SAINT LOUIS PSYCHOLOGY INTERNSHIP CONSORTIUM

2009-2010

PRE-DOCTORAL INTERNSHIP

IN

CLINICAL PSYCHOLOGY

Administered by

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St. Louis Psychology Internship Consortium

Introduction

The St. Louis Psychology Internship Consortium (SLPIC) is an APA approved program* offering a diverse clinical practice experience. Training takes place in both inpatient and outpatient settings where services are provided to clients of all age ranges and levels of psychopathology. The Consortium is strongly committed to training that provides interns with intensive supervision, weekly didactic seminars and a range of opportunities for direct clinical experience. Interns conduct individual psychotherapy, group psychotherapy and, occasionally, marital and family therapy. Interns also complete assessments, conduct mental status exams, develop comprehensive treatment plans, and perform psychological evaluations. As members of interdisciplinary teams, psychologists serve as consultants to many services and specialized treatment programs. Interns are trained by Consortium psychologists and other mental health professionals from a wide variety of backgrounds, theoretical orientations and interests. We believe that the intensive and diverse training offered by our program provides an excellent foundation for later specialization.

Intern training has taken place at Metropolitan St. Louis Psychiatric Center since 1956 and the program was one of the earliest APA accredited internships. Interns have trained at Hawthorn Children’s Psychiatric Hospital since the hospital’s inception over 25 years ago. These two facilities as well as St. Louis Psychiatric Rehabilitation Center are part of the Missouri Department of Mental Health, together serving clients in nineteen urban, suburban and rural counties in the Eastern Region of Missouri with a population over three million. These three Department of Mental Health facilities joined with outpatient providers in 1989 to establish the St. Louis Psychology Internship Consortium, creating training opportunities in both inpatient and outplacement settings. Interns will select three, four-month long core rotations from those available at Hawthorn Children’s Psychiatric Hospital and Residential Treatment Center (HCPH), Metropolitan St. Louis Psychiatric Center (MPC), the St. Louis Psychiatric Rehabilitation Center (SLPRC) and Community Psychological Service, University of Missouri-St. Louis (CPS).

During the 2009-2010 training year, interns will also be provided a one-day-per-week adjunct rotation at one of the following: Children’s Advocacy Services of Greater St. Louis (CASGSL), Community Psychological Service (CPS), Missouri Institute of Mental Health (MIMH), or the Missouri Sexual Offender Treatment Center (MSOTC). CASGSL is a Child Advocacy Center accredited by the National Children’s Alliance and serves the St. Louis Metropolitan area as the primary provider of forensic interviews and trauma informed psychotherapy for maltreated and traumatized children and their non-offending caregivers. MIMH is a center for policy, research and training. MSOTC provides mandatory treatment to certain civilly committed sexual offenders who have been convicted, found not guilty by reason of insanity or committed as criminal sexual psychopaths.

*For further information regarding accreditation status, contact the Office of Program Consultation and Accreditation, American Psychological Association, 750 First Street, NE, Washington, D.C., 20002-4242, (202) 336-5500; Web: www.apa.org.
Clinical Internship Program

The St. Louis Psychology Internship Consortium offers comprehensive training to qualified pre-doctoral psychology graduate students. There are four full-time, salaried internship positions. The internship program is a 12-month commitment, beginning the first week of August. Interns are expected to work a minimum of 40 hours per week to complete the training program.

The goal of the internship training program is to help interns prepare for professional careers as psychologists. The underlying philosophy of the program asserts that newly trained clinical psychology interns should be prepared to function as qualified and competent entry-level practitioners who can provide an array of psychological services in a variety of settings. As such the program incorporates a broad range of professional training activities designed to introduce intern trainees to a range of experiences which they are likely to encounter as they enter the ranks of professional psychology.

The training model consistent with this philosophy is a clinical practice model that

1) prepares interns to provide relevant, up-to-date, effective psychological assessment, treatment and consultation services to a variety of populations in a variety of health care contexts;
2) prepares interns to collaborate effectively with multidisciplinary treatment teams in the planning and implementation of mental health services;
3) prepares interns to appreciate the interdependent relationship between psychological science and clinical practice; and,
4) prepares interns to develop a professional identity, assume leadership roles and internalize high ethical and professional standards of conduct.

Training experiences are designed to facilitate the development of a broad knowledge base and intermediate to advanced competencies in the following areas:

1) diagnosis and assessment;
2) psychotherapeutic intervention;
3) appreciation of individual differences and cultural diversity;
4) professional conduct, ethics and legal issues;
5) consultation and supervision;
6) scholarly inquiry and application of current scientific knowledge to practice.

Each week, seminars are provided by psychologist members of the Consortium and mental health professionals from the local community on topics covering changing trends in the field, issues of professional development and skills relevant to clinical practice. At the various training sites, interns also participate in ongoing educational opportunities including case conferences, colloquia and other didactic opportunities.
Clinical Experiences

Each intern participates in three of the four available core rotations for a period of four months at each rotation. The available core rotations include outpatient assessment experience at CPS, child/adolescent acute care at HCPH, acute adult inpatient care at MPC, and one of several long-term adult training options at SLPRC. Additionally, interns work one day per week at an adjunct rotation: CASGSL, CPS, MIMH or MSOTC. Interns will engage in a variety of activities throughout the rotations, including, but not limited to, individual, group and family therapies along with testing, interviewing, treatment planning, treatment team consultations, milieu interventions and/or conducting research into mental health issues. Weekly intern breakfasts are scheduled during work hours to facilitate group cohesion and create the opportunity for informal discussion of ongoing experiences and professional development.

A typical workweek for an intern includes the following:

♦ Core Rotation (at CPS, HCPH, MPC, or SLPRC) – 4 days/week
♦ Adjunct Rotation (at CASGSL, CPS, MIMH or MSOTC) – 1 day/week
♦ Didactic Seminars – 2 hours/week
♦ Intern Breakfast Group – 1 hour/week

♦ Additional professional activities such as professional reading, report writing, attendance at seminars within the community and responding to special circumstances at clinical sites may also be expected. Interns are encouraged to maximize the training experience by participating in professional activities available through their respective sites as well as in the St. Louis community.
CONSORTIUM

TRAINING

SITES
COMMUNITY PSYCHOLOGICAL SERVICE

The Community Psychological Service (CPS) is a not-for-profit outpatient mental health clinic established at the University of Missouri-St. Louis in 1977. CPS is the primary practicum training site for graduate students in the APA-approved Doctoral Training Program in Clinical Psychology at UM-St. Louis. The threefold mission of CPS is to offer its graduate students, pre-doctoral interns and post-doctoral fellows opportunities for clinical training, professional service provision and applied research.

Located in North St. Louis County, CPS serves Metropolitan St. Louis and its surrounding areas. CPS clinicians provide affordable psychological services on a sliding-scale fee basis for clients from diverse ethnic and socio-economic backgrounds. Lower income individuals without health insurance make up the bulk of CPS referrals.

CPS clinicians perform psychological assessments for private clients and provide evaluations for local schools and state agencies on a contractual basis. These include the Special School District of St. Louis County, the State of Missouri on behalf of clients of the Missouri Department of Social Services Children’s Division and the Division of Vocational Rehabilitation, The Missouri Board of Probation and Parole, a group home, a mental health center, and a local charter school also refer clients for evaluation.

Interns choosing CPS as a major rotation will have the opportunity to refine their diagnostic skills and enhance competencies in interviewing and tests administration and interpretation by way of conducting a wide variety of assessments. Opportunities for cognitive and personality (objective and projective) assessment are available. Comprehensive personality evaluations of adults and children with severe emotional disturbances, forensic parenting competency assessments, violence/risk assessments, and evaluations of learning and attentional disorders in children and adults are common. Opportunities to conduct school-based evaluations, adolescent sex offender evaluations as well as Probation/Parole and Vocational Rehabilitation evaluations also may be available. Although this is primarily an assessment rotation, there may also be some opportunities for interns to provide outpatient therapy services to CPS clients. In addition, interns may have the opportunity to provide clinical supervision for a graduate student.

