

*Commonwealth of Virginia*  
*Department of Behavioral Health and Developmental Services*

# *Central State Hospital*

***DOCTORAL PSYCHOLOGY  
INTERNSHIP HANDBOOK  
2024-2025***



**DBHDS** 

*A life of possibilities for all Virginians*

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## **PROGRAM PHILOSOPHY AND TRAINING MODEL**

The CSH internship program is designed to meet all internship training and supervision requirements for licensure as a clinical psychologist in the state of Virginia and comply with the standards set forth by APPIC and APA. The trainee is responsible for obtaining information on licensure requirements and ensuring that they file all necessary forms in a timely manner in order to obtain licensure.

The CSH internship training program offers education and supervision in the practice of clinical and forensic psychology, a primary goal of which is to prepare the intern for the practice of psychology with a seriously mentally ill population. The program advocates a practitioner-apprentice model, which helps interns develop competence through the use of experiential learning or “learning by doing.” Our program believes learning occurs through exposure, mentoring, and supervised practice with incremental degrees of task complexity and trainee autonomy. Further, our supervisors advocate that training occur using evidence-based best practices and encourage exposure and discussion to emerging research in these areas. Through this process, interns are expected to gradually increase their clinical proficiency and knowledge of clinical psychology and the legal system, and to grow into their professional identity in the fields of forensic clinical psychology and public service.

Training occurs within a multidisciplinary framework. In both core rotations, interns practice and train with members of other professional disciplines. The program encourages interaction, cooperation, and sharing of knowledge and expertise as a multidisciplinary team. The internship is an integrated training experience. We place an emphasis on exposing interns to the breadth and variety of professional roles assumed by psychologists in an inpatient setting, while providing opportunity to obtain exposure to some specialized areas of practice, namely forensics. It is our belief that good forensic psychologists are outstanding clinical psychologists first and foremost; therefore, interns will be expected to demonstrate competence in the traditional core skills of clinical psychology, including psychodiagnostic testing, clinical interviewing, treatment planning, consultation, and psychotherapy, while concurrently acquiring a knowledge base of the preeminent research areas, legal issues and precedents that contribute to the competent practice of forensic psychology.

As noted above, the effective practice of forensic clinical psychology is strongly linked to foundational training and analysis of scientific inquiry, and therefore interns are encouraged to rely upon empirically supported assessment techniques, and to actively seek to link emerging clinical theory and contemporary research with established principles of assessment, and forensic treatment and evaluation.

## **DIVERSITY VALUE STATEMENT**

Our training program is enriched by members' openness to learning about –and embracing- the diversity of all persons in an atmosphere of respect, trust, and safety. CSH's mission is to support the wellness and safety of all individuals and their communities throughout the Commonwealth. The program expects that interns and trainers be committed to the values of openness, respect, and integrity for diversity, equity, and inclusion. The program expects that interns and trainers are willing to examine their personal values, and to learn to work effectively with others.

No one is completely free of bias and prejudice. The interns and faculty members are expected to examine their own biases, model personal introspection, and to be committed to lifelong learning. Trainers are expected to be mindful and inclusive of interns' identities. Interns are expected to examine and attempt to resolve any attitudes, beliefs, opinions, or feelings that might affect their abilities to provide services to individuals different from themselves.

The program is committed to maintaining an atmosphere of education and training for all, and one in which bias and prejudice can be openly challenged. The program is committed to a supportive process that facilitates the development of knowledge and skills necessary for working effectively with individuals of diverse ethnicities, colors, socioeconomic statuses, ages, sexes, sexual orientations, gender identities and expressions, physical and mental disabilities, marital statuses, and national origins.

## PSYCHOLOGY TRAINING PROGRAM GOALS

**Aim I:** To develop competence of interns to practice as entry level psychologists in independent delivery of clinical interventions.

- Interns will demonstrate current knowledge of diagnostic systems that consider clients' history, dysfunction, and personal/systemic strengths; contextualize human behavior and apply this knowledge in assessment and diagnosis; select assessment methods that draw from the best available empirical literature and assemble assessment data from a variety of sources to develop a comprehensive and individualized clinical conceptualization and make appropriate recommendations to assist recovery.
- Interns will establish and maintain effective relationships with those who receive psychological services; develop evidence-based intervention plans that are individualized, trauma-informed, goal-specific, and informed by the current scientific literature, diversity characteristics, and contextual factors; and evaluate intervention effectiveness and adapt as needed.
- Interns will demonstrate current theoretic and empirical knowledge as it relates to diversity in research, training, supervision/consultation, and provision of services; integrate awareness of individual and cultural difference in the conduct of professional roles across a wide variety of populations.

**Aim II:** To develop competence of interns to practice as entry level psychologists in the areas of forensic and psychological assessment.

- Select from and administer multiple methods and means of evaluation in ways that are responsive to and respectful of diverse individuals and contexts.
- Interpret, integrate, and conceptualize assessment results to accurately address the referral question.
- Communicate results in written and verbal form clearly, constructively, and accurately in a conceptually appropriate manner.

**Aim III:** To develop professional competencies of interns to function as entry level psychologists in professional conduct and decision-making.

- Interns will understand and act in accordance with professional standards and guidelines (including laws and regulations at the organizational, state, and federal level) as well as the current version of the APA Ethical Principles of Psychologists and Code of Conduct; recognize ethical dilemmas should they arise and resolve the dilemmas in an ethically-informed manner; conduct oneself in an ethical manner during all professional activities.
- Develop and maintain productive relationships with colleagues representing psychology and other disciplines (e.g., psychiatric, nursing, social work, etc.) as well as supervisors and supervisees, community organizations, clients and their families; communicate integrated findings in both oral and written formats that demonstrate proficiency with professional language and concepts; exhibit effective interpersonal skills.
- Develop familiarity with ethical standards and regulations pertaining to forensic psychological practice, including relevant state and federal case law; assess and

conceptualize forensic issues to inform treatment recommendations and communication with attorneys and other legal personnel; evidence knowledge of risk assessment procedures using both direct and collateral sources to develop appropriate risk management strategies.

- Conduct themselves in ways that reflect important values and attitudes of psychologists to include personal integrity, professional responsibility, a commitment to lifelong learning, and concern for the welfare and rights of others; engage in effective self-monitoring and self-care to enhance professional effectiveness; actively seek out and respond to supervisory feedback; manage increasingly complex clinical decisions and situations with independence and confidence.
- Congruent with goals one and two, interns will utilize critical thinking to become informed consumers of relevant empirical literature, and to apply this knowledge to their emerging clinical and assessment praxis.

## TRAINING PLAN

Interns will complete two, separate six-month major rotations, described in detail below. They will also complete two minor rotations, each consuming one day per week. The 2000-hour internship must be completed in 12 months and comprise at least 500 direct hours.

### MAJOR ROTATIONS

Both major rotations allow for a variety of group and individual therapy experiences, interdisciplinary team collaboration, consultation, and opportunities for conducting assessments (e.g., mood, personality, intellectual, cognitive and risk evaluations and neuropsychological screenings). Interns are assigned to a multidisciplinary treatment team and follow assigned patients conducting initial assessments, treatment planning, brief therapy and/or psychoeducational sessions (e.g., competency restoration or crises stabilization). Discharge planning or release planning begins at admission, and interns will be able to participate in collaboration and aftercare planning with community services as well. Interns will conduct between two and four hours of group therapy per week. Group treatment consists of a variety of evidence-based group modalities, in addition to psychotherapy, skill-based treatments, and competency restoration services. Finally, interns complete risk assessments and provide diagnostic/treatment consultation, treatment of incompetent defendants with lower-level offenses, and long-term treatment of civilly transferred patients adjudicated NGRI.

Interns will complete each of the six-month rotations denoted below. This allows interns to gain experience both in a maximum security forensic inpatient setting as well as the civil inpatient setting. This format allows for a wider range of clinical and training experiences as well as supervisory experiences. Interns will spend approximately 16 to 20 hours a week in their primary rotation.

**Maximum Security** CSH houses the only maximum-security forensic units in the state. Adults in this building highlight the rare intersection of serious mental illness and risk of harm to self or others. The vast majority of these individuals comprise two distinct categories: treatment of defendants adjudicated incompetent to proceed; and patients adjudicated Not Guilty by Reason of Insanity who are remanded to the custody of the Department of Behavioral Health and Disability Services (DBHDS) during the temporary custody and/or conditional release process. Individuals in this building are most likely to be charged with serious or high-profile offenses.

**Minimum Security** Patients in these buildings generally comprise a mixture of acute civil admissions and pre-trial forensic status patients (i.e., in need of competence restoration).

**Patient Population Generally:** Across both major rotations, and within the forensic evaluation rotation, the interns will gain exposure to a variety of clinical presentations. Certain patients present with relatively straightforward diagnoses and courses of treatment. However, the vast majority of the individuals receiving treatment or evaluation at CSH carry complex co-morbidities. It is not uncommon for any given patient to have an intersection of serious mental illness, personality pathology, intellectual deficits, substance use, and/or protracted history of self-harm or other-harm behaviors. These also may be overlaid upon other, broader areas of clinical importance, such as gender identity or community reintegration obstacles, etc. While these

individuals' cases can be challenging, the primary supervisors see these as invaluable training experiences, and the intern will gain increasing exposure and guidance on how to tackle them. Of note, interns will likely get minimal exposure to geriatric populations, as Virginia has a specific facility designed to address the unique care needs of individuals of advanced age.

## **MINOR ROTATIONS**

**Forensic Evaluation Team** Interns will spend one day a week working with the Forensic Evaluation Team and will be provided additional training and education related to the field of forensic psychology and forensic evaluation. Interns will be encouraged to shadow each FET member, but will be assigned a primary supervisor, with whom they will conduct clinical interviews with adjunct in-vivo supervision. Over time, interns will be expected to maintain their own caseload of evaluation cases, which will continue through to the conclusion of the internship year. An additional expectation will be that interns become increasingly autonomous in the performance of their job duties, with the goal of achieving readiness for independent practice by the end of the training year. All reports written by the intern during the training year will be reviewed and co-signed by the supervisor.

**Research** The training program recognizes the importance of research in the context of an effective and best-practices focused training program. To that end, interns are encouraged to seek out various opportunities to become a more informed consumer of research, and to contribute to research that can answer pressing questions held by CSH Administration and various departments, as well as research questions that benefit forensic psychology and evaluation practices overall. These research opportunities have a decidedly applied bent: assisting Dr. Banks with manuscript revisions on a number of journals for which she is a reviewer; assisting the Research & Review Committee on monthly meetings and Journal Club offerings; updating assessment briefs that can be used for expert testimony; and engaging in original research. CSH has a Research & Review Committee, as well as an IRB that vets proposals and ongoing research programs at CSH, both at the internal and external level. Dr. Banks is the primary supervisor for any research opportunity the intern wishes to engage in. Dr. Armstrong provides meta supervision through her role as Chair IRB for DBHDS.

**Group Therapy** Throughout the course of the training year, interns will be responsible for the provision of a specific group modality, such as restoration to competency, DBT, ACT, CBTp, or a treatment modality that fills a specific treatment need for patients. The intern will be expected to maintain the same modality, although the location of this group, and therefore patient population, will rotate between treatment malls throughout the course of the internship year.

## **ADDITIONAL TRAINING ACTIVITIES**

The offered additional trainings for internship are sequential and cumulative to their learning over the course of the year. The didactic, conference, and seminar schedules are created in complexity to provide interns with the foundational knowledge that is relevant to their understanding of their current role and progresses to expose them to relevant skills to prepare for licensure and independent practice in the field of psychology. These additional training activities are also used to inform intern training goals.

### **Institute of Law, Psychiatry, and Public Policy (ILPPP) at the University of Virginia**

In late the Fall of the training year, the Intern attends the Basic Forensic Evaluation training offered by the ILPPP, a one-week intensive workshop covering the basic principles of forensic evaluation. The cost of this program is covered by the hospital. Interns must complete the training and submit the final writing assignment to the ILPPP. In addition to this training, a number of other training seminars may be offered by the ILPPP during the Intern's training year. Examples from previous years include Risk Assessment, Evaluating Individuals Found Not Guilty by Reason of Insanity, Assessing Individuals Charged with Sexual Crimes, Conducting Mental Health Evaluations for Capital Sentencing Proceedings, and other advanced seminars or symposia.

### **Landmark Case Law Series**

CSH's Forensic Evaluation Team hosts a weekly landmark case law series during the training year, typically beginning in October. The cases discussed are drawn from the recommended reading list provided by the American Board of Forensic Psychology (ABFP) for preparation for board certification in Forensic Psychology. In the beginning of the year, depending on the Intern's prior familiarity with case law, the Intern may be provided guidance and mentoring with regard to the structure of the seminar and preparation of legal briefs. The Intern will have the opportunity to prepare case briefs and to lead the discussion over the course of the year. The case law series are open to other CSH staff and are often attended by a number of psychology practicum students, doctoral psychology interns, physician's assistant students, and psychiatry residents. \*Currently being conducted virtually.

### **Forensic Seminar Series**

In conjunction with Eastern State Hospital, the forensic seminar series is a didactic series specifically meant to cover the areas that fall under forensic psychology to include (but not limited to) pretrial criminal evaluations (CST, MSO), violence risk assessment, post-adjudication evaluations (NGRI), civil commitment, sex offender evaluation and treatment, juvenile justice, other civil matters, malingering, psychopathy, probation, other criminal competencies, child custody, workers comp, death penalty, and treatment in forensic contexts. The creator (Betsy Hunt, Ph.D. ABPP) and collaborator of the didactic series (Tallie Armstrong, Ph.D.) have designed the series to closely parallel the required readings and areas of competence typically covered on the ABPP Forensic written exam. It is held every Wednesday from 11am to 1pm. The Intern is to attend virtually on a weekly basis.

### **Didactic Trainings**

The Department of Psychology holds a series of didactic trainings throughout the year, covering such topics as risk assessment, the NGRI graduated release process, suicide risk assessment,

cultural competency, Dialectical Behavior Therapy, substance use assessment and treatment, sex offender evaluations, assessment of malingering, trauma-informed care, ethics, etcetera. The didactic structure also includes professional development seminars and case conferences related to topics of diversity. CSH also offers a variety of trainings throughout the year that are available to all staff members.

### **Intern Committee Assignments**

The Psychology Interns shall have a representative who actively participates in the Psychology Internship Workgroup to represent the views and perspectives of the Interns on all matters of program evaluation and planning. With the exception of reviews of individual interns' performance. The Psychology Interns are also encouraged to participate in other committees throughout the hospital including but not limited to the Recovery/Trauma Informed Care Committee, Behavior Management Committee, and the Employee Appreciation Committee.

### **Supervision**

The minimum number of supervision hours is four hours per week, with a minimum of two of those hours being face-to-face individual supervision (Core Supervisor, Research Program Supervisor, and Forensic Evaluation Team). Interns also participate in group supervision facilitated by a licensed clinical psychologist along with practicum students every other week, as well as weekly group supervision with the Forensic Evaluation Team. The group supervision is designed to provide an opportunity to connect with peers, provide peer supervision and social support for trainees. This has proved to be highly successful in building cohesion and interconnectedness amongst our Interns and practicum students. Supervision methods will reflect and promote growth in ethical principles and professional conduct standards. Over the course of the training year, interns are provided the opportunity to supervise the intervention and assessments of practicum students. Additionally, interns will facilitate group supervision including practicum students and postdoctoral fellow during the last three months of the internship.

