

UC DAVIS HEALTH UNIVERSITY OF CALIFORNIA, DAVIS
SCHOOL OF MEDICINE
*Department of Psychiatry and
Behavioral Sciences*

**CLINICAL CHILD AND ADOLESCENT PSYCHOLOGY (CCAP)
POST-DOCTORAL FELLOWSHIP TRAINING PROGRAM BROCHURE
2023 - 2024**



UCD Medical Center, Dept. of Psychiatry and Behavioral Sciences



Sacramento County Child and Adolescent Psychiatric Services

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PROGRAM DESCRIPTION AND ADMINISTRATION

The UC Davis Medical Center, located in Sacramento, California, is an integrated, academic health system that is consistently ranked among the nation's top medical schools. Within the UC Davis School of Medicine, the Department of Psychiatry and Behavioral Sciences has a strong collaborative relationship with Sacramento County's Department of Health Services, UC Davis Health, and the MIND Institute. Our postdoctoral fellowship program in clinical child and adolescent psychology offers fellows the best of both worlds: training from a strong academic approach that emphasizes evidence-based treatment across complex clinical setting. Alongside UC Davis Clinical Psychology and Psychiatry Faculty and psychiatry residents and fellows, our post-doctoral fellows will receive their training and provide direct psychological services at their primary rotation at a county-operated community mental health clinic. They also spend a day engaged in their advanced rotation. Secondary rotations provide exposure to providing pediatric integrated behavioral health or social skills group therapy and management with a neurodiverse population.



UC Davis Clinical Faculty

Training Director (TD)

Carlina R. Wheeler, Ph.D.

Associate Training Director (ATD)

Elizabeth S. Loyola, Psy.D.

Additional Supervising Psychologists and Psychiatrists

Olivia Briceño-Contreras, Psy.D.

Danielle Haener, Psy.D.

Tanya Holland, Psy.D.

Melissa Hopkins, M.D.

Richelle Long, Ph.D.

PROGRAM VALUES



1. **Lead Person-Centered Care** in the best way, at the best time, in the best place, and with the best team
2. **Reimagine Education** by cultivating diverse, transdisciplinary, life-long learners who will lead transformation in health care to advance well-being and equity for all
3. **Accelerate Innovative Research** to improve lives and reduce the burden of disease through the discovery, implementation and dissemination of new knowledge
4. **Improve Population Health** through the use of big data and precision health
5. **Transform Our Culture** by engaging everyone with compassion and inclusion, by inspiring innovative ideas, and by empowering each other
6. **Promote Sustainability** through shared goals, balanced priorities and investments in our workforce and in our community



Our Mission

To provide a culturally competent system of care that promotes holistic recovery, optimum health, and resiliency

Our Vision

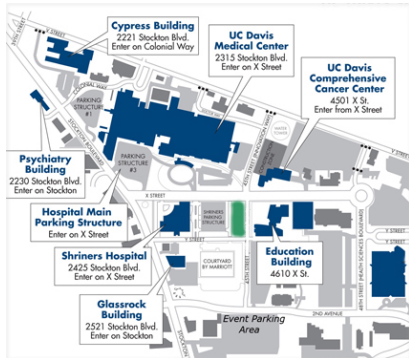
We envision a community where persons from diverse backgrounds across the life continuum have the opportunity to experience optimum wellness.

Our Values

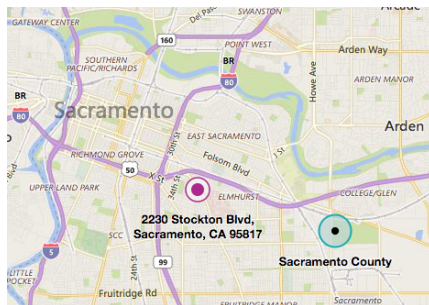
Respect, Compassion, Integrity • Client and/or Family Driven • Equal Access for Diverse Populations • Culturally Competent, Adaptive, Responsive and Meaningful • Prevention and Early Intervention • Full Community Integration and Collaboration • Coordinated Near Home and in Natural Settings • Strength-Based Integrated and Evidence-Based Practices • Innovative and Outcome-Driven Practices and Systems • Wellness, Recovery, and Resilience Focus

LOCATION

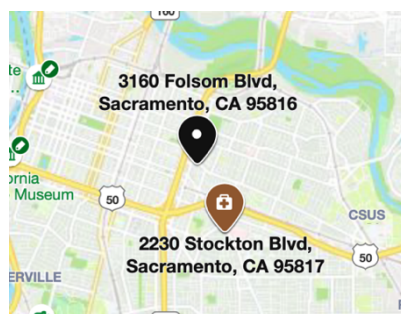
The UC Davis Department of Psychiatry and Behavioral Sciences is located in Sacramento, California, approximately 20 miles east of the main UC Davis campus, in Davis, California. The MIND Institute is located on the Medical Center campus.