Interns will receive 1 to 2 hours of individual supervision each week. However, numerous opportunities are present for more informal supervision experiences. Interns on this rotation will also be given opportunities to participate in didactic training experiences at UM-St. Louis including the colloquia series offered by the Clinical Psychology Doctoral Program, the Center for Trauma Recovery and Children’s Advocacy Services of Greater St. Louis.
HAWTHORN CHILDREN’S PSYCHIATRIC HOSPITAL
AND RESIDENTIAL TREATMENT CENTER

Hawthorn (HCPH) is a 28-bed inpatient facility accredited by Joint Commission for accreditation of Healthcare Organizations (JCAHO) serving children and adolescents (ages six through 18) from St. Louis City and a 31-county region of Southeastern Missouri. Children are referred by mental health centers, juvenile courts, doctors and Division of Family Services (DFS). Youth are hospitalized who are assessed to be dangerous to themselves or others or who are adjudged to have an under-controlled severe psychiatric disturbance which so imperils their judgment or capacity to control behavior that a non-specific risk is posed. These disorders may include Bipolar, acute Post-traumatic Stress Disorder, Schizophrenia, and Psychotic Disorders-NOS. Most patients qualify for multiple diagnoses as developmental disorders, learning disabilities and developing personality disorders are common in this population, as are life circumstances representing extreme psychosocial stressors, frequently physical or sexual abuse and neglect.

The inpatient program consists of separate children’s and adolescents’ units. Average length of stay for the eight bed Children’s Unit is approximately 20 days; average length of stay for the 20 bed Adolescents’ Unit is approximately 50 days. Both inpatient units function within a behavior management system and comprehensive care is afforded by multidisciplinary teams consisting of Psychiatrists, Psychologists, Nursing staff, Social Workers, Recreational and Art Therapists and Teachers as well as Interns of these various professions. All interns are assigned to the Adolescent Unit and have an option to join the Children’s unit.

Hawthorn Residential consists of three co-ed cottages with teenagers who require long term care that cannot be provided adequately in a more natural environment. Length of stay varies from approximately six months to two years. Interns may become active in the Residential program by being the primary therapist for individuals, or as a psychotherapy group co-leader. Opportunities to conduct family therapy with a co-leader are available.

Becoming part of a team is most enhanced by participation in Rounds, treatment planning and discharge meetings, and being present in the unit’s milieu. Over the course of their hospital stay, effort is made to facilitate changes in the patients’ mental health and welfare that will have a positive “ripple effect” post hospitalization. Interns learn how to be therapeutic at all times and how to provide interventions that make a “difference” despite the severity and complexity of these youth’s conditions.

Interns, respected as junior staff members, serve as primary therapists for individuals and as co-therapists for family and/or group psychotherapies. In addition to providing psychological services for their units of affiliation, interns may also offer services across all areas of the hospital and residential center. Doing so not only presents interns with opportunities to work with a more varied population in differing roles, but also to receive supervision from others than their primary supervisor. Supervision is abundant, typically more than three hours weekly.

Interns may act as consultants to the Residential Center serving youth ages 13 through 18 who may reside there for approximately six months to one year. This patient population represents youth who are less acutely impacted by their mental illnesses but are unable to safely and successfully reside with their families or surrogate families. The program emphasizes the development and/or improvement of social skills, academics, vocational preparation and the
pro-social use of leisure time. Interns may also be involved in co-leading groups or family therapy with students in the Day Treatment Program, a cooperative venture between the Department of Mental Health and Special School District. Youth in this program commonly have developmental disorders and interns gain valuable appreciation for the challenges facing youth on the spectrum of Pervasive Developmental Disorders as well as the challenges of their families, teachers and peers.

Hawthorn presents a unique opportunity for specialized training in child and adolescent psychology. Psychology interns learn a great deal about severe psychopathology, utility of psychotropic medications, and complex intervention for complicated situations. Hawthorn provides an excellent opportunity for becoming more skillful in differential diagnosing and psychological assessment as well as becoming more adept at adapting psychotherapeutic interventions to the particular capacities of the youth within time constraints posed by variable lengths of stay.
METROPOLITAN ST. LOUIS PSYCHIATRIC CENTER

Metropolitan St. Louis Psychiatric Center is a JCAHO accredited 112-bed psychiatric hospital providing both emergency and acute care for adult inpatients in the Eastern Region of Missouri. Serving a large area of the state, Metropolitan St. Louis Psychiatric Center treats individuals from a highly diverse catchment area that includes rural, urban and suburban populations. While diverse backgrounds and socioeconomic levels are represented within the inpatient population, persons with less education and fewer resources are in majority. Approximately 50% of the patients represent minorities, with the majority of those individuals being African-American. Metropolitan St. Louis Psychiatric Center provides services to individuals who have been involuntarily hospitalized as well as to those independently seeking assistance through hospitalization. Admissions are typically for less than 90 days with the average length of stay being approximately 14 days.

Metropolitan St. Louis Psychiatric Center is a treatment and training institution with which Washington University’s School of Medicine, Department of Psychiatry is affiliated. Psychiatry residents and medical students rotate through the inpatient service at MPC. Practica are offered to students in psychology, social work, nursing, occupational therapy, music therapy, dietetics, physician’s assistants programs and pharmacy.

The Psychology Department consists of four doctoral level psychologists and one postdoctoral resident with a variety of theoretical orientations and areas of interest/expertise. Interns are matched with a primary supervisor who provides the majority of the training and supervision during the rotation. Focused supervision from other staff is available for individual and group psychotherapy and on assessment cases, insuring that interns have an opportunity to draw upon the experience of various members of the staff. Interns receive a minimum of two to three hours of supervision per week, with many opportunities for informal supervision as the intern works with the psychologist on the unit. Guided readings of the professional literature relevant to inpatient services/professional development supplement supervision.

The inpatient rotation at Metropolitan St. Louis Psychiatric Center emphasizes education, diagnosis and treatment of acutely symptomatic individuals. While Axis I disorders such as the schizophrenias and affective disorders are the most frequent diagnoses, many patients also present with substance abuse and Axis II disorders, resulting in a complicated and challenging clinical picture. The psychology intern is a member of a multidisciplinary treatment team, participating in treatment and discharge planning as well as other treatment activities. A primary goal of the inpatient rotation is for the psychology intern to learn to function as a professional in this setting, both in direct care services to the patient and as a member of the treatment team. Interns also have the opportunity to attend some of the hospital’s onsite continuing education activities.
ST. LOUIS PSYCHIATRIC REHABILITATION CENTER

SLPRC, under various names, has served the public since 1869. It is a JCAHO accredited, inpatient psychiatric facility operated by the Missouri Department of Mental Health. The facility currently has 196 beds divided into four 25-bed wards and twelve 8-bed residential cottages. We provide long-term inpatient psychiatric and psychosocial rehabilitation services to adults with severe and persistent mental illnesses and Axis II disorders from the urban, suburban, and rural areas of eastern Missouri. We also perform outpatient evaluations of criminal defendant’s competency to stand trial and probable mental state at the time of an alleged offense. Most of our clients were committed for treatment because they are Incompetent to Stand Trial or Not Guilty by Reason of Insanity.

The Psychology Department consists of nine psychologists who have varying interests and backgrounds. We are active participants in the ongoing development of treatment and treatment programs and have leadership roles in the units we serve. In general, interns rotating at SLPRC should expect to complete two or more assessments, participate in at least four weekly therapy groups, carry a caseload of three or four individual therapy clients, and participate in multidisciplinary treatment team meetings. These expectations are flexible based upon the needs and interests of the intern. The supervision available is intense and plentiful, with a minimum of one, but commonly two scheduled hours, along with frequent informal opportunities for supervision. Preferred rotations are selected from the programs detailed below.