## PROGRAM ADMINISTRATION AND SUPERVISORS

Throughout the year, interns receive a minimum of four hours of face-to-face supervision per week with a licensed clinical psychologist, and they will have at least two different supervisors during the training year. Given the complex nature of the work, interns are likely to receive considerably more supervision, both formally scheduled as well as through less formal interactions, than the aforementioned minimum amount. The interns' developmental needs will also be taken into consideration when allotting time for additional supervision. A brief biography of current psychology staff members has been provided for you to reference.

### Psychology Internship Workgroup

The major administrative body for the CSH Clinical Psychology Internship is the Psychology Internship Workgroup. The committee meets quarterly to review the policies and procedures of the internship program, to make necessary and appropriate modifications and develop new policies as needed, and to review Intern progress and performance. The composition of the Psychology Internship Workgroup consists of the Core Supervisors and an intern class representative.

#### *Administration*



**Rachel Lane, Psy.D. - Director of Psychology** - Dr. Lane received her Doctor of Psychology from Alliant University in Irvine, CA. Her graduate program focused on both clinical and forensic psychology. She completed her predoctoral internship at an inpatient psychiatric facility, BHC Alhambra Hospital, which provided acute crisis stabilization, detox/substance use disorder treatment, and intensive eating disorder treatment. Her postdoctoral experience led her to

Virginia in 2016 when she joined Catawba Hospital, which is a state psychiatric facility located in Southwest Virginia serving civil and forensic clients. There, she served as a treatment team psychologist and completed pre-trial evaluations related to Competency to Stand Trial and Mental Status at the Time of the Offense. She also completed violence risk assessments related to management of clients adjudicated Not Guilty by Reason of Insanity (NGRI). She chaired several hospital committees and performance improvement teams, focusing on safety culture and staff recognition. She became the Director of Psychology & Forensics at the hospital, where she led staff training efforts related to competency restoration, risk assessment, behavioral intervention, and recovery-oriented principles. In 2021, she relocated to Central Virginia and was excited to join the Central State Hospital (CSH) team. Currently, she is the Director of Psychology & Forensic Services at CSH and serves on the state's Forensic Review Panel, which provides consultation to state hospitals across Virginia on risk management of NGRI acquittees. In her spare time, Dr. Lane enjoys video games and burritos.

### *Maximum Security Staff*



**Marissa Jarrett, Psy.D. – Psychology Supervisor-** Dr. Jarrett graduated from Nova Southeastern University in 2010 and completed her internship at Florida State Hospital. She completed her postdoctoral training at Central State Hospital and chose to remain as a treatment team psychologist. In 2017, she was promoted to psychology supervisor in the maximum-security building. Dr. Jarrett has worked with forensic populations throughout her training and career, providing both assessment and treatment. She primarily practices CBT; however, she integrates other interventions as needed to best fit the needs of the individuals with whom she is working. In her free time, she enjoys spending time with her family and dog, crafting, spending time outdoors, and listening to true crime podcasts.



**Carol Clay, Psy.D., CSOTP – Treatment Team Psychologist -** Dr. Carol Clay is a licensed clinical psychologist providing services on a treatment team within the maximum-security unit of CSH. After graduating from Spelman College with a B.A. in Psychology, Dr. Clay went on to obtain the degrees of Master of Psychology and Doctor of Psychology (clinical) at The George Washington University. Dr. Clay's passion is serving individuals whose presenting problems represent the overlapping stigma of mental health and the criminal justice system. Dr. Clay also serves as a member of the Internal Forensic Privileging Committee (IFPC) who reviews privilege requests for Not Guilty by Reason of Insanity acquittees. Dr. Clay is a Certified Sex Offender Treatment Provider (CSOTP) and uses these skills within the setting to address sexually inappropriate behaviors and/or evaluating risk of sexual violence as these issues serve as barriers to discharge. Dr. Clay serves as the Student Training Coordinator for practicum and doctoral interns.



**Jacquelyn Harris, Psy.D. – Treatment Team Psychologist -** Dr. Harris earned her B.S. in Psychology with a minor in Neuroscience at George Mason University. She went on to obtain the degrees of Master of Clinical Psychology and Doctor of Clinical Psychology at National Louis University. Her training experiences have been focused on working with individuals who have been diagnosed with a severe mental illness and have legal involvement. She completed her doctoral internship at the Federal Bureau of Prisons where she worked with inmates in the Residential Drug Abuse Program, Sex Offender Treatment Program, and Special Housing Unit. At CSH, she has primarily served as a treatment team psychologist and is currently on the admissions unit in maximum security. She also serves as Section Chief for forensic treatment groups, in which she maintains the curriculum and addresses the necessary treatment needs for individuals hospitalized for the purpose of competency to stand trial, as well as those adjudicated Not Guilty by Reason of Insanity. Her clinical interests include: racial and gender minorities, complex trauma, psychosis, personality disorders, and substance use disorders. In her current role, the primary focus is on maintaining the safety of the milieu via suicide and violence risk assessments, crisis interventions, and short-term individual therapy. Dr. Harris serves

as a rotation supervisor and the Intern Representative. In her free time, she enjoys being at the beach, traveling, and exploring new cuisines and cultures.



**Melissa Raby, Psy.D., LCSW, CSOTP - Treatment Team Psychologist -** Dr. Raby graduated from the American School of Professional Psychology at Argosy University, Arlington Virginia Campus in 2015. She completed her internship at Prince William Family Counseling in Woodbridge, Virginia. Currently, Dr. Raby works as a treatment team psychologist on an admissions ward. Her interests include working with adult and juvenile sex offenders, personality assessment, and working with individuals diagnosed with a SMI. In her free time, she enjoys spending with her dogs, being outside, and going to see Dead & Company in concert.

### *Forensic Services*



**Jeremy Schrieber, Ph.D. – Forensic Coordinator –** Dr. Schrieber received his master's degree in forensic psychology and doctorate in clinical psychology from Fairleigh Dickinson University and completed his internship at Eastern Virginia Medical School/Eastern State Hospital. He immediately transitioned into a role as a treatment team psychologist for individuals adjudicated not guilty by reason of insanity at Eastern State Hospital. After three years in this position, he began a new position as a psychology supervisor and treatment team psychologist for patients transferred from jails for emergency treatment, evaluation, and restoration to competency to stand trial. Supplementing his work within the hospital, Dr. Schrieber began working as independent forensic evaluator in 2021, which only caused his passion for forensic evaluations to grow. He currently works as the Forensic Coordinator at Central State Hospital and has since lived happily ever after. Dr. Schrieber's experience as a supervisor began late in his graduate program - he has supervised practicum students, interns, post-doctoral fellows, and licensed psychologists and psychology providers. His research interests and publications are largely focused on violence risk assessment, factors predicting length of hospitalization among insanity acquittees, and issues pertaining to Miranda rights. His clinical interests surround evaluations of competency to stand trial, criminal responsibility, violence risk and treatment of individuals with serious mental illness and personality disorders. When he is not buried in his work (by choice), Dr. Schrieber enjoys mountain biking, motorsport events, and pretty much anything else that happens outdoors.



**Brandon Riley, Ph.D. - Assistant Forensic Coordinator** - Brandon Riley is a native to the Commonwealth who did his undergrad studies at Virginia Tech before hoofing it all the way to Texas to pursue his doctorate in clinical psychology at Sam Houston State University. He then interned at the Wyoming State Hospital and completed his post-doc residency at the University of California - Davis in Sacramento. He joined Central State Hospital as a treatment team psychologist in 2008 and for several years held a supervisory role that included the selection and training of practicum students and interns. In 2019 he switched sides and went over to clinical administration as the Assistant Forensic Coordinator, but occasionally he still does stuff relevant to the practice of psychology. He resides in Richmond with his husband and their

three evil cats.



**Helen Greenbacker, Psy.D. - Forensic Evaluation Team Supervisor** - Dr. Greenbacker chose to pursue a career in psychology after deciding it was the more practical of her two undergraduate majors, the other being history. She obtained her graduate degree from Florida Institute of Technology. Dr. Greenbacker completed an APA-accredited internship with Southeast Human Service Center in Fargo, North Dakota, where she gained experience in pre-trial sex offender evaluations, parental capacity evaluations, and driving in snow. She then moved to Kansas City, Missouri, where she completed her post-doctoral residency as a member of the

forensic evaluation team at Center for Behavioral Medicine, completing evaluations regarding competency, responsibility, and sexually violent predator determination. Following her residency year, she returned to her home state of Virginia to work as a treatment team psychologist at CSH. During her time in this position, she was placed on a ward predominantly housing Not Guilty by Reason of Insanity acquittees, and subsequently completed risk assessment evaluations. Dr. Greenbacker also briefly spent time as the Director of Psychology at CSH before choosing to pursue her passion for forensic evaluation. She has been appointed by the Commissioner to the Forensic Evaluation Oversight Review Panel, providing review and quality assurance of competency to stand trial and sanity at the time of the alleged offense evaluations completed by evaluators on the state-wide approved evaluator list. In her spare time, Dr. Greenbacker enjoys weightlifting, volunteering, and running with her dog, who is, of course, a good boy.



**Amanda Banks, Ph.D. – Forensic Evaluator** - Dr. Banks earned a B.A. in Criminal Justice with a Minor in Psychology at Sam Houston State University. She completed her M.A. in Counseling and Ph.D. in Clinical Adolescent Psychology at Prairie View A&M University. Dr. Banks completed predoctoral internship at Central State Hospital and remained on staff as the treatment team psychologist in the women's unit on maximum security. Dr. Banks has since transitioned to the role of forensic evaluator. She also serves as a member and psychology designee of the Research and Review Committee and conducts research on clinical intervention for competency restoration. Dr. Banks enjoys cooking, traveling, painting, and

watching true crime and reality TV in her free time.



**Jennifer Mackowski, Ph.D. – Forensic Evaluator** – Dr. Mackowski received her doctoral degree in clinical psychology from Montclair State University in New Jersey. During her doctoral training, Dr. Mackowski worked in a correctional setting, a private practice focused on dialectical behavioral therapy and forensic services, and in a state psychiatric hospital that served forensic populations. Through these experiences, she formed a passion for providing evidence-based treatments and objective assessments to these underserved and diverse populations. As such, Dr. Mackowski completed an APA-accredited internship at Trenton Psychiatric Hospital and Ann Klein Forensic Center in New Jersey. There, she conducted psychological and forensic assessments, and provided individual and group

therapy to adults diagnosed with severe mental illness. Following internship, Dr. Mackowski completed her postdoctoral forensic fellowship here at Central State Hospital, where she had the opportunity to hone her skills in the evaluation of competency to stand trial and mental status at the time of offense. She also led a weekly mental health case law seminar, partook in specialized training through the Institute of Law, Psychiatry and Public Policy (ILPPP), and served as the chair of the research committee. Dr. Mackowski enjoyed her fellowship so much, that she decided to apply to the full-time evaluator position at the hospital, where she continues to happily be a part of the forensic evaluation team. In her free time, she enjoys CrossFit, petting her furbabies, and reading psychological thrillers.



**Kathia Bonilla Amaya, PsyD – Forensic Evaluator** – Dr. Bonilla Amaya received her clinical psychology doctoral degree from Indiana State University and received training providing services to individuals with severe mental illness within a maximum-security prison. She completed an APA-accredited internship with Wellpath-South Florida State Hospital in Pembroke Pines, Florida, where she gained experience in conducting competency to stand trial evaluations, violence risk assessments.

Additionally, she provided competency restoration services to defendants as well as treatment to individuals adjudicated not guilty by reason of insanity. Following completion of her internship, Dr. Bonilla Amaya moved back to her home state of Virginia and completed her post-doctoral residency as a member of the Forensic Evaluation Team at Central State Hospital. While completing her post-doctoral training, she conducted competency and sanity at the time of the alleged offense evaluations and assisted with providing group supervision to trainees. Dr. Bonilla Amaya enjoys traveling, hiking, weightlifting, baking, and cuddling with her dog Olaf in her spare time.

### *Minimum Security Staff*



**Alan Singer, Psy.D. - Psychology Supervisor** - Dr. Singer graduated from the Illinois School of Professional Psychology. He completed his internship at a state psychiatric center in Long Island, New York. Dr. Singer has served several years as a supervisor at Central State Hospital. His professional interests include rehabilitation psychology, behavioral and brief psychodynamic therapy. Dr. Singer enjoys a variety of sports and spending time with his family.



**Barbara Hernandez, Ph.D., CSOTP - Psychology Supervisor** – Dr. Hernandez obtained a Ph.D. in health psychology with a clinical concentration in 2014 and a master’s degree in clinical psychology in 2003 from Virginia State University. She is a licensed clinical psychologist and certified sex offender treatment provider with 20 years of experience providing mental health and substance abuse services and 14 years of experience working with individuals with problematic sexual behaviors. Dr. Hernandez is a psychology supervisor at CSH and a former CSH practicum student. Throughout her career, Dr. Hernandez has worked primarily with adolescents and adults with diverse cultural backgrounds in community, hospital, and correctional settings.

She has an extensive background in psychological and psychosexual assessment. Her primary research interests include disordered eating behaviors and body dissatisfaction, and she provides assessment and therapy targeting these issues. Dr. Hernandez’s is an avid advocate of self-care and encourages others to honor their mind and body daily.



**Sarah Netzky, Psy.D. – Treatment Team Psychologist** - Dr. Sarah Netzky has a Master of Arts in Clinical Counselling Psychology from Roosevelt University and earned her PsyD in Clinical Psychology in 2022 from the Illinois School of Professional Psychology at National Louis University. She completed her doctoral internship at Central State Hospital where she started a research project on malingering which she presented at the Annual Convention of the American Psychological Association. Following her internship, Dr. Netzky spent a year in Mississippi conducting forensic evaluations and providing restoration treatment. In addition, she presented on malingering in January 2023 for the CSH Continuing Medical Education Series and returned as a Treatment Team

Psychologist in the Fall of 2023. Dr. Netzky’s research interests include group psychotherapy, malingering, and other forensic topics. She takes a developmental and feminist approach to supervision and in treatment she tends to conceptualize from a psychodynamic lens.

## **ADMINISTRATIVE DETAILS**

### **Calendar**

The internship begins on August 12<sup>th</sup> and terminates 12 calendar months later. The granting of educational leave (beyond the required training workshops to be attended at the Institute for Law, Psychiatry, and Public Policy) shall be at the discretion of the Training Director.

### **Stipend**

The stipend for the internship is \$40,000.

### **Professional Liability Insurance**

Professional liability insurance covering clinical activities clearly defined within the scope of the internship training program is provided by the hospital at no cost to the intern.

### **Health Insurance and Leave Time**

The intern will receive health, dental, and disability insurance as offered to all Virginia state employees. The intern receives four (4) days per year of family/personal leave, eight (8) days per year of sick leave, and he or she also earns four (4) hours of general leave time per pay period (1 day per month). This is in addition to annual paid holidays.

### **Pay Periods and Pay Days**

The intern will receive two monthly paychecks for a total of 24 paychecks per year. Direct deposit is required.

### **Offices**

Interns will be assigned office space with individual telephone and computer access.