The CAPS Clinic is located at the Granite Regional Park (GRP), which is less than 5 miles away from the UCD Medical Center campus. The GRP provides a fishing pond, nearby walking paths, outdoor benches, soccer fields, and a newly constructed skate park. The CAPS Clinic is also located near a light rail station that provides frequent shuttle services. Business hours are from 8:00am – 5:00pm, therefore interns are not expected to work outside business hours, unless other arrangements have been made with the intern’s supervisors.



The UC Davis Health Pediatric Midtown Ambulatory Care Center Clinic is located about a mile away from the UC Davis Medical Center Campus. It is between the Midtown and East Sacramento neighborhoods of Sacramento, which offers many walkable local restaurants, attractions, and parks.



DIVERSITY AND INCLUSION STATEMENT

As a training program, the UCDH Clinical Child and Adolescent Psychology (CCAP) Post-Doctoral Fellowship stands for diversity, inclusion, equity, and justice. We are committed to creating a welcoming training and teaching environment that respects individual differences while supporting the attainment of nationally recognized competencies for becoming a health service psychologist. To this end, we commit to: recognizing and addressing unconscious bias within our training organization, making efforts to recruit and retain diverse trainees and faculty from historically underrepresented groups in the field, engaging our team to create a more just and inclusive environment, developing the space for all team members to gather, share, and learn from one another, and to increase our awareness for inequality, power and privilege, discrimination, and various forms of oppression across clinical, professional, and personal settings to better engage in respectful and inclusive practices.

CAPS CLINIC STAFF AND POPULATION

The CAPS Clinic is staffed by four full-time UC Davis faculty psychologists and three board-certified child psychiatrists. It is the primary training site for our post-doctoral psychology fellows, as well as UC Davis' doctoral psychology interns and psychiatry fellows. Medical students also complete rotations at the CAPS Clinic. At our training site, there is a strong collaborative atmosphere and emphasis on interdisciplinary teamwork with the psychiatry team, county-employed clinicians, and psychiatric nurses. Our trainees develop strong working relationships with a number of professionals within the community that last beyond their training year.

The CAPS Clinic is a county-operated outpatient community mental health clinic for roughly 275 infants, children, adolescents, and transitional-aged youth (ages 0 to 21-years-old), who receive therapy, psychological testing, and/or medication management services. The CAPS Clinic solely serves children and adolescents who have mental health coverage through California's state-funded health care program, Medi-Cal/EPSDT. These clients present with a wide range of complex diagnostic concerns. Most of our clients and their families struggle with multiple environmental stressors including low income, unemployment, poor social support, and/or family history of mental health or alcohol/substance abuse problems. Oftentimes, our clients and their family members have also experienced complex developmental trauma, maltreatment, exposure to other adverse childhood experiences, and may be involved with Child Protective Services (CPS). Clients may also be involved with the juvenile justice system and are on probation. In addition, many of our clients experience difficulties in the learning environment and are provided special education services (i.e., 504 Behavior Plan or IEP). Clients represent diverse backgrounds and identities.

PEDIATRIC CLINIC STAFF AND POPULATION

A range of specialized medical and mental health professionals staff the UC Davis Health Family Medicine, Internal Medicine, and Pediatric Midtown Ambulatory Care Center Clinic. Specialties include Family Medicine, Internal Medicine, Pediatrics, Hepatology, Neurological Surgery, Psychotherapy and Psychiatry. It is one of two possible, advanced rotation training sites for our post-doctoral psychology fellows and the secondary training site for our doctoral interns. Medical students and psychiatry residents in psychiatry also complete rotations at the Midtown Pediatric Clinic. The post-doctoral fellow selected for the Pediatric Clinic Advanced Rotation will be responsible for supporting programmatic administration by conducting intakes, determining eligibility, and making case assignments. The fellow will also provide brief, targeted evidence-based interventions, primarily utilizing Cognitive Behavior Therapy, to a child and adolescent population screened by their pediatricians to have moderate symptoms of depression and/or anxiety. Following a population health model, clients seen at the Pediatric Clinic benefit from early intervention approaches to reduce the development of severe and persistent mental health symptoms. Clients come from diverse backgrounds and identities that are representative of the Sacramento community. Eligible clients are ages 8 to 17. While most clients have insurance, this clinic can also serve individuals with Medi-Cal/EPSDT. As a newer rotation, the program is still collecting specific demographics of clients served.

MIND INSTITUTE STAFF AND POPULATION

The UC Davis MIND Institute is a collaborative international research center, committed to the awