Doctoral Internship in Clinical Psychology

July 1, 2021 - June 30, 2022

Long Island Jewish Medical Center - Zucker Hillside Hospital
Division of Psychological Services

718-470-8390

Stewart Lipner, PhD
Director of Psychological Services, LIJ and NSUH Campuses

Elihu Turkel, PsyD
Director of Psychology Training and Adult Psychology Internship Track

Paul Mattis, PhD, ABPP-CN
Chief of Neuropsychology, Assoc. Director - Clinical Neuropsychology Internship Track

Stephanie Solow, PsyD
Assoc. Director - Clinical Child Internship Track
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OVERVIEW

The Doctoral Internship Program in Clinical Psychology at Long Island Jewish Medical Center - Zucker Hillside Hospital resides in a major academic medical center that is part of a larger health care system and which provides both medical and psychiatric services to patients across the life span. This professional environment affords a unique opportunity to build competencies in Health Service Psychology through training in many different clinical settings with various treatment and assessment modalities. The training program facilitates professional development in a collegial and multidisciplinary environment that values the diversity of backgrounds of our staff, trainees, patients, and larger community.

PROGRAM AIMS AND COMPETENCIES

The internship program aims to develop competencies in the following areas of Health Service Psychology consistent with APA Standards of Accreditation: II-2-a; IRC- C-8-I):

Profession-Wide Competencies
- Scholarly Inquiry and application of current scientific knowledge to practice
- Ethical and Legal Standards
- Individual and Cultural Diversity
- Professional Values and Attitudes
- Communication and Interpersonal Skills
- Assessment
- Intervention
- Supervision
- Consultation

Program-Specific Competencies
- Clinical Neuropsychology (Clinical Neuropsychology track)
- Clinical Child Psychology (Clinical Child track)

The three internship tracks may vary in the proportional emphasis placed on each of these competency areas. The internship is a 12-month long program; interns will receive attestation of their experience only after successful completion of the full 12-month program.
The Clinical Neuropsychology track of the Internship is designed to adhere to guidelines recommended by the Houston Conference on Specialty Education and Training in Neuropsychology (1998) and the inter-organizational Taxonomy for Education and Training in Clinical Neuropsychology (2017). The Clinical Child Psychology track of the Internship is designed to adhere to the published guidelines and recommendations for training in Clinical Child Psychology as articulated by the APA Division 53’s Board of Directors.

MISSION OF NORTHWELL HEALTH AND LONG ISLAND JEWISH MEDICAL CENTER

Northwell Health strives to improve the health of the communities it serves and is committed to providing the highest quality clinical care; educating the current and future generations of health care professionals; searching for new advances in medicine through the conduct of bio-medical research; promoting health education; and caring for the entire community regardless of the ability to pay.

Northwell Health aims to be a national health care leader, committed to excellence, compassion and improving the health of the community; to become the leader in providing quality health care which can be defined and measured; to improve the human condition by advancing disease-oriented, basic scientific and clinical research; to provide an exceptional learning environment; to act as a system and be recognized as the provider of choice which is operationally efficient and financially successful; to provide an environment in which patients, their families, and physicians are highly satisfied with the services provided through Northwell Health; to become the employer of choice through the development and support of a competent, motivated and productive workforce; to become an indispensable community asset by responding to identified health needs through education, advocacy, partnerships and programs which result in improved access to care and health outcomes; and to become the preferred hospital partner for physicians practicing in the service area.

Long Island Jewish Medical Center (LIJMC), one of the cornerstone facilities within Northwell Health, is a leader in providing patient-centered care while maintaining a focus on the highest quality of clinical outcomes. Its core values of caring, excellence, innovation and integrity serve as the foundation for the mission and ultimate vision of Northwell Health: “Be better tomorrow than we are today.”

As a part of Northwell Health, LIJMC strives to improve the health of the communities it serves and is committed to providing the highest quality clinical care, educating the
current and future generations of healthcare professionals, searching for new advances in medicine through the conduct of biomedical research, promoting health education, and caring for the entire community regardless of the ability to pay.

By embodying these guiding principles, LIJMC has fostered innovative and progressive approaches to providing a world-class patient experience while continually striving to improve the health of the communities we serve. This enduring commitment to a wellness-driven model of care has helped LIJMC become recognized as a premier regional destination for specialized healthcare services.

THE PROFESSIONAL SETTING

Although the Internship program is administratively housed in Zucker Hillside Hospital (Northwell’s largest psychiatric hospital), interns may have clinical placements at one of several Northwell facilities depending on their tracks and electives: Zucker Hillside Hospital, Cohen Children’s Medical Center, Long Island Jewish Hospital, North Shore University Hospital, and the Institute for Neurology and Neurosurgery. These facilities as well as the overarching system are described below.

Northwell Health
With over 70,000 employees, 23 hospitals, approximately 750 outpatient facilities, and 3,300 physician partners, Northwell is the nation’s third largest, non-profit, secular healthcare system, and New York State’s largest private employer and largest health care system. Northwell Health cares for people of all ages throughout Long Island, Queens, Manhattan, Westchester County and Staten Island – a service area encompassing more than seven million people. Northwell Health also conducts pioneering research at The Feinstein Institutes for Medical Research and has implemented a visionary approach to medical education highlighted by the Donald and Barbara Zucker School of Medicine at Hofstra/Northwell.

Long Island Jewish Medical Center (LIJMC): Long Island Jewish Medical Center offers world-class cardiology, cardiac surgery, thoracic surgery, orthopedics, head and neck oncology, urology, gynecology and vascular programs. Its 48-acre campus in New Hyde Park hosts three major facilities:

- Long Island Jewish Hospital
- Cohen Children’s Medical Center
Zucker Hillside Hospital

Long Island Jewish Hospital (LIJH) is a 524-bed, not-for-profit, tertiary care teaching hospital serving the greater metropolitan New York area. The primary focus is on the complete care of the patient, with a healing environment, compassionate hospitality and a collaborative team approach to ensure the best outcomes for its patients. In its advanced facilities for medical, surgical, dental and obstetrical care, LIJH's expert staff uses some of the most advanced diagnostic and treatment technologies available today.

Functioning as a regional medical resource, the hospital provides: (1) State-of-the-art facilities for adult medical and surgical care, coronary and emergency care including the Heart Institute and the Institute of Oncology, (2) Advanced equipment for diagnosis and treatment including Magnetic Resonance Imaging (MRI), Computerized Tomography (CT) and Radiography, linear accelerators, nuclear scanning, fiber-optic technology, microsurgery and laser surgery, (3) A broad range of government and philanthropy supported research programs in psychiatric illness, heart disease, cancer, arthritis and blood dyscrasias, (4) Approved regional centers for treatment of cystic fibrosis, hemophilia, muscular dystrophy, and epilepsy, (5) Inpatient, outpatient and community based renal dialysis services, and (6) A fully integrated psychiatric consultation-liaison service.

North Shore University Hospital (NSUH) North Shore University Hospital is a major academic tertiary care hospital, providing the full spectrum of clinical health care services for patients of all ages. It offers a wide range of specialty and subspecialty residency programs, postgraduate training programs and clinical fellowships for research and education.

- 738-bed teaching hospital on the 58-acre Sandra Atlas Bass Campus
- Academically affiliated with the Donald and Barbara Zucker School of Medicine at Hofstra/Northwell
- Employs more than 6,000 highly trained physicians, nurses and other medical staff

North Shore University Hospital provides leading-edge care in all medical specialties, including neurology, neurosurgery, open-heart surgery, orthopedic surgery, urology and maternal-fetal medicine. It continues to meet the needs of the community through exceptional primary health care while offering specialty programs such as the Katz Women’s Hospitals (one of two), for comprehensive, compassionate and superior care for women’s health issues. North Shore University Hospital also includes
the Comprehensive Wound Healing Center, focused on chronic wound care, the first and only kidney transplant center in Nassau and Queens Counties and the Center for Human Reproduction.

The Emergency Department at North Shore University Hospital is a New York State Designated Regional "Level One" Trauma Center. It offers the highest level of care to the most critically injured patients in the area. The physicians and nurses of the ED care for more than 90,000 patients per year and are available 24 hours a day, 7 days a week.

**Zucker Hillside Hospital (ZHH)** Zucker Hillside Hospital is Northwell Health’s nationally recognized behavioral health center known for its pioneering clinical, teaching and research programs. Zucker Hillside Hospital opened in 1927 with 40 beds. Today, the facility operates 221 inpatient beds and delivers approximately 250,000 outpatient visits. Its psychiatric inpatient service includes general adult units as well as specialized units for adolescents, college students, the elderly, and women. A Partial Hospital psychiatric program is available for adults and an enhanced outpatient treatment program for the elderly at risk. The Ambulatory Care Center includes a general psychiatric outpatient clinic and specialty programs in Dialectical Behavior Therapy, Affective Disorders, Phobic and Anxiety Disorders, Geriatric Psychiatry, Obsessive Compulsive Disorder, Perinatal Psychiatric Disorders, Bipolar Disorder, Substance Abuse and a Crisis Center. The Division of Child and Adolescent Psychiatry has a large ambulatory service that includes traditional outpatient psychiatric services and a specialty track providing cognitive behavioral treatment of child anxiety and related disorders (e.g., OCD, Tourette’s, Trichotillomania). Zucker Hillside Hospital also has established an extensive network of community-based mental health and substance abuse programs serving adults and adolescents. In 2013 the hospital opened a new, 116-bed, $120 million inpatient pavilion. This state-of-the-art, 130,000-square-foot facility houses six specialized units that discretely treat young adults and college students suffering from early phase psychosis and other serious conditions, including suicidal impulses and substance abuse; patients with major depression and bipolar disorder; women with gender-specific needs; adolescents with mood and severe behavior problems; and geriatric patients with later-life depression, psychiatric expression of physical illness and overwhelming behavioral disturbances that complicate Alzheimer’s disease and related dementias. Clinical rotations are available in some of these programs. A state-of-the-art Electroconvulsive Treatment (ECT) suite is also housed in the new building where approximately 7,000 treatments are performed annually. The hospital is networked to support a computerized behavioral health information system and clinical record allowing clinicians to easily share important patient data, facilitate access to the Internet
and reduce the burden of medical record documentation requirements. Zucker Hospital was included in the *U.S. News & World Report Best Hospitals 2013-2014* and is a National Institute for Mental Health designated *Clinical Research Center for Study of Schizophrenia*. You may listen to some of the highlights of the work at ZHH [here](#).