## **COVID-19 SAFETY MODIFICATIONS**

Throughout the COVID-19 health crisis, CSH has continued to provide around the clock care and mental health treatment services, while prioritizing the safety of both patients and employees. Simultaneously, the internship program has remained committed to providing high quality training opportunities for postdoctoral interns while taking precautions to ensure their safety. Although the COVID-19 pandemic is consistently evolving, below is a highlight of the most significant modifications that have been implemented at CSH as a result of CDC and Virginia Department of Health guidelines.

- All employees are able to wear medical masks in staff or patients areas per their own preference.
- All patients are required to be screened for COVID-19 upon admission and prior to leaving the facility for medical appointments

- Any patient unit with a known exposure or positive COVID test result is required to test and possibly implement full PPE
- Onsite free COVID-19 testing is offered to employees and patients
- Onsite free COVID-19 vaccinations are available for employees and patients

## EVALUATION

Below are templates of the rating form used by the core supervisors to determine an intern's current performance and competencies at predetermined points throughout the training year. Interns should be expected to maintain or improve their performance in these areas over time. Should an intern not meet the appropriate expectation for performance, a strengths-based approach will be implemented to ensure the intern can achieve the requisite competencies in the area(s) of need.

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### CENTRAL STATE HOSPITAL

### DEPARTMENT OF PSYCHOLOGY

### DOCTORAL PSYCHOLOGY INTERN

### EVALUATION OF COMPETENCIES

Intern: \_\_\_\_\_

Supervisor(s): \_\_\_\_\_

Rotation or Activity Being Evaluated: \_\_\_\_\_

Purpose of Evaluation:                      Progress Review                      Final Evaluation                      Other (specify): \_\_\_\_\_

At the beginning of each rotation, all supervisors are to review this evaluation with the intern, clarifying expectations for workload and planned rotation activities and identifying competencies expected to be evaluated during the rotation or activity. At mid-rotation, all supervisors are to use this form as a guide for feedback regarding performance towards attainment of competency goals and areas for development. At the conclusion of the rotation or training activity, all supervisors are to complete and review this evaluation with the intern, then submit the completed evaluation with signatures and dates to the Student Training Coordinator.

#### Minimum Levels of Achievement:

*Conclusion of First Rotation:* At the conclusion of the first rotation, an intern must achieve ratings of "3" or higher on all competency items in all competency areas. Any ratings of "2" or lower will result in modifications to the training plan to address the area and improve performance.

*Conclusion of Second Rotation (Internship Completion):* By the conclusion of the training year, an intern must achieve a rating of "4" or higher in all rated skills in each competency area, indicating that the intern requires minimal supervision and is exhibiting competency at a level expected at the conclusion of the training year (prepared to begin post-doctoral fellowship or entry-level psychologist position).

**RATING KEY:**

- 1 Intern requires direct observation and intensive basic instruction to use this skill. Competency for this skill is below the minimum expected at the beginning of internship and a Performance Improvement Plan (PIP) is necessary.
- 2 Intern requires close monitoring and instruction for this skill, although direct observation and basic instruction are not required. Competency for this skill is at the level expected at the beginning of internship training (expected internship entry level). A Performance Improvement Plan (PIP) may be necessary.
- 3 Intern does not require close monitoring beyond normal parameters of supervision. Competency for this skill is at the level beyond the start of internship training year, yet below that expected (entry level psychologist or entry level post-doctoral psychology fellow) at the conclusion of the internship year.
- 4 Intern requires minimal supervision for this skill in routine cases. Competency for this skill is at the level expected at the conclusion of the training year (expected intern exit level; prepared to begin post-doctoral fellowship or entry level psychologist position).
- 5 Intern is performing at the level of independent practice. Competency for this skill is at the level of an individual prepared for licensure in clinical psychology.

N/O No opportunity to observe this skill

**INSTRUCTIONS:** For each competency skill item observed, place an (X) in the box next to each item designating the intern’s level of competency with each skill item, according to the rating key above. Only place one (X) per competency item. It is understood that not all training activities will allow supervisors the opportunity to observe, and, therefore, evaluate each skill or competency. **Only score those items for which you have direct knowledge of the intern’s abilities.**

Competency Area 1: Research & Scholarship	1	2	3	4	N/O
a. Demonstrates understanding of empirical literature with regard to diagnostic conceptualization.					
b. Proactively reviews and uses the empirical literature to inform interventions and treatment.					
c. If involved in research activities, evidences proficiency in research design, ethical standards, statistical methodologies, and interpretation/communication of findings.					

d. Intern integrates current research and literature into clinical practice.					
e. Intern demonstrates critical thinking skills when presenting/discussing research relevant to clinical practice.					

**METHODS OF SUPERVISION:**

This evaluation is based on the following methods of supervision with this intern:

\_\_\_\_\_ Direct Observation (including co-facilitation of clinical interventions)

\_\_\_\_\_ Case Presentation

\_\_\_\_\_ Report Review

\_\_\_\_\_ Review of Raw Data/Testing Materials

\_\_\_\_\_ Discussion in Individual Supervision

\_\_\_\_\_ Reports by Other Colleagues Who Interacted with the Intern

**Optional Comments:**

Competency Area 2: Ethical and Legal Standards	1	2	3	4	N/O
a. Intern demonstrates knowledge of the current version of the APA Ethical Principles of Psychologists and Code of Conduct and consistently applies them appropriately, seeking					

<b>consultation as needed.</b>					
<b>b. Initially, and as needed throughout the clinical process, clarifies roles, expectations, and limits of confidentiality with patient/defendant and all collateral sources of information.</b>					
<b>c. Intern demonstrates awareness of relevant regulations applicable to their professional work, including patients' rights, release of information procedures, informed consent to treatment, limits to confidentiality, management of suicidal behavior, and child/elder abuse reporting policies.</b>					
<b>d. Intern recognizes ethical dilemmas as they arise and applies ethical decision-making processes in order to resolves the dilemmas; seeks</b>					

consultation as needed to help resolve ethical dilemmas.					
e. Interns conducts self in an ethical manner in all professional activities.					

**METHODS OF SUPERVISION:**

This evaluation is based on the following methods of supervision with this intern:

\_\_\_\_\_ Direct Observation (including co-facilitation of clinical interventions)

\_\_\_\_\_ Case Presentation

\_\_\_\_\_ Report Review

\_\_\_\_\_ Review of Raw Data/Testing Materials

\_\_\_\_\_ Discussion in Individual Supervision

\_\_\_\_\_ Reports by Other Colleagues Who Interacted with the Intern

**Optional Comments:**

Competency Area 3: Individual and Cultural Diversity	1	2	3	4	N/O
a. Intern recognizes and appropriately addresses cultural and/or individual differences particular to them that might affect how they understand and					

interact with patients and staff different from themselves.					
b. Intern recognize and appropriately addresses pertinent cultural and/or individual difference specific to the patient's background that might affect the presenting problem or the manner in which patients engage in the therapeutic relationship or process.					
c. Intern recognizes potential cultural themes and sensitivities pertinent to the particular populations of focus (rural, older adults, LGBT, etc.)					
d. Intern demonstrates the ability to independently apply their knowledge and approach in working effectively with a range of diverse individuals.					
e. Aware of and responds appropriately to individual differences and issues of culture/background in assessment, diagnosis, case conceptualization, and treatment/forensic evaluation.					
f. Is aware of personal biases and attitudes which may adversely impact the inherent accuracy and fairness of the final work product, whether treatment planning/recommendations or forensic reporting, and addresses these issues in supervision and in ongoing peer consultancy.					

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**METHODS OF SUPERVISION:**

This evaluation is based on the following methods of supervision with this intern:

\_\_\_\_\_ Direct Observation (including co-facilitation of clinical interventions)

\_\_\_\_\_ Case Presentation

\_\_\_\_\_ Report Review

\_\_\_\_\_ Review of Raw Data/Testing Materials

\_\_\_\_\_ Discussion in Individual Supervision

\_\_\_\_\_ Reports by Other Colleagues Who Interacted with the Intern

**Optional Comments:**

<b>Competency Area 4: Professional Values, Attitudes, and Behaviors</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>N/O</b>
<b>a. Intern behaves in ways reflective of the values, attitudes, and spirit of psychology and demonstrates integrity, accountability, a desire to learn, and concern for the welfare of others.</b>					
<b>b. Intern demonstrates professional demeanor and appearance.</b>					

<b>c. Intern displays professional behavior when using annual leave, sick leave, and authorized absence by following appropriate procedures and using leave responsibly.</b>					
<b>d. Exhibits professional behavior in the clinical setting and maintains adherence with agency policies regarding standards of conduct.</b>					
<b>e. Intern manages all assigned workload within given times frames without sacrificing the qualitative aspects of the workload.</b>					
<b>f. Intern prepares for supervision and utilizes supervision time appropriately.</b>					
<b>g. Intern engages in self-reflection, is aware of professional limitations, and seeks consultation appropriately.</b>					
<b>h. Intern engages in activities to maintain and</b>					

<b>improve performance, well-being, and professional effectiveness.</b>					
<b>i. Intern establishes and maintains respectful relationships with patients, supervisors, colleagues, and interdisciplinary personnel to facilitate goals of the case; manages interpersonal issues appropriately in the patient relationship.</b>					
<b>j. Intern demonstrates maturity of judgement in clinical and professional matters.</b>					
<b>k. Intern is receptive to supervisor suggestions and attempts to implement suggestions in clinical practice.</b>					
<b>l. Intern appropriately displays increasing independence and autonomy commensurate with increasing competency development.</b>					

<b>m. Demonstrates commitment to clients' recovery and awareness of trauma-informed care.</b>					
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**METHODS OF SUPERVISION:**

This evaluation is based on the following methods of supervision with this intern:

- \_\_\_\_\_ Direct Observation (including co-facilitation of clinical interventions)
- \_\_\_\_\_ Case Presentation
- \_\_\_\_\_ Report Review
- \_\_\_\_\_ Review of Raw Data/Testing Materials
- \_\_\_\_\_ Discussion in Individual Supervision
- \_\_\_\_\_ Reports by Other Colleagues Who Interacted with the Intern

**Optional Comments:**

<b>Competency Area 5: Communication and Interpersonal Skills</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>N/O</b>
<b>a. Intern communicates (orally, nonverbally, and in writing) with patients and families in a manner that is respectful, clear, and conducive to maintaining a collaborative relationship.</b>					
<b>b. Intern communicates (orally, nonverbally,</b>					

<p><b>and in writing) psychological information to other professionals in a manner that is organized and understandable by them (e.g., progress notes and reports).</b></p>					
<p><b>c. Intern's written documentation demonstrates a thorough grasp of professional language and concepts and sensitivity to patient information.</b></p>					
<p><b>d. Intern presents assessment and treatment cases and sessions verbally in an organized, clear, and concise manner.</b></p>					
<p><b>e. Intern demonstrates effective interpersonal skills and the ability to manage difficult communications in a manner which serves to maintain a respectful relationship.</b></p>					

**METHODS OF SUPERVISION:**

This evaluation is based on the following methods of supervision with this intern:

\_\_\_\_\_ Direct Observation (including co-facilitation of clinical interventions)

\_\_\_\_\_ Case Presentation

\_\_\_\_\_ Report Review

\_\_\_\_\_ Review of Raw Data/Testing Materials

\_\_\_\_\_ Discussion in Individual Supervision

\_\_\_\_\_ Reports by Other Colleagues Who Interacted with the Intern

**Optional Comments:**

<b>Competency Area 6: Assessment and Psychological Diagnostic Skills</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>N/O</b>
<b>a. Intern clarifies the referral question or presenting problem.</b>					
<b>b. Intern gathers a complete/relevant history, integrating information obtained from clinical interview and chart review.</b>					
<b>c. Intern conducts a comprehensive and accurate mental status exam.</b>					
<b>d. Intern selects appropriate sources of evidence-based psychological and/or self-report instruments that</b>					

<b>appropriately identify the goals and questions of the assessment and relevant diversity and individual characteristics of the patient.</b>					
<b>e. Intern demonstrates accurate and standardized administration and scoring of tests/instruments with proper use of norms and population base rates.</b>					
<b>f. Intern accurately interprets and conceptualizes the assessment results based on integration of clinical interview, chart review, and testing data.</b>					
<b>g. Intern guards against decision-making biases, distinguishing the aspects of the assessment that are objective from those that are subjective.</b>					
<b>h. Intern formulates an accurate diagnosis according to DSM criteria.</b>					
<b>i. Intern write reports that are organized, clear, and coherent and</b>					

which integrate history, observations, and assessment data that meets the technical standard of professional authorship.					
j. Draws appropriate conclusions based on assessment data and makes recommendations accordingly.					

Successful mock administration of the WAIS-IV and mental status examination: Yes No N/A

Successful mock interpretation scoring and report of WAIS-IV: Yes No N/A

Number of Evaluations Conducted: \_\_\_\_\_

Instruments/Tests Administered and Interpreted:

Tests administered and interpreted (check all that apply):

BAI

BDI-II

Clock Drawing

HCR-20

M-FAST

MMPI-3

MMPI-2-RF

PAI

SIRS

TOMM

WAIS-V

\_\_\_ WASI-III

\_\_\_ WMS-III

\_\_\_ WMS-IV

\_\_\_ WMT

\_\_\_ WJ-III

\_\_\_ WRAT-4

\_\_\_ Other (Please List):

**METHODS OF SUPERVISION:**

This evaluation is based on the following methods of supervision with this intern:

\_\_\_\_\_ Direct Observation (including co-facilitation of clinical interventions)

\_\_\_\_\_ Case Presentation

\_\_\_\_\_ Report Review

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\_\_\_\_\_ Discussion in Individual Supervision

\_\_\_\_\_ Reports by Other Colleagues Who Interacted with the Intern

**Optional Comments:**

<b>Competency Area 7: Intervention and Individual Therapy</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>N/O</b>
<b>a. Intern develops and maintains a therapeutic rapport with patients.</b>					

<b>b. Intern conceptualizes patient's presenting problem(s) within a theoretical approach appropriate to the patient population.</b>					
<b>c. Intern develops appropriate treatment plans and patient centered goals.</b>					
<b>d. Intern evidences clinical decision-making informed by relevant scientific literature, assessment findings, diversity characteristics, and contextual variables.</b>					
<b>e. Intern implements evidence-based interventions with fidelity to treatment protocols and models.</b>					
<b>f. Intern appropriately uses self-report measures or other measures to evaluate and monitor outcomes of interventions.</b>					
<b>g. Correctly chooses and administers empirically supported treatments when available; otherwise uses the empirical literature to guide treatment decisions.</b>					

<b>h. Intern appropriately adapts intervention goals and methods consistent with ongoing outcome evaluation.</b>					
<b>i. Intern demonstrates understanding of the relationship between DSM diagnoses (and/or functional analysis) and case conceptualization; diagnoses are reliable differential diagnostic decisions using DSM-5.</b>					
<b>j. Intern demonstrates an awareness of process/relationship issues occurring within the therapeutic relationship.</b>					
<b>k. Intern demonstrates the ability to modify and adapt interventions when clinically indicated or when a clear evidence base is lacking.</b>					
<b>l. Intern demonstrates good case management skills (includes making referrals, follow-up, etc.)</b>					
<b>GROUP PSYCHOTHERAPY:</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>N/O</b>
<b>m. Intern displays an awareness of group dynamics and process.</b>					
<b>n. Intern demonstrates the ability to maintain group</b>					

<b>order and focus on the goals of session.</b>					
<b>o. Correctly chooses and administers empirically supported treatments when available; otherwise uses the empirical literature to guide treatment decisions.</b>					
<b>p. Intern demonstrates the ability to function in a co-facilitator role.</b>					
<b>q. Intern implements evidence-based interventions with appropriate modifications consistent with patient population and group process.</b>					
<b>r. Intern is able to effectively manage the group process.</b>					

**Number of Individual Patients Seen: \_\_\_\_\_**

**Number of Group Sessions Lead or Co-Lead: \_\_\_\_\_**

**Types of Group Sessions Lead or Co-Lead: \_\_\_\_\_**

**METHODS OF SUPERVISION:**

This evaluation is based on the following methods of supervision with this intern:

\_\_\_\_\_ Direct Observation (including co-facilitation of clinical interventions)

\_\_\_\_\_ Case Presentation

\_\_\_\_\_ Report Review

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\_\_\_\_\_ Discussion in Individual Supervision

\_\_\_\_\_ Reports by Other Colleagues Who Interacted with the Intern

**Optional Comments:**

<b>Competency Area 8: Supervision</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>N/O</b>
<b>a. Applies the knowledge of supervision models and practices in direct or simulated practice with psychology trainees or other health professionals.</b>					
<b>b. Uses supervision well (prepared for supervision, accepts and integrates feedback well, etc.).</b>					
<b>c. Engages in self-reflection and can use emotions appropriately in therapeutic context.</b>					
<b>d. As assigned, supervision of practicum students shows appropriate skill with offering</b>					

feedback and making recommendations.					
e. Intern appropriately applied supervision model(s) to group supervision of practicum students.					

