Predoctoral Internship
Clinical Psychology
Neuropsychology 2016-2017
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Description of the Hospital, Health Care System and Department

Staten Island University Hospital Mission Statement
Staten Island University Hospital is dedicated to providing our community with the best possible quality care through continuous quality improvement efforts. We consider employees to be our greatest resource. We continually examine the way we do our work in order to make improvements and prevent errors. Exceeding the needs and expectations of our customers is the basis for all that we do.

Staten Island University Hospital
Staten Island University Hospital is part of the Northwell Health System, offering innovative robotic surgery, advanced cardiology procedures, an award-winning cancer center, and CARF and JACHO accredited rehabilitation services. We also conduct medical research in our state-of-the-art facilities and support the most influential and comprehensive residency program in the area.

Staten Island University Hospital is a 714-bed, specialized teaching hospital located in New York City's 5th and fastest-growing borough. Occupying two large campuses, plus a number of community-based health centers and labs, the hospital provides quality care to the people of Staten Island, the New York metropolitan region, and to patients from around the world.

The 17-acre north campus (475 Seaview Avenue, Ocean Breeze) features the architecturally beautiful six-story Tower Pavilion; home of the renowned Heart Institute of Staten Island. The Heart Institute rivals the best cardiac centers in the nation, and offers advanced cardiothoracic surgeries, including "continuous beating heart" surgery plus sophisticated invasive and non-invasive diagnostics.

The north campus also is home to the prestigious Nalitt Institute for Cancer and Blood-Related Diseases, which was New York State's very first freestanding ambulatory cancer care facility, and remains an innovator with leading-edge research protocols and a compassionate, caring ethic. Other vital north site locales include the multi-specialty Irving R. Boody, Jr. Medical Arts Pavilion, the hospital's Regional Burn Center with its deserved national reputation for pediatric
burn care, plus a Trauma Center, Center for Women's Health, and widely-acclaimed programs for high-risk pregnancies and maternal care.

The south campus (375 Seguine Avenue, Princes Bay) offers specialty programs that include Geriatric Psychiatry, the hospital's accredited Institute for Sleep Medicine, and a range of behavioral health and substance abuse services. Both campuses have 911-receiving Emergency Departments, and Staten Island's fully-modern, new Emergency Department and Education Center is currently under construction at the north site.

Founded in 1861, Staten Island University Hospital today is a member of the North Shore-LIJ Health System, and enjoys numerous academic and clinical affiliations and accreditations.

**Northwell Health System**

Northwell Health System formerly North Shore-LIJ Health System includes 21 award-winning hospitals and nearly 400 physician practice locations throughout New York, including Long Island, Manhattan, Queens and Staten Island. Proudly serving an area of seven million people, Northwell delivers world-class services designed for every step of your health and wellness journey.

Northwell Health System was founded in 1997 with the merger of the North Shore Health System and LIJ Medical Center, creating a healthcare network that now includes 21 hospitals, The Feinstein Institute for Medical Research, rehabilitation and skilled nursing facilities, a home care network, a hospice network, and progressive care centers offering a range of outpatient services.

Headquartered in Great Neck, New York, North Shore-LIJ is the largest integrated health system in New York State, based on patient revenue, and the 14th-largest healthcare system in the United States. Its service area encompasses more than seven million people in Long Island, Manhattan, Queens and Staten Island. With more than 47,000 employees, North Shore-LIJ is the largest private employer in New York State.
Rehabilitation Medicine Department

At the Rehabilitation Medicine Department at Staten Island University Hospital our physicians, neuropsychologists, occupational and physical therapists, speech language pathologists, recreation therapists, rehabilitation nurses, and support staff provide the highest quality patient care. Our department combines its services with:

- The Stroke Center
- Department of Orthopedics
- The Regional Burn Center
- The Heart Institute
- Nalitt Institute for Cancer and Blood Related Diseases

Our department's well-known programs include:

- A comprehensive 68-bed inpatient rehab unit for adults.
- Brain injury inpatient rehab for adults.
- Outpatient adult rehab in two locations.
- Outpatient pediatric rehab & Early Intervention through the NYC Department of Health & Mental Hygiene.

SIUH Rehabilitation Medicine is focused on consumer satisfaction. We continually enhance the quality of our services. We are recognized by:

- The Commission on Accreditation of Rehabilitation Facilities (CARF).
- The Joint Commission.
- The New York State Department of Health designates SIUH as the largest downstate center for the inpatient treatment of brain injury.