**Cognitive-Behavioral Program:** You may choose this as a primary rotation. The two teams of this program provide services for one ward and five cottages. The clients have a broad range of functioning, although most are at a higher level. Most have a personality disorder (often Antisocial Personality or significant Antisocial features) in addition to a stable Axis I disorder (usually Schizophrenia). Many have problems with chemical dependency as well. A few are in the later stages of preparation for discharge. If you choose this rotation, you will spend much of your time gaining additional experience in providing individual and group therapy. You will gain experience completing risk-related summaries, working as part of a treatment team, and you will learn the role of a psychologist in an inpatient facility. You might have the opportunity to help develop release applications for committed clients. There will be a few opportunities for psychological assessment. In supervision, you can expect discussions on the management of reluctant and resistant clients, maintaining professional boundaries, and a psychologist’s role in this kind of setting.

**Forensic Pretrial Program:** You may choose this as a primary or secondary (i.e., add-on) rotation. The program has two functions: inpatient and outpatient forensic evaluations, and inpatient restoration of adjudicative competency.

Certified Forensic Examiners, who conduct pretrial evaluations of competency to stand trial, criminal responsibility, and other matters related to criminal defendants (e.g., Sexually Violent Predator commitment evaluations), staff the forensic evaluation service. Evaluations are usually on an outpatient basis.

The inpatient unit is comprised of a ward and a cottage. Nearly all the clients are Incompetent to Stand Trial and committed for competency restoration. The team provides medical and psychiatric treatment, psycho-educational competency restoration, group and individual therapy, and preparation for court.
If you choose this program as a primary rotation, you will spend two-thirds of your time on the inpatient unit participating in individual and group competency restoration and psychological assessment. You will spend the remaining time observing and participating in forensic evaluations. Specific expectations for the latter include observing and participating in at least one evaluation each week, reading extensively on the subject of forensic evaluation, observing court testimony, and developing forensic report writing skills. You should expect to complete three full reports before the end of the rotation. A primary rotation should prepare you for a forensic post-doc or other supervised forensic experience.

If you choose this as a secondary rotation (i.e., added to a primary rotation in CBP), you will observe several pretrial evaluations and do basic readings in forensic evaluation. If you are interested, you can also develop forensic report writing skills with the goal of completing one full pretrial report. A secondary rotation will give you good exposure, but will not prepare you well for a forensic post-doc.

**Centralized Cognitive Rehabilitation Program**: This is not offered as a rotation, but an intern may choose to participate in treatment offered by the adjunct supervisor in this program. This service provides a systematic, 12-month cognitive rehabilitation program to schizophrenic clients from across the hospital that have cognitive deficits.

**Specialized Forensic Services**: This is not offered as a rotation, but an intern may choose to participate in treatment offered by adjunct supervisors in this program. This service focuses on treatment and evaluation related to the risk of dangerousness. Psychologists serving clients throughout the hospital staff this program. Treatment is usually based on a cognitive-behavioral approach.

**Freedom Bound Dual Diagnosis Program**: This is not offered as a rotation, but an intern may choose to participate in treatment offered by the adjunct supervisor in this program. This service focuses on treatment of clients throughout the hospital who have co-morbid chemical abuse or dependency. Didactic introductory groups and treatment following relapse are offered. The service also hosts 12-step meetings.
CHILDREN’S ADVOCACY SERVICES OF GREATER ST. LOUIS (CASGSL)

In 1991, a group of professionals in the St. Louis Metropolitan Area who were concerned with the system’s response to childhood sexual abuse found a successful model in the Huntsville Child Advocacy Center and proposed bringing a similar program to St. Louis. Incorporated in 1991 and open for services in 1995, the center was the first Advocacy Center in Missouri. The purpose of the Children’s Advocacy Center was to coordinate efforts and promote collaboration between law enforcement, medical, judicial, and social service agencies during sexual abuse investigations, thus reducing the traumatic effects to children. In 1997, the Children’s Advocacy Center merged with the Kathy J. Weinman Centre, which is located at the University of Missouri-St. Louis. Together, the two agencies formed Children’s Advocacy Services of Greater St. Louis (CASGSL). As a result, more comprehensive services were offered to victims of childhood sexual abuse and their non-offending parents. In 2002, CASGSL became a member site of the National Child Traumatic Stress Network. Subsequently, in 2005 CASGSL expanded from solely providing services to sexually abused children, and began offering services to child victims of all forms of trauma. In addition to forensic and therapeutic services, CASGSL also offers professional training, an active research program and prevention awareness initiatives in the St. Louis area.

CASGSL’s multidisciplinary staff includes psychologists, licensed clinical social workers and licensed professional counselors. CASGSL also serves as a training site for graduate-level practicum students in all three disciplines. Furthermore, CASGSL staff frequently engaged in collaborations with other professionals in the fields of law/law enforcement, child protection, medicine, education, and mental health.

CASGSL is the region’s primary provider of evidence-based, trauma-focused services to children ages 3-18 and their non-offending parents. Approximately 700 children per year in the St. Louis Metropolitan Area receive forensic and/or therapeutic services at CASGSL. The majority of clients have a minority status, predominantly African-American. Furthermore, many of the families served at CASGSL have limited financial resources, with approximately 60% of families having an annual household income of less than $20,000. Children who receive services at CASGSL have experienced a wide variety of traumatic events, with exposure to multiple forms of trauma being the norm. The most common forms of trauma experienced by CASGSL clients include sexual abuse, physical abuse, domestic violence, neglect, and community violence. The trauma histories of CASGSL clients are frequently complex and long-standing, often beginning in the first few years of life. CASGSL clients present with a variety of emotional and behavioral difficulties including posttraumatic stress, depression, anxiety, conduct disturbances, attention difficulties, emotional and behavioral dysregulation, and sexualized behaviors.

CASGSL provides “state of the art,” evidence-based treatments for difficulties associated with exposure to childhood trauma. Treatment is assessment-driven and interns will be trained in the administration and interpretation of a variety of child and trauma-focused measures. Therapeutic services can be provided in individual, family and group formats, based on the specific needs of a client/family. CASGSL staff members are trained in multiple, evidence-based treatment modalities including: Trauma-Focused Cognitive-Behavioral Therapy (TF-CBT), Parent-Child Interaction Therapy (PCIT), cognitive-behavioral treatment for children with sexual behavior problems, Structured Psychotherapy for Adolescents Responding to Chronic Stress (SPARCS), and Integrated Treatment for Complex Trauma. All of these treatment modalities have been identified as promising or established treatment options for traumatized children.
CASGSL has two locations, one of which is located on the South Campus of the University of Missouri-St. Louis, and the other which is located in the Central West End. Forensic services are conducted entirely at the Central West End location, while therapeutic services are offered at both locations.

The adjunct intern at CASGSL will provide therapeutic services to traumatized children and their non-offending parents. Therapeutic services for these clients will include initial evaluation of the history of trauma exposure and the presentation of emotional and behavioral difficulties. The adjunct intern will be expected to carry a caseload of approximately 5-6 clients weekly. Interns receive one hour of formal one-to-one supervision with their primary supervisor and additional informal supervision experiences such as case consultation with other staff members.
MISSOURI INSTITUTE OF MENTAL HEALTH (MIMH)

The Missouri Institute of Mental Health (MIMH) is a center for policy, research and training, and is part of the School of Medicine of the University of Missouri-Columbia.

MIMH exists to conduct research that will improve services for persons served by the Department of Mental Health (DMH) and to foster excellence in mental health services through employee training and the study of mental health policy and ethics. The Institute is composed of the following five divisions:

The Behavioral Health Division is one of the nation's leading centers for research in mental health computing and the development and application of emerging technologies to improve quality of services. It also conducts mental health services research. Projects conducted by division members include: Substance Abuse and Mental Health Services Administration (SAMHSA) funded studies such as Faith-Based Gender Specific Integrated HIV/AIDS and Substance Abuse Prevention Mentoring Project, ESSAY Project (Enhancing Supports for Substance Abusing Youth), and Transitions (a grant to develop a system of care for children involved with the Division of Family Services who have severe emotional disorders), as well as several SAMHSA and NIDA funded-studies relating to HIV, co-occurring disorders, and homelessness.