**Steven and Alexandra Cohen Children's Medical Center (CCMC)** is a tertiary care pediatric facility that was opened in 1983 as a resource for the care of acutely and chronically ill children. CCMC’s staff is dedicated to providing the very best care to meet the special needs of children, from premature babies to adolescents. Its 202-bed hospital opened in 1983 as the New York metropolitan area's only hospital designed exclusively for children. Today CCMC is the largest provider of pediatric health services in New York State, serving 1.8 million children in Brooklyn, Queens, Nassau and Suffolk counties. There is an active Consultation-Liaison Service and a specialized Eating Disorders Program. Psychology has a strong presence in the [Department of Pediatrics](#) (i.e., Hematology/Oncology and HIV services), in [Developmental and Behavioral Pediatrics](#) and in the [Division of Child and Adolescent Psychiatry](#).

**Institute for Neurology and Neurosurgery**
The Northwell *Institute for Neurology and Neurosurgery* is a premier provider of neurosurgical and neurological services in the region, offering world-class, compassionate patient care while contributing to advances in our field. With one of the largest programs for treatment of brain aneurysms and complex vascular disorders in the country, our neurosurgeons are leaders in endoscopic pituitary and skull base surgeries.

The Institute offers the expertise that allows for a collaborative approach to treating the entire spectrum of neurological disorders, including:

- Movement Disorders
- Epilepsy
- Benign and malignant brain tumors
- Brain aneurysms
- Stroke
- AVMs and other neurovascular conditions
- Spinal disorders
- Traumatic brain injury
- Headaches
- Neuromuscular conditions
- Alzheimer’s disease and other memory disorders
North Shore University Hospital has been awarded the Certificate of Distinction as a Primary Care Stroke Center by the Joint Commission for its outstanding program, which signifies compliance with the highest national standards for safety and quality care.

Northwell Health’s Institute for Neurology and Neurosurgery was established in 2006 and is a multidisciplinary continuum of neuroscience programs that combines medicine, scientific research and technology, clinical programs, surgical techniques and education to advance the diagnosis and treatment of neurological diseases and disorders. The Institute’s team of neurospecialists is dedicated to providing high-quality, world-class medical and surgical care, while maintaining the highest ethical standards. Including both the Departments of Neurology and Neurosurgery, clinical services are provided throughout the health system, including neuropsychology. The Institute has well over 50 neurology beds, which includes 10 dedicated to the Epilepsy Monitoring Unit and 6 to the Stroke Unit. There are also 16 Neurological ICU beds.

Research The Feinstein Institutes for Medical Research comprise the research branch of Northwell Health. Biomedical research has been a vital aspect of its two academic medical centers – North Shore University Hospital and Long Island Jewish Medical Center – since their establishment in the early 1950’s. Through their connection to the hospital system, the Institutes bridge the gap between biomedical research and patient care. The Institutes are composed of more than 4000 scientists and staff who work in laboratories and clinical research programs in collaboration with clinicians and patients throughout the many facilities of Northwell Health. Every year, more than 15,000 patients and volunteers participate in over 2,000 research studies.

Research at Zucker Hillside Hospital The internationally recognized research program at Zucker Hillside Hospital attracts trainees and visiting scientists from the U.S. and abroad. The hospital's inpatient, day hospital and outpatient facilities serve as sites for research investigation. Investigators and research staff are housed in a dedicated research facility and subsumed under the Feinstein Institutes for Medical Research. Comprehensive research facilities may be used by interns if applicable to their placements as time permits. The National Institute for Mental Health (NIMH) funds Zucker Hillside Hospital’s Intervention Research Center for the Study of Schizophrenia. The Center is one of only two such resources in the country and provides support for a number of NIMH funded studies of treatment in schizophrenia. Additionally, the National Institute of Mental Health, the National Institutes of Health and the American Recovery and Reinvestment Act have directed $40 million funding for a study called RAISE (Recovery After an Initial Schizophrenia Episode), a large-scale, research project that seeks to fundamentally change the way schizophrenia is treated by developing and
testing innovative and coordinated intervention approaches in the early stages of the illness. The study - of which about $25 million is earmarked for scientists at Zucker Hillside Hospital campus of The Feinstein Institutes for Medical Research involves two independent teams of researchers, one being led by Zucker Hillside/Feinstein scientists and another at Columbia University’s New York State Psychiatric Institute. Research is also conducted in bipolar disorder, depression, dementia, childhood behavioral disorders, epilepsy, and anxiety disorders. These studies are funded by the federal government, foundations, and the pharmaceutical industry. Psychologists play a prominent role in many of these studies.

The Health Sciences Library at the Long Island Jewish Medical Center is an integrated system that includes physical and electronic libraries the LIJMC and NSUH Hospitals. All employees of Long Island Jewish Medical Center, attending physicians on staff, students participating in current clinical rotations, and authorized volunteers are eligible for library privileges. The library is accessible for use of on-site collections and photocopying, or viewing of consumer health videos as well as via remote computer access through browsing and searching. Resources include Elijahcat, MEDLINE, OVID, PubMed, ACP Medicine & ACS, Federal Register, Surgery, StatRef, Cochrane Library, Dynamed, Micromedex, Pep Web, UpToDate, PsychInfo, Associations and Governmental/Healthcare Sites, MDConsult, Electronic and Print Journals, Books on Cultural Diversity, Consumer Health, Electronic Textbooks, and Health and General Reference and many other databases and resources which are continually updated.

The Division of Psychological Services at Long Island Jewish Medical Center and North Shore University Hospital/Manhasset The role of psychological services and the expansion of training opportunities for psychologists have paralleled the growth of mental health services. With the integration of psychiatric and psychological services based at NSUH into those at the Long Island Jewish Medical Center under the aegis of The Department of Psychiatry, programs and staff based at NSUH became part of the internship in clinical psychology at Long Island Jewish Medical Center, Zucker Hillside Hospital as of July 2007. Combined, over 30 psychologists based at Zucker Hillside Hospital and NSUH contribute to every aspect of patient treatment. Psychologists direct programs, provide patient care, supervise, teach, conduct research and consult in varied community settings. Psychologists typically work in consultation and collaboration with other professionals. In addition to our Internship in Clinical Psychology, there are APA-accredited post-doctoral clinical fellowships that include positions in Clinical Child Psychology and in Clinical Psychology with an emphasis in Geropsychology. Also, there are over 50 psychology externs receiving supervised
practicum training under the aegis of Zucker Hillside Hospital’s Division of Psychological Services.

OUR VALUES REGARDING DIVERSITY

Northwell Health provides services to a diverse clientele that mirrors the cultural richness of the New York City metropolitan area. Northwell Health clientele are diverse with respect to race, ethnicity, religious faith, sexual orientation, age, disability status, and life experience. We believe that diversity is a rich resource for personal and professional development. We value the diversity of our staff and trainees and believe that their many backgrounds strengthen our institution. The Long Island Jewish Medical Center serves Nassau and Suffolk counties as well as the borough of Queens, which is the most diverse county in the nation, with over 170 languages spoken inside the county.

Northwell Health promotes equal opportunity and non-discrimination and welcomes applications from all qualified students regardless of race, ethnicity, religious faith, sexual orientation, age, or disability status as defined by applicable law. Qualified members of minority groups that have historically been under-represented are especially encouraged to apply.

Several years ago the Division of Psychological Services formed a Diversity Training Council. The council is made up of psychology staff and trainees and aims at defining and promulgating best training practices to promote respect for diversity, to raise concerns and promote solutions. In addition, it provides a forum for mentorship and connection among a diverse group of staff and trainees. In the past two years the Council has sponsored mentor lunches devoted to women’s' career trajectory and mentorship. These forums were heavily attended, received strong feedback and more are being scheduled. The Diversity Council has been gaining momentum in terms of members and it coordinates efforts with the Northwell’s Office of Diversity and Health Literacy and Equity. In 2021, the Psychology Diversity Training Council was renamed CARE (Psychology Council for Anti-Racism and Equity) with an expanded focus on including psychology staff in addition to trainees. Updates and changes were implemented after reviewing and discussing feedback from our trainees and fellow staff
psychologists. At least one psychologist from each program serves on the Council. The expansion of the Council aims to:

- reinforce the idea that DEI initiatives are valued and prioritized by supervisors in all areas of training and service;
- demonstrate that DEI infuses all activities instead of constituting a separate process;
- require participation from people across varying levels of power and privilege;
- integrate DEI topics, education, and discussions throughout the Division and equip all staff psychologists with ways to address these issues;
- enhance equity and inclusiveness in the Division and workplace;
- increase involvement of staff psychologists and leaders in refining strategies for recruitment and retention of BIPOC trainees and staff.

Finally, Northwell Health has been named one of the nation's top health systems for diversity, ranking second nationally and No. 1 in New York State, according to DiversityInc's top [Hospitals & Health Systems for Diversity](https://www.diversityinc.com/) list (see “Top Hospitals and Health Systems”). Northwell made the list for the seventh straight year, jumping up the rankings from No. 5 a year ago. This was the second such honor this year for Northwell Health, which was named a *Fortune Best Workplace for Diversity*.

**OUR RESPONSE DURING COVID-19**

When COVID-19 struck New York in mid-March 2020, Northwell Health quickly mobilized to confront the pandemic by surging to treat an influx of patients as well as by developing and implementing methods to protect its health care providers. As the largest health care system – and the largest private employer - in New York State, Northwell with the guidance of CEO and President, Michael Dowling, worked closely with the governor’s office to treat and study the virus, launch research into therapeutics and outcomes and provide testing to the health care and larger community.