**METHODS OF SUPERVISION:**

This evaluation is based on the following methods of supervision with this intern:

\_\_\_\_\_ Direct Observation (including co-facilitation of clinical interventions)

\_\_\_\_\_ Case Presentation

\_\_\_\_\_ Report Review

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\_\_\_\_\_ Discussion in Individual Supervision

\_\_\_\_\_ Reports by Other Colleagues Who Interacted with the Intern

**Optional Comments:**

Competency Area 9: Consultation and Interprofessional/Interdisciplinary Skills	1	2	3	4	N/O
a. Intern independently consults with psychologists and professionals from other disciplines in the care of their patients.					
b. Intern contributes to treatment team planning and to team					

<b>implementation of interventions.</b>					
<b>c. Intern demonstrates knowledge of and respect for the unique roles of other professionals in a collaborative treatment approach.</b>					
<b>d. Intern effectively interacts with other disciplines on interdisciplinary treatment teams.</b>					

**METHODS OF SUPERVISION:**

This evaluation is based on the following methods of supervision with this intern:

\_\_\_\_\_ Direct Observation (including co-facilitation of clinical interventions)

\_\_\_\_\_ Case Presentation

\_\_\_\_\_ Report Review

\_\_\_\_\_ Review of Raw Data/Testing Materials

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\_\_\_\_\_ Reports by Other Colleagues Who Interacted with the Intern

**Optional Comments:**

<b>Competency Area 10: Forensic Practices</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>N/O</b>
<b>a. Intern demonstrates a knowledge of legal statutes as it relates to clinical assessment.</b>					
<b>b. Demonstrates awareness of and adherence to best</b>					

<b>practice guidelines for forensic psychologists.</b>					
<b>c. Intern understands ethical practices within the area of forensic psychology.</b>					
<b>d. Intern evidences clinical decision-making informed by relevant scientific literature, assessment findings, diversity characteristics, and contextual variables.</b>					
<b>e. Conducts interviews and assessments that facilitate treatment planning and/or that effectively respond to the psycho-legal question at issue (includes interviewing skills, including the fluid use of appropriate language with patients from diverse ethnic, cultural and SES backgrounds).</b>					
<b>f. Intern writes reports that are organized and which integrate history, observations, and assessment data.</b>					

**METHODS OF SUPERVISION:**

This evaluation is based on the following methods of supervision with this intern:



**CENTRAL STATE HOSPITAL  
DEPARTMENT OF PSYCHOLOGY  
INTERN RATINGS**

**Training Year:**

**Training Setting (Rotation or Supervisor):**

**Trainee:**

**Supervisor:**

Rate the degree to which your supervisor performed the following and the rotation fulfilled your expectations in accordance with your training needs:

- 1. Training needs not met**
- 2. Trainings needs somewhat met**
- 3. Training needs adequately met**
- 4. Training needs exceeded**
- 5. N/O (Not Observed)**

- |  |       |       |
|--|-------|-------|
| 1. Established clear training goals and expectations                     | _____ |       |
| 2. Addressed your needs and concerns                                     | _____ |       |
| 3. Showed respect for your professional style and previous training      | _____ | _____ |
| 4. Provided guidance appropriate to your level                           | _____ |       |
| 5. Addressed legal and ethical issues as they emerged                    | _____ |       |
| 6. Provided adequate time for supervision                                | _____ |       |
| 7. Was available as needed   | _____ |       |
| 8. Provided feedback about areas in which you were doing well            | _____ |       |
| 9. Provided feedback about areas in which further development was needed | _____ |       |
| 10. Provided opportunities for learning new skills                       | _____ | _____ |
| 11. Exposed you to relevant reading material/research                    | _____ |       |
| 12. Provided a reasonable work load                                      | _____ |       |
| 13. My training goals for this experience were met                       | _____ |       |
| 14. My skill level in intervention increased                             | _____ |       |
| 15. My skill level in assessment increased                               | _____ |       |
| 16. My ability to manage the work load increased                         | _____ |       |
| 17. My ability to function as a professional psychologist increased      | _____ |       |
| 18. My professional identity as a competent psychologist increased       | _____ | _____ |
| 19. My sense of myself as a competent professional increased             | _____ |       |
| 20. My supervisory and/or consultation skills increased                  | _____ |       |
| 21. My sensitivity to cultural/diversity issues increased                | _____ |       |
| 22. My understanding of relevant ethical issues increased                | _____ |       |
| 23. My awareness and understanding of relevant scholarly work increased  | _____ |       |

**Comments (use additional space as needed):**

Please indicate your preference regarding the release of this information to your supervisor(s):

In accordance with CSH policy, this information may only be shared with your supervisor(s) if you wish. Please indicate below if this is to be shared (the default is to keep all feedback private).

**Please share the feedback above:** \_\_\_\_\_

Signature and date

## **DISMISSAL, REMEDIATION POLICIES, DUE PROCESS, & GRIEVANCE PROCEDURES:**

**Dismissal, Remediation Policies, Due Process and Grievance Procedures:** All staff, including interns and supervisors, are expected to adhere to the standards of conduct outlined by the Department of Human Resource Management. DHRM Policy 1.60 explains the Commonwealth's Standards of Conduct (SOC). Employees are expected to fulfill their duties and to conduct themselves in a manner deserving of public trust. The policy provides a list that is not all-inclusive but is intended to illustrate the minimum expectation for acceptable workplace conduct and performance.

While an intern is only employed for one year, they are still treated as a new employee serving a one-year probationary period. As a probationary employee, the disciplinary actions outlined in the SOC are not applicable. DHRM Policy 1.45; Probationary Period reminds the probationary employee that if at any time during the probationary period an employee is not suited for the job, the employee should be terminated or allowed to resign. A probationary employee does not have access to the Grievance Procedure.

[http://www.dhrm.virginia.gov/docs/default-source/hrpolicy/pol1\\_60.pdf?sfvrsn=2](http://www.dhrm.virginia.gov/docs/default-source/hrpolicy/pol1_60.pdf?sfvrsn=2)

Interns will receive regular, on-going informal feedback regarding their performance and progress from their supervisors throughout the internship year. In addition to initial test-outs, interns will receive two formal, written performance evaluations by their primary supervisor and minor rotation supervisors. Additionally, the program will provide an overall rating of competencies collectively scored by the panel of supervisors working with each intern. This is in addition to those required by the intern's academic institution's requirements. The performance reviews and the intern's rights to appeal those reviews will be consistent with DHRM policy 1.40.

[Policy Number: 1.40 Performance Planning and Evaluation \(virginia.gov\)](#)

### **Due Process and Feedback**

It is our expectation that interns will successfully complete the internship program, and we commit to working with our interns to maximize the probability of attaining that goal. In an effort to ensure that decisions about interns are not arbitrary or personal, the program has developed due process procedures. Interns are informed of expectations related to professional functioning and behavior both verbally and in written format (via an Intern Brochure and Handbook) during the orientation process.

In addition to regular verbal feedback provided during weekly supervision, interns will be provided with quarterly evaluations which will be shared with the Director of Clinical Training (DCT) at the intern's graduate program. In the event that issues arise which necessitate due process procedure, the Internship Program Coordinator and/or Primary Supervisor will ensure that all concerned parties, especially the intern, are aware of the relevant issues and of the likelihood that disciplinary action will be taken. Input from the intern's DCT will be sought when indicated about how best to address unsatisfactory progress or problematic behavior. As indicated, the intern's Primary Supervisor will institute a

remediation plan for identified skill deficiencies and/or problematic behaviors, including a time frame for expected remediation (e.g., 90 days) and consequences of not rectifying the areas of concern. Interns will be provided written notice prior to the initiation of a remediation plan, or any other formal notification of unsatisfactory performance, as well as a written procedure describing how to appeal the program's action. Such procedures will be made available to the intern at the beginning of the training year. Interns will be granted sufficient time (i.e., ten days) to respond to any action taken by the program. An appeal document should explain the reasons for the appeal and include any documentation or evidence that would warrant reconsideration for the decision. The program will solicit and consider input from multiple professional sources (e.g., training staff, graduate program DCT, and available literature) when making decisions or recommendations regarding the trainee's performance. Actions taken by the training program and rationale for said actions will be provided in writing to the intern and the graduate program DCT.

### **Definition of Problem Behavior**

Behaviors are identified as problem behaviors if they include one or more of the following characteristics:

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1. The intern does not acknowledge, understand, or address the problem when it is identified.
2. The problem is not merely a reflection of a skill deficit that can be rectified by academic or didactic training.
3. The quality of services delivered by the trainee is sufficiently negatively affected.
4. The problem is not restricted to one area of professional functioning.
5. A disproportionate amount of attention by training personnel is required.
6. The intern's behavior does not change as a function of feedback, remediation efforts, and/or time.

### **PROCEDURES FOR RESPONDING TO SKILL DEFICIENCY OR PROBLEM BEHAVIOR**

If a staff member judges an intern's performance as constituting a skill deficiency or problem behavior, the following procedure will be followed.

1. The staff member notifies the Internship Program Coordinator that there is a concern about the trainee's skills or professional functioning.
2. The Internship Program Coordinator initially consults with the primary supervisor, other directly involved CSH clinical staff, and the CSH Director of Clinical Training if the problem pertains to clinical practice.

3. Input will then be sought from senior clinical staff (i.e., the Clinical Director) if necessary.
4. The Internship Program Coordinator may also choose to consult with the trainee's academic department.

If it is determined that the concern needs further review, the following procedure will be initiated.

1. The Internship Program Coordinator will write a letter to the intern outlining the concern, providing notice that a review will occur, and informing the intern that she/he may provide a written statement to the Internship Program Coordinator if desired.
2. The Intern Training Workgroup will meet to discuss the concern and possible follow-up action. With this input, the Internship Program Coordinator will determine what follow-up action is needed.
3. These steps will be appropriately documented and implemented according to due process procedures.

#### **POSSIBLE INTERVENTIONS IN RESPONSE TO SKILL DEFICIENCY OR PROBLEM BEHAVIOR**

The Internship Program Coordinator - in consultation with Primary Supervisor, Intern Training Workgroup, and CSH Director of Clinical Training may determine that one or more of the following responses will be made.

*Verbal Counseling* – the intern is given feedback regarding unsatisfactory behavior or performance

*Written Counseling* – provides:

- a. Notification to the intern that there is unsatisfactory behavior
- b. Description of the unsatisfactory behavior
- c. Actions required to remedy the behavior
- d. Statement that more serious action is not deemed necessary

*Notice of Improvement Needed/Substandard Performance Form* – directs the intern to discontinue unsatisfactory action(s) or behavior(s). The intern will be given a letter specifying the following:

- a. Description of the unsatisfactory behavior

- b. Actions required to correct the unsatisfactory behavior
- c. Timeline for correction
- d. Possible consequences if the problem is not corrected

*Schedule Modification* – the intern’s schedule is modified to allow the intern to focus on remediation of the area of concern. Examples of possible modifications include:

- a. Increasing the amount of supervision, either with the same or other supervisors
- b. Changing the format, emphasis, or focus of supervision
- c. Recommending personal therapy
- d. Reducing the trainee's clinical or other workload

*Clinical Privileges Suspension* – if it is determined that the intern’s problem behavior might impact client welfare, the trainee’s clinical privileges will be suspended. The trainee will be given a letter specifying the following:

- a. Description of the unsatisfactory behavior
- b. If applicable, 1) Actions required to correct the unsatisfactory behavior 2) Timeline for correction 3) Explanation of the procedure that will be used to determine whether satisfactory progress has been made 4) Possible consequences if the problem is not corrected

### **Guidelines for Implementing Decisions**

1. Once the final decisions have been made by the Internship Program Coordinator, after evaluating the review panel findings, the Internship Program Coordinator, CSH Director of Clinical Training, and Primary Supervisor meet with the intern to review the decisions made and specify the remediation procedures.
2. Any formal action taken by the Training Program is communicated in writing to both the trainee and the trainee’s home program. This notification indicates the nature of the problem, a rationale for the implementation of the remediation procedures and the specific steps that are to be taken.
3. When necessary, the status of the intern's remediation efforts are reviewed within a designated time period, but no later than the next formal evaluation period. This review is made by the Internship Program Coordinator, the CSH Director of Clinical Training, and the trainee's Primary Supervisor.

4. The outcome of the review is communicated in writing to the intern, the intern's home program, and to the CSH Director of Clinical Training.

### **Formal Complaint Procedures/Complaint Appeal Procedures**

Procedures for Complaint with Written Evaluation or with Intern Training Workgroup Decision:

If an intern does not agree with a written evaluation and discussion with the supervisor does not resolve the issue, or if an intern does not agree with the decision of the Intern Training Workgroup, the intern may submit a letter of appeal to be attached to the specific supervisor's evaluation or Committee recommendation, then to be forwarded to the Internship Program Coordinator. In this letter, the intern may request an appeal based on:

1. Denial of due process in the evaluation/complaint procedure (e.g., evaluation criteria not presented prior to evaluation or opportunity to demonstrate proficiency not provided prior to evaluation) or
2. Denial of opportunity to present data to refute criticisms in the evaluation/complaint process.

The request must be submitted no later than ten (10) calendar days after the evaluation or workgroup decision notice is received by the intern, must identify the specific aspect of the evaluation with which the intern disagrees, and must suggest what form of modification is requested.