The Evaluation, Policy, and Ethics Division evaluates public mental health programs, provides data to influence state policy decisions, reviews the scientific literature to analyze mental health policies at the national level, and conducts mental health services research. Projects conducted by division members include: SAMHSA funded studies such as Prevention of Methamphetamine And Inhalant Abuse; COSIG (Co-Occurring Disorders State Incentive Grant); and numerous evaluations of adult and adolescent substance abuse treatment programs.

The Child & Family Mental Health Services Division provides evaluation and research in support of children and families with mental health and substance abuse related needs. Projects conducted by division members include: SPIRIT (School-based Prevention, Intervention and Resources Initiative); Missouri’s Strategic Prevention Framework State Incentive Grant; and the Missouri Youth Suicide Prevention Project.

The Continuing Education Division designs and delivers programs that enhance the skills of mental health professionals and disseminates information about mental health and substance abuse to the community. The division provides numerous training programs for Department of Mental Health employees as well as professionals around the country. Using a variety of methods of dissemination, including live training, streaming internet video, and DVDs, the Continuing Education Division strives to meet professionals' ongoing training needs.

The MIMH Library is one of the largest mental health libraries in the Midwest. The library’s collection includes over 25,000 volumes of books and journals, subscriptions to 400 journals, and numerous audio and videotapes. The library is the repository for the archives of the National Association of State Mental Health Program Directors (NASMHPD) and maintains the original St. Louis State Hospital patient record books from 1869-1911, as well as photographs of the hospital site dating from 1870. The Library staff provides numerous services to Department of Mental Health employees, including interns: computerized literature searches, photocopying and document delivery.
The Library’s homepage (mimh.edu/library) provides access to the library’s book catalog as well as to lists of available resources.
The Missouri Sexual Offender Treatment Center (MSOTC) was established in 1999, under what is commonly referred to as the Sexually Violent Predator (SVP) Act, to offer sexual offender treatment to those who meet certain criteria, including a history of sexually violence offenses.* As of April 2008, over 140 residents resided at this maximum security facility, on seven wards. Among those, the most common DSM Axis I diagnoses are the paraphilias; many of our residents also carry Axis II diagnoses, predominantly Antisocial and/or Narcissistic, or Personality Disorder NOS with antisocial and/or narcissistic features.

MSOTC offers a range of opportunities to interns. Should you choose this adjunct rotation, you will be working with individuals with severe personality disorders, and some psychopathic individuals—populations rarely accessible through outpatient and most inpatient settings. We believe working with these individuals, and our treatment team, will help you develop and hone new theoretical and skill sets that will serve you well, regardless of your future plans. MSOTC also offers the opportunity to work with a truly diverse multidisciplinary team. Because we are a residential facility, you will probably have contact with someone from every facet of our organization at some point in your rotation; we believe every department at MSOTC plays a valuable role in the treatment of our residents. In addition, MSOTC provides additional education in sexual offender treatment and assessment—such as the psychology department’s biweekly “Lunch and Learn” program, in which relevant materials are reviewed and discussed. Interns also have access to our growing library of multimedia materials in this area.

**TREATMENT PROGRAM OVERVIEW** Our mission is “to protect the citizens of the State of Missouri by securely detaining and effecting positive change through integrated state-of-the-art mental and physical health care in those with a history of sexual offenses. We are dedicated to enabling our residents to become productive members of the community and their families without further victimizing others.” In a nutshell, our goal can be expressed as “No more victims.”

To that end, our treatment program is built on a biopsychosocial model that incorporates into treatment multiple elements as contributors to sexual offending. Our psychotherapeutic model operates on the core elements of: 1) cognitive-behavioral principles, 2) personal responsibility for past and current behaviors, and 3) compassion and a genuine belief in the resident’s capacity for change.

The treatment program consists of four Phases. Each Phase builds on the skills and principles gained in previous Phases, while introducing new challenges and expectations:

**PRE-ENGAGEMENT/ENGAGEMENT:** These residents are typically either new to MSOTC treatment or have not yet demonstrated a relatively consistent commitment to change. Target topics for this Phase include learning to respond appropriately to rules and authority, admitting one is a sex offender in need of treatment, learning the basics of MSOTC treatment, and making healthier leisure choices.

**COGNITIVE RESTRUCTURING:** Residents at this stage of treatment are considered to have met the expectations of the Pre-Engagement/Engagement Phase, including commitment to change. Target issues for this Phase include increasing awareness of the thoughts/feelings/
behavior process and thinking patterns, disclosing offenses and developing personal offending cycles, and beginning to address the emotional states associated with their offending and other unhelpful behaviors.

**EMOTIONAL INTEGRATION:** This Phase of treatment focuses on addressing the elements that we believe lead to long-term change – making substantive changes in leisure activities and attitudes toward same, accepting and learning appropriate coping strategies for all emotional states, and dismantling unhelpful core beliefs. This Phase also expects residents to discuss past unhealthy relationships and begin to learn and practice developing appropriately intimate relationships with staff and peers.

**COMMUNITY REINTEGRATION:** This Phase is still “under construction,” but as the name suggests, will focus on mastering the skills needed for a return to the community through gradually decreasing levels of supervision and restriction. Planned activities of this phase also include college courses, finding meaningful work and housing outside the facility, family therapy, development of relapse prevention plans, and developing support networks.

**OPPORTUNITIES AND ACTIVITIES OF MSOTC INTERNS** A typical day at MSOTC may involve:
- Individual therapy session
- Co-facilitate/facilitate Thinking Errors group
- Lunch and Learn
- Individual therapy session
- Documentation/Assessment/Report Writing
- Supervision

At the start of your rotation, you will work closely with the Training Coordinator to develop and refine an individualized schedule based on your experience, your needs, and your interests. Presently, those activities include:

**ASSESSMENTS:** Testing batteries typically include cognitive instruments (e.g., WAIS-III, WASI), objective psychological (e.g., MMPI-2, MCMI-III), and projective psychological (e.g., Rorschach, TAT). Interns administer, score, and interpret the appropriate tests, then prepare reports integrating findings and offering recommendations for future treatment.

**PSYCHOEDUCATIONAL CLASSES:** These short-term didactic classes follow a set curriculum focusing on specific topics. Classes vary by semester, but have included: Anger Management, Communication, Men’s Issues, Understanding Mental Disorders, Group Therapy Basics, and Mindfulness. Interns will serve as primary facilitator during their second semester with us, and have the option of developing a psychoeducational class.

**SUPERVISION:** You will receive at least one hour of supervision each week, with the Training Coordinator or one of the other licensed psychologists on staff.

*To view the SVP law, please see RSMo 632, Sections 480-513 at the following URL: http://www.moga.state.mo.us/STATUTES/C632.HTM*

Revised LSM 4/08
APPLICATION
INFORMATION
**Requirements for Application**

An applicant must be a **candidate for a doctoral degree** and enrolled in an **APA accredited clinical or counseling psychology graduate program**. We seek cultural diversity among our applicants. Our most competitive applicants have completed at least ten comprehensive psychological assessments and have had experience with a variety of treatment modalities and client populations.

All applicants are expected to have completed coursework in personality theories, psychopathology, administration and interpretation of objective personality tests and cognitive ability tests, and the theory and practice of psychotherapy. Applicants also are expected to have completed relevant practicum experience in clinical settings and to have completed a minimum of five comprehensive psychological assessments integrating both cognitive and personality measures. Variety of experience with diverse populations is highly desirable.

The University of Missouri – St. Louis and the Missouri Department of Mental Health both require a background check for abuse/neglect and criminal history. In addition, the Missouri Department of Mental Health also requires a drug screen for all interns. Interns must initiate these screening processes soon after the match. The Training Director will guide interns through these processes. Failure to pass any of these screens will abrogate the obligation incurred through the Match and result in dismissal from the internship.

