established skill and knowledge base in the area of psychological assessment. While each intern is encouraged to complete ten (10) psychological assessments, a minimum of six (6) assessments are required, with written psychological evaluations addressing specific goals/requests. Assessments are supervised by licensed psychologists and should focus on the integration of various tests and report writing skills. As competency is gained, the supervisor may allow the intern more autonomy. The intern is expected to become more

proficient and sophisticated in his/her ability to perform and report assessments and results as the internship progresses. If a site cannot provide the necessary number of assessment opportunities for a Psychology Intern, a secondary site may be assigned for a period of time during the internship year to provide the needed resources.

Didactic Training

The primary focus of didactic training is to further enhance interns' readiness to practice in either a collaborative primary care setting or in a rural area. Psychology interns participate in a once-a-month two-day didactic training presented in a seminar/workshop format. The structure of this two-day training fosters the opportunity for more in-depth and comprehensive exploration of topics relevant to clinical practice. A reference list of literature pertinent to the monthly didactic training is provided to interns in advance of the training. Interns are expected to become familiar with the current literature and be able to enrich the training activity through participation and clarifying questions. Attendance at monthly didactic trainings also provides interns ongoing informal contact with each other so they can share experiences and provide support to each other.

Psychological Evaluation Conceptualization

In addition to their didactic training, the psychology interns attend a monthly psychological evaluation conceptualization group. In this training psychology interns take turns providing, organizing, and presenting assessment data for group review and evaluation. This group assists members in accurate test interpretation, proficient case conceptualization, and successful report writing. The focus of these exercises is ensuring evaluation and assessment practices follow evidence-based research and utilize the latest available manuals and literature to inform and further the discussion.

Clinical Supervision Exercise

To foster their development as future supervisors, psychology interns spend one hour during their monthly didactic training in a Clinical Supervision Exercise. In this group, interns explore the professional role of supervisor and develop skills and attitudes appropriate to that function. This exercise utilizes supervision of actual cases provided by interns in a group setting. At times, a guest supervisor from varying theoretical orientations provides a 25-35 minute mock supervision session to an intern while the group observes. As the training year progresses, interns are encouraged to also practice supervising in a mock setting. Following the session, a discussion is facilitated on supervision style, level of effectiveness, areas for improvement, and theoretical underpinnings. The chief purpose of these exercises is to encourage interns to begin developing an effective supervision approach while receiving valuable and honest feedback in its practice. This process is supported during the didactic training year via a half-day presentation that focuses on current supervising theories and principles of supervision. The following text is reviewed as the foundation of these discussions:

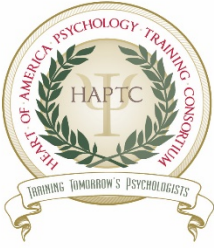
Bernard, J. M., & Goodyear, R. K. (2008). *Foundations of Clinical Supervision* (4th ed.). Allyn & Bacon.

Self-Directed Journal Review

Every week, interns are allotted two hours in their schedule for self-directed journal review. The intern should review topics related both to areas applicable to present training and to areas of professional interest such as dissertation-related topics. It is required that 10% of these journal articles are topics related to diversity. Each month the intern must provide a short (2-3 sentences) synopsis of each journal article reviewed and turn it in to the Site Training Director for verification for the completion of this assignment. These synopsis sheets are due before the 15th of the following month and will be verified by the Training Director on the monthly summary sheet. Late submissions will be noted on the intern's Quarterly Professionalism Review.

As an additional component of the self-directed journal review, each intern shall submit a minimum of four journal citations and summaries for discussion on a specified consortium listserv for interns, supervisors, and training directors (one post due each quarter). Purposes of these requirements include:

1. Contributing to an accumulation of growing literature bases useful for application to local clinical practice.
2. Establishing a habit of participation in professional discussions and resource-sharing with regard to the scientific and practical knowledge base.
3. Furthering the effective use of technology in support of identifying and utilizing the existing evidence-base in clinical practice.