As New York went on “pause”, ZHH ambulatory services immediately transitioned to remote operations and developed methods to conduct and track intake appointments, individual and group therapy and medication management via several telehealth platforms. Staff on inpatient services staggered their schedules to reduce congestion and patient care was adjusted to adhere to social distancing. Patients were monitored
and those showing signs of infection were tested with positive cases transferred out either to the medical hospital or to specialty psychiatry units at other Northwell facilities. As a result, the infection rate for patients remained very low and staff remained safe (as antibody testing subsequently showed). Respite and reflection stations were set up on campus for the benefit of staff and a Coronavirus webpage tracked updated educational and policy information about the virus for Northwell staff.

During the early stage of the pandemic the decision was made for all interns to work remotely and this remained in place for the remainder of the 2019-2020 training year. Interns’ outpatient work, didactics and supervision were smoothly transitioned to video-based or telephone-based platforms and efforts were made to provide some connection to patients and families on inpatient units through staff-assisted video or telephone sessions. In addition, two of our lead psychologists with noted expertise in trauma work launched a large initiative to provide relief and support to the front line medical providers. Interns were eager to be involved in this by obtaining certification in Psychological First Aid (PFA) and Skills for Psychological Recovery (SPR) through online training provided by the National Child Traumatic Stress Network. Over 500 group and individual encounters with front-line staff took place. Individual and group supervision was provided and there was a weekly Zoom conference dedicated to presentations and discussions related to PFA/SPR. While relieved of the commute and protected from exposure to patients and staff, the interns had much to cope with, often balancing child-care and personal space issues with their workload; they managed to accomplish this with resilience, mutual support and flexibility.

During the 2020-21 training year, we temporarily restructured aspects of our sequence to accommodate a potential second surge. All interviews, didactics, supervision and meetings took place on Zoom or Microsoft Teams. As community positivity rates showed a sharp and sustained decline, the pool of vaccinated staff and patients grew, and standardized protocols for symptom monitoring and COVID testing were implemented, our internship program in 2021-22 came to resemble its pre-pandemic nature in many ways. At the present time, interns have a blended experience which combines on-site clinical assignments (e.g., on inpatient units) and remote work. Supervision aims to be in-person when possible and didactics allow for virtual attendance. All of our ambulatory services still provide telehealth services but this may be subject to change in the coming months. Interns are provided with the required PPE and any backup health services needed. All inpatients must test negative for COVID before being admitted and all staff and visitors are monitored (e.g., via thermal and mask detection units posted at entrance points as well as daily questionnaires). Our gym has been converted into a “Tranquility Space” so that all staff will be able to take a
few moments during their day to reflect and refuel. This Tranquility Space is a calming environment with access a Resource Station (with both system and local wellness guides and resources), a Self-Reflection Station (with coloring activities, a gratitude garden, mindfulness/journaling activities and more) and a Stretching Station (with yoga mats, blocks, stretching bands and other stress relief tools).

While we cannot predict the circumstances that will exist in the summer of 2022, we plan a return to the optimal training structure/sequence but will be responsive to changes. Many of the adaptations may remain, including social distancing, PPE and vigilant hand hygiene. We have learned a great deal about safety and treatment since the onset of this pandemic – Northwell has treated the most COVID patients in New York – and we will continue to adapt together and to put new safety precautions in place as needed.
THE DOCTORAL INTERNSHIP TRAINING PROGRAM

The Internship program began in 1966 with one half-time intern and in 2022-223 is expected to consist of a complement of 11 full-time interns in three clinical tracks: Six in the Adult Psychology Track, two in the Clinical Child Psychology Track, and three in the Clinical Neuropsychology Track. The program provides a core of clinical and didactic experiences emphasizing those skills and knowledge relevant to all Health Service psychologists. The specialized tracks offer additional experiences in their respective areas. This integration of general and specialized training is a particular strength of the Internship.

Our training mission is to facilitate the development of highly competent and ethical health service providers. Psychology internship training parallels the mission of Northwell Health, associated hospitals and the Division of Psychology. That is, the Division of Psychological Service’s commitment to service, education, research, and community access is seen in the division’s philosophy which is to “(1) utilize the most advanced techniques in psychological assessment and psychotherapeutic interventions supported by research findings that are undergirded by respect for the dignity of the patients we serve, (2) maintain a training program in clinical psychological practice that is of the highest quality (3) encourage, support, and conduct research and 4) seek to monitor and improve each of these aspects of service.” The existence and continued growth of psychology internship training attests to the value of our programs to our institution’s mission. Each of the Internship tracks complements core training with

![Chart](chart.png)
specialized seminars and clinical rotations. All Interns participate in a common set of didactic experiences as well as track-specific educational activities. A description of the overall Internship program and each of the tracks is provided below. As staffing or programs may change unexpectedly, not all placements listed below may be available each year. We will make every effort to publicize any substantive changes that occur after the posting of this brochure.

Time commitment varies throughout the training year (and within each track of the internship).

The structure, time demand and nature of rotations and placements vary across the three training tracks, but in general interns spend 80% of their time providing clinical services (including individual and group psychotherapy, diagnostic and assessment services, consultation and participation in interdisciplinary team meetings). Services are provided within one or more of the structured and intensive settings to which they are assigned on a rotating basis (usually for up to 6 months at a time) and at outpatient or specialized clinical placements. (Within the above category of clinical services, psychological assessment constitutes different proportions for the different tracks; for neuropsychology track interns assessment may comprise ~60% of their time while for the adult and child tracks it is closer to 10%.) Travel (not more than 1-2 hours per week) is sometimes necessary between placements as interns may have assignments on different campuses. Some evening time is required with outpatient placements. Seminars constitute about 4-8 hours per week depending on the track (except during the initial week of orientation which is dominated by didactics). Documentation is accomplished via an electronic medical record (EMR) on most sites and comprises approximately 2 hours per week. Finally, interns spend at least 4 hours per week receiving face-to-face supervision, at least 2 hours of which is individually based and with additional supervision on an ad hoc basis. The accompanying chart depicts the above components with their average time demands. (Note: categories are stacked to indicate estimated hours for each, however, supervision and documentation are subsumed within the primary and secondary clinical rotations.)

As staffing or programs may change unexpectedly, not all placements listed below may be available each year. Any substantive changes will be publicized; those that occur after the posting of this brochure will be communicated to applicants via APPIC Late Breaking updates and/or by email.
ACCREDITATION

The internship program is accredited by the American Psychological Association and has been continuously accredited since 1978. APA accreditation was last renewed in 2013 and is valid through the next site visit which is expected to take place in 2021.

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

Office of Program Consultation and Accreditation American Psychological Association
750 1st Street, NE
Washington, DC 20002
Phone: (202) 336-5979 / E-mail: apaaccred@apa.org
Web: www.apa.org/ed/accreditation

The Internship program is a member of the Association of Psychology Postdoctoral and Internships Centers (APPIC).

ADULT PSYCHOLOGY TRACK

National Matching Services Program Code Number: 145912

(6 Interns)

PLACEMENTS

This internship experience consists of concurrent primary and secondary placements with an additional, simultaneous, year-long psychological assessment assignment.

HOURS

Some evening time is required and will vary with respective placements. Placements are described in more detail below. Placement assignments are determined during the spring preceding the start of internship and are based on such factors as interns’
training needs, resource and staffing availability, and placement cross-compatibility. Emphasis is placed on providing interns with exposure to diverse populations and settings.

**Primary Placements – Adult Track**

**Inpatient Service (ZHH):** The inpatient unit is situated in Zucker Hillside Hospital, a large psychiatric facility with over 200 inpatient beds across 10 inpatient units. Current placements occur on a [General Adult Unit](#), the [Women’s Unit](#) or the [Adolescent Inpatient Unit](#) and other units may be considered if available. The Adult inpatient psychiatric units have 20-30 beds and serve patients representing a cross-section of socio-economic groups and psychiatric disorders. On the Adult inpatient units, the intern participates in daily multidisciplinary clinical rounds, community meetings, staff meetings, and case conferences. The intern also functions as a clinical consultant, providing short-term individual psychotherapy for a select patient caseload, group psychotherapy and psychological testing as needed. Group therapy generally consists of empirically-based and/or modified process approaches adapted to the setting and population. Interns in the adult track may also be assigned in the primary placement to the [Adolescent Inpatient Unit](#). On this unit, psychology interns function as primary therapists for a limited caseload, are an integral part of the treatment team and participate actively in the therapeutic milieu. Interns provide short-term individual and family therapy for referred patients, and participate in multidisciplinary clinical meetings, community meetings, and case conferences. Interns serve as co-leaders of Dialectical Behavior Therapy (DBT) groups for patients or DBT skills webinars for caregivers. Significant experience is also gained in implementing crisis management and utilizing behavioral modification. Opportunities may be available for interns to provide psychological evaluations for diagnostic clarification and placement decisions. For further details please refer to the 1 West description listed under the Child Track section.

**Partial Hospital and High-Risk Outpatient Programs:** Placements are in either the [Adult Partial Hospital](#) or the [Senior Treatment Enhanced Program](#), both at ZHH (described in the following sections). These programs are utilized as alternatives to - or as step-downs from - inpatient hospitalization. Each provides a structured setting for psychiatric patients who, while not in need of hospitalization, are unable to function fully at work or in other aspects of community life or who require closer monitoring and support during periods of high risk. In the role of primary therapist to a caseload of
patients, the intern is responsible for all aspects of care including intake evaluation, treatment planning, psychotherapy, consultations regarding medication with staff psychiatrist, and with community agencies, discharge planning, and related activities. The intern also co-leads group therapy sessions each week and may perform psychological assessment with referred patients. Group therapy generally consists of empirically-based, psychoeducational approaches or process-type therapy adapted to the setting and population. The intern shares responsibility with a multi-disciplinary team and may attend staff meetings where issues of program planning and development, as well as day-to-day functioning of patients are addressed.