**Financial Support and Employee Benefits**

There are four fully funded internship positions available. The monthly pay for this position is $1,458.33 (17,500 yearly). In addition, as University of Missouri – St. Louis employees, your benefits will include:

a. **Vacation/Sick Leave:** 22 working days per year to use for vacation or sick leave. Please note: You will not be reimbursed for any unused leave at the end of the internship.

b. **Health Insurance:** Employees and their eligible dependents are offered two health insurance options with substantial subsidy from the University of Missouri.

c. **Holidays:** 8 paid holidays annually.

d. **Life Insurance:** The University of Missouri offers a basic term life insurance (1 times annual salary) plan at no cost and there are other options to purchase additional coverage.

e. **Cafeteria Plan:** An optional payroll deduction savings plan which permit employees to set aside a portion of their salary on a tax-free basis to be reimbursed for certain medical, child and dependent care expenses.

f. **Elective Benefits:** Vision, Dental, Long Term Disability, Long Term Care, Credit Union, Deferred Compensation, Paid Military Leave, COBRA, and Retirement Plan.
HOW TO APPLY

Formal application materials should be submitted as early as possible. Completed applications must be received by November 15, 2008, to be considered for the following internship year. St. Louis Psychology Internship Consortium participates in the APPIC Match Program and abides by APPIC Guidelines in intern recruitment and selection. Applications must include the following materials:

1. Completed APPIC Application for Psychology Internship (1 copy)  
   www.appic.org/;
2. Official transcripts for all graduate coursework (1 copy);
3. The APPIC Verification Form from the Director of Clinical Training documenting that you are a candidate for internship, and that internship is a required component of your doctoral program (1 copy);
4. Three letters of reference from professors or clinical supervisors who are well acquainted with your clinical experience and skill (1 copy of each);
5. A resume of your professional and practicum experience, including current interests in the area of clinical psychology (1 copy);
6. Two samples of your written professional work. One should be a psychological evaluation that includes psychological testing; the other should be a therapy conceptualization and summary for a course of treatment (1 copy of each).

By December 15, 2008, all applicants will have been sent a letter from the Training Director notifying them of whether or not they have been selected for an interview.

Completed application materials and inquiries about the program or interviews should be addressed to:

Deana L. Jefferson, Ph.D.  
Director of Training  
St. Louis Psychology Internship Consortium  
c/o Psychology Department, 325 Stadler Hall  
University of Missouri – St. Louis  
One University Boulevard  
Saint Louis, MO 63121  
Telephone: (314) 516-5825
SLPIC

STAFF
COMMUNITY PSYCHOLOGICAL SERVICE

ROBERT N. HARRIS, Ph.D., is the Director of the Community Psychological Service. Dr. Harris is a Missouri Licensed Psychologist/Health Services Provider and a Clinical Professor in the Department of Psychology at UM-St. Louis. He teaches graduate courses in cognitive and personality assessment, ethics, and provides psychotherapy supervision to Psychological Trainees. He received his B.A. (1981) in Psychology, and an M.A. (1981) in Sociology from Stanford University, and his M.A. (1984) and Ph.D. (1986) in Clinical Psychology from the University of Kansas. He interned in the Department of Psychiatry, University of Texas Health Science Center at San Antonio. He has worked in inpatient, residential and outpatient settings with children, adolescents and adults. Clinical interests include psychological assessment, Attention-Deficit/Hyperactivity Disorder in children and adults, and systemic and psychodynamic psychotherapies.

DEANA L. JEFFERSON, Ph.D., a Clinical Assistant Professor in the Department of Psychology at UM – St. Louis, is the Director of Internship Training for the Saint Louis Psychology Internship Consortium and Assistant Director of Community Psychological Service. Dr. Jefferson provides psychotherapy and assessment supervision to Psychological Trainees in the doctoral program at UM – St. Louis and to interns, teaches undergraduate courses, and conducts psychological evaluations at Community Psychological Service. She received her B.A. (1997) in Psychology from Southern Connecticut State University and her M.A. (2001) and Ph.D. (2005) in Clinical Psychology from UM – St. Louis. Dr. Jefferson interned in the Department of Psychiatry, Louisiana State University Health Sciences Center at New Orleans. She has worked in inpatient and outpatient settings with children, adolescents and adults. Clinical interests include psychological assessment, personality disorders, psychological trauma, and interpersonal and psychodynamic approaches to psychotherapy.
MARGARET CRONER, M.A./L.P.C., Intake Services Coordinator for Hawthorn, received her B.S. in Education from Miami University in Oxford, Ohio, and her M.A. (1986) in Counseling Psychology from Lindenwood College, St. Charles, Missouri. Margaret is a Licensed Professional Counselor in the State of Missouri who has expertise in intake assessment and referral. Clinical interests include individual therapy using an eclectic approach in which a client-centered modality is based on object relations theory and cognitive behavior interventions.

MARLA LIBERMAN, Ph.D., Internship Training Coordinator for Hawthorn, Licensed Psychologist, received advanced degrees from the University of Illinois and St. Louis University, and completed a Clinical/Community Internship at UMDNJ-Rutgers Medical School. Social Learning, Psychodynamic and Bowenian orientations inform her work and expertise in trauma recovery. Special interests include tacit strategic interventions, the pragmatics of using language to regulate boundaries in psychotherapy; diagnostics with consideration of phenomenal experience and treatment-directing case formulation. Optimizing the use of the Rorschach specifically and using test batteries to cross-validate hypotheses generated from individual test results is a passion actively shared with interns, typically resulting in their new or renewed enthusiasm for assessment.

SHANNOON MORGAN-GILLARD, Psy.D., is a licensed clinical psychologist working at Hawthorn Children’s Psychiatric Residential Program and in private practice. She completed her psychology internship with the St. Louis Psychology Internship Consortium and her Post-Doctoral Fellowship in forensic Rehabilitation at the St. Louis Psychiatric Rehabilitation Center. Dr. Morgan-Gillard is experienced in working with all ages of clients, in a variety of settings including outpatient clinics, inpatient acute care and long-term/residential psychiatric hospitals, college counseling and career centers, and forensic psychiatric hospitals. Dr. Morgan-Gillard’s areas of interest include working with clients with depression, anxiety, aggression and behavior disorders, and substance abuse disorders; conducting psychodiagnostic and psychoeducational assessments; and supervising students in therapy and assessment.

Dr. Morgan-Gillard is experienced in working with clients with severe mental illness, and clients with comorbid clinical, substance abuse, and personality disorders. She has experience conducting evaluations of AD/HD and learning disability, affective, anxiety and psychotic disorders, risk for violence and aggression, and eating disorders. She has extensive experience conducting psychoeducational and psychotherapeutic groups on a wide range of topics including building character and values, managing mood disorders, minimizing the risk of aggression, mental illness relapse prevention, substance abuse relapse prevention, anger management, and stress management.

ROBERT SCHNIDMAN, Ph.D., is a clinical psychologist with over 25 years of psychotherapy and psychological testing experience. He received his B.A. (1973) from University of Missouri-Columbia; M.A. (1975) in Clinical from Indiana State; Ph.D. (1979) in Clinical from University of Southern Mississippi and is licensed in Missouri. As an inpatient psychologist at Hawthorn Children’s Psychiatric Hospital he provides individual, group, and family therapy as well as psychological evaluations and intern supervision.
METROPOLITAN ST. LOUIS PSYCHIATRIC CENTER
PSYCHOLOGY FACULTY

DEBRA A. LUECHTEFELD, Psy.D., a Licensed Psychologist and certified Health Service Provider, is the Internship Coordinator for MPC. She received her doctorate from Forest Institute of Professional Psychology and has extensive experience working with severely mentally ill adults and adolescents. She is the Chairperson of the Patient Safety Committee and a member of both the Provision of Care Committee and the Quality Council. She is also the coordinator of MPC’s team for responding to staff assaulted by patients. Her clinical interests include Schizophrenia and schizophrenia-spectrum disorders, personality disorders and group psychotherapy.

WILLIAM C. PETERSEN, Ph.D. is a Licensed Psychologist and certified Health Service Provider at MPC. He received his Ph.D. in Counseling Psychology from the University of Missouri-Columbia in 1990. He serves on the Board of Inquiry, is a member of the Environment of Care Committee, and currently co-chairs the Programming Taskforce that explores needed changes in facility groups and other programming areas. He is the psychologist on a special intermediate unit where he has developed a unit wide level system and behavior management program with a strong emphasis on rewards. He also specializes in the treatment of those with PTSD, trains interns in this specialty and his current goal is to collect outcome data on the PTSD protocol he has developed.