Neuropsychology Division

There are five neuropsychologists within the Department of Rehabilitation Medicine with expertise in a wide variety of neurological conditions affecting both adults and children. Specific areas of expertise include: brain injury and stroke rehabilitation, neuro-oncology, memory disorders, typical and atypical child development, learning disabilities, and persistent mental illness. Traumatic spinal cord injury, amputees, other neurological conditions, and pain management.
Goal of the Predoctoral Internship Program

The main objective of the Predoctoral Neuropsychology Internship Program at Staten Island University Hospital, Department of Rehabilitation Medicine is to provide the opportunity for interns to develop competency in the application of psychological and neuropsychological knowledge to the professional practice of psychology, with specific emphasis placed on clinical problems in a medical center setting. Since the setting for this internship is in the Rehabilitation Medicine Department, emphasis is on work with individuals with a range of physical, cognitive, emotional and behavioral disabilities.

The orientation and operation of the Neuropsychology Internship Program at Staten Island University Hospital is as a Scientist-Practitioner training program. To this aim, evidence-based practices are emphasized. The training model emphasizes supervised experiences in assessment, intervention, consultation, and other professional development activities that are sequential, cumulative, and gradually increased in complexity.

Neuropsychology Internship Training Program - Training Model

Interns are trained in assessment, consultation, individual and group therapy, cognitive remediation, and professional development, with the primary training method being experiential.

Training in assessment emphasizes comprehensive evaluation of cognitive functioning of individuals with neurological and developmental disorders. Interns learn effective interviewing techniques with neurologically-impaired patients and become proficient at test selection, administration, and scoring, as well as interpretation of results and oral and written communication of findings. Supervision emphasizes integrated conceptualization of theoretical models of adult and developmental neuropsychology, neuropsychological instruments and data.

Over the course of the 12 month training program, interns move from close supervision, mentorship, and intensive instruction to relatively autonomous functioning. Trainees will conduct both outpatient and inpatient evaluations utilizing a flexible battery approach based on the referral issue and age of patient. Trainees will engage in neuropsychological
consultation with other medical professionals, take part in multidisciplinary team meetings, didactic activities and clinical research.

The intention is to foster clinical psychologists in the area of rehabilitation psychology and clinical neuropsychology. The internship promotes development of interns’ clinical skills in multiple areas including brief and comprehensive psychological and neuropsychological assessments, individual, family and group psychotherapy, cognitive remediation, and interdisciplinary team consultation. These skills are developed through intensive supervision, experiential learning, and evidenced based didactics.

Approximately 50-60% of the intern’s time is devoted to direct clinical work, which will be split between the Outpatient and Inpatient services.

**Pediatric and Adult Outpatient Service**
Interns will complete in-depth psychological and neuropsychological assessments, provide individual psychotherapy and family education. The Outpatient Neuropsychology service treats adults and children presenting with a broad range of behavioral, developmental, learning and neurocognitive disabilities. Referrals to Outpatient Neuropsychology are received from a variety of sources including: the Rehabilitation Medicine Department, Adult and Pediatric Trauma Services, Adult Neurology, Developmental Pediatrics, Pediatric Neurology, Oncology, Neurosurgery, and professionals in the community.

Based on one’s training needs and specific interests, an intern can choose to focus primarily on either adult or pediatric cases. The Training Director selects the cases for each intern. Because it is not feasible to develop expertise in all the populations were serve, cases will be clustered so that the intern can develop a thorough understanding of several conditions, eg. Chari malformations, Traumatic Brain Injury, subcortical dementias, Autism etc.

**Inpatient Brain Injury and Rehabilitation Units**
Interns will also gain experience in performing bedside neurocognitive and behavioral assessments with acutely ill patients. This will include individuals with primarily cognitive disabilities (e.g., traumatic brain injury, stroke), and general rehabilitation patients who require physical rehabilitation following debilitating medical illnesses and/or surgical interventions. Interns will administer and interpret brief cognitive tests, provide supportive
psychotherapy and psychoeducation to patients and their families, co-lead cognitive remediation, patient and family support groups, and work collaboratively with the interdisciplinary rehabilitation team. In many instances, an intern will follow a patient through the entire continuum of care - from acute inpatient rehabilitation to outpatient to better understand the resolution and evolving nature of disability in our patients.

Neuropsychology Internship Training Program - Internship Hours

The training year begins in July and finishes the last Friday in June. 1750 clock hours are required for the completion of the internship in accordance with New York state licensure requirements. Full time hours will be accrued at the rate of 37.5 hours/week for a period not exceeding 12 months. Thus, interns may take a total of 20 days of personal time, which may include sick days, personal time or vacation days. However, if personal circumstances necessitate taking additional time, the intern’s training year may need to be extended to complete the necessary training hours.

Sample Schedule of Weekly Activities

The following is a general outline of weekly activities.

**Direct patient service (20-25 hours per week)** including: individual psychological assessments, individual neuropsychological assessments, individual psychological interventions, family interventions, and group psychotherapy.