HAPTC-Central Settings and Application

Site Membership and Descriptions

Internship training is carried out in a variety of affiliated member training sites. There are three levels of membership available for training sites: Core, Adjunct, and Affiliate Members. The following reflects the number of sites at each membership level for the Central Region for the 2015-2016 training year:

- One Core member
- Eight Adjunct members

Many of the sites within the consortium employ more than one doctoral-level licensed psychologist, ensuring opportunities for primary supervision by two on-site doctoral-level licensed psychologists. In instances where there is only one psychologist on-site, HAPTC-Central works with the training site to coordinate additional primary supervision for the intern.

Table 2 reflects the range of settings for HAPTC-Central member sites.

TABLE 2: Characteristics of Member Sites

	Community Mental Health	Private Practice	Other
Burrell Behavioral Health	X		
Clark Community	X		
Family Psychological Center		X	
Family Psy. of Springfield		X	
Greater Ozarks		X	
Ozarks Center	X		Inpatient Psychiatric Facility
Midwest Assessment		X	
Pathways	X		
Royal Oaks			Private Psychiatric Hospital

Table 3 reflects an example of populations most often served at our member sites. A brief description of each site is provided on the pages which follow.

TABLE 3: Client Populations Served

See site descriptions on the following pages for the corresponding site number

	1	2	3	4	5	6	7	8	9
Geriatric	X		X	X	X	X	X	X	X
Adults	X	X	X	X	X	X	X	X	X
Adolescents/Children	X	X	X	X	X	X		X	X
Marital/Couples	X		X	X	X	X		X	X
Families	X	X	X	X	X	X		X	X
Outpatient	X	X	X	X	X	X	X	X	
Inpatient					X		X	X	X
Incarcerated	X								
Home-Bound	X			X		X		X	
Developmentally Disabled	X		X	X	X	X		X	X
Neurologically Impaired	X		X		X	X		X	X
Chemically Dependent	X	X	X			X		X	X
Medical Patients	X		X	X		X	X	X	
Forensic Patients	X		X		X	X		X	
Sexual Offenders	X		X		X	X		X	X
Community Organizations	X			X	X	X		X	X

1. Burrell Behavioral Health Center**Adjunct Member****Positions: 2****Training Director:** Paul Thomlinson, Ph.D. (see website for list of site supervisors)

Burrell Behavioral Health is a community mental health center located in Springfield, Missouri, which provides a very wide range of opportunities due to its fairly comprehensive continuum of care, including children's day treatment, adolescent substance abuse, child/youth community psychiatric rehabilitation centers, adult CPRC, senior adult CPRC, residential treatment for youth, and general outpatient services. Burrell has locations in 17 counties throughout Missouri and treats approximately 30,000 clients each year. Though the population of Greene County is fairly racially homogeneous, there is a rapidly growing Hispanic/Latino population. The area continues to grow in older adult population as the area is attractive to retirees. The area continues to be relatively heavily impacted by poverty, as evidenced by high Medicaid population and high free/reduced lunch proportions in public schools.

The mission of Burrell is to meet behavioral health needs when and where they occur, and before they become more serious. It is their goal to produce well trained psychologists with skills in community behavioral healthcare, through appropriate and meaningful rotations and supportive/encouraging supervision.

2. Clark Community Mental Health Center

Adjunct Member

Positions: 0 – Inactive Site for 2016-2017

Training Director: Gary June, Psy.D.

Supervisors: Gary L. June, Psy.D. and Morgana Hazell, Psy.D.

Clark Community Mental Health Center is the Administrative Agent for the Department of Mental Health, providing comprehensive psychiatric, substance abuse treatment and prevention services to residents in a three county area. The facility is home to outpatient mental health counselors, and alcohol/drug abuse counselors and psychiatrists. Additionally, Clark Center supports a tele-health program offered through the University of Missouri, Columbia.

The mission of the Clark Community Mental Health Center is to be a crisis assessment and information resource for area residents in need of assistance with mental illness, substance abuse, mental retardation, and developmental disabilities. In addition to the primary psychiatric and substance abuse services offered, Clark Center provides crisis support through telephone and mobile assistance as well as education and outreach within the schools and communities it serves.

3. Family Psychological Center, PA

Adjunct Member

Positions: 2

Training Director: Charles Nichols, Psy.D.

Supervisors: Charles Nichols, Psy.D. and Phillip Brown, Ph.D.