LAURA R. TISHEY, Psy.D., is a Licensed Psychologist at MPC. She received her Doctorate in Clinical Psychology from the Illinois School of Professional Psychology in Chicago, Illinois. She presently serves as the Chairperson for the Patient Rights Committee and is a member of both the Quality Council and Earlene’s Team, a team that responds to staff assaulted by patients. Her clinical experience has focused mainly on working with chronically and severely mentally ill adults in both inpatient and outpatient settings. In addition, her interests include substance abuse relapse prevention and psychopharmacology.
ST. LOUIS PSYCHIATRIC REHABILITATION CENTER
PSYCHOLOGY FACULTY

MICHAEL ARMOUR, Ph.D., is a licensed Psychologist, a Certified Forensic Examiner, and the Unit Director of the Forensic Pretrial Program. He completed his Ph.D. in clinical psychology from Purdue University in 1984. He previously worked at Malcolm Bliss MHC and at St. Louis State Hospital on the Forensic Evaluation Service. His clinical interests include pretrial evaluations, reliability, and validity issues regarding diagnoses, and psychological assessment.

CHERYL D. CANON, M.A., is a licensed Psychologist and works with Specialized Forensic Services and the Cognitive-Behavioral Program. She completed her B.A. and her M.A. in clinical psychology from Eastern Illinois University in 1979 and 1981 respectively. Professional interests include sexual abuse detection and treatment, domestic violence, stress management and treatment of multiple personality disorder. She has experience in a variety of settings (Director of Psychological Services in a private M.R. facility) with an emphasis on treatment and detection of sexual abuse, domestic violence, and marital therapy. She also presented stress management workshops in industrial and corporate settings.

MEENA DHAWAN, Ph.D., is a licensed Psychologist and works with the Centralized Cognitive Rehabilitation Program. She completed her M.A. from the University of Pittsburgh in 1975 and Ph.D. in cognitive psychology from Delhi University, India in 1985. Before joining SLPRC she taught at Delhi University, was a research associate in the department of neuropsychology at the Washington University School of Medicine, and a clinical psychologist at the Southeast Missouri Mental Health Center in Farmington, Missouri. Current interests include the utilization of neuropsychological test results in designing individual treatment plans, and individual and group psychotherapy utilizing a cognitive-behavior approach.

LISA ELLIS, Ph.D., is a licensed Psychologist, the Director of Psychology, and works with Specialized Forensic Services. She completed her B.A. from Clemson University in 1988 and Ph.D. in clinical psychology from the University of Missouri-St. Louis in 1996. She completed her internship with the Consortium and a postdoctoral fellowship in Forensic Rehabilitation at SLPRC. Her professional interests include the treatment of delusions, personality disorders, women’s issues, supervision, and risk assessment.

MARK A. FELCHLIA, Ph.D., is a licensed Psychologist and works with the Cognitive-Behavioral Program and is the Internship Training Coordinator for St. Louis Psychiatric Rehabilitation Center. He completed his M.A. from Southern Illinois University-Edwardsville in 1981 and Ph.D. in clinical psychology from St. Louis University in 1992. Clinical interests include individual therapy in long-term treatment settings, the impact of involuntary treatment on the change process, competency to stand trial and treatment to restore competency, and the psychologist’s role while working with a multidisciplinary team.
KAROL ANN KIEL, M.A., is a licensed Psychologist and works with the Cognitive-Behavioral Program. She completed her B.A. from St. Louis University in 1978 and her M.A. in psychology from the University of Missouri-St. Louis in 1988. Clinical interests include cognitive-behavioral treatment of affective disorder, work with borderline personality disorder, development of responsibility therapy programs with offender populations, and treatment of sex offenders.

LILY RAYMOND, Ph.D., is a licensed Psychologist and works with Specialized Forensic Services. She completed her B.A. from Notre Dame in 1984 and her Ph.D. from the State University of New York-Albany in 1991. She completed her internship here during the first year of the consortium model and was the first Post Doctoral Fellow in Forensic Psychology at St. Louis Psychiatric Rehabilitation Center. Her clinical interests and activities include risk assessment for violence, participating on the Forensic Review Committee, providing therapy focused on prevention of future violence, and providing group and individual therapy for forensic clients with varying needs, diagnoses, levels of functioning, and criminal histories.

RICHARD SCOTT, Ph.D. is a licensed Psychologist, a Certified Forensic Examiner, and works with the Forensic Pretrial Program. He completed his B.S. in Psychology and Philosophy from Bradley University in 1983 and his M.S.(R) and Ph.D. from St. Louis University in 1989 and 1991 respectively. His interests include psychological and forensic assessment, personality disorders, ethics, and training. He employs a prescriptive approach to therapy using supportive psychodynamic therapy and cognitive interventions.

MARILYN TURNER, Ph.D., is a licensed Psychologist and works with the Dual Diagnosis (Mental Illness/Substance Abuse) and Transitional Rehabilitation programs. She completed her B.A. from the University of Arizona in 1976 and her Ph.D. from the University of Missouri-St. Louis in 1983. Her current interests include treatment of severe and persistent mental illness, lesbian and gay issues, accreditation standards compliance, and systems design and functioning.
CHILDREN’S ADVOCACY SERVICES OF GREATER ST. LOUIS

JERRY H. DUNN, Ph.D., is the Executive Director of Children’s Advocacy Services of Greater St. Louis (CASGSL) and oversees the clinical, forensic, research and training activities of the agency’s two sites. Dr. Dunn is a licensed psychologist and is an Assistant Clinical Professor in the Department of Psychology at University of Missouri-St. Louis. Her clinical and research interests involve assessment and treatment of high-risk children and their family members in community and school based settings. Dr. Dunn received her doctorate in Clinical Psychology at the University of Missouri - St. Louis, interned with the St. Louis Psychology Internship Consortium and completed her post-doctoral fellowship at the Community Psychological Service. Dr. Dunn maintains active membership in child centered organizations at the local, state and federal levels. She serves on the Advisory Council for the St. Louis Family and Community Partnership, works with the Leadership Team for the St. Louis Family Justice Center, sits on the Board of Directors for Missouri KidsFirst and acts as the agency liaison to the National Childhood Traumatic Stress Network.

MATTHEW D. KLIETHERMES, Ph.D., is the Manager of Clinical Services for Children’s Advocacy Services of Greater St. Louis (CASGSL). Dr. Kliethermes is a Missouri Licensed Psychologist/Health Services Provider and an Assistant Clinical Professor in the Department of Psychology at UM-St. Louis. He provides direct clinical services to children and families who have been exposed to trauma and conducts clinical supervision with psychological trainees at CASGSL. He received his B.S. in Psychology at Truman State University (1996) and his M.S. (2000) and Ph.D. (2003) in Clinical Psychology at Saint Louis University. He interned at La Rabida Children’s Hospital in Chicago, IL and completed his postdoctoral fellowship at the Center for Trauma Recovery at UM-St. Louis. He has extensive training and experience working with children exposed to trauma and clinical interests include evidence-based treatment for child trauma, complex trauma in children and adolescents, and traumatic grief.

MEGAN M. SCHACHT, Ph.D., is an Assistant Clinical Professor and the Manager of Clinical Operations with the Children’s Advocacy Services of Greater St. Louis (CASGSL) at the University of Missouri – St. Louis. She received her bachelor’s degree in Psychology from Illinois College in Jacksonville, IL. She attended graduate school in clinical psychology at the University of Missouri – St. Louis and received a doctoral degree with an emphasis in child clinical psychology. Dr. Schacht completed a pre-doctoral internship at Aurora Mental Health Center in Aurora, CO where she provided psychological services with the Adolescent Intensive Outpatient team who provided services to adolescents who were in foster care, recently hospitalized, or involved with juvenile justice. Dr. Schacht continues to provide direct clinical services to children and adolescents at Children’s Advocacy Services, but also serves as the agency’s Manager of Clinical Operations. She has special professional interest in the areas of complex trauma, sexual abuse, Trauma-Focused Cognitive-Behavioral Therapy (TF-CBT), Integrated Treatment of Complex Trauma (ITCT), Structured Psychotherapy for Adolescents Responding to Chronic Stress (SPARCS), psychological assessment of children and adolescents with trauma histories, general psychological assessment, and mental health administration.