- **Adult Partial Hospital**: This setting provides daily therapy and activity groups, pharmacotherapy, individual and family therapy for a heterogeneous population of adult patients with subacute, severe psychiatric disorders. Interns have primary case management and individual/family psychotherapy responsibility for patients, co-lead groups, and attend staff meetings. Interns learn rapid assessment and treatment planning and work intensively to increase stabilization and to prepare patients for the next level of care.

- **Senior Treatment Enhanced Program (STEP)**: Similar to the adult partial hospital treatment setting, the Senior Treatment Enhanced Program is a Geropsychiatry high-risk ambulatory service which offers brief, subacute care for older adults. The modal diagnostic category is mood disorder. The intern has frequent contact with other staff who have specialized skills in the assessment, care and psychiatric treatment of older adults. The intern also interacts regularly with other trainees assigned to that specialized program (psychology externs, fellows, residents).

**Secondary Placements – Adult Track**

*Below is a listing of the range of possible secondary placements. Not all placements will be filled every year. Assignments will take into consideration interns’ needs/interests, service needs, available supervisory time and compatibility.*

**The Older Adult - Geriatric Psychiatry Ambulatory Center (ZHH)**: This service center provides comprehensive psychiatric evaluation and treatment to older adults (above the age of 60). Service hours are generally 9-5 pm; no evenings are required. Patients predominantly have psychiatric disorders characterized by depression, anxiety
and adjustment reactions to life stressors. A small subgroup of clinic patients have psychotic disorders and are in fairly stable condition; quite a few patients are experiencing their first episode of mental illness. Most of the psychotherapy cases involve cognitively intact older adults.

Patients selected for intern assignment are those assessed to be excellent therapy candidates. Interns will receive training in Psychodynamic, Interpersonal Psychotherapy (IPT) or Cognitive Behavioral Therapy (CBT) modalities. In addition to being trained in intervention approaches that are applicable throughout the life span, this placement equips the clinician with the necessary tools for this burgeoning population. Patients predominantly have psychiatric disorders characterized by depression, anxiety and adjustment reactions to life stressors. Opportunities for periodic coverage of group therapy sessions may arise.

- A weekly **Geropsychology Seminar** is provided and other didactic options (depending on schedule and interest) may include group supervision, journal club and case conference.
- Interns are expected to have the opportunity to receive intensive training in the implementation of the evidence-based intervention of **Interpersonal Therapy (IPT)** (Weissman, Markowitz & Klerman, 2000) by participating in an IPT seminar and receiving supervision based on audio-taped sessions of dedicated cases.

**The Program in Dialectical Behavior Therapy** (ZHH Adult Outpatient Psychiatry Department) The program implements Marsha Linehan’s Dialectical Behavior Therapy (DBT) in the treatment of individuals with Borderline Personality Disorder. The intern provides individual and group DBT therapy, as well as telephone coaching calls and works with a multidisciplinary DBT team.

**General Adult Clinic with Emphasis on Integrative Psychotherapy** (ZHH Adult Outpatient Psychiatry Department): This clinical program offers services to individuals with a large variety of diagnoses, demographics, and severity level of illness. It is an opportunity for the psychology intern to further develop psychotherapy skills with a focus on how to conceptualize and integrate approaches to cases, i.e., learn how to add to one’s identified core orientation by pulling from many other evidence-based interventions such as but not limited to psychodynamic, CBT, DBT, IPT, IPSRT and ACT. The psychology intern will also learn how to further develop skills to identify and approach cases with a lens of trauma informed care when appropriate.
General Adult Clinic with Emphasis on Phobia and Anxiety Disorders (ZHH Adult Outpatient Psychiatry Department): This program specializes in the treatment of adult outpatients diagnosed with a range of anxiety disorders. The intern carries a mixed caseload of patients with anxiety and comorbid disorders whose conditions are stable. Patients may receive individual and group treatment, psychopharmacologic treatment and in-vivo exposure treatment (this modality is currently suspended during the COVID pandemic). The intern co-leads a phobia group and provides individual psychotherapy to persons with anxiety disorders.

Obsessive Compulsive Disorder (OCD) Center (ZHH)
This placement offers the opportunity for trainees to become familiar with and specialize in evidence based approaches for the treatment of obsessive compulsive disorder (OCD) and related disorders (body dysmorphic disorder, obsessive compulsive personality disorder) in an outpatient setting. The intern is responsible for the care of patients using Cognitive Behavioral Therapy (with emphasis on exposure and response prevention). Along with individual cases, the intern will have the opportunity to run groups using the same treatment modalities. Trainees participate in a weekly didactic meeting and receive weekly supervision – both individual and group. (More information about the OCD Center is available at its website:
https://www.northshorelij.com/ocdcneter.)

Better Outcomes through Ongoing Specialized Treatment (BOOST): The BOOST program provides outpatient treatment to adults (aged 18-40 at time of admission) with primary psychotic disorders, many of whom have graduated from specialized first episode treatment. This placement offers the opportunity for interns to develop skills working with this population in both individual and group formats and using a variety of techniques, including CBT for psychosis and Recovery Oriented Cognitive Therapy (CT-R). Interns will also participate in multidisciplinary team meetings.
Perinatal Center

The Perinatal Center provides evaluation and treatment for:

- Women who develop psychological symptoms during pregnancy;
- Women struggling with unexpected pregnancy outcomes such as miscarriage;
- Pregnant or postpartum women with complicated medical or psychosocial issues who are experiencing emotional distress;
- Parents facing the challenges associated with children born with complex medical issues;
- Mothers who deliver healthy babies and subsequently develop postpartum mental health complications;
- Couples who experience relationship challenges in the context of pregnancy and postpartum period.

Treatment may include:

- Individual therapy (modalities include CBT, DBT, psychodynamic, supportive, crisis intervention, psychoeducation)
- Group Psychotherapy (e.g., perinatal support, DBT skills, childbirth education)
- Enhanced collaboration of care with other service providers such as OB/GYN, the NICU, the maternity units, etc.
- Psychopharmacology,
- Case management such as assistance with accessing or maintaining various resources

Interns carry caseloads consisting largely of individual patients, with the opportunity to work with couples and lead groups as well. Interns join weekly perinatal team meetings and weekly perinatal educational seminars. Interns receive one hour of regularly scheduled supervision with a licensed psychologist, along with ad hoc supervision as needed. Interns with interest in perinatal and women’s behavioral health research may have the opportunity to get involved with ongoing research projects.
Psychological Assessment – Adult Track

The Psychological Assessment assignment refers to a consultation service that receives referrals from mental health providers throughout the ZHH campus. While some testing may be built into primary assignments, all adult track interns will be assigned referrals on a rotating basis throughout the year. Referrals generally involve neuropsychological screening, psycho-diagnostic assessment, and general cognitive assessment. Customized feedback is provided to treatment teams within days of the assessment. *Fundamental competency with the use of personality (projective and objective) and intellectual measures in a psychiatric patient population is presumed.* This assignment aims to deepen interns’ knowledge and skills regarding common assessment instruments, to provide experience with some unfamiliar but useful instruments and approaches, to enable mastery of a flexible battery approach which is focused on the referral question, and to enhance reporting and feedback skills.

Supervision – Adult Track

Interns receive at least *four hours per week* of supervision, with additional supervision available as needed. Members of the psychology training faculty supervise psychological testing and psychotherapy conducted by psychology interns. One or more doctoral level psychologists, who are appropriately trained and licensed, are involved in ongoing supervisory relationships with an intern and have primary professional responsibility for the cases on which supervision is provided. Internship supervisor(s) conduct a total of at least 2 hours per week of individual supervision with the intern during the course of the year. Supervision bearing on medical issues or psychopharmacological intervention may be provided by a senior psychiatrist. Interns have access to consultation and supervision during times they are providing clinical services.

In addition to receiving supervision, didactic sequences and supervisory discussions also provide interns with knowledge of supervision models and practices. Interns may apply this knowledge in direct or simulated practice with psychology trainees, or other health professionals if possible. This is sometimes carried out in the form of role-played supervision with others, and/or peer supervision with other trainees.
CLINICAL CHILD PSYCHOLOGY TRACK

National Matching Services Program Code Number: 145914

(2 Interns)

The Clinical Child Track of the Doctoral Internship Program is based on the premise that broad exposure to a variety of disorders, developmental states, and treatment approaches is essential to the development of competencies for a clinical child psychologist. Interns work under the close supervision of psychologists and as part of interdisciplinary teams. The intern learns to identify and classify a broad range of symptoms of psychopathology within the DSM-V diagnostic framework that affect development and adjustment. There is a strong emphasis on intern competence in the use of psychological assessment methods relevant to children and their families across hospital-based programming (including mental status, psychiatric interview, suicide risk assessment, semi-structured diagnostic interviewing, clinical and family interview techniques as well as treatment outcomes assessment). Clinical placements also encourage use of a range of intervention techniques across modalities of treatment (individual, group, family, milieu & consultation). While these placements are diverse in terms of clinical experiences, what is consistent across placements, is the commitment towards utilizing evidenced based treatments predominantly grounded in a CBT theoretical model. Through experiences in outpatient, inpatient, and elective placements, competencies are acquired in assessment, diagnosis and treatment. Clinical placements encourage use of a variety of treatment strategies including short-term problem-oriented therapy, cognitive-behavioral therapy, family therapy, group therapy, and crisis intervention.