The Family Psychological Center is a private practice located in Harrison, Arkansas which provides outpatient psychological services in a rural context. Serving a regional population of 60,000 in north-central Arkansas, the Family Psychological Center receives referrals primarily from physicians, public schools, judges, and the Division of Human Services.

The mission of Family Psychological Center is to provide quality, intensive training in the practice of Clinical Psychology in a rural psychology setting. Psychology Interns benefit from exposure to multiple supervisors who have varying theoretical orientations and practice specialties. Training opportunities are varied and include assessment of a range of clientele and presenting problems with a diverse mix of assessment instruments and approaches. Psychology Interns have open access throughout the week to their primary supervisor in addition to scheduled supervisory sessions.

4. Family Psychology of Springfield

Adjunct Member

Positions: 1

Training Director: Deborah Cox, Ph.D.

Supervisors: Deborah Cox, Ph.D. and Joseph Hulgus, Ph.D.

Family Psychology of Springfield, LLC, is a community practice venue which provides individual, couple, family, and group therapy for a wide population of presenting concerns. Most notably, they center their work on the Trauma Recovery process. The most common diagnosis seen is post-traumatic stress disorder, followed closely by major depression and other anxiety disorders. The psychology training program at FPS seeks to provide a collaborative training experience, based upon the principles of Relational-Cultural Theory. They value constant attention to the human systems in which they provide intervention, relying on groundbreaking works of such family systems thinkers as Bowen, Satir, Erikson, White, and Haley. They also value the EMDR approach to therapy and encourage supervisors to become trained in EMDR and/or CBT trauma recovery methods. They think in terms of empirically-supported treatments and infuse discussion of these in supervision.

The mission of FPS is to provide Springfield and surrounding areas with trauma recovery and other mental health services, using a family systems and EMDR approach, and to provide community education about trauma, attachment processes, and health. They seek to provide outreach to people living in rural areas of Southwest Missouri, via in-home and secure telehealth services.

5. Greater Ozarks Rural Psychologists

Adjunct Member

Positions: 1

Training Director: Loretta Fuge, Psy.D.

Supervisors: Loretta Fuge, Psy.D. and Deanna Wolf, Psy.D.

Greater Ozarks Rural Psychologists, LLC, is a private practice located in Mansfield, Missouri, approximately 50 miles east of Springfield. Greater Ozarks currently provides services to more than 125 clients weekly, representing an eight county service region. Three psychologists and one licensed professional counselor provide services on-site using a blend of full-time and part time schedules.

The training goal at Greater Ozarks is to develop psychologists with strong therapeutic skills, knowledge of assessment and evaluation, and unquestionable ethics. Psychology Interns are trained and supported in a high quality generalist experience with unique opportunities to develop specialized skills. Psychology Interns will be offered various opportunities to work with clients in an outpatient clinic, and will have the opportunity to work with physicians, schools, social service agencies, attorneys and court systems to provide comprehensive therapeutic services. Greater Ozarks is committed to the

development of psychologists-in-training to enter the profession as competent and ethical providers of psychological services.

6. Midwest Assessment & Psychotherapy Solutions

Adjunct Member

Positions: 1

Training Director: Angela King, Psy.D.

Supervisors: Angela King, Psy.D. and Dustin Brown, Psy.D.

Midwest Assessment and Psychotherapy Solutions, P.C. (MAPS) specializes in providing advanced psychological evaluation, psychotherapy, and counseling services for all ages. This site provides comprehensive and compassionate services for children, adolescents, adults, couples, and families. They work closely with a variety of individuals and organizations in the state including individuals, schools, doctors, caseworkers, juvenile officers, attorneys, judges, and other mental health providers.

The goal at MAPS is to provide quality training in the areas of individual and family therapy and psychological evaluations. Training involves helping trainees become familiar with and competent in administering a variety of psychological assessment measures as well as assisting them in learning to accurately score and interpret such measures. There are offices in Springfield, Monett, and Nixa, providing assessments and evaluations throughout the Southwest Missouri region.

7. Ozark Center

Adjunct Member

Positions: 2

Training Director: A.J. Whitmire, Ph.D.

Supervisors: A.J. Whitmire, Ph.D. and Stephanie Terrell, Psy.D.

Ozark Center is an integral component of the Freeman Health System, an acute care inpatient medical center which serves 13,500 patients every year. Ozark Center, the Freeman Health outpatient clinic, is based in Joplin, Missouri, the fourth largest metropolitan area and fastest growing region in the state. Psychology Interns spend the majority of their time on the inpatient units and are considered to be an integral part of the therapeutic treatment team which includes a psychiatrist, a psychologist, a social worker, a case manager supervisor, and usually a medical student.

Ozark Center's vision is that those experiencing mental illness, addiction, or the pain of abuse will develop the skills essential to a life with dignity and purpose. Ozark Center provides comprehensive behavioral health services to children, adults, and families in a region which includes Missouri, Arkansas, Oklahoma, and Kansas.

8. [Pathways Community Behavioral Healthcare, Inc.](#)

Adjunct Member

Positions: 4

Dual Track Positions: 2

Training Director: Cathy Grigg, Psy.D. (see web page for list of site supervisors)

Pathways Community Behavioral Healthcare, Inc. is a community mental health system which provides comprehensive psychiatric, substance abuse treatment and prevention services. With 28 satellite clinics throughout Missouri, Pathways provides opportunities for Psychology Interns to work with a diverse client base.

The mission of Pathways is to enhance wellness in the lives of individuals and communities by instilling hope, building partnerships, and supporting recovery. Services provided range from brief individual, group or family counseling dealing with issues such as depression and anxiety to long-term care and support for adults with serious mental illness and children with serious emotional disturbances.

Interns placed at Pathways will typically provide services at two satellite clinics within driving distance of each other. As all HAPTC-Central sites, Pathways reimburses interns for travel beyond 20 miles. Training opportunities available at the individual offices are listed on the website. Interns apply to the office(s) at which they would like to be placed.

9. [Royal Oaks Hospital](#)

Core Member

Positions: 5

Dual Track Positions: 2

Training Director: Tenea Lowman, Psy.D.

Supervisors: Tenea Lowman, Psy.D. and Adam Andreassen, Psy.D.

Royal Oaks Hospital is a 41 bed acute care inpatient facility located in Windsor, Missouri. Serving a rural community of approximately 3,000 people, Royal Oaks provides outpatient psychotherapeutic services, partial hospitalization, and acute inpatient care.

The mission of Royal Oaks Hospital is to enhance wellness in the lives of individuals and communities by instilling hope, building partnerships, and supporting recovery. Dedicated to research and program development in mental health, Royal Oaks provides an internship experience with a special focus on rural health issues. Training at Royal Oaks Hospital is guided by principles of integrity and excellence, open communication, courage, hope, self-direction, healthy partnerships, a culture of dignity, and a respect for diversity.

Interns may also apply for the dual Royal Oaks/Pathways rotations. Interns in this rotation will spend half of their time at Royal Oaks Hospital and the other half of their time at the Pathways office in Clinton, Missouri.

Psychology Intern Stipend, Work Expectations, and Benefits

Stipend and Work Expectations

HAPTC-Central psychology interns will receive an \$18,000 stipend for the 2016-2017 training year. The internship is for a 12-month duration beginning August 15th, 2016 and ending August 14th, 2017. Pre-doctoral students shall represent themselves as “Psychology Interns” and complete a total of 2,000 hours within a required minimum of 40 hours per week and a maximum of 50 hours per week. It is expected that the internship and training activities come first and any other roles/duties are secondary to the completion of the internship program.

Benefits

Psychology interns assigned to HAPTC-Central member sites are considered employees of HAPTC-Central and not of the member site. HAPTC-Central provides the following benefits to all interns:

- 1) Optional Health Insurance for psychology intern and eligible family members. This benefit requires financial participation by the intern
- 2) Ten days of paid vacation per annum
- 3) Four days of sick leave per annum
- 4) Seven paid holidays
- 5) Three Professional Development days
- 6) In some instances, mileage reimbursement, as determined by site supervisors and the President/CEO

Eligibility, Application, and Selection Procedures

Eligibility

Applications for internship are accepted from persons who have met the following requirements:

- Comprehensive Examination successfully completed
- Master’s degree (or equivalent) completed
- Dissertation or Doctoral Project proposal approved by start of internship
- Completion of a minimum of 1000 total practicum hours
- Completion of 250 Intervention and Assessment hours
- Completion of 100 Supervision hours
- Completion of all required coursework for doctoral degree (other than dissertation/doctoral project)
- Must be enrolled in an APA or CPA accredited clinical (preferred), counseling, or school psychology doctoral program.