If an appeal is appropriately requested, the following steps will be taken:

- A. An Appeals Panel, made up of two staff members, will be formed within 14 calendar days of receipt of the appeal. The intern may designate one member of the Appeals Panel from the psychology department staff (who have not had prior evaluative authority of the intern, and did not participate in Internship Workgroup decisions related to the decision with which the intern is appealing). The Internship Program Coordinator, or designee, will designate the other member. The Internship Program Coordinator and Primary Supervisor are prohibited from serving on the Appeals Panel.
- B. The Internship Program Coordinator, or designee, is responsible for convening the committee and the CSH Director of Clinical Training, or designee, presides. Both review the appeal procedures and make sure that no committee member has a conflict of interest in the case presented.
  - a. The intern and the supervisor(s) involved will be notified when the appeal meeting will be held.
  - b. The Appeals Panel may request the presence of a written statement from the individuals involved, as deemed appropriate.

c. The intern may submit to the panel any written statements deemed appropriate, may request a personal interview or may request that the panel interview other individuals with relevant information. The involved supervisor also has these same privileges.

d. The panel will meet within 14 calendar days of the receipt of the appeal and will present a written summary of the committee's findings and any recommendations to the Internship Program Coordinator.

C. The Internship Program Coordinator will take action based on the Appeals Committee's findings.

Examples of outcomes might include (but are not limited to):

1. Accept the original evaluation report and recommend a plan of remediation;
2. Request that the supervisor write a new report to include specific changes;
3. Revise the evaluation or add an addendum to the original evaluation;
4. Recommend another remediation plan be implemented.

The recommendation of the Appeals Panel is to be communicated in writing to the intern in a timely manner.

D. If the intern is dissatisfied with the decision of the Appeals Panel, they may request that a second and final review be made by the Clinical Director, or designee at a level above the CSH Internship Program Director of Clinical Training. The request must be submitted to the Clinical Director within five (5) calendar days after receiving the Internship Program Coordinator's written decision.

The Clinical Director or review designee will make the final recommendation about the intern's appeal.

**Procedures for Formal Complaint with Training, Supervision, and All other Concerns:**

*Informal Problem Resolution Procedure:* If a trainee experiences a problem with a CSH clinical or support staff member, the trainee is encouraged to proceed by taking the following actions. If a step is not successful, the trainee should proceed to the next step. We recognize that, in some situations, the trainee may feel uncomfortable about talking directly with a staff member about an issue. If that is the case, the trainee is advised to consult with the Internship Program Coordinator and/or Intern Representative.

Step 1: First, attempt to address and resolve the problem with the individual as soon as possible.

Step 2: If addressing the issue with the staff member is not successful, or the trainee prefers not to first address the issue with the individual, they may consult with the Internship Program Coordinator.

The Internship Program Coordinator will assist by using one or more of the following actions.

- a. Serving as a consultant to assist in deciding how best to communicate with the individual
- b. Facilitating a mediation session between the staff person and the trainee
- c. Taking the issue to relevant CSH Leadership Team members, Human Resources, and/or the Intern Training Workgroup for consultation and problem solving
- d. Consulting with the Clinical Director.
- e. In the case of an issue with the Internship Program Coordinator, the trainee should consult with the CSH Director of Clinical Training. In the case of an issue in which neither the Internship Program Coordinator or CSH Director of Clinical Training can be consulted, the trainee should consult with the Clinical Director and/or Intern Representative.

Step 3: If satisfactory resolution is still not attained, the trainee may file a formal complaint.

### **Formal Complaint**

Step 1: The trainee will provide a letter to the Internship Program Coordinator documenting the nature of the complaint and what attempts have been made to resolve the issue.

Step 2: The Internship Program Coordinator will write a letter to the trainee outlining the grievance procedure, including the trainee's right to select one of the CSH staff members on a review panel and the opportunity to dispute information and/or explain their position. The letter will also document the timeline for responding to the grievance.

Step 3: The Internship Program Coordinator will then convene a review panel that includes two staff members. The intern may designate one member of the Review Panel from the psychology department staff. The Internship Program Coordinator, or designee, will designate the other member.

- a. The Internship Program Coordinator, or designee, is responsible for convening the Review Panel and the CSH Director of Clinical Training, or designee,

presides. Both parties involved (trainee and staff member trainee is filing a complaint against) review the complaint review procedures and make sure that no review panel member has a conflict of interest in the case presented. If the complaint is against the Internship Program Coordinator and/or CSH Director of Clinical Training, designees will be appointed to coordinate and/or preside over the review panel meeting.

b. The intern and the supervisor(s) involved will be notified when the review meeting will be held.

c. The Review Panel may request the presence of a written statement from the individuals involved, as deemed appropriate.

d. The intern may submit to the panel any written statements deemed appropriate, may request a personal interview or may request that the panel interview other individuals with relevant information. The involved supervisor also has these same privileges.

e. The panel will meet within 21 calendar days of the receipt of the formal complaint submission. The review panel will hear all information and, within five working days of the completion of the review hearing, the review panel will, by majority vote, prepare a recommended written response to the complaint.

Step 4: The Internship Program Coordinator and/or CSH Director of Clinical Training (or designee) will provide the panel's written recommendations to the CSH Clinical Director. Within five working days of receipt of the review panel's recommendation, the Clinical Director will accept the recommendation, reject the recommendations and provide an alternative, or refer the matter back to the review panel for further deliberation. The Clinical Director will then make the final decision regarding the appropriate response to the grievance.

Step 5: Once a decision has been made, the trainee, sponsoring university, and other appropriate individuals will be informed in writing of the action taken.

It is the policy of the Commonwealth to provide its employees with a workplace free from harassment and/or retaliation against employees who either complain of harassment or aide in the investigation of such a complaint.

<https://www.dhrm.virginia.gov/hrpolicies>

**Leave Requests:** Opportunities for scheduled or unscheduled leave is recognized when an Intern is absent for an assignment or educational activity. Leave, depending upon circumstances, may be granted as the discretion of the Internship Program Coordinator, with or without pay. The Program Coordinator will notify the Human Resources Department of extended leaves of

absence and conditions relative thereto. Taking of leave without prior notification to and approval from the Program Coordinator is grounds for immediate dismissal. Interns must notify and receive approval from the Program Coordinator well in advance of any anticipated leave needs in order to allow time for adequate coverage of the clinical care responsibilities.

Interns should consult their Primary Supervisor for information regarding the length of leave and potential effects on the duration of the Training Program. If use of leave extends the Training Program beyond the normal time period, the necessary time to complete the Program may be without additional pay.

**Vacation, Sick and Family/Personal Leave Policies:** On date of hire, interns are authorized four days (36 hours) of family personal leave and eight days (64 hours) of sick leave. This is in addition annual paid holidays. Annual leave is earned at a rate of 4 hours per pay period. Vacations must be scheduled sufficiently in advance to allow for adequate planning for clinical coverage of the Intern's responsibilities. The amount of vacation that can be taken at any one time shall be determined by the Intern's primary supervisor. No vacation will be authorized during the two weeks immediately preceding the conclusion of the Internship (i.e., following July 25<sup>th</sup> of the training year). The granting of educational leave shall be at the discretion of the Primary Supervisor.

For planned leave, Interns must complete a leave slip and have it signed by a Psychology Supervisor or the Psychology Director. Slips must be turned in to the timekeeper via email, fax or interoffice mail prior to closing of the pay period. A record of your leave will be maintained via the Kronos database and spreadsheet (e.g., time-to-track).

When using sick or family personal leave, please follow the guidelines above. If you are ill and must remain at home, please contact your Psychology Supervisor and/or the Psychology Director as soon as possible so that coverage can be arranged. A leave slip must be turned in as soon as you return to work.

**Staff/Faculty Evaluations:** Hospital staff are evaluated annually by their direct supervisors as part of their employee performance evaluations. The CSH training department routinely solicits evaluations of all guest speakers and lectures to assess their knowledge and ability to convey information effectively. Performance evaluations are reviewed with staff members and signed by the staff member and their supervisor. These evaluations are kept in the Department's own staff files as well as the individual staff members file in Human Resources.

**Program Evaluation:** The Psychology Intern Training Workgroup is responsible for evaluating the goals and objectives of the Internship Program along with the effectiveness of the program in meeting these goals and objectives. The Psychology Intern Training Workgroup shall conduct a formal review of the Program on an annual basis and the process will be documented in the minutes of that meeting. At the end of each rotation or at a specified period, Interns will complete confidential evaluations of their educational experiences. At the end of each academic year, the Interns and Core Supervisors will complete confidential evaluations of the Program. The information contained in these evaluations is confidential, and only summary material will be made available to the Workgroup members. The Internship Program Coordinator will summarize the periodic evaluations and guarantee the anonymity of the responses. Summaries of these

evaluations along with Internal Review (when applicable) and other sources of information as provided will be used by the Psychology Intern Training Workgroup in their review of the program. The results of this annual assessment will be used to devise and implement improvements to the program. The workgroup will also provide ongoing monitoring of the program through the scheduled quarterly meetings. Records of evaluations will be kept within the human resources department. Interns are informed of record retention policies during hospital orientation. Interns are also made aware of the agency's Code of Conduct during the orientation process. They are provided a copy of the APA Code of Ethics in their intern resources (via Microsoft Teams). For the purpose of evaluating the interns' competency in this area, ongoing discussion is an element of formal and informal supervision. Interns are also invited to attend continuing education events discussing ethics.

**Intern Representative:** This role is held by an early career psychologist who serves as a *representative who actively participates in the Psychology Intern Training Workgroup to convey the views and perspectives of the Interns on all matters of program evaluation and planning with the exception of reviews of individual interns' performance.* The Intern Representative may advocate for interns when the workgroup meets, without interfering with the intern meeting aspects of the supervision competency. If the Intern Representative is made aware of any internship program (either handbook or APPIC) or hospital violation, it must be reported to the Student Training Coordinator and/or Director of Psychology/Clinical Training. If the intern discusses aspects of their wellbeing that raise concern or begin to use their consultation with the Intern Representative therapeutically, they should instead be referred to the Employee Assistance Program (EAP).

**Social Media:** The Virginia Department of Human Resource Management (DHRM) has issued the following policy for state agencies. Please review the policy at:  
<https://www.dhrm.virginia.gov/docs/default-source/hrpolicy/pol175useofinternet.pdf>

**Outside Employment:** The program understands that interns may be interested in seeking employment outside their internship position during the course of the year. Please be advised that hospital employees (including interns) seeking outside employment are required to obtain prior written approval from the Hospital Chief Executive Officer (CEO) or designee as outlined in [CSH Outside Employment policy \(JI 8-18b\)](#) to ensure there is no conflict of interest.

# Appendix A: Didactic Calendar

## Psychology Internship Didactic/Group Supervision Schedule 2024-2025

- Didactics and *Group Supervision* will be held on Mondays in Building 43, Room 27 from 12:00pm to 1:00pm unless otherwise noted
- *Case Law Seminars* will be held on Mondays virtually via MS Teams
- *CMEs* are held twice monthly from Central State Hospital from 3:30pm to 5:00pm virtually via MS Teams
- *Forensic Seminar Series* will be hosted by Eastern State Hospital on Wednesdays from 11:00am to 1:00pm
- *Other trainings* as indicated

### August 2024

<p><i>August 12 through August 19:</i></p> <ul style="list-style-type: none"> <li>• <i>Hospital Orientation/New Employee Training (Room Assignment Provided by HR)</i></li> </ul>	<p><i>Interns will be oriented to mandatory hospital policies and receive required trainings necessary to begin working within the agency.</i></p>
<p><i>August 20 and 21:</i></p> <ul style="list-style-type: none"> <li>• <i>Psychology Department Training w/ Dr. Clay (B113, Conference Room)</i></li> </ul>	<p><i>Interns will be oriented to policies, assessments, and tasks necessary for the Psychology Department</i></p>
<p><i>August 22:</i></p> <ul style="list-style-type: none"> <li>• <i>9:00am-12:00pm: VITA Set Up, Columbia Risk Assessment Training, and WAIS-IV Test Out w/ Primary Supervisors</i></li> </ul>	<ul style="list-style-type: none"> <li>• <i>With the assistance of their primary supervisor, interns will be provided access to the hospital's electronic system (VITA). Once provided access, interns will complete the final quiz for the Columbia Suicide Risk Assessment training completed during orientation. They will also administer a mock WAIS-IV administration to their primary supervisor.</i></li> </ul>
<p><i>August 26:</i></p> <ul style="list-style-type: none"> <li>• <i>12:00pm - 1:00pm: Didactic: Mental Status Examinations (Dr. Brandon Riley)</i></li> <li>• <i>3:00pm to 4:00pm - Case Law Seminar</i></li> </ul>	<ul style="list-style-type: none"> <li>• <i>Dr. Brandon Riley will provide a training on mental status examinations to include the various domains that should be documented within these examinations.</i></li> <li>• <i>CSH's Forensic Evaluation Team hosts a weekly landmark case law series during the training year. The cases discussed are drawn from the recommended reading list provided by the American Board of Forensic Psychology (ABFP) for preparation for board certification in Forensic Psychology.</i></li> </ul>

<p>August 29:</p> <ul style="list-style-type: none"> <li>11:00am – 1:00pm: Forensic Seminar Series</li> </ul>	<p><i>In conjunction with Eastern State Hospital, the forensic seminar series is a didactic series specifically meant to cover the areas that fall under forensic psychology to include (but not limited to) pretrial criminal evaluations (CST, MSO), violence risk assessment, post-adjudication evaluations (NGRI), civil commitment, sex offender evaluation and treatment, juvenile justice, other civil matters, malingering, psychopathy, probation, other criminal competencies, child custody, workers comp, death penalty, and treatment in forensic contexts.</i></p>
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**September 2024**

<p>September 2: Labor Day (Holiday)</p>	
<p>September 5: 11:00am – 1:00pm: Forensic Seminar Series</p>	<p><i>In conjunction with Eastern State Hospital, the forensic seminar series is a didactic series specifically meant to cover the areas that fall under forensic psychology to include (but not limited to) pretrial criminal evaluations (CST, MSO), violence risk assessment, post-adjudication evaluations (NGRI), civil commitment, sex offender evaluation and treatment, juvenile justice, other civil matters, malingering, psychopathy, probation, other criminal competencies, child custody, workers comp, death penalty, and treatment in forensic contexts.</i></p>
<p>September 9:</p> <ul style="list-style-type: none"> <li>12:00 pm – 1:00pm Group Supervision (Dr. Clay)</li> <li>3:00pm to 4:00pm - Case Law Seminar</li> </ul>	<ul style="list-style-type: none"> <li><i>CSH's Forensic Evaluation Team hosts a weekly landmark case law series during the training year. The cases discussed are drawn from the recommended reading list provided by the American Board of Forensic Psychology (ABFP) for preparation for board certification in Forensic Psychology.</i></li> </ul>
<p>September 12:</p> <ul style="list-style-type: none"> <li>11:00am – 1:00pm: Forensic Seminar Series</li> </ul>	<p><i>In conjunction with Eastern State Hospital, the forensic seminar series is a didactic series specifically meant to cover the areas that fall under forensic psychology to include (but not limited to) pretrial criminal evaluations (CST, MSO), violence risk assessment, post-adjudication evaluations (NGRI), civil commitment, sex offender evaluation and treatment, juvenile justice, other civil matters, malingering, psychopathy, probation, other criminal competencies, child custody, workers comp, death penalty, and treatment in forensic contexts.</i></p>
<p>September 13:</p> <ul style="list-style-type: none"> <li>ILPPP Violence Risk AND Threat Assessment of Adults</li> </ul>	<p><i>Interns will attend the Institute of Law, Psychiatry, and Public Policy (ILPPP) at the University of Virginia to further their understanding of the HCR-20 Violence Risk Assessment tool and its application within the NGRI process.</i></p>