NATALIE H. WILCOX, Ph.D. is a psychologist at the Children’s Advocacy Services of Greater St. Louis (CASGSL). She provides individual, family, and group therapy to children, adolescents and their non offending caregivers. Dr. Wilcox received her doctorate in Counseling Psychology from the University of Missouri Kansas City and completed her internship at the
Family Service and Guidance Center in Topeka Kansas. Dr. Wilcox joined CASGSL following completion of the APA Accredited post-doctoral training program at the University of Oklahoma Health Sciences Center with emphasis areas in pediatric psychology and child maltreatment. During her fellowship, Dr. Wilcox participated in and graduated from the Interdisciplinary Training Program at the University of Oklahoma Health Sciences Center that provides specialized training in child maltreatment issues to advanced students in psychology, medicine, social work, law, dentistry, and physical/occupational therapy. She also received specialized training in Parent-Child Interaction Therapy (PCIT) and a manualized and evidence based treatment for Children with Sexual Behavior Problems. Her clinical and research interests include assessment and treatment of children and adolescent victims of child maltreatment, treatment of pre-school and school age children with sexual behavior problems, behavior and emotional problems resulting from exposure to domestic violence, and attachment issues related to the experience of child maltreatment. In addition to her clinical responsibilities, Dr. Wilcox is the Project Director for the Center’s Children with Sexual Behavior Problems program, supervises graduate students and provides training to area professionals in topics related to child maltreatment.
JOEL EPSTEIN, PhD is a Research Associate Professor. He received his doctorate in clinical psychology from the University of South Carolina and completed his internship at the Houston VA Medical Center. Dr. Epstein’s dissertation examined the utility of computer-generated reports for MMPI interpretation. His current interest lies in the development of interactive multimedia and web-based applications for public education. Dr. Epstein’s first program was Mental Health Studios, an interactive multimedia program designed to educate the public about mental and addictive disorders. The program is now part of a permanent exhibit at the St. Louis Science Center. Dr. Epstein’s second program, ATOD-TV, is designed to teach the public about substance abuse. His third program, Cracking The Skull, is an interactive movie about the brain and brain trauma. His fourth program, The Doubles, in which he developed a substance abuse education curriculum for 3rd & 4th graders, compared delivery via CD-ROM, Internet, Videotape, or Workbook. Dr. Epstein has also been using the Internet as a mechanism to collect data for various psychological surveys. His most recent project was a NIDA-funded grant that developed a substance abuse education curriculum for 4th, 5th, and 6th grade African-American children and examined the utility of delivering interventions through faith communities.

MATTHEW HILE, PhD is a Research Associate Professor and Director of the Institute’s Behavioral Informatics Program. Trained at the University of Kentucky in clinical and community psychology. Dr. Hile served as Chief Psychologist and later Unit Director of the dual diagnosis treatment units of the St. Louis Developmental Disabilities Treatment Center. He completed a two-year postdoctoral fellowship with the Missouri Institute of Psychiatry (now MIMH) before joining the faculty. A FIRST Award from NIMH allowed Dr. Hile to develop the Mental Retardation-Expert, an automated decision support system to help clinicians treat severe behavior problems in individuals who are mentally retarded and/or developmentally disabled. More recently, he has developed the Clinical/Management Information System for the assessment and tracking of persons in the mental health system (C/MIS) and Initial Standardized Assessment Protocol (ISAP) for assessing and following substance abusers. ISAP is used to assess and measure change by all of Missouri’s publicly funded substance abuse treatment programs and in other centers across the country. Focusing on behavioral informatics, his current research interests are web-based self-help training, internet based support communities, practical outcome measurement and reporting, graphic data representations, tools to help behavioral health staff become more effective, and client-service matching.
MISSOURI SEXUAL OFFENDER TREATMENT CENTER FACULTY

ALAN BLAKE, M.S., is a Missouri licensed psychologist and Chief Operating Officer of MSOTC. His BA (1972) is from Ottawa University, Ottawa, Kansas. He earned an MS (1972) from Kansas State Teachers College, Emporia, Kansas in Student Personnel Services and Counseling in Higher Education, and an MS from Emporia State University, Emporia, Kansas (1978) in Psychology. As a public sector psychologist he has been a forensic psychologist at Kansas State Security Hospital, Larned, Kansas, assisted in the development and implementation of Missouri Sexual Offender Program (MoSOP), Missouri Department of Corrections, has been an inpatient staff psychologist in acute, long term care and forensic areas of St. Louis State Hospital, supervised psychologists preparing for licensure, and served as a consultant for the Bureau of AIDS Prevention, Missouri Department of Health. As an administrator within the Department of Mental Health he has participated in development of programming for long term and forensic populations, the development of the Missouri DMH Forensic Manual, served on statewide forensic and risk management policy committees, and served as chair of the DMH Eastern Region Forensic Committee. He has provided services to the community in private practice through Stress Management Consultants and the Center for Creative Change, Webster Groves, Missouri, with an emphasis on treatment of gay and lesbian populations. His primary treatment approach is cognitive-behavioral.

JONATHAN ROSENBOOM, Psy.D., is a Missouri licensed psychologist and Director of Behavioral Treatment Services at MSOTC. He is also a certified psychological health services provider. He earned his Doctor of Psychology degree in Clinical Psychology from Baylor University in 1984. Dr. Rosenboom was a psychologist, certified forensic examiner, Director of Psychology Services and Assistant Superintendent-Treatment at Malcolm Bliss Mental Health Center. In addition, Dr. Rosenboom was the Clinical Director at Hawthorn Children’s Psychiatric Hospital, the Chief of Mental Health Services for the Missouri Department of Corrections (MoDOC) and the Director of Behavioral Health Services for the MoDOC. His clinical interests include psychological testing, ego psychology and development, depressive disorders and personality disorders.

LINDA MEADE, Ph.D. (Linda.Meade@dmh.mo.gov) is a Missouri licensed psychologist, the Director of Psychology, and the Internship Training Coordinator for the Missouri Sexual Offender Treatment Center. Dr. Meade earned her Ph.D. in clinical psychology from the University of Missouri-St. Louis in 2001. She has worked with both perpetrators and victims of violence at the VA Hospital in Denver, CO, the Center for Trauma Recovery at UMSL, and the St. Louis Psychiatric Rehabilitation Center, and completed her postdoctoral residency in the Anxiety Disorders Clinic at the Behavioral Medicine Institute. She currently facilitates the Emotional Integration therapy group, based on a model that incorporates affective and experiential as well as cognitive and behavioral elements. Dr. Meade also has several years’ experience in business and marketing, including account management, copywriting and video production, and coordination of special events. Clinical interests include the role of negative emotional states in sexual offending and treatment, positive psychology, and the integration of traditional and non-traditional treatment approaches. Her approach to psychotherapy combines psychodynamic, humanistic, and cognitive behavioral elements.
GENIE BONTE, M.A., is a Missouri licensed psychologist at MSOTC and a certified Psychological Health Services provider. Ms. Bonte received her B.A. in psychology from Mount Holyoke College in 1969, and completed most of her doctoral requirements in Clinical Psychology from Washington University in St. Louis. She worked at the St. Louis Psychiatric Rehabilitation Center for over 33 years, primarily providing services for those identified as severely and persistently mentally ill. Ms. Bonte also worked as a Psychology Supervisor, and Team Supervisor for the Social Learning Program. In the 1990’s she spent 5 years coordinating Staff Development Services for the Eastern Region. Clinical interests include initial diagnostic assessment, assessment throughout the treatment process including forensic risk evaluations, and the treatment planning process.