Applicants who possess a Master’s degree and are willing to obtain state licensure may be given preference in the applicant selection process.

Many HAPTC-Central sites require background checks and/or drug screens prior to beginning the internship. Eligibility to begin internship, even after match, is contingent upon the intern passing

these tests. If a matched intern fails to pass a background check or drug screen, HAPTC-Central reserves the right to withdraw the invitation to match with the intern.

As a part of the partial affiliation between HAPTC-Central and William James College, students from William James (specifically those who are previous Forest Institute students completing their teach out program) are given preference in the selection process due to mutual interest in serving rural areas and long-term career aspirations to live and work in Missouri or surrounding areas. However, interns from programs other than William James College will still be considered and are encouraged to apply. Please see the FAQ section of our website on Partial Affiliation for more information about this agreement.

Internship Application Process

Application Deadline: November 15th, 2015

The Heart of America Psychology Training Consortium requires that the AAPI Online application service must be used by all applicants in order to be considered for our internship training program. Prospective psychology interns apply to individual sites within the consortium, not to the consortium as a whole; however, individuals may apply to as many training sites within the consortium as they wish. Everyone is to specifically indicate which sites she/he is applying to in the AAPI cover letter.

The following information is required in all HAPTC-Central applications:

- Cover letter specifying the sites being applied to and why the intern is a good fit for each,
- APPIC AAPI as designated on the online application,
- Three letters of reference, and
- One psychological evaluation report writing sample submitted as supplemental material.

Eligible applications are reviewed and ranked by a combination of HAPTC-Central staff and individual site directors. A select group of applicants are invited for interview. Notification of invitation to interview is made by December 1st.

In order to reduce the travel expense associated with interviewing, all participating HAPTC-Central sites conduct interviews on December 18th in Springfield, Missouri. Open houses may be offered at individual sites by request, but is not required or always available.

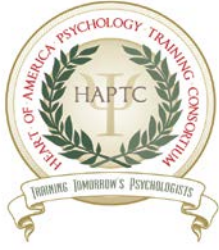
Following interviews, individual sites rank the interviewed candidates for submission in the APPIC match service. All final rankings are approved by the President/CEO, and application and selection procedures follow the APPIC guidelines. Internship applicants will be informed of their selection through the APPIC notification process contracted through the National Match Service.

Interested individuals may obtain a copy of the AAPI as a Microsoft Word file from the APPIC Website. The web address is www.appic.org. 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 Psychology Intern applicant.

APPIC Match Information

HAPTC-Central participates in the APPIC internship matching program. Applicants must use the correct 6-digit program code (listed below) to identify each program on his/her Rank Order List. A match can only occur if the applicant and site use the same program Code Number when submitting the Rank Order Lists. Applicants can also obtain the Code Number for each program from the Listing of Programs participating in the Match, which is available on the APPIC Matching Program web site (www.appi.org) or on the HAPTC Website (www.haptconline.org). Applicants may use these web pages to view up-to-date information on available sites and experiences through HAPTC-Central.

Program Code Number	Program Description	Available Slots
192514	Burrell Behavioral Health Center	2
1925	Clark Community Mental Health Center	0
192520	Family Psychological Center, PA.	2
192524	Family Psychology of Springfield	1
192517	Greater Ozarks Rural Psychologists	1
192525	Midwest Assessment and Psychotherapy Solutions	1
192515	Ozark Center	2
192527	Pathways – Cuba	1
192529	Pathways – Nevada	1
192526	Pathways – Rolla	1
192516	Pathways – Waynesville	1
192512	Royal Oaks Hospital	3
192530	Royal Oaks/Pathways Dual Track	2



General Policies and Guidelines

Non-Discrimination Policy

HAPTC-Central and member sites are Equal Opportunity/Affirmative Action employers and do not discriminate on the basis of race, color, religion, ethnic or national origin, creed, ancestry, gender, disability or age, sexual orientation or veteran status in employment or in any of its programs and activities. For questions, concerns, or more information, contact Katherine Dixon at kdixon@haptconline.org.