<p>September 16:</p> <ul style="list-style-type: none"> <li>12:00pm - 1:00pm Didactic: Competency to Stand Trial (Dr. Helen Greenbacker)</li> <li>3:00pm to 4:00pm - Case Law Seminar</li> </ul>	<ul style="list-style-type: none"> <li>Dr. Helen Greenbacker will provide an overview of Virginia's Competency to Stand Trial statutes and describe how pre-trial defendants are assessed under this legal code.</li> <li>CSH's Forensic Evaluation Team hosts a weekly landmark case law series during the training year. The cases discussed are drawn from the recommended reading list provided by the American Board of Forensic Psychology (ABFP) for preparation for board certification in Forensic Psychology.</li> </ul>
<p>September 19:</p> <p>11:00am – 1:00pm: Forensic Seminar Series</p>	<p><i>In conjunction with Eastern State Hospital, the forensic seminar series is a didactic series specifically meant to cover the areas that fall under forensic psychology to include (but not limited to) pretrial criminal evaluations (CST, MSO), violence risk assessment, post-adjudication evaluations (NGRI), civil commitment, sex offender evaluation and treatment, juvenile justice, other civil matters, malingering, psychopathy, probation, other criminal competencies, child custody, workers comp, death penalty, and treatment in forensic contexts.</i></p>
<p>September 23:</p> <ul style="list-style-type: none"> <li>12:00 pm – 1:00pm Group Supervision (Dr. Clay)</li> <li>3:00pm to 4:00pm - Case Law Seminar</li> </ul>	<ul style="list-style-type: none"> <li>CSH's Forensic Evaluation Team hosts a weekly landmark case law series during the training year. The cases discussed are drawn from the recommended reading list provided by the American Board of Forensic Psychology (ABFP) for preparation for board certification in Forensic Psychology.</li> </ul>
<p>September 26:</p> <p>11:00am – 1:00pm: Forensic Seminar Series</p>	<ul style="list-style-type: none"> <li><i>In conjunction with Eastern State Hospital, the forensic seminar series is a didactic series specifically meant to cover the areas that fall under forensic psychology to include (but not limited to) pretrial criminal evaluations (CST, MSO), violence risk assessment, post-adjudication evaluations (NGRI), civil commitment, sex offender evaluation and treatment, juvenile justice, other civil matters, malingering, psychopathy, probation, other criminal competencies, child custody, workers comp, death penalty, and treatment in forensic contexts.</i></li> </ul>
<p>September 30:</p> <ul style="list-style-type: none"> <li>12:00pm – 1:00pm Didactic: The NGRI Process (Dr. Melissa Raby)</li> <li>3:00pm to 4:00pm - Case Law Seminar</li> </ul>	<ul style="list-style-type: none"> <li>Dr. Melissa Raby will provide an overview of the temporary custody and gradual release process for individuals adjudicated Not Guilty by Reason of Insanity.</li> <li>CSH's Forensic Evaluation Team hosts a weekly landmark case law series during the training year. The cases discussed are drawn from the recommended reading list provided by the American Board of Forensic Psychology (ABFP) for preparation for board certification in Forensic Psychology.</li> </ul>

October 2024

<p>October 3: 11:00am – 1:00pm: Forensic Seminar Series</p>	<p><i>In conjunction with Eastern State Hospital, the forensic seminar series is a didactic series specifically meant to cover the areas that fall under forensic psychology to include (but not limited to) pretrial criminal evaluations (CST, MSO), violence risk assessment, post-adjudication evaluations (NGRI), civil commitment, sex offender evaluation and treatment, juvenile justice, other civil matters, malingering, psychopathy, probation, other criminal competencies, child custody, workers comp, death penalty, and treatment in forensic contexts.</i></p>
<p>October 7:</p> <ul style="list-style-type: none"> <li>• 12:00 pm – 1:00pm Group Supervision (Dr. Clay)</li> <li>• 3:00pm to 4:00pm - Case Law Seminar</li> </ul>	<ul style="list-style-type: none"> <li>• <i>CSH's Forensic Evaluation Team hosts a weekly landmark case law series during the training year. The cases discussed are drawn from the recommended reading list provided by the American Board of Forensic Psychology (ABFP) for preparation for board certification in Forensic Psychology.</i></li> </ul>
<p>October 10: 11:00am – 1:00pm: Forensic Seminar Series</p>	<p><i>In conjunction with Eastern State Hospital, the forensic seminar series is a didactic series specifically meant to cover the areas that fall under forensic psychology to include (but not limited to) pretrial criminal evaluations (CST, MSO), violence risk assessment, post-adjudication evaluations (NGRI), civil commitment, sex offender evaluation and treatment, juvenile justice, other civil matters, malingering, psychopathy, probation, other criminal competencies, child custody, workers comp, death penalty, and treatment in forensic contexts.</i></p>
<p>October 14:</p> <ul style="list-style-type: none"> <li>• 12:00pm – 1:00pm: The Role of Social Workers in the NGRI Process (Ms. Jacqueline Reinert-Hicks)</li> <li>• 3:00pm to 4:00pm - Case Law Seminar</li> </ul>	<ul style="list-style-type: none"> <li>• <i>Ms. Reinert-Hicks will discuss the role of social workers within the inpatient and outpatient setting as it relates to NGRI acquittees. She will also provide an overview of services available to our clients after being discharged from the hospital setting.</i></li> <li>• <i>CSH's Forensic Evaluation Team hosts a weekly landmark case law series during the training year. The cases discussed are drawn from the recommended reading list provided by the American Board of Forensic Psychology (ABFP) for preparation for board certification in Forensic Psychology.</i></li> </ul>
<p>October 17: 11:00am – 1:00pm: Forensic Seminar Series</p>	<p><i>In conjunction with Eastern State Hospital, the forensic seminar series is a didactic series specifically meant to cover the areas that fall under forensic psychology to include (but not limited to) pretrial criminal evaluations (CST, MSO), violence risk assessment, post-adjudication evaluations (NGRI), civil commitment, sex offender evaluation and treatment, juvenile justice, other civil matters, malingering, psychopathy, probation, other criminal competencies, child custody, workers comp, death penalty, and treatment in forensic contexts.</i></p>
<p>October 21:</p>	

<ul style="list-style-type: none"> <li>• 12:00 pm – 1:00pm Group Supervision (Dr. Clay)</li> <li>• 3:00pm to 4:00pm - Case Law Seminar</li> </ul>	<ul style="list-style-type: none"> <li>• CSH's Forensic Evaluation Team hosts a weekly landmark case law series during the training year. The cases discussed are drawn from the recommended reading list provided by the American Board of Forensic Psychology (ABFP) for preparation for board certification in Forensic Psychology.</li> </ul>
<p>October 24: 11:00am – 1:00pm: Forensic Seminar Series</p>	<p><i>In conjunction with Eastern State Hospital, the forensic seminar series is a didactic series specifically meant to cover the areas that fall under forensic psychology to include (but not limited to) pretrial criminal evaluations (CST, MSO), violence risk assessment, post-adjudication evaluations (NGRI), civil commitment, sex offender evaluation and treatment, juvenile justice, other civil matters, malingering, psychopathy, probation, other criminal competencies, child custody, workers comp, death penalty, and treatment in forensic contexts.</i></p>
<p>October 28:</p> <ul style="list-style-type: none"> <li>• 12:00pm – 1:00pm: Sanity at the Time of the Offense (Dr. Brandon Riley)</li> <li>• 3:00pm to 4:00pm - Case Law Seminar</li> </ul>	<ul style="list-style-type: none"> <li>• Dr. Brandon Riley will provide an overview on Virginia's legal statute for evaluating sanity at the time of the offense and how the concept is assessed.</li> <li>• CSH's Forensic Evaluation Team hosts a weekly landmark case law series during the training year. The cases discussed are drawn from the recommended reading list provided by the American Board of Forensic Psychology (ABFP) for preparation for board certification in Forensic Psychology.</li> </ul>
<p>October 31: 11:00am – 1:00pm: Forensic Seminar Series</p>	<p><i>In conjunction with Eastern State Hospital, the forensic seminar series is a didactic series specifically meant to cover the areas that fall under forensic psychology to include (but not limited to) pretrial criminal evaluations (CST, MSO), violence risk assessment, post-adjudication evaluations (NGRI), civil commitment, sex offender evaluation and treatment, juvenile justice, other civil matters, malingering, psychopathy, probation, other criminal competencies, child custody, workers comp, death penalty, and treatment in forensic contexts.</i></p>

November 2024

<p>November 4:</p> <ul style="list-style-type: none"> <li>• 12:00 pm – 1:00pm Group Supervision/Internship Interview Discussion (Dr. Clay)</li> <li>• 3:00pm to 4:00pm - Case Law Seminar</li> </ul>	<ul style="list-style-type: none"> <li>• In addition to facilitating typical group supervision discussion, Dr. Clay will provide guidance on internship interview preparation.</li> <li>• CSH's Forensic Evaluation Team hosts a weekly landmark case law series during the training year. The cases discussed are drawn from the recommended reading list provided by the American Board of Forensic Psychology (ABFP) for preparation for board certification in Forensic Psychology.</li> </ul>
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<p>November 7: 11:00am – 1:00pm: Forensic Seminar Series</p>	<p><i>In conjunction with Eastern State Hospital, the forensic seminar series is a didactic series specifically meant to cover the areas that fall under forensic psychology to include (but not limited to) pretrial criminal evaluations (CST, MSO), violence risk assessment, post-adjudication evaluations (NGRI), civil commitment, sex offender evaluation and treatment, juvenile justice, other civil matters, malingering, psychopathy, probation, other criminal competencies, child custody, workers comp, death penalty, and treatment in forensic contexts.</i></p>
<p>November 11:</p> <ul style="list-style-type: none"> <li>• 12:00 pm – 1:00pm Group Supervision (Dr. Clay)</li> <li>• 3:00pm to 4:00pm - Case Law Seminar</li> </ul>	<ul style="list-style-type: none"> <li>• <i>CSH's Forensic Evaluation Team hosts a weekly landmark case law series during the training year. The cases discussed are drawn from the recommended reading list provided by the American Board of Forensic Psychology (ABFP) for preparation for board certification in Forensic Psychology.</i></li> </ul>
<p>November 14: 11:00am – 1:00pm: Forensic Seminar Series</p>	<p><i>In conjunction with Eastern State Hospital, the forensic seminar series is a didactic series specifically meant to cover the areas that fall under forensic psychology to include (but not limited to) pretrial criminal evaluations (CST, MSO), violence risk assessment, post-adjudication evaluations (NGRI), civil commitment, sex offender evaluation and treatment, juvenile justice, other civil matters, malingering, psychopathy, probation, other criminal competencies, child custody, workers comp, death penalty, and treatment in forensic contexts.</i></p>
<p>November 18:</p> <ul style="list-style-type: none"> <li>• 12:00pm – 1:00pm: Didactic: Review of the HCR-20<sup>v3</sup> and Risk Assessment (Dr. Barbara Hernandez)</li> <li>• 3:00pm to 4:00pm - Case Law Seminar</li> </ul>	<ul style="list-style-type: none"> <li>• Dr. Barbara Hernandez will provide an overview of the HCR-20 Violence Risk Assessment tool and discuss its application within the NGRI process.</li> <li>• <i>CSH's Forensic Evaluation Team hosts a weekly landmark case law series during the training year. The cases discussed are drawn from the recommended reading list provided by the American Board of Forensic Psychology (ABFP) for preparation for board certification in Forensic Psychology</i></li> </ul>
<p>November 21: 11:00am – 1:00pm: Forensic Seminar Series</p>	<ul style="list-style-type: none"> <li>• <i>In conjunction with Eastern State Hospital, the forensic seminar series is a didactic series specifically meant to cover the areas that fall under forensic psychology to include (but not limited to) pretrial criminal evaluations (CST, MSO), violence risk assessment, post-adjudication evaluations (NGRI), civil commitment, sex offender evaluation and treatment, juvenile justice, other civil matters, malingering, psychopathy, probation, other criminal competencies, child custody, workers comp, death penalty, and treatment in forensic contexts.</i></li> </ul>

<p>November 25:</p> <ul style="list-style-type: none"> <li>3:00pm to 4:00pm - Case Law Seminar</li> </ul>	<ul style="list-style-type: none"> <li>CSH's Forensic Evaluation Team hosts a weekly landmark case law series during the training year. The cases discussed are drawn from the recommended reading list provided by the American Board of Forensic Psychology (ABFP) for preparation for board certification in Forensic Psychology.</li> </ul>
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**December 2024**

<p>December 2:</p> <ul style="list-style-type: none"> <li>12:00 pm – 1:00pm Group Supervision</li> <li>3:00pm to 4:00pm - Case Law Seminar</li> </ul>	<p>CSH's Forensic Evaluation Team hosts a weekly landmark case law series during the training year. The cases discussed are drawn from the recommended reading list provided by the American Board of Forensic Psychology (ABFP) for preparation for board certification in Forensic Psychology.</p>
<p>December 5: 11:00am – 1:00pm: Forensic Seminar Series</p>	<p>In conjunction with Eastern State Hospital, the forensic seminar series is a didactic series specifically meant to cover the areas that fall under forensic psychology to include (but not limited to) pretrial criminal evaluations (CST, MSO), violence risk assessment, post-adjudication evaluations (NGRI), civil commitment, sex offender evaluation and treatment, juvenile justice, other civil matters, malingering, psychopathy, probation, other criminal competencies, child custody, workers comp, death penalty, and treatment in forensic contexts.</p>
<p>December 9-11: ILPPP (UVA) Basic Adult Forensic Assessment</p>	<p>Interns will attend a one-week intensive workshop covering the basic principles of forensic evaluation at the Institute of Law, Psychiatry, and Public Policy (ILPPP) at the University of Virginia.</p>
<p>December 16:</p> <ul style="list-style-type: none"> <li>12:00 pm – 1:00pm Group Supervision</li> <li>3:00pm to 4:00pm - Case Law Seminar</li> </ul>	<p>CSH's Forensic Evaluation Team hosts a weekly landmark case law series during the training year. The cases discussed are drawn from the recommended reading list provided by the American Board of Forensic Psychology (ABFP) for preparation for board certification in Forensic Psychology.</p>
<p>December 19: 11:00am – 1:00pm: Forensic Seminar Series</p>	<p>In conjunction with Eastern State Hospital, the forensic seminar series is a didactic series specifically meant to cover the areas that fall under forensic psychology to include (but not limited to) pretrial criminal evaluations (CST, MSO), violence risk assessment, post-adjudication evaluations (NGRI), civil commitment, sex offender evaluation and treatment, juvenile justice, other civil matters, malingering, psychopathy, probation, other criminal competencies, child custody, workers comp, death penalty, and treatment in forensic contexts.</p>
<p>December 23: Christmas Break</p>	
<p>December 30: New Year Holiday Break</p>	