Placements – Child Track

Interns are assigned approximately half-time to the Child and Adolescent Ambulatory Service for the full internship year. For the remaining hours, interns are assigned to the Adolescent Inpatient Unit (1 West) for six months and to a selected combination of major and mini rotations for the alternate six months. Details about these assignments follow.
Child and Adolescent Ambulatory Services (ZHH) (approximately half-time, 12 months)

In the Child and Adolescent Outpatient Department interns will have the opportunity to gain experience in individual, family, and group therapy working with a diverse clinical population. Interns typically carry 5-7 individual or family cases and co-lead 1-2 weekly group. At least 2 cases are designated as Anxiety Clinic cases, which will have been identified as suitable for a structured CBT intervention in the child anxiety and related disorders track. Schedule permitting, interns can also elect to be part of the Adolescent Outpatient DBT program. Interns also receive specialized training in Evidenced Based Treatments such as, The Unified Protocol for Transdiagnostic Treatment of Emotional Disorders in Children and Adolescents (UP-C and UP-A), Dialectical Behavior Therapy, Trauma-Focused CBT, Parent-Child Interaction Therapy, Modular CBT for Child and Adolescent Anxiety, Parent Behavior Management, CBT for Depression, and Comprehensive Behavioral Intervention for Tics. Interns are also invited to participate in a 2-day workshop in TF-CBT, carry individual TF-CBT cases, and participate in year-long consultation calls.

Inpatient Rotation (approximately half-time, 6 months)

1 West: Located on the grounds of Zucker Hillside Hospital, the adolescent inpatient unit (1 West) is a 21-bed, acute-care psychiatric unit for adolescents (ages 12-17) presenting with severe psychopathology that prevents them from being safely maintained in the home and community. Patients on 1 West receive comprehensive evidence-based treatment for a wide spectrum of psychiatric disorders and complex psychosocial issues. Multi-disciplinary treatment on 1 West includes, but is not limited to, individual, family, and group psychotherapy, medication management, rehabilitation groups, case management, and disposition planning. 1 West staff have been intensively trained by Behavioral Tech in Dialectical Behavior Therapy (DBT) and 1 West offers an efficacious full model DBT program including individual, family, group, and milieu coaching (Tebbett-Mock, et al 2019; Saito et al., 2020; Tebbett-Mock, McGee, & Saito, 2021). Psychology interns provide short-term individual and family therapy for patients within a Cognitive Behavioral Therapy (CBT) or Dialectical Behavior Therapy (DBT) framework, depending on the adolescent’s presenting symptoms and functioning. Interns are also involved in determining appropriate discharge plans and coordination of services for assigned cases, and gain strong working knowledge of available services. Depending on unit needs, Interns co-lead DBT skills groups for patients or a DBT skills webinar for caregivers. Psychology interns are an integral part of the treatment team.
and participate actively in the therapeutic milieu. These activities include leading morning Community Meeting including Mindfulness activities, assisting in the token economy, creating specialized behavior plans, and serving as a consultant to other unit staff. Interns also participate in diagnostic interviews and multidisciplinary team meetings. Significant experience is gained in risk assessment, implementing crisis management strategies, utilizing behavioral modification, and collaborating with a variety of professionals who work with adolescents (e.g., child protective services, school staff, juvenile justice, etc.). Interns receive 1 hour each of individual and group supervision. Psychology group supervision includes a didactic series on a variety of clinical topics, with emphasis on DBT early in the training year as well as a 2-day DBT Workshop in July.

**Major Elective Rotations - Child Track (6 months)**

Interns choose from one of the two 16-hour-per-week electives indicated below.

- **Pediatric Health Psychology Service:** The service provides treatment in coordination with the Division of Hematology-Oncology and Stem Cell Transplantation at Cohen Children's Medical Center. This placement affords interns the opportunity to interface with medical pediatric staff. Responsibilities include providing individual and family psychotherapy and performing ongoing assessment of the psychological needs of children, adolescents and young adults treated in the division. This includes conducting intake assessments during the initial session with patients and their families. Interventions include facilitating psychological adaptation to chronic and/or serious medical conditions, managing pain and symptoms, providing parent management training, enhancing compliance with prescribed treatments, and implementing various psychotherapeutic modalities and orientations to patients being treated in both the inpatient and outpatient settings of this division. The intern will join a multidisciplinary team consisting of Physicians, Social Workers, Nurses, Child Life Specialists, etc., and will learn about providing psychology services within a multidisciplinary care model.

- **Eating Disorders Program:** This program located at Cohen Children's Medical Center provides services to children, adolescents, and young adults up to age 21 diagnosed with Eating Disorders, as well as co-morbid diagnoses. Interns carry a caseload of up to two patients at a time who are admitted to the Adolescent Medicine inpatient unit or the Eating Disorders Day Program. Interns serve as primary therapists, following cases from intake throughout their admission, often across both inpatient and day program settings. Responsibilities include providing diagnostic interviewing, individual and family
therapy, group therapy, and in vivo meal supervision. Interns receive comprehensive training in empirically based treatments (EBTs) and a didactic seminar is offered to familiarize trainees with EBTs for eating disorders. EDP staff have been intensively trained by Behavioral Tech in DBT and all trainees participate in the staff DBT consultation team as well as provide individual DBT therapy, milieu coaching and run two groups. Further training in CBT and Family Based Treatment (Maudsley) is provided. Psychology interns are an integral part of the treatment team as well as the therapeutic milieu and participate actively in daily staff meetings and weekly multi-family meetings. This placement allows for extensive experience in working in a multi-disciplinary, milieu setting, as well as in collaboration with the Adolescent Medicine physicians and nutritionists.

Mini Rotations - (4 hours a week for 6 months)

Child Track Interns are expected to elect a 4 hour per week “mini rotation” (simultaneous with either the Eating Disorders or Pediatric Health Psychology Service).

A sample of possible available “mini rotations” includes:

- **Child Psychiatry Intake Rotation:** Interns will learn how to conduct initial psychiatric interviews with children, adolescents and families seeking psychiatric services, perform mental status exams, risk assessment, and formulate initial diagnostic impressions, and treatment dispositions under the supervision of the staff psychologist and attending child psychiatrist.

- **Developmental and Behavioral Pediatrics:** This placement offers the opportunity to assess children and adolescents in an outpatient setting. As part of this program, interns will become skilled in the diagnostic interview and gain extensive experience in the administration, writing, and interpretation of psycho-educational assessments. Additionally, it may be possible to co-lead a group for children diagnosed with ADHD as part of the Family ADHD Group Treatment Program.

- **Outpatient Adolescent DBT Program:** Interns gain the opportunity to participate in the adolescent DBT consultation team and carry individual DBT cases and co-lead a multifamily DBT skills group.
- **Parent-Child Interaction Therapy:** Interns gain the opportunity to participate in didactics in Parent-Child Interaction therapy and carry both individual and group therapy cases in the Child Psychiatry Outpatient Clinic.

- **Perinatal Psychiatry:** Interns will have the opportunity to supervise mother-baby visits, co-lead groups, and assist with various educational programs on the Inpatient Women’s Unit, which specializes in treating women with perinatal psychiatric illness.

- **Recognition and Prevention (RAP) Program:** The Recognition and Prevention (RAP) Program, is a research program funded by the National Institute of Mental Health. The RAP Program serves adolescents and young adults between the ages of 12 and 25 who are at high-risk for developing serious mental illnesses including psychotic and bipolar disorders. Interns will have the opportunity to carry individual cases and to co-lead CBT/Social Skills groups.

- **Medical Genetics:** The field of human genetics and genomics is always expanding, and findings are leading to new understandings of many diseases and conditions; at the cutting-edge of this field, specialists at Northwell’s Division of Medical Genetics diagnose and care for children and adults with the full range of inherited and sporadic genetic disorders. As part of this program, interns will gain the opportunity to conduct mental health screenings of individuals with personal and family history of cancer and will work closely with a team of genetic counselors and geneticists, including participating in weekly case conference team meetings and other educational opportunities.

- **Transgender Program:** At the newly-established Northwell LGBTQ Transgender Program, interns will have the opportunity to participate in interdisciplinary assessments for purposes such as program intake and clearance for gender-affirming medical interventions, with the potential collaboration with varied specialists within Northwell (e.g., Endocrinology and Plastic Surgery). Short-term individual, group, and family therapy with youth, emerging adults, and families may also be possible.
Supervision – Child Track

Interns receive at least four hours per week of supervision, with additional supervision available as needed. One or more doctoral level psychologists, who are appropriately trained and licensed, are involved in ongoing supervisory relationships with an intern and have primary professional responsibility for the cases on which supervision is provided. Internship supervisor(s) conduct a total of at least 2 hours per week of individual supervision with the intern during the course of the year. Internship supervisors represent a breadth of theoretical orientations including cognitive, behavioral, and family systems. In addition to the individual supervision interns receive within each of their clinical placements, child track interns attend weekly supervision/case consultation in a group format, focused on the cognitive-behavioral treatment of anxiety and related disorders.

In addition to receiving supervision, didactic sequences and supervisory discussions also provide interns with knowledge of supervision models and practices. Interns may apply this knowledge in direct or simulated practice with psychology trainees, or other health professionals if possible. This is sometimes carried out in the form of role-played supervision with others, and/or peer supervision with other trainees.

Teaching and Community Outreach- Child Track

Interns will have the opportunity to gain experience with teaching and presenting. Interns will be presented with various opportunities to teach other disciplines through our collaboration with Child Psychiatry. In addition, interns will have the opportunity to become involved in community outreach and present for various local school districts and other nonprofit community organizations.
CLINICAL NEUROPSYCHOLOGY TRACK

National Matching Services Program Code Number: 145913

(3 interns)

The Clinical Neuropsychology Track of the Doctoral Internship Program in Clinical Psychology provides intensive clinical training and experience in neuropsychological assessment and consultation while continuing the intern’s general clinical training. Clinical Neuropsychology Track training facilitates the integration of prior didactic doctoral education and clinical externship exposure with more advanced clinical practice in neuropsychology. The training thus prepares the intern for a two-year post-doctoral fellowship in clinical neuropsychology followed by a career as an independent provider of neuropsychological services.

The Clinical Neuropsychology Track follows the model of training proposed by the Houston Conference on Specialty Education and Training in Clinical Neuropsychology and the inter-organizational Taxonomy for Education and Training in Clinical Neuropsychology (2017). In this one-year, full-time experience most of the clinical neuropsychology track intern’s time is devoted to neuropsychology with the remainder dedicated to general training in other aspects of clinical psychology.