Disabilities Support Services Policy

Within the guidelines set forth in this policy, HAPTC-Central and member sites are committed to providing an accessible and supportive environment for individuals with disabilities. Equal access for qualified students with disabilities is an obligation of HAPTC-Central under Section 504 of the Rehabilitation Act of 1973 and the Americans with Disabilities Act of 1990. HAPTC-Central and member sites do not discriminate on the basis of disability against otherwise-qualified individuals in any program, service, or activity offered by the consortium. HAPTC-Central is committed to ensuring that no otherwise-qualified individual with a disability is excluded, denied services, segregated or otherwise treated differently than other individuals because of the absence of auxiliary aids or other appropriate services. Such accommodations, however, cannot result in an undue burden to HAPTC-Central or member sites or fundamentally alter the requirements essential to a psychology training program. HAPTC-Central reserves the right to determine whether a psychology intern or resident is capable of performing the duties required by the program.

Notification to the consortium of any and all types of personal needs involving physical, emotional, and learning difficulties and/or needs related to the Americans with Disabilities Act is the sole responsibility of the psychology intern. The individual should notify the Support Coordinator for Persons with Disabilities as soon as the need for accommodations becomes evident. In order to receive accommodations, the individual must provide the Support Coordinator for Persons with Disabilities with appropriate documentation of the disability. Accommodations will not be provided for undocumented disabilities, except that accommodations may be provided on a provisional basis pending receipt of documentation for disabilities that are readily apparent. Only persons interested in receiving disability-related accommodations need to provide disability documentation. If eligibility for accommodations is established and the request for accommodations approved, the Support Coordinator for Persons with Disabilities will coordinate a meeting between psychology intern and the necessary Training Directors and/or supervisors to review the approved accommodations. While all reasonable

efforts will be made to accommodate individual needs, it is conceivable that some conditions and circumstances may exist which cannot be reasonably accommodated.

To initiate an inquiry or request for accommodations, the individual must contact Katherine Dixon at kdixon@haptconline.org.

A full listing of HAPTC-Central's policies and guidelines, including the Due Process and Grievance Policy is included in the Internship Training Manual which is provided to interns during orientation. This document can also be viewed by request of the Executive Training Office. To request a copy of HAPTC-Central's policies or to view a copy of the full manual, contact Katherine Dixon via email at kdixon@haptconline.org.



Appendix A: APA Accreditation

Heart of America Psychology Training Consortium – Central Region has been accredited by the Commission on Accreditation of the American Psychological Association since fall of 2013. This program is accredited for seven years. If you have any questions regarding the program or any of the member sites, please contact President/CEO, Adam Andreassen, Psy.D. by phone (417-812-6495) or email (aandreassen@haptconline.org).

Questions related to the program's accredited status should be directed to the Commission on Accreditation:

[Office of Program Consultation and Accreditation](#)

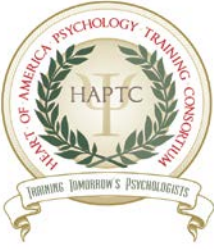
American Psychological Association

750 1st Street, NE, Washington, DC 20002

Phone: (202) 336-5979

Email: apaaccred@apa.org

Web: www.apa.org/ed/accreditation



Appendix B: Rural Psychology

“In almost all rural and frontier areas, health care practitioners, services and infrastructure are in short supply. The population is small and is disproportionately older. These areas have low household incomes, relatively high unemployment rates and high poverty rates. Unfortunately, they also have a high proportion of the population that lacks health insurance or has inadequate coverage. Providing behavioral health care services to rural residents is further complicated by the presence of stigma” (American Psychological Association, 2012). These words are taken from the American Psychological Association’s (APA) webpage dedicated to rural health awareness and initiative. They represent a longstanding commitment on behalf of the APA to promote increased awareness and resource allocation for rural residents and frontier populations. A significant barrier repeatedly encountered by organizations such as the APA Committee on Rural Health and The National Association for Rural Mental Health (NARMH) is the limited amount of specialty mental healthcare clinicians interested in rural practice.