LYNNE EASON, M.Ed., is a Missouri licensed psychologist and senior staff psychologist at MSOTC. Ms. Eason received her Master’s degree in Counseling Psychology from the University of Missouri-Columbia, and has worked with hospitalized chronically mentally ill for over 15 years. She worked for Annie Malone Children’s Home as a therapist for families and victims of child abuse and neglect for 2 years. Ms. Eason also has worked as a therapist/program director for group homes for those with mental retardation and developmental disabilities for over 6 years. She currently facilitates two sex offender process groups at MSOTC and has taught a number of psychoeducational classes as well. Clinical interests revolve around therapy adaptations needed for serving those with serious mental illnesses, intellectual challenges, developmental disabilities, and geriatric issues.

BRIDGET GRAHAM, Psy.D., is a Missouri licensed psychologist at MSOTC. She received her Doctorate in Clinical Psychology from Nova Southeastern University, interned at the St. Louis Psychology Internship Consortium, and completed her post-doctoral residency at MSOTC. Dr. Graham currently co-facilitates two process groups at MSOTC. Her clinical interests include sex offender treatment, Antisocial Personality Disorder, psychopathy, expert witness testimony, competency to stand trial and criminal responsibility evaluations.

SUJATHA RAMESH, Ph.D. is a California and Missouri licensed psychologist at MSOTC. Dr. Ramesh received her doctorate in Counseling Psychology from the University of Southern California, interned at the San Bernardino County Department of Behavioral Health, and completed her post-doctoral training at the University of California-Riverside Student Counseling Center. She currently facilitates a process group and co-facilitates another process group at MSOTC. Dr. Ramesh worked as a psychologist in the Children’s Advocacy Services of Greater St. Louis, which serves children and adolescents who have experienced trauma. Currently, she also facilitates group therapy in the St. Louis Family Courts for youth who exhibit sexually harmful behavior. Dr. Ramesh incorporates psychodynamic and cognitive-behavioral approaches in her treatment. Her clinical interests include attachment issues, development processes related to trauma, and substance abuse.

URSULA MARSH, Ph.D., is a Psychology Resident at MSOTC. Dr. Marsh earned her Ph.D. in clinical psychology from the University of Missouri-St. Louis in 2007. She interned at the St. Louis Psychology Internship Consortium, where she worked in acute care inpatient settings with both adults and children. Her training also includes work with a wide variety of outpatient clients in a community mental health clinic and work with victims of violence at the Center for Trauma Recovery at UMSL. Dr. Marsh also has fifteen years of experience in the social service
field, working with abused and neglected children and their families and with an adult forensic population. Dr. Marsh currently facilitates a psycho-educational class and co-facilitates a process group at MSOTC. Her clinical interests include the impact of victimization on antisocial behavior, and the function of mindfulness in achieving therapeutic change.
Web-links to SLPIC Training Sites

Community Psychological Service
http://www.umsl.edu/~umslcps/

Hawthorn Children’s Psychiatric Hospital and Residential Treatment Center
http://www.dmh.missouri.gov/hcph/

Metropolitan St. Louis Psychiatric Center
http://www.dmh.missouri.gov/mpc/

St. Louis Psychiatric Rehabilitation Center
http://www.dmh.missouri.gov/slprc/

Children’s Advocacy Services of Greater St. Louis
http://www.stlouiscac.org/

Missouri Institute of Mental Health
http://www.mimh.edu

Missouri Sexual Offender Treatment Center
http://www.dmh.mo.gov/msotc/index.htm
LIVING IN ST. LOUIS

Training at SLPIC and living in St. Louis are enriched by the neighborhoods of the facilities in the Consortium and the cultural offerings of the metropolitan area.

Metropolitan St. Louis Psychiatric Center (MPC) is located in a modern, ADA-approved facility with a courtyard design, allowing patients and staff access and views of naturally landscaped areas during the day and is accessible by public transportation. The facility is adjacent to the “Central West End,” an area noted for its cosmopolitan atmosphere, unique shops and restaurants in a turn-of-the-century neighborhood and Forest Park, a 1,376-acre area containing many cultural and recreational opportunities.

Hawthorn Children’s Psychiatric Hospital is in an older part of St. Louis County, not far from the City boundary and close to the University of Missouri-St. Louis. Nearby is the Community Psychological Service located on the campus of the University of Missouri-St. Louis.

St. Louis Psychiatric Rehabilitation Center was originally built on spacious grounds in the tradition of state hospitals 150 years ago. The area is adjacent to the “Hill” neighborhood, known for its traditional Italian ethnic identity and the multitude of exceptionally good restaurants, bakeries and grocery stores. New facilities constructed on this same property opened in late 1997. Also located on the campus is the Missouri Institute of Mental Health, which is housed in the historic “Dome” Building.

The Missouri Sexual Offender Treatment Center is located 67 miles south of St. Louis in Farmington, Missouri.

St. Louis has experienced a burst of renovation as older neighborhoods have been rediscovered and revamped. There are also beautiful tree-lined suburbs built at the turn of the century that resemble small towns. A good highway system makes even the newest suburbs accessible to most SLPIC training sites within a half-hour commute. The MetroLink, a new light-rail system in operation since 1993 is currently expanding and provides a convenient alternate method of transportation.

The riverfront around the Arch has been redeveloped as an entertainment district with riverboats and restaurants in converted 19th century warehouses. Several major entertainment and shopping complexes have opened up in the past few years in the central business district. Cultural facilities abound with our nationally recognized St. Louis Symphony, theater, opera, Art Museum, Zoo, City Museum, Science Center, The History Museum, Butterfly House and the Missouri Botanical Gardens. In the summer there are Broadway musicals in The Muny’s outdoor amphitheater in Forest Park. The Verizon Amphitheater, which opened in May 1991, is a state-of-the-art outdoor facility that attracts the nations’ premier entertainers. During the rest of the year, top acts and touring productions play at the Fox Theatre, one of the largest 1920’s movie palaces. A tradition of St. Louis jazz and blues is carried out in music spots around town. The area’s many colleges and universities add to the cultural offerings.

St. Louis is a baseball city and the Cardinals consistently draw over two million fans every season to Busch Stadium. The St. Louis Blues play an exciting brand of hockey and the St. Louis
University Billikens bring thrilling college basketball to the City. Both teams play in the Scottrade Center opened in 1994. The St. Louis Rams (winners of the 2000 Super Bowl) play football in the recently built domed stadium.

A full range of seasons unfolds each year as St. Louis typically enjoys a long and beautiful autumn with picturesque hillsides covered with brilliant fall colors. A winter with several snowfalls evolves into two to three months of exquisite, cool, clear spring days followed by the hot months of summer. In the middle of the country at the confluence of the Mississippi and Missouri Rivers, St. Louis is a comfortable and friendly city with easy access to all parts of the nation.
APPLICATION

Use APPIC Application for Psychology Internship (AAPI) with Additional Information specified on Page 19.

The St. Louis Psychology Internship Consortium is a member of The Association of Psychology Postdoctoral and Internship Centers (APPIC) and abides by its policies with regard to intern selection and matching.

Prospective interns must register with National Matching Services, Inc. and match with our internship program to enter the 2008-2009 training class. In addition, prospective interns must agree to and pass background clearances and drug screening to participate in the internship program.
Association of Psychology Postdoctoral and Internship Centers

INTERNSHIP MATCHING PROGRAM

REQUEST FOR APPLICANT AGREEMENT PACKAGE

TO THE APPLICANT: If you have not yet requested an Applicant Agreement form and materials describing the APPIC Internship Matching Program for positions beginning in 2008, please complete this form immediately and send it to:

National Matching Services, Inc.
595 Bay Street
Suite 301, Box 29
Toronto, Ontario Canada M5G 2C2
Telephone: (416) 977-3431
Fax: (416) 977-5020

Please note, when mailing this form to the above address, be sure to affix sufficient postage to Canada.

Alternatively, you can request an Applicant Agreement package by completing and submitting the form available on the APPIC Internship Matching Program internet web site at www.natmatch.com/psychint

(Print or type information)

Last Name ____________________________ First Name ____________________________ Middle Initial

Street ____________________________________________________________________________ Apt. #

City ___________________ State ___________ Zip Code ________________________________

Country

Telephone: (_______) ___________________ Extension: ________________________________

Signature __________________________ Date ____________________________

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