**Supervision (2-4 hours per week).** Each intern will have clinical supervision to support planning assessments, analyzing data and providing oral and written feedback. Supervision will also emphasize the delivery of psychological services and include professional conduct, ethics and standards. Each intern will have a primary supervisor in the Outpatient service and a primary supervisor on the Inpatient unit. The intern will meet with each supervisor for one-hour each week and will participate in group supervision.

**Didactic Activities- (2-3 hours per week)** Interns will be required to attend 3-4 lectures per week, two of which are conducted by the training program and geared specifically for the interns (Journal Club and Neuropsychology Didactic Lecture series). The choice of the
remaining lectures will be determined by the intern’s interests and educational needs. The hospital offers grand rounds relevant to the training needs of beginning psychologists and physicians in Pediatrics, Neurology, General Medicine, Oncology, Neuroscience, Surgery and Psychiatry. The Neuropsychology Didactic series, the Journal Club and Neuroradiology Rounds are mandatory. In addition, interns will be required to attend brain cuttings as they occur.

**Readings.** Readings pertaining to clinical cases will be assigned. Interns will be expected to integrate readings and research articles into cases and present during supervision.

**Paperwork and Report Writing (10 hours).** Interns will have time devoted to case preparation, data scoring and report writing.

Below is an example of an intern’s Weekly Schedule:

**Table 1: Intern’s Weekly Schedule**

<table>
<thead>
<tr>
<th></th>
<th>Monday</th>
<th>Tuesday</th>
<th>Wednesday</th>
<th>Thursday</th>
<th>Friday</th>
</tr>
</thead>
<tbody>
<tr>
<td>8:00-9:00</td>
<td>Case Conference</td>
<td>Research</td>
<td>Outpatient Testing/Therapy</td>
<td>Third Thursday of the month- Neurology Rounds</td>
<td></td>
</tr>
<tr>
<td>9:00 – 10:00</td>
<td>Research</td>
<td>Outpatient Testing/Therapy</td>
<td>Paperwork</td>
<td>Medical Grand Rounds</td>
<td></td>
</tr>
<tr>
<td>10:00-11:00</td>
<td>Outpatient Testing/Therapy</td>
<td>Research</td>
<td>Pediatric Rounds</td>
<td>Outpatient Testing/Therapy</td>
<td></td>
</tr>
<tr>
<td>11:00 – 12:00</td>
<td>Outpatient Testing/Therapy</td>
<td>Neuroradiology Rounds</td>
<td>Neuropsychology Didactic Series</td>
<td>Paperwork</td>
<td>Outpatient Group Supervision</td>
</tr>
<tr>
<td>12:00 – 1:00</td>
<td>LUNCH</td>
<td>LUNCH</td>
<td>LUNCH</td>
<td>LUNCH</td>
<td>LUNCH</td>
</tr>
<tr>
<td>1:00 – 2:00</td>
<td>Outpatient Supervision</td>
<td>Journal Club</td>
<td>Paperwork</td>
<td>Paperwork</td>
<td>Paperwork</td>
</tr>
<tr>
<td>2:00 – 3:00</td>
<td>Outpatient Testing/Therapy</td>
<td>Outpatient Testing/Therapy</td>
<td>Inpatient</td>
<td>Inpatient</td>
<td>Inpatient</td>
</tr>
<tr>
<td>3:00 – 4:00</td>
<td>Paperwork</td>
<td>Outpatient Testing/Therapy</td>
<td>Inpatient</td>
<td>Inpatient</td>
<td>Inpatient</td>
</tr>
<tr>
<td>4:00-5:00</td>
<td>Paperwork</td>
<td>Outpatient Testing/Therapy</td>
<td>Inpatient- Supervision</td>
<td>Inpatient</td>
<td>Inpatient</td>
</tr>
</tbody>
</table>
Organization of Intern Training

Interns are assigned to both the Outpatient Clinic and Inpatient Unit to conduct assessments/consultations/therapy/groups. Training in both areas is a requirement of this program. An individualized training plan is developed jointly by the intern and the Training Director and takes into account the intern’s previous training experiences and future career goals. Within their area of focus, the interns will work with a variety of staff. The precise structure of training will vary due to the different service demands and training goals. Interns typically spend about 50% of their time in direct patient contact. The remainder of the time is devoted to report writing, supervision, research and didactic training.

In the Outpatient Clinic, each intern is expected to carry a case of 2-3 patients and complete 2-3 full neuropsychological reports monthly. On the Inpatient unit, each intern will gradually mirror the clinical duties of their supervising psychologist before assuming a caseload of 2-3 patients.

Hiring Process

Hiring is contingent upon successful completion of employee health screening, background check, and reference check. Successful completion of employee health screening will require passing a drug screening test, obtaining a PPD and being current on titers. Successful completion of background check requires fingerprinting and disclosure of any legal issues. If the candidate has a criminal history, it must be disclosed. Failure to disclose is a condition to deny employment. Following disclosure of legal history, there is an adjudication review of all offenses by the Health Care System. A determination is then made based on person’s past and their prospective job. Finally, failure to obtain references or a poor reference can result in failure to pass the pre-employment screening.

Internship Orientation

During the first two weeks of the internship year, a series of presentations is provided to all interns with a basic orientation to the hospital, library services, hospital policies and procedures, the department and the program as well as preparation for much of the clinical training they will undergo during the year. Interns receive guidance in the implementation of
our procedures, as well as area-specific presentations including an overview of commonly seen diagnoses, frequently used tests and basic interpretative guidelines.

**Individualized Training Plan**

The specific course of training is tailored individually to each intern’s particular training needs. Early in the internship year, the Training Director meets with each intern to review the intern’s prior practicum training experiences and self-assessment of professional training needs. The outcome of this review is to build a training plan across the following five categories: (1) assessment and consultation skills (e.g., interviewing, testing, independent case conceptualization, report writing, feedback to referral sources, etc.); (2) intervention skills (e.g., individual, family, or group psychotherapy, etc.); (3) populations and diagnoses (e.g., children, adolescents, adults, elderly, medical surgical, pediatric, psychiatric, neurological patients, etc.); (4) neuropsychological theoretical orientations (e.g., eclectic, hypothesis testing, process approach, Halstead-Reitan, Luria, etc.); and (5) other skills (e.g., supervisory experience, research involvement, public presentations etc.). These identified training targets serve as the guide that is used in determining the intern’s clinical training. The individualized training plan is reviewed on an ongoing basis and is updated based on the intern’s progress and input from the written and oral feedback from the intern’s training supervisors.

**Supervision Methods**

The intern’s experience of direct provision of clinical services occurs in conjunction with regular, ongoing (individual and/or group) supervision by a department neuropsychologist. It is generally preceded by opportunities for observational learning and guided participation. In addition, the clinical and supervisory experiences are supplemented with yearlong didactic experiences that address theories and methods of assessment/diagnosis and consultation, psychological interventions and their efficacy (including empirically supported treatment), ethics and professional behavior, and issues of cultural and individual diversity. Modeling and guided participation typify the primary teaching methods used. Each supervisor reviews the intern’s prior training so as to gauge the level and type of supervisory guidance required to meet the intern’s training needs.
Training Supervisors

Each intern will have a primary training supervisor on the Inpatient unit and in the Outpatient clinic. Based on the learning needs and specialty of staff, interns may change supervisors mid-year to enhance their learning. For both assessment and psychotherapy cases, the supervisor maintains responsibility for the case.

Expected Proficiencies

The essential clinical psychology skills in which all interns are expected to demonstrate competence by the end of internship include the following: (a) neuropsychological assessment including clinical interviewing (i.e., the development of an appropriate interpersonal contact that permits the gathering of information relevant to neurological and psychosocial factors that cause or maintain the patient’s presenting problem or symptomatology) and the selection, use, and interpretation of standardized neuropsychological tests and measures relevant to forming a diagnosis, conceptualization, or treatment plan for the presenting problem; (b) consultation and communication with other professionals regarding the contribution of psychological factors to the presenting problem or diagnosis and the availability of appropriate psychological intervention alternatives; (c) case conceptualization and report writing (i.e., the integration of interview data, test findings, and collateral sources of information into a coherent framework that allows for the communication of an accurate diagnosis and the development of an appropriate treatment plan); (d) psychotherapeutic intervention (i.e., the development and implementation of an appropriate treatment derived from a data-based case conceptualization and an awareness of the relevant empirical literature regarding the efficacy of various treatments for the presenting problem or diagnosis); (e) awareness of issues of professional ethics, legal issues, and individual and cultural diversity as they affect the practice of psychology; and (f) knowledge of the methods and contributions of research and scholarly inquiry as applied to the practice of psychology. Competence in the essential professional skills (appropriate to an entry-level position) within the designated area of interest is required for successful completion of the internship program. Competence is also expected for skills outside the intern’s designated area of focus. Systematic training in the targeted professional competencies is assured through the following activities: (1) the direct provision of clinical services that all interns accrue on their assessment/consultation and psychotherapy/supervision activities; (2) ongoing individual and group supervision; (3) the
four hours per week of involvement in research; and (4) the more than 150 hours per year of
didactic training that addresses theories and methods of assessment/diagnosis and
consultation, psychological interventions and their efficacy, strategies of scholarly inquiry,
ethics and professional behavior, and issues of cultural and individual diversity.