Results of the shortage of specialty mental healthcare clinicians in rural areas have been changes in public health policy and the reallocation of financial incentives to attract practitioners, such as psychologist, to rural America. The recent expansion of the scope of the National Health Service Corps (NHSC) loan forgiveness programs has allowed further attraction of psychologists to these underserved areas. Other results from the shortage of psychologists in rural America have been the development and expansion of various training institutions, programs, and continuing education venues such as HAPTC-Central. In the past decade HAPTC-Central has changed the specialty mental healthcare landscape in the rural Ozark Plateau region of Missouri and Arkansas. Since its inception, almost one-hundred pre-doctoral psychological interns have fulfilled their final doctoral requirements while participating in its various training programs. Many of those interns have continued their clinical practice in rural Missouri or Arkansas after attaining full licensure.

The above listed initiatives and incentives are important as years of research have shown rural life to be less idyllic and tranquil than often thought. The facts are that rural Americans suffer from similar rates of psychological disorders as their urban counterpart. Additionally, illicit drug use, often methamphetamine, and male suicide rates have been found to be disproportionately higher in rural Americans compared to urban Americans (Lorenz, Wickrama, & Yeh, 2004). According to the same authors, reasons for these higher rates of psychopathology have been attributed to the stresses of isolation and the deterioration of culture/community. Furthermore, the lack of licensed specialty mental healthcare providers, such as psychologists, contributes to these trends of mental illness in rural America. For these reasons, HAPTC-Central continues to recommit itself to address the psychological needs of the rural underserved.

For more information about Rural Mental Health, you can visit the following web sites:

www.ruralhealth.hrsa.gov

<http://ruralcommittee.hrsa.gov>

www.nrharural.org

www.wiche.edumentalhealth

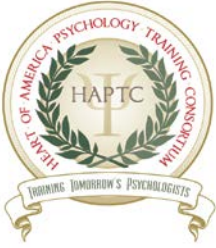
<http://telehealth.hrsa.gov>

www.hp.ufl.edu/uchptelehealth

www.pacifichui.org

www.nrbhc.org

www.isu.edudepartmentsirh



Appendix C: Collaborative Primary Health Care

A growing body of literature calls for the inclusion of broad-based mental health services in America’s healthcare system. Furthermore, there is recognition of the need and utility of a “collaborative” approach to mental health and behavioral health into our “healthcare” system.

The primary care setting has been viewed as the preferred setting for the delivery of behavioral health care services. There are three principle goals of collaborative care: 1) to produce healthier patients, 2) to create more efficient resource expenditures, and 3) to remove barriers to access.

One of the primary goals of the HAPTC-Central is to provide Psychology Interns with the skills to practice in and even manage collaborative primary care settings. Not all designated sites within the consortium are based on a collaborative primary health care model and not all sites offer this intense and focused training; however, most of the sites offer the benefit of training under either piece of HAPTC-Central’s stated mission of rural psychology or collaborative primary health care.

The collaborative primary health care training model provides training to work in a medical office, hospital, ER, and medical care facility and interact with a multidisciplinary team while focusing on the behavioral needs of the patient. This training model requires a strong background in at least one of the following areas: collaborative primary health care, medical psychology, health psychology, rehabilitation psychology or pain management. Psychology Interns interact in a triage fashion with the medical staff providing valuable feedback and intervention on a behavioral level for the patient’s medical condition.



References

- American Psychological Association. (2012). Rural health. Retrieved from <http://www.apa.org/practice/programs/rural/index.aspx>
- Committee on Rural Health Mission. (2012). Retrieved February 28, 2012, from <http://www.apa.org/practice/programs/rural/committee/mission.aspx>
- Lorenz, F. O., Wickrama, K.A., & Yeh, H. (2004). Rural mental health: Comparing difference and modeling change. In N. Glasgow, L. W. Morton, & N. E. Johnson (Eds.), *Critical issues in rural health* (75-88). Ames, Iowa: Blackwell Publishing Professional
- Trierweiler, S. J. & Stricker, G. (1992). Research and evaluation competency: Training the local clinical scientist. *The Core Curriculum in Professional Psychology*. Washington, DC: APA.