**January 2025**

<p>January 6:  12:00 pm – 1:00pm Group Supervision  3:00pm to 4:00pm - Case Law Seminar</p>	<p>CSH's Forensic Evaluation Team hosts a weekly landmark case law series during the training year. The cases discussed are drawn from the recommended reading list provided by the American Board of Forensic Psychology (ABFP) for preparation for board certification in Forensic Psychology.</p>
<p>January 9:  11:00am – 1:00pm: Forensic Seminar Series</p>	<p>In conjunction with Eastern State Hospital, the forensic seminar series is a didactic series specifically meant to cover the areas that fall under forensic psychology to include (but not limited to) pretrial criminal evaluations (CST, MSO), violence risk assessment, post-adjudication evaluations (NGRI), civil commitment, sex offender evaluation and treatment, juvenile justice, other civil matters, malingering, psychopathy, probation, other criminal competencies, child custody, workers comp, death penalty, and treatment in forensic contexts.</p>
<p>January 13:  Didactic: Substance Use Treatment (Paul Fletcher)  3:00pm to 4:00pm - Case Law Seminar</p>	<ul style="list-style-type: none"> <li>• Mr. Paul Fletcher, certified substance abuse counselor, will discuss the physiology of addiction and the pharmacological approach to substance abuse treatment.</li> <li>• CSH's Forensic Evaluation Team hosts a weekly landmark case law series during the training year. The cases discussed are drawn from the recommended reading list provided by the American Board of Forensic Psychology (ABFP) for preparation for board certification in Forensic Psychology.</li> </ul>
<p>January 16:  11:00am – 1:00pm: Forensic Seminar Series</p>	<p>In conjunction with Eastern State Hospital, the forensic seminar series is a didactic series specifically meant to cover the areas that fall under forensic psychology to include (but not limited to) pretrial criminal evaluations (CST, MSO), violence risk assessment, post-adjudication evaluations (NGRI), civil commitment, sex offender evaluation and treatment, juvenile justice, other civil matters, malingering, psychopathy, probation, other criminal competencies, child custody, workers comp, death penalty, and treatment in forensic contexts.</p>
<p>January 20: Martin L. King, Jr. Day (Holiday)</p>	
<p>January 23:  11:00am – 1:00pm: Forensic Seminar Series</p>	<p>In conjunction with Eastern State Hospital, the forensic seminar series is a didactic series specifically meant to cover the areas that fall under forensic psychology to include (but not limited to) pretrial criminal evaluations (CST, MSO), violence risk assessment, post-adjudication evaluations (NGRI), civil commitment, sex offender evaluation and treatment, juvenile justice, other civil matters, malingering, psychopathy, probation, other criminal competencies, child custody, workers comp, death penalty, and treatment in forensic contexts.</p>
<p>January 27:  12:00 pm – 1:00pm Group Supervision  3:00pm to 4:00pm - Case Law Seminar</p>	<p>CSH's Forensic Evaluation Team hosts a weekly landmark case law series during the training year. The cases discussed are drawn from the recommended reading list provided by the American Board of</p>

	<i>Forensic Psychology (ABFP) for preparation for board certification in Forensic Psychology.</i>
January 30: 11:00am – 1:00pm: Forensic Seminar Series	<i>In conjunction with Eastern State Hospital, the forensic seminar series is a didactic series specifically meant to cover the areas that fall under forensic psychology to include (but not limited to) pretrial criminal evaluations (CST, MSO), violence risk assessment, post-adjudication evaluations (NGRI), civil commitment, sex offender evaluation and treatment, juvenile justice, other civil matters, malingering, psychopathy, probation, other criminal competencies, child custody, workers comp, death penalty, and treatment in forensic contexts.</i>

**February 2025**

February 3: 12:00 – 1:00pm Didactic: Psychopharmacology Series (Dr. Robert Gardella) 3:00pm to 4:00pm - Case Law Seminar	<ul style="list-style-type: none"> <li>• Dr. Robert Gardella will discuss the physiology of psychiatric disorders and how they are treated in a forensic setting.</li> </ul> <i>CSH's Forensic Evaluation Team hosts a weekly landmark case law series during the training year. The cases discussed are drawn from the recommended reading list provided by the American Board of Forensic Psychology (ABFP) for preparation for board certification in Forensic Psychology.</i>
February 6: 11:00am – 1:00pm: Forensic Seminar Series	<i>In conjunction with Eastern State Hospital, the forensic seminar series is a didactic series specifically meant to cover the areas that fall under forensic psychology to include (but not limited to) pretrial criminal evaluations (CST, MSO), violence risk assessment, post-adjudication evaluations (NGRI), civil commitment, sex offender evaluation and treatment, juvenile justice, other civil matters, malingering, psychopathy, probation, other criminal competencies, child custody, workers comp, death penalty, and treatment in forensic contexts.</i>
February 10: 12:00 pm – 1:00pm Group Supervision 3:00pm to 4:00pm - Case Law Seminar	<i>CSH's Forensic Evaluation Team hosts a weekly landmark case law series during the training year. The cases discussed are drawn from the recommended reading list provided by the American Board of Forensic Psychology (ABFP) for preparation for board certification in Forensic Psychology.</i>
February 13: 11:00am – 1:00pm: Forensic Seminar Series	<ul style="list-style-type: none"> <li>• <i>In conjunction with Eastern State Hospital, the forensic seminar series is a didactic series specifically meant to cover the areas that fall under forensic psychology to include (but not limited to) pretrial criminal evaluations (CST, MSO), violence risk assessment, post-adjudication evaluations (NGRI), civil commitment, sex offender evaluation and treatment, juvenile justice, other civil matters, malingering, psychopathy, probation, other criminal competencies, child custody, workers comp, death penalty, and treatment in forensic contexts.</i></li> </ul>

February 17: President's Day (Holiday)	
February 20: 11:00am – 1:00pm: Forensic Seminar Series	<i>In conjunction with Eastern State Hospital, the forensic seminar series is a didactic series specifically meant to cover the areas that fall under forensic psychology to include (but not limited to) pretrial criminal evaluations (CST, MSO), violence risk assessment, post-adjudication evaluations (NGRI), civil commitment, sex offender evaluation and treatment, juvenile justice, other civil matters, malingering, psychopathy, probation, other criminal competencies, child custody, workers comp, death penalty, and treatment in forensic contexts.</i>
February 24: 12:00pm – 1:00pm Didactic: Racial & Ethnic Diversity 3:00pm to 4:00pm - Case Law Seminar	<ul style="list-style-type: none"> <li>• <i>Dr. Meredith Cain Munson will lead a discussion in exploration of diversity factors relevant to diagnosing severe mental illness in a forensic setting.</i></li> <li>• <i>CSH's Forensic Evaluation Team hosts a weekly landmark case law series during the training year. The cases discussed are drawn from the recommended reading list provided by the American Board of Forensic Psychology (ABFP) for preparation for board certification in Forensic Psychology.</i></li> </ul>
February 27: 11:00am – 1:00pm: Forensic Seminar Series	<i>In conjunction with Eastern State Hospital, the forensic seminar series is a didactic series specifically meant to cover the areas that fall under forensic psychology to include (but not limited to) pretrial criminal evaluations (CST, MSO), violence risk assessment, post-adjudication evaluations (NGRI), civil commitment, sex offender evaluation and treatment, juvenile justice, other civil matters, malingering, psychopathy, probation, other criminal competencies, child custody, workers comp, death penalty, and treatment in forensic contexts.</i>

### March 2025

March 3: 12:00pm – 1:00pm Didactic: Capacity vs. Competency (Dr. Robert Gardella) 3:00pm to 4:00pm - Case Law Seminar	<ul style="list-style-type: none"> <li>• <i>Dr. Robert Gardella will provide an overview on how capacity is established within inpatient hospitalization and how this concept differs from an individual's competency to stand trial.</i></li> <li>• <i>CSH's Forensic Evaluation Team hosts a weekly landmark case law series during the training year. The cases discussed are drawn from the recommended reading list provided by the American Board of Forensic Psychology (ABFP) for preparation for board certification in Forensic Psychology.</i></li> </ul>
March 6: 11:00am – 1:00pm: Forensic Seminar Series	<i>In conjunction with Eastern State Hospital, the forensic seminar series is a didactic series specifically meant to cover the areas that fall under forensic psychology to include (but not limited to) pretrial criminal evaluations (CST, MSO), violence risk assessment, post-adjudication evaluations (NGRI), civil</i>

	<i>commitment, sex offender evaluation and treatment, juvenile justice, other civil matters, malingering, psychopathy, probation, other criminal competencies, child custody, workers comp, death penalty, and treatment in forensic contexts.</i>
<p>March 10:</p> <p><i>12:00 pm – 1:00pm Group Supervision</i></p> <p><i>3:00pm to 4:00pm - Case Law Seminar</i></p>	<i>CSH's Forensic Evaluation Team hosts a weekly landmark case law series during the training year. The cases discussed are drawn from the recommended reading list provided by the American Board of Forensic Psychology (ABFP) for preparation for board certification in Forensic Psychology.</i>
<p>March 13:</p> <p><i>11:00am – 1:00pm: Forensic Seminar Series</i></p>	<i>In conjunction with Eastern State Hospital, the forensic seminar series is a didactic series specifically meant to cover the areas that fall under forensic psychology to include (but not limited to) pretrial criminal evaluations (CST, MSO), violence risk assessment, post-adjudication evaluations (NGRI), civil commitment, sex offender evaluation and treatment, juvenile justice, other civil matters, malingering, psychopathy, probation, other criminal competencies, child custody, workers comp, death penalty, and treatment in forensic contexts.</i>
<p>March 17:</p> <p><i>12:00 – 1:00pm Didactic: Trauma-Informed Care (Dr. Brandi Justice)</i></p> <p><i>3:00pm to 4:00pm - Case Law Seminar</i></p>	<ul style="list-style-type: none"> <li>• <i>Dr. Brandi Justice will provide an overview of trauma-informed care and discuss how this concept is utilized within the hospital setting.</i></li> <li>• <i>CSH's Forensic Evaluation Team hosts a weekly landmark case law series during the training year. The cases discussed are drawn from the recommended reading list provided by the American Board of Forensic Psychology (ABFP) for preparation for board certification in Forensic Psychology.</i></li> </ul>
<p>March 20:</p> <p><i>11:00am – 1:00pm: Forensic Seminar Series</i></p>	<i>In conjunction with Eastern State Hospital, the forensic seminar series is a didactic series specifically meant to cover the areas that fall under forensic psychology to include (but not limited to) pretrial criminal evaluations (CST, MSO), violence risk assessment, post-adjudication evaluations (NGRI), civil commitment, sex offender evaluation and treatment, juvenile justice, other civil matters, malingering, psychopathy, probation, other criminal competencies, child custody, workers comp, death penalty, and treatment in forensic contexts.</i>
<p>March 24:</p> <p><i>12:00 pm – 1:00pm Group Supervision</i></p> <p><i>3:00pm to 4:00pm - Case Law Seminar</i></p>	<i>CSH's Forensic Evaluation Team hosts a weekly landmark case law series during the training year. The cases discussed are drawn from the recommended reading list provided by the American Board of Forensic Psychology (ABFP) for preparation for board certification in Forensic Psychology.</i>
<p>March 27:</p> <p><i>11:00am – 1:00pm: Forensic Seminar Series</i></p>	<i>In conjunction with Eastern State Hospital, the forensic seminar series is a didactic series specifically meant to cover the areas that fall under forensic psychology to include (but not limited to) pretrial criminal evaluations (CST, MSO), violence risk assessment, post-adjudication evaluations (NGRI), civil</i>

	<i>commitment, sex offender evaluation and treatment, juvenile justice, other civil matters, malingering, psychopathy, probation, other criminal competencies, child custody, workers comp, death penalty, and treatment in forensic contexts.</i>
<p>March 31:  12:00pm – 1:00pm Didactic: Assessment of Malingering, Part 1 (Dr. Natalie Armstrong)  3:00pm to 4:00pm - Case Law Seminar</p>	<ul style="list-style-type: none"> <li>• Dr. Natalie Armstrong will provide an overview on the intricacies of malingering within a forensic setting and how the concept is assessed.</li> <li>• CSH's Forensic Evaluation Team hosts a weekly landmark case law series during the training year. The cases discussed are drawn from the recommended reading list provided by the American Board of Forensic Psychology (ABFP) for preparation for board certification in Forensic Psychology.</li> </ul>

April 2025

<p>April 3:  11:00am – 1:00pm: Forensic Seminar Series</p>	<i>In conjunction with Eastern State Hospital, the forensic seminar series is a didactic series specifically meant to cover the areas that fall under forensic psychology to include (but not limited to) pretrial criminal evaluations (CST, MSO), violence risk assessment, post-adjudication evaluations (NGRI), civil commitment, sex offender evaluation and treatment, juvenile justice, other civil matters, malingering, psychopathy, probation, other criminal competencies, child custody, workers comp, death penalty, and treatment in forensic contexts.</i>
<p>April 7:  12:00 pm – 1:00pm Group Supervision  3:00pm to 4:00pm - Case Law Seminar</p>	<i>CSH's Forensic Evaluation Team hosts a weekly landmark case law series during the training year. The cases discussed are drawn from the recommended reading list provided by the American Board of Forensic Psychology (ABFP) for preparation for board certification in Forensic Psychology.</i>
<p>April 10:  11:00am – 1:00pm: Forensic Seminar Series</p>	<i>In conjunction with Eastern State Hospital, the forensic seminar series is a didactic series specifically meant to cover the areas that fall under forensic psychology to include (but not limited to) pretrial criminal evaluations (CST, MSO), violence risk assessment, post-adjudication evaluations (NGRI), civil commitment, sex offender evaluation and treatment, juvenile justice, other civil matters, malingering, psychopathy, probation, other criminal competencies, child custody, workers comp, death penalty, and treatment in forensic contexts.</i>
<p>April 14:  12:00pm – 1:00pm  Didactic: Assessment of Malingering, Part 2 (Dr. Natalie Armstrong)  3:00pm to 4:00pm - Case Law Seminar</p>	<ul style="list-style-type: none"> <li>• Dr. Natalie Armstrong will provide an overview on the intricacies of malingering within a forensic setting and how the concept is assessed.</li> <li>• CSH's Forensic Evaluation Team hosts a weekly landmark case law series during the training year. The cases discussed are drawn from the recommended reading list provided</li> </ul>