Placements - Neuropsychology Track

Clinical Neuropsychology Track interns participate in examination and consultation services in programs associated with four major hospitals: Long Island Jewish Hospital, North Shore University Hospital, Zucker Hillside Hospital, and Cohen Children’s Medical Center. Through these placements interns gain experience with a wide variety of neurological, neurosurgical, neuropsychiatric and developmental disorders. The Neuropsychology Track interns train alongside neurology residents, neuropsychology fellows, other clinical psychology interns, and neuropsychology externs from local universities. Specialty track didactic experiences include a yearlong seminar in neuropsychology, during which topics such as neuropsychological disorders, neuroanatomy and neuro-imaging are presented. Other educational forums include neurology grand rounds, neurosurgery grand rounds, and epilepsy rounds.

The training year is divided into three four-month rotations. Within each rotation, interns participate in one or two neuropsychological placements. Interns devote approximately
60% of their time to these activities. Interns are also assigned to psychotherapy placement, which runs for the entire year, accounting for another 20% of the trainees’ time. The remainder of the interns’ time is spent in educational activities.

**Department of Neurology/Northwell Neuroscience Institute**

**Comprehensive Epilepsy Program:** Interns rotate on the Comprehensive Epilepsy Program and obtain training in neuropsychological assessment of patients with a range of actual or suspected neurological diseases/disorders, and particularly epilepsy and autoimmune encephalitis. North Shore University Hospital is a Level 4 Epilepsy Center that offers interdisciplinary care and complex surgical treatment options for patients with epilepsy. The Neuropsychology Division is a key part of this interdisciplinary epilepsy care team. Interns gain intensive training in neuropsychological assessment of epilepsy surgery candidates. Interns will also have the opportunity to regularly observe Wada procedures and extra- and intra-operative cortical mappings, and attend a weekly multidisciplinary epilepsy surgical conference. In addition, the Neuropsychology Division provides other clinical services to epilepsy patients, including psychological consultations on the Epilepsy Monitoring Unit and offers PACES (Program for Active Consumer Engagement in Epilepsy Self-Management), an 8-week self-management program designed to help adults with epilepsy manage their active seizure conditions and associated cognitive and mood symptoms.

**Movement Disorders Program:** Within the Movement Disorders Program interns gain training in neuropsychological assessment of adults with movement disorders, including Parkinson’s disease and other parkinsonian disorders, essential tremor, and normal pressure hydrocephalus. Interns consult with neurologists, geneticists, and neurosurgeons regarding diagnostic issues, as well as other referral questions, such as patients’ capacity to benefit from functional brain surgery with deep brain stimulator placement and patients’ readiness to undertake genetic testing for the Huntington’s disease gene. In addition, patients are seen for many other referral neurology disciplines, including The Memory Disorder Program, Stroke Program and General Neurology, as well as other department, including Geriatric Medicine, Psychiatry, Physical Medicine, and Internal Medicine.

**Neurology:** During this rotation interns work in conjunction with neurologists in both outpatient and inpatients settings. Within the inpatient neurology program, interns will participate in bed rounds with the stroke team, which consists of vascular neurologists, stroke fellows, neurology residents, and medical students. Within the outpatient setting, interns work with neurologists specializing in different areas, including behavioral
neurology, epilepsy, pain, movement disorders, neuromuscular, and multiple sclerosis. During this rotation, interns work directly with the neurologists observing their exams as well as hands on learning. Additionally, interns have the opportunity to evaluate inpatients on the stroke unit.

During this rotation, interns also participate in more comprehensive outpatient assessments. While multiple patient populations will be seen during this rotation there is a focus on patients with suspected primary progressive neurodegenerative diseases.

**Psychiatry**: The psychiatry rotation provides interns with a lifespan neuropsychological assessment experience. Interns will work in an outpatient setting with pediatric, adult, and geriatric clients presenting with a variety of neurologic, medical, and psychiatric illnesses. Common presentations include oncology (brain and other systems), neurodevelopmental disorders, and dementia.

### Psychotherapy Experience - Neuropsychology Track

Each intern carries a caseload equivalent to five hours per week of psychotherapy throughout the internship year. The assignments consist of individual psychotherapy cases. Psychotherapy experience will be gained via placement in one of the following settings:

- **The Early Treatment Program (ETP)**: Interns participate in applying a manualized treatment for first episode schizophrenia outpatients.
- **Ambulatory Geriatric Psychiatry**: Interns provide evidence-based psychotherapy for elderly individuals seeking treatment for non-acute psychiatric conditions.

### Supervision - Neuropsychology Track

A central premise of the Clinical Neuropsychology Track is that interns benefit most from a broad exposure to different supervisory styles and orientations. Four or more hours of weekly supervision (at least two of which are one-on-one) are provided. Interns typically work with three or more different supervisors during the course of the year. Members of the psychology training faculty supervise psychotherapy conducted by psychology interns. All supervisors are doctoral level psychologists, who are
appropriately trained and licensed, and have primary professional responsibility for the cases on which supervision is provided. Interns have access to consultation and supervision during times they are providing clinical services.

While no single neuropsychological orientation is advocated over others, emphasis is given to flexible, hypothesis testing assessment strategies rather than fixed-battery approaches. Both quantitative and qualitative performance indices in making neuropsychological inferences are emphasized.

In addition to receiving supervision, didactic sequences and supervisory discussions also provide interns with knowledge of supervision models and practices. Interns may apply this knowledge in direct or simulated practice with psychology trainees, or other health professionals if possible. This is sometimes carried out in the form of role-played supervision with others, and/or peer supervision with other trainees.
THE DIDACTIC PROGRAM

The seminar program covers a variety of general and specific topics related to clinical psychology. Seminars are supplemented by Department of Psychiatry, Neurology, and Division of Child and Adolescent Psychiatry grand rounds which feature presentations by prominent experts. Ongoing seminars and journal clubs in neuroscience, geriatric psychiatry, and child psychiatry may also be available for interested interns.

Each seminar is described below. Seminars are grouped by the track in which they are offered. Nonetheless, all interns are invited to attend any of the seminars if time permits. Some of the courses are year-long while others are presented in a mini-course format.

Seminars/Didactics for all Internship Tracks

Ethics for Psychologists: This four-part series takes place immediately after the internship orientation period in July. The focus is on case-oriented applications of the APA Ethics Code, an overview of its history, standards and procedures pertaining to regulatory entities and psychology boards, and discussion of contemporary topics such as technology.

Core Issues Seminar This seminar forms the "heart" of the Internship's didactic program and runs from September through June. Faculty and interns from all three tracks meet to learn about and discuss a variety of issues. The seminar includes such modules or sequences as: risk assessment, hospitalization, issues related to psychiatric diagnosis; advanced issues in empirically supported psychotherapies with different age groups; psychopharmacology; multicultural issues; consultation; supervision and other topics. It should be noted that issues of individual and cultural diversity are integral to the internship program and are incorporated into the internship course work and into individual and group supervision. Additionally, the seminar provides a regular forum for ongoing discussion of administrative and professional issues that arise for interns.

Professional Issues Colloquium On a monthly basis, issues bearing on the contemporary practice of psychology are discussed by internship and affiliated faculty. Examples of topics include: balancing career and family; obtaining a postdoctoral fellowship; managing a successful independent practice; reimbursement issues; career building; new practice opportunities for psychologists, and the licensure process.
Clinical Case Conference  On a monthly basis, a case conference is led by a senior psychologist. Interns take turns presenting active cases and provide feedback on cases presented by other interns. This provides a forum for practicing organized and thoughtful presentation of clinical information as well as an opportunity for peer review and “second opinions”.

Decolonizing Psychology Journal Club  Introduced in 2021, this seminar meets on a monthly and makes use of readings as well as audio/visual presentations to stimulate discussion and increase knowledge about issues including: indigeneity; privilege and implicit biases; intersectionality; acculturation and the shift from macro- to micro-aggressions; biases in scientific pursuit and in diagnosis; racial trauma, disparity and healing and transgender issues. Supervisors are tasked with the same readings in order to maintain currency in this competency area.

Prevention and Management of Crisis Situations  Interns are certified in de-escalation skills by attending a three-day workshop in aggression reduction training as part of their orientation.

Department of Psychiatry Grand Rounds  The series runs from September through June and features weekly presentations by nationally prominent psychiatrists and psychologists on contemporary research and practice developments in the mental health field. These rounds are typically attended by the interns in the adult track and other interns as topics are relevant to their interests.

Adult Internship Track Seminars

Psychological Assessment  Training is provided in administration and interpretation of psycho-diagnostic, cognitive, personality and some neuropsychological measures. The seminar includes review of fundamentals of testing, exposure to specialized assessments (e.g., malingering, learning disability, and neuropsychological screening approaches) and the practice of oral and written reporting. Meetings alternate between case presentations and topical discussions.

Clinical Geropsychology  This seminar reviews basic issues in assessment and treatment of older adults, clinical problems of later life, somatic treatment for late life
psychiatric problems, psychotherapeutic interventions, and gerontology. The seminar is attended by Adult Psychology interns with assignments in the STEP and Geropsychiatry Clinic as well as other psychology trainees with geriatric placements.

**Interpersonal Psychotherapy Seminar** This weekly seminar is offered to adult track interns with placement in the Gero-psychiatric or Perinatal Services. The seminar offers an instructional section regarding the Interpersonal Psychotherapy (IPT) model developed by Klerman and Weissman (1987) followed by supervision by a senior psychologist who is a master trainer in this approach. Each intern will be assigned a designated clinic patient and audio recordings of the sessions will be reviewed by the seminar leader and discussed in group format.

**Principles of Group Psychotherapy** This seminar (weekly for the month of August) focuses on core topics in group psychotherapy (including group dynamics, confidentiality, theories of group therapy, technique, pitfalls and case examples).

**Experiential Group** Interns are offered the opportunity to attend this experiential process group facilitated by a senior training clinician without any supervisory role vis-à-vis the interns. The material discussed in these meetings is kept private, affording the interns the freedom to comment on their experience.

**Clinical Child Psychology Track Seminars**

**Anxiety Clinic Case Conference:** Presentation, didactics, and discussion on core evidence-based treatments utilized in the Outpatient Clinic mainly Trauma Focused-Cognitive Behavioral Therapy (TF-CBT) and the Unified Protocol for the Transdiagnostic Treatment of Emotional Disorders in Children and Adolescents (UP-C and UP-A). These treatment protocols are reviewed extensively. Interns present cases where they are using these treatments and provide feedback to their peers. Adaptations for these evidenced based treatments, along with cultural diversity and ethics are discussed throughout the year long experience.
**Child and Adolescent Psychiatry Grand Rounds** The series runs from September through May and features weekly presentations by prominent mental health care professionals on research and practice issues in child and adolescent psychiatry and psychology.

**Clinical Child Psychology Seminar:** This seminar covers core elements of clinical practice in child psychology, including both family systems-oriented and cognitive-behavioral interventions for various clinical problems in this population. In July and August, there are weekly, 2-hour seminars that provide the foundation of knowledge essential to the practice of evidenced based treatments for clinical child psychology. There is also a 10 hour workshop providing the fundamentals of Dialectical Behavior Therapy focusing on providing DBT across multiple settings. From September to June, the seminars focus on several core modules that include: evidence based practices for specialty populations, Third Wave CBT approaches, family systems-oriented treatments and medical/health related topics. This seminar is attended by the child psychology interns, child psychology externs, and post-doctoral psychology fellows.

**Child Track Site-Specific Seminars:** Both the adolescent inpatient unit (1 West) and the Eating Disorder Program offer weekly didactics pertaining to topics essential to the treatment of those specialty populations. Didactics on 1 West focus on Dialectical Behavioral Therapy and more broadly on acute inpatient care (e.g., risk assessment, safety planning, levels of care and treatment planning). For interns, electing placement within the Eating Disorder Program, weekly didactics focus on assessment and diagnosis of eating disorders; evidence-based treatments for eating disorders including Family Based Treatment for Anorexia, exposure-based interventions and DBT applications.

**Clinical Neuropsychology Track Seminars**

**Neuropsychology Seminar** This 2 1/2-hour weekly seminar is developed yearly for the neuropsychology track interns and runs all 12 months. The lectures are also attended by neuropsychological faculty, neuropsychology externs and fellows, as well as interested interns from other tracks. It begins with introductory topics relevant to neuropsychological consultation in neurological, psychiatric, and general medical services. The neurologic examination is presented as well as other medical topics
germane to neuropsychological evaluation. The seminar continues with lectures on topics that include the major focal neurological syndromes, specific neurological disorders, neurologic interventions, and neuroanatomy and neuroimaging. In addition, topics important to professional development are also included, such as cultural factors in assessment, ethics in assessment, board certification and professional advocacy.

**Dementia Board**: This is a monthly seminar organized by the Department of Neurology's Behavioral Neurology and Neuropsychology divisions, and the Department of Radiology. It is attended by faculty and trainees from multiple disciplines including neuropsychologists, neurologists, radiologist, and geriatricians. This is predominantly a case conference, in which clinical cases are presented from a neuropsychological, neurological, and radiographic view. However, informative sessions are also included, such as clinical trials.

**Epilepsy Conference** This is a year-long working rounds within the Comprehensive Epilepsy Care Center and attended by the neuropsychology track interns, alongside epileptologists, neurosurgeon, neuropsychologist, nurse practitioner, and social worker. Patients with complex seizure disorders that do not respond to medications are discussed, including their candidacy for epilepsy surgery. During this multidisciplinary conference multiple sources of data, including results of video EEG monitoring, neuroimaging, neuropsychological evaluation, and the Intracarotid Amobarbital Procedure (Wada Test), are reviewed and discussed.

**Neurology Grand Rounds** The series runs from September through June and features weekly presentations by nationally prominent neurologist and neuroscientists on contemporary research and practice developments in the field of neurology. These rounds are typically attended by the interns in the neuropsychology track and other interns as topics are relevant to their interests.

**Active learning**: Each seminar has an active learning component such as case conferences, and ABCN format fact finding exercises.

Additional didactic experiences in clinical neuropsychology are available through:

- Attendance at weekly Department of Neurology grand rounds (mandatory);
- Participation in Epilepsy Surgery Conference (mandatory);
• Attendance at Investigational Medicine lectures and Neuroscience lectures at the Feinstein Institute of Medical Research (optional);
• Attendance at grand rounds within other departments, including pediatric neurology and neurosurgery (optional).

ADDITIONAL INFORMATION FOR ALL INTERNSHIP APPLICANTS

Internship Admissions, Support and Initial Placement Data

Please see our training webpage for access to information about admissions, support and placement for the most recent intern cohorts.

Evaluation of Interns and the Internship Program

The Internship program values the scientific basis of clinical practice. We also value the diversity of backgrounds of our staff, trainees, patients, and larger community. When feasible, empirically-supported practices are used in our clinical programs. The aim of the Internship program is to further develop the trainee's competencies in the areas listed above.

Interns’ development of each of these competencies is evaluated throughout the training year and discussed in supervisory meetings. In addition, formal written evaluations are conducted towards the end of each clinical rotation (i.e., at midyear and in June) and a written summary of performance is provided to the intern's graduate training director at those times.

The intern's evaluation of the Internship Program is actively sought.

• During orientation, interns are familiarized with the training programs' Due Process policy and Grievance Procedure.
• The Core Issues seminar provides an opportunity to discuss ongoing administrative and professional problems that may arise.
• A representative is chosen by the interns to represent the entire internship class at monthly meetings of the Education and Training Committee which includes leadership staff from the externship, internship, and fellowship programs.
• The track leaders meet with each intern bimonthly to review progress and satisfaction and to discuss any concerns.
• In addition, the Training Director meets with each intern in all tracks midyear to survey the intern’s experience and satisfaction.
• At the end of the Internship year, interns are asked to provide a written evaluation of the internship program, their supervisors and seminars.
• Prior to leaving, interns also meet with the Director of Psychological Services to discuss their experience.
• Finally, interns are surveyed at least one year after completing the internship to assess the way in which the internship impacted on their career and professional activities.

(Please see the Internship Handbook - available on our training page – for a look at the Competency Evaluation Form, Due Process Policy, Grievance Procedure and the Extended Training Policy.)

Salary and Benefits

The internship salary is $35,568 annually. Benefits include 20 days of paid time off, up to 5 Professional Days off (at the TD’s discretion) and 8 paid legal holidays. In addition, sick days may be used for illness. As per institutional policy, new hires at Northwell Health are not paid for time off during their first three months of work. Also, unused time off will ordinarily not be paid out at the end of the internship. Northwell Health provides a partially subsidized benefit program which offers the opportunity to purchase health, life, and disability coverage to meet personal needs. Interns and their eligible dependents are eligible for health care benefits as of the first day of the internship. The above information represents the policy as of September 2021; although no changes are anticipated at this time, we will attempt to disseminate any substantive changes that occur.

Please note that while interns are permitted to work at a paying job during the internship year, it cannot be in the same medical center as the internship, any required malpractice insurance must be covered at the intern’s own personal cost, and the job cannot interfere with training in any way.
Application Requirements

The Internship is expected to begin on July 1, 2022 and continues for the period of one year (i.e., through June 30, 2023). Applicants may only apply to one of the three internship tracks. For the purpose of clarity, please indicate your choice of internship track prominently in your cover letter. Eligibility requirements for each of the Internship programs are as follows:

**Adult Psychology Track:** The applicant must be a candidate for the PhD or PsyD in an APA-accredited or CPA-accredited health service psychology program or be enrolled in a formal respecialization program. Additionally, it is strongly preferred that applicants have administered and written a minimum of five integrated psychological test reports using complete psychodiagnostic batteries (including cognitive and projective instruments) in a clinical setting.

**Clinical Child Psychology Track:** The applicant must be a candidate for the PhD or PsyD in an APA-accredited or CPA-accredited health service psychology program. Priority is given to those candidates with a strong commitment to and significant experience in research and treatment of children and adolescents. At least one year of clinical experience with children or adolescents is required. Applicants from School Psychology programs will not be considered unless there is evidence of intensive experience (greater than 1 year in duration) in non-school clinical settings.

**Clinical Neuropsychology Track:** The applicant must be a candidate for the PhD or PsyD in an APA-accredited or CPA-accredited health service psychology program. Applicants should have both course work and two years of supervised experience in clinical neuropsychology. This could be completed within or outside a designated track, specialization or concentration in neuropsychology.
APPLICATION PROCEDURE

The internship program is a member of the Association of Psychology Postdoctoral and Internship Centers (APPIC). Applications will only be accepted through the APPIC Application for Psychology Internships (AAPI) and applicants must be registered with the online registration system on the Match web site at www.natmatch.com/psychint.

Three letters of recommendation are required.

The application deadline for the 2022-23 internship is November 1, 202 (applications must be submitted no later than 11:59pm EST of that date).

In addition to the standard elements of the APPI online, the following supplemental materials are required (via scanned upload as per AAPI online instructions):

**Required Supplemental Materials:**

**Applicants to the Adult Psychology Track submit:**

- One summary of an adult clinical treatment case. The case summary should be designed for clinical use and generally include a concise (i.e., preferably less than 5 pages) synopsis of presenting problems, history, conceptualization, course of treatment and recommendations.

**Applicants to the Clinical Child Psychology Track submit both items below:**

- One psychodiagnostic test report of a child or adolescent (under 18 years old) including cognitive and personality measures, and
- One case summary of a child or adolescent, which includes the detailed description of a course of treatment.

**Applicants to the Clinical Neuropsychology Track submit:**

- Two neuropsychology assessment reports.
- **Interviews** for the Neuropsychology Track will be held on: **Monday, January 10th 2022, Tuesday, January 11th 2022; Wednesday January 19th, 2022; Thursday, January 20th, 2022**

**All Applicants:** Please be sure to comply with HIPAA requirements in ensuring the de-identification of submitted work samples.
Internship Selection Procedures

This program is a member-subscriber of the Association of Psychology Postdoctoral and Internship Centers (APPIC) and strictly observes the guidelines of this organization and its match procedures (which can be found at http://www.natmatch.com/psychint/). The LIJ Medical Center – Zucker Hillside Hospital Internship Program normally requires on-site interviews; this year we will be conducting video-based interviews. Due to the large number of applications received, we are not able to offer interviews to all applicants. Every effort will be made to notify applicants of their interview status by December 15, 2021. Upon interview, a recent photograph is helpful as an aid for interviewers’ accurate recall but this plays no role in selection or ranking.

Applicants invited for interviews will be notified of any “open house” meetings or other opportunities during which they can meet with current interns and faculty and learn more about the internship.

This internship site agrees to abide by the APPIC policy that no persons at this training facility will solicit, accept or use any ranking-related information from any intern applicants.

Eligibility and Pre-hiring Procedures:

It is the policy of Northwell Health’s Employee Health Services department (EHS), to foster an environment of patient safety and to protect the health of Northwell Health’s workforce. This is done by various medical screening processes, immunizations, and other reporting requirements including standard pre-placement medical evaluations. It is also a Northwell Health policy to maintain occupational health records on all individuals covered by this policy and to reassess their health status annually to ensure that Northwell Health’s workforce is free from health impairments that could endanger patients as well as co-workers and visitors.

It is the organization’s policy to conduct background investigations and verifications on all prospective employees to ensure all are qualified and meet the minimum requirements for their position and Northwell Health’s standards. Information obtained through the background investigations and verifications will be considered for employment purposes, as permitted by applicable law and regulations. Conditional
offers of employment – such as the internship match - are contingent upon satisfactory completion of required background investigations and verifications. Decisions about eligibility will take into account the intern’s expected duties and the needs of the clinical placement as well as the results of medical evaluations and the applicant’s health status.

Consequently, applicants who match to our internship should understand that prior to commencing the internship they will need to pass a Health System required medical examination, a review of their credentials and a screening by the New York State Child Abuse Registry and other verifications; match commitments are understood to be contingent on meeting these requirements. These procedures and a pre-employment interview must be completed in advance of commencing the internship and necessitate availability in June.

Information Requests

We ask that information about the program be accessed through our training website. Requests for further information (i.e., specific questions or clarification) should be directed to:

Elihu Turkel, PsyD
Director of Psychology Training: Zucker Hillside Hospital
Tel: 718-470-8387  E-mail: eturkel@northwell.edu
COMMONLY ASKED QUESTIONS ABOUT APPLYING TO THE INTERNSHIP

May I apply to more than one track at your internship program?

No. We ask that applicants choose which of the internship tracks (Adult, Child or Neuropsychology) best fits with their professional goals and experience.

Some internship programs will not accept applications from applicants who were externs at the site immediately prior. Is there any such restriction at Zucker Hillside?

No.

Will I have a chance to talk to current interns if I am invited for an interview? If so, will they be involved in evaluating my suitability?

If you are invited for an interview, we will make every effort to enable you to meet with current interns, although since they are all very busy (especially when their supervisors are interviewing) you might not be able to meet with all of them. Pending their consent, we will provide you with their contact information. The way current interns are included in the recruitment process varies by internship track. Current interns do not take part in the selection of applicants; they are directed to meet with applicants only for the purpose of providing information about the internship experience.

What is the minimum number of intervention and assessment hours needed in order to apply to the internship?

There is no absolute minimum “hours” requirement. Rather, applicants to each track are considered based on the quality and quantity of their experience, its diversity and appropriateness to the internship experience, their skill sets and their apparent standing relative to the applicant pool. We will take into consideration the difficulty many students have encountered accumulating clinical (especially assessment) experience during the pandemic.
**What should I do if something went wrong with my application (e.g., the wrong document was uploaded; it was incomplete; there was a technical problem at the deadline)?**

In special circumstances as above, it is best to email the Director of Training, explain the problem and ask for direction. Be sure to contact APPIC with any irregularities regarding the application portal.

**Will I be notified if I will not be interviewed?**

We do our best to notify all applicants of their interview status no later than December 15th. If other applicants have received notification before that date but you have not, do not assume that you have been overlooked; we do not always process all notifications simultaneously. Also, different tracks may notify at different times before that date.

**What is the total number of hours required to complete the internship?**

The internship is a year-long training program. Interns must have completed all assignments over the course of twelve months and must attend work on the last day (i.e., June 30, 2022) of the internship. No attestations of completion will be issued prior to that point.
Training Leadership

Elihu Turkel, PsyD *Director of Psychology Training and Adult Internship Track*, Yeshiva University, Clinical, 1984

Paul Mattis, PhD, ABPP-CN *Chief of Neuropsychology; Assoc. Dir. of Neuropsychology Internship Track*, U of Houston, 1994

Stephanie Solow, PsyD *Assoc. Dir. of Clinical Child Internship Track*, Pace University, School/Child Clinical, 2004

Supervisory Faculty

<table>
<thead>
<tr>
<th>Name</th>
<th>Institution</th>
<th>Year</th>
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<tbody>
<tr>
<td>Kristin Candan, PhD</td>
<td>Fairleigh Dickinson University, Clinical, 2008</td>
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<tr>
<td>Peter D’Amico, PhD, ABPP</td>
<td>SUNY Binghamton, Clinical, 1995</td>
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<tr>
<td>Christine D’Urso, PhD</td>
<td>Hofstra University, Clinical, 2017</td>
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<td>Kalli Feldman, PhD</td>
<td>The New School, Clinical, 2012</td>
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<tr>
<td>Nathan Frishberg, PhD</td>
<td>St. John’s University, Clinical, 2018</td>
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<tr>
<td>Wendy Fuller, PhD</td>
<td>Fairleigh Dickinson University, 2016</td>
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<tr>
<td>Adeena Gabriel, PhD</td>
<td>Fairleigh Dickinson University, Clinical, 2012</td>
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<tr>
<td>Bella Grossman, PhD</td>
<td>New School for Social Research, Clinical, 2014</td>
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<td>Marie Genevieve Iselin, PhD</td>
<td>Clark University, Clinical, 2004</td>
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<td>Jimmy Kim, PsyD</td>
<td>Pace University, School-Clinical-Child, 2003</td>
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<td>Hannah Knafo, PhD</td>
<td>The New School, Clinical, 2017</td>
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<td>Asha Kumar Patel, PhD</td>
<td>St. John’s University, Clinical, 2011</td>
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<tr>
<td>Christine Lee, PhD</td>
<td>Yeshiva University, 2018</td>
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<tr>
<td>Barbara Libov, PhD</td>
<td>St. John’s University, Clinical, 1996</td>
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<td>Stewart Lipner, PhD</td>
<td>Yeshiva University, Clinical, 1985</td>
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<tr>
<td>Madeline McGee, PhD</td>
<td>St. John’s University, Clinical Child, 2008</td>
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<tr>
<td>Erica Meltzer, PhD</td>
<td>CUNY Queens College, Clinical, 2016</td>
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<tr>
<td>Amy Nadel, PhD</td>
<td>Fairleigh Dickinson University, Clinical, 2014</td>
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<td>Anthony Pinto, PhD</td>
<td>Hofstra University, School/Clinical, 2002</td>
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<td>Rita Ryan, PhD</td>
<td>The New School, Clinical, 1997</td>
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<tr>
<td>Lauren Salvatore, PsyD</td>
<td>Yeshiva University, Clinical, 2015</td>
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<tr>
<td>Lauren Scher, PsyD</td>
<td>Long Island University: Post, Clinical, 2007</td>
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<tr>
<td>Stephanie Solow, PsyD</td>
<td>Pace University, School/Child Clinical, 2004</td>
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<td>Joyce Tanzer-Levy, PhD</td>
<td>St. John’s University, Clinical, 1996</td>
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<td>Alison Tebbet, PhD</td>
<td>St. John’s University, Clinical Child, 2013</td>
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<td>Lisa Testa, PhD</td>
<td>The New School, Clinical, 2006</td>
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<td>Gregory Vikingstad, PhD</td>
<td>St. John’s University, Clinical Child, 2014</td>
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<td>Philip Watson, PhD</td>
<td>CUNY Queens College, Clinical, 2014</td>
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<tr>
<td>Kayla Whearty, PhD</td>
<td>Binghamton University, Clinical, 2017</td>
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2021-2022 Psychology Interns

(All Interns below have consented to their names appearing in this publication)

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**Adult Track**

Bridget Anton       Seton Hall University
Chiroshti Bhattacharjee Seton Hall University
Desiree Curcio      Long Island University -CW Post
Katrina Florio      Adelphi University
Madeline McKeon     The New School
Adir Pinchot        St. John's University

______________________________

**Child Psychology Track**

Olivia Peros        Hofstra University
Sheila Rouzitalab   Rutgers University

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**Clinical Neuropsychology Track**

Emma Duca           St. John's University
Jennifer Miller     Yeshiva University
Shonna Schneider    Yeshiva University
Zucker Hillside Hospital Administration

JOHN M. KANE, M.D. Senior Vice President, Behavioral Health Services
Northwell Health; Chair, Psychiatry: Zucker Hillside Hospital; Chair, Psychiatry: Donald and Barbara Zucker School of Medicine at Hofstra/Northwell

BLAINE M. GREENWALD, M.D. Vice Chairman, Combined Department of Psychiatry: Long Island Jewish Medical Center/North Shore University Hospital; Director, Geriatric Psychiatry Division, Zucker Hillside Hospital, Northwell Health

MICHAEL SCARPELLI, Executive Director, Zucker Hillside Hospital and South Oaks Hospitals, Northwell Health

MARK FAUTH, MBA Vice-President: Behavioral Health Service Line, Zucker Hillside Hospital, Northwell Health