	<p><i>by the American Board of Forensic Psychology (ABFP) for preparation for board certification in Forensic Psychology.</i></p>
<p><b>April 17:</b> 11:00am – 1:00pm: Forensic Seminar Series</p>	<p><i>In conjunction with Eastern State Hospital, the forensic seminar series is a didactic series specifically meant to cover the areas that fall under forensic psychology to include (but not limited to) pretrial criminal evaluations (CST, MSO), violence risk assessment, post-adjudication evaluations (NGRI), civil commitment, sex offender evaluation and treatment, juvenile justice, other civil matters, malingering, psychopathy, probation, other criminal competencies, child custody, workers comp, death penalty, and treatment in forensic contexts.</i></p>
<p><b>April 21:</b> 12:00 pm – 1:00pm Group Supervision 3:00pm to 4:00pm - Case Law Seminar</p>	<p><i>CSH's Forensic Evaluation Team hosts a weekly landmark case law series during the training year. The cases discussed are drawn from the recommended reading list provided by the American Board of Forensic Psychology (ABFP) for preparation for board certification in Forensic Psychology.</i></p>
<p><b>April 24:</b> 11:00am – 1:00pm: Forensic Seminar Series</p>	<p><i>In conjunction with Eastern State Hospital, the forensic seminar series is a didactic series specifically meant to cover the areas that fall under forensic psychology to include (but not limited to) pretrial criminal evaluations (CST, MSO), violence risk assessment, post-adjudication evaluations (NGRI), civil commitment, sex offender evaluation and treatment, juvenile justice, other civil matters, malingering, psychopathy, probation, other criminal competencies, child custody, workers comp, death penalty, and treatment in forensic contexts.</i></p>
<p><b>April 28:</b> 12:00pm – 1:00pm Didactic: Evaluation of Sexual Offenders, Part 1 (Dr. Helen Greenbacker) 3:00pm to 4:00pm - Case Law Seminar</p>	<ul style="list-style-type: none"> <li>• <i>Dr. Helen Greenbacker will provide an overview of Virginia statutes related to the evaluation of sex offenders and discuss how clinicians provide this assessment.</i></li> <li>• <i>CSH's Forensic Evaluation Team hosts a weekly landmark case law series during the training year. The cases discussed are drawn from the recommended reading list provided by the American Board of Forensic Psychology (ABFP) for preparation for board certification in Forensic Psychology.</i></li> </ul>
<p><b>April 1:</b> 11:00am – 1:00pm: Forensic Seminar Series</p>	<ul style="list-style-type: none"> <li>• <i>In conjunction with Eastern State Hospital, the forensic seminar series is a didactic series specifically meant to cover the areas that fall under forensic psychology to include (but not limited to) pretrial criminal evaluations (CST, MSO), violence risk assessment, post-adjudication evaluations (NGRI), civil commitment, sex offender evaluation and treatment, juvenile justice, other civil matters, malingering, psychopathy, probation, other criminal competencies, child custody, workers comp, death penalty, and treatment in forensic contexts.</i></li> </ul>

May 2025

<p>May 5:  <i>12:00 pm – 1:00pm Group Supervision</i>  <i>3:00pm to 4:00pm - Case Law Seminar</i></p>	<p><i>CSH's Forensic Evaluation Team hosts a weekly landmark case law series during the training year. The cases discussed are drawn from the recommended reading list provided by the American Board of Forensic Psychology (ABFP) for preparation for board certification in Forensic Psychology.</i></p>
<p>May 8:  <i>11:00am – 1:00pm: Forensic Seminar Series</i></p>	<p><i>In conjunction with Eastern State Hospital, the forensic seminar series is a didactic series specifically meant to cover the areas that fall under forensic psychology to include (but not limited to) pretrial criminal evaluations (CST, MSO), violence risk assessment, post-adjudication evaluations (NGRI), civil commitment, sex offender evaluation and treatment, juvenile justice, other civil matters, malingering, psychopathy, probation, other criminal competencies, child custody, workers comp, death penalty, and treatment in forensic contexts.</i></p>
<p>May 12:  <i>12:00pm – 1:00pm</i>  <i>Didactic: Evaluation of Sexual Offenders, Part 2 (Dr. Helen Greenbacker)</i>  <i>3:00pm to 4:00pm - Case Law Seminar</i></p>	<ul style="list-style-type: none"> <li>• <i>Dr. Helen Greenbacker will provide an overview of Virginia statutes related to the evaluation of sex offenders and discuss how clinicians provide this assessment.</i></li> <li>• <i>CSH's Forensic Evaluation Team hosts a weekly landmark case law series during the training year. The cases discussed are drawn from the recommended reading list provided by the American Board of Forensic Psychology (ABFP) for preparation for board certification in Forensic Psychology.</i></li> </ul>
<p>May 15:  <i>11:00am – 1:00pm: Forensic Seminar Series</i></p>	<p><i>In conjunction with Eastern State Hospital, the forensic seminar series is a didactic series specifically meant to cover the areas that fall under forensic psychology to include (but not limited to) pretrial criminal evaluations (CST, MSO), violence risk assessment, post-adjudication evaluations (NGRI), civil commitment, sex offender evaluation and treatment, juvenile justice, other civil matters, malingering, psychopathy, probation, other criminal competencies, child custody, workers comp, death penalty, and treatment in forensic contexts.</i></p>
<p>May 19:  <i>12:00 pm – 1:00pm Group Supervision</i>  <i>3:00pm to 4:00pm - Case Law Seminar</i></p>	<p><i>CSH's Forensic Evaluation Team hosts a weekly landmark case law series during the training year. The cases discussed are drawn from the recommended reading list provided by the American Board of Forensic Psychology (ABFP) for preparation for board certification in Forensic Psychology.</i></p>
<p>May 22:  <i>11:00am – 1:00pm: Forensic Seminar Series</i></p>	<p><i>In conjunction with Eastern State Hospital, the forensic seminar series is a didactic series specifically meant to cover the areas that fall under forensic psychology to include (but not limited to) pretrial criminal evaluations (CST, MSO), violence risk assessment, post-adjudication evaluations (NGRI), civil commitment, sex offender evaluation and treatment, juvenile justice, other civil matters, malingering,</i></p>

	<i>psychopathy, probation, other criminal competencies, child custody, workers comp, death penalty, and treatment in forensic contexts.</i>
May 26: Memorial Day (Holiday)	
May 29: 11:00am – 1:00pm: Forensic Seminar Series	<i>In conjunction with Eastern State Hospital, the forensic seminar series is a didactic series specifically meant to cover the areas that fall under forensic psychology to include (but not limited to) pretrial criminal evaluations (CST, MSO), violence risk assessment, post-adjudication evaluations (NGRI), civil commitment, sex offender evaluation and treatment, juvenile justice, other civil matters, malingering, psychopathy, probation, other criminal competencies, child custody, workers comp, death penalty, and treatment in forensic contexts.</i>

June 2025

June 2: 12:00pm – 1:00pm <i>Didactic: Correctional Setting Psychology: Women Working in Forensic Settings (Dr. Jacquelyn Harris)</i> 3:00pm to 4:00pm - Case Law Seminar	<ul style="list-style-type: none"> <li>• <i>Dr. Jacquelyn Harris will provide an overview of challenges women find working in forensic settings and how to address these issues with clinical consideration.</i></li> <li>• <i>CSH's Forensic Evaluation Team hosts a weekly landmark case law series during the training year. The cases discussed are drawn from the recommended reading list provided by the American Board of Forensic Psychology (ABFP) for preparation for board certification in Forensic Psychology.</i></li> </ul>
June 5: 11:00am – 1:00pm: Forensic Seminar Series	<i>In conjunction with Eastern State Hospital, the forensic seminar series is a didactic series specifically meant to cover the areas that fall under forensic psychology to include (but not limited to) pretrial criminal evaluations (CST, MSO), violence risk assessment, post-adjudication evaluations (NGRI), civil commitment, sex offender evaluation and treatment, juvenile justice, other civil matters, malingering, psychopathy, probation, other criminal competencies, child custody, workers comp, death penalty, and treatment in forensic contexts.</i>
June 9: 12:00 pm – 1:00pm Group Supervision 3:00pm to 4:00pm - Case Law Seminar	<i>CSH's Forensic Evaluation Team hosts a weekly landmark case law series during the training year. The cases discussed are drawn from the recommended reading list provided by the American Board of Forensic Psychology (ABFP) for preparation for board certification in Forensic Psychology.</i>
June 12: 11:00am – 1:00pm: Forensic Seminar Series	<i>In conjunction with Eastern State Hospital, the forensic seminar series is a didactic series specifically meant to cover the areas that fall under forensic psychology to include (but not limited to) pretrial criminal evaluations (CST, MSO), violence risk assessment, post-adjudication evaluations (NGRI), civil commitment, sex offender evaluation and treatment, juvenile justice, other civil matters, malingering,</i>

	<i>psychopathy, probation, other criminal competencies, child custody, workers comp, death penalty, and treatment in forensic contexts.</i>
<p>June 16:  12:00pm – 1:00pm Didactic: Restoration of CST: Unpacking the Complexities and Optimizing Outcomes (Dr. Robert Gardella)  3:00pm to 4:00pm - Case Law Seminar</p>	<ul style="list-style-type: none"> <li>• Dr. Robert Gardella provides an overview of inpatient competency restoration services with consideration of the psychiatric provider's treatment approach.</li> <li>• CSH's Forensic Evaluation Team hosts a weekly landmark case law series during the training year. The cases discussed are drawn from the recommended reading list provided by the American Board of Forensic Psychology (ABFP) for preparation for board certification in Forensic Psychology.</li> </ul>
<p>June 19:  11:00am – 1:00pm: Forensic Seminar Series</p>	<i>In conjunction with Eastern State Hospital, the forensic seminar series is a didactic series specifically meant to cover the areas that fall under forensic psychology to include (but not limited to) pretrial criminal evaluations (CST, MSO), violence risk assessment, post-adjudication evaluations (NGRI), civil commitment, sex offender evaluation and treatment, juvenile justice, other civil matters, malingering, psychopathy, probation, other criminal competencies, child custody, workers comp, death penalty, and treatment in forensic contexts.</i>
<p>June 23:  12:00 pm – 1:00pm Group Supervision  3:00pm to 4:00pm - Case Law Seminar</p>	<i>CSH's Forensic Evaluation Team hosts a weekly landmark case law series during the training year. The cases discussed are drawn from the recommended reading list provided by the American Board of Forensic Psychology (ABFP) for preparation for board certification in Forensic Psychology.</i>
<p>June 26:  11:00am – 1:00pm: Forensic Seminar Series</p>	<i>In conjunction with Eastern State Hospital, the forensic seminar series is a didactic series specifically meant to cover the areas that fall under forensic psychology to include (but not limited to) pretrial criminal evaluations (CST, MSO), violence risk assessment, post-adjudication evaluations (NGRI), civil commitment, sex offender evaluation and treatment, juvenile justice, other civil matters, malingering, psychopathy, probation, other criminal competencies, child custody, workers comp, death penalty, and treatment in forensic contexts.</i>
<p>June 30:  12:00pm – 1:00pm Didactic: Inpatient Treatment and Considerations of those with Transgender Identities (Dr. Steven Crossman)  3:00pm to 4:00pm - Case Law Seminar</p>	<ul style="list-style-type: none"> <li>• Dr. Steven Crossman provides an overview of inpatient treatment and considerations for care of transgender patients in an inpatient setting.</li> <li>• CSH's Forensic Evaluation Team hosts a weekly landmark case law series during the training year. The cases discussed are drawn from the recommended reading list provided by the American Board of Forensic Psychology (ABFP) for preparation for board certification in Forensic Psychology.</li> </ul>

<p>July 3: 11:00am – 1:00pm: Forensic Seminar Series</p>	<p><i>In conjunction with Eastern State Hospital, the forensic seminar series is a didactic series specifically meant to cover the areas that fall under forensic psychology to include (but not limited to) pretrial criminal evaluations (CST, MSO), violence risk assessment, post-adjudication evaluations (NGRI), civil commitment, sex offender evaluation and treatment, juvenile justice, other civil matters, malingering, psychopathy, probation, other criminal competencies, child custody, workers comp, death penalty, and treatment in forensic contexts.</i></p>
<p>July 7: 12:00 pm – 1:00pm Group Supervision 3:00pm to 4:00pm - Case Law Seminar</p>	<p><i>CSH's Forensic Evaluation Team hosts a weekly landmark case law series during the training year. The cases discussed are drawn from the recommended reading list provided by the American Board of Forensic Psychology (ABFP) for preparation for board certification in Forensic Psychology.</i></p>
<p>July 10: 11:00am – 1:00pm: Forensic Seminar Series</p>	<p><i>In conjunction with Eastern State Hospital, the forensic seminar series is a didactic series specifically meant to cover the areas that fall under forensic psychology to include (but not limited to) pretrial criminal evaluations (CST, MSO), violence risk assessment, post-adjudication evaluations (NGRI), civil commitment, sex offender evaluation and treatment, juvenile justice, other civil matters, malingering, psychopathy, probation, other criminal competencies, child custody, workers comp, death penalty, and treatment in forensic contexts.</i></p>
<p>July 21: 12:00pm – 1:30pm Didactic: Issues Related to the Overlap of Religion and Mental Health (Dr. Meredith Cain Munson) 3:00pm to 4:00pm - Case Law Seminar</p>	<ul style="list-style-type: none"> <li>• <i>Dr. Cain Munson will provide an overview of challenges related to religion and psychiatric symptoms within the inpatient setting and how to address these matters using cultural competency.</i></li> <li>• <i>CSH's Forensic Evaluation Team hosts a weekly landmark case law series during the training year. The cases discussed are drawn from the recommended reading list provided by the American Board of Forensic Psychology (ABFP) for preparation for board certification in Forensic Psychology.</i></li> </ul>
<p>July 24: 11:00am – 1:00pm: Forensic Seminar Series</p>	<p><i>In conjunction with Eastern State Hospital, the forensic seminar series is a didactic series specifically meant to cover the areas that fall under forensic psychology to include (but not limited to) pretrial criminal evaluations (CST, MSO), violence risk assessment, post-adjudication evaluations (NGRI), civil commitment, sex offender evaluation and treatment, juvenile justice, other civil matters, malingering, psychopathy, probation, other criminal competencies, child custody, workers comp, death penalty, and treatment in forensic contexts.</i></p>
<p>July 28: 12:00 pm – 1:00pm Group Supervision 3:00pm to 4:00pm - Case Law Seminar</p>	<p><i>CSH's Forensic Evaluation Team hosts a weekly landmark case law series during the training year. The cases discussed are drawn from the recommended</i></p>

	<i>reading list provided by the American Board of Forensic Psychology (ABFP) for preparation for board certification in Forensic Psychology.</i>
<p>July 31:  11:00am – 1:00pm: Forensic Seminar Series</p>	<p><i>In conjunction with Eastern State Hospital, the forensic seminar series is a didactic series specifically meant to cover the areas that fall under forensic psychology to include (but not limited to) pretrial criminal evaluations (CST, MSO), violence risk assessment, post-adjudication evaluations (NGRI), civil commitment, sex offender evaluation and treatment, juvenile justice, other civil matters, malingering, psychopathy, probation, other criminal competencies, child custody, workers comp, death penalty, and treatment in forensic contexts.</i></p>

August 2025

<p>August 4:  12:00 pm – 1:00pm Group Supervision/Wrapping Up Internship  3:00pm to 4:00pm - Case Law Seminar</p>	<ul style="list-style-type: none"> <li><i>In addition to facilitating typical group supervision discussion, Dr. Clay will provide space for reflection on the internship year.</i></li> <li><i>CSH's Forensic Evaluation Team hosts a weekly landmark case law series during the training year. The cases discussed are drawn from the recommended reading list provided by the American Board of Forensic Psychology (ABFP) for preparation for board certification in Forensic Psychology.</i></li> </ul>
<p>August 7:  11:00am – 1:00pm: Forensic Seminar Series</p>	<p><i>In conjunction with Eastern State Hospital, the forensic seminar series is a didactic series specifically meant to cover the areas that fall under forensic psychology to include (but not limited to) pretrial criminal evaluations (CST, MSO), violence risk assessment, post-adjudication evaluations (NGRI), civil commitment, sex offender evaluation and treatment, juvenile justice, other civil matters, malingering, psychopathy, probation, other criminal competencies, child custody, workers comp, death penalty, and treatment in forensic contexts.</i></p>

APPENDIX B: CAMPUS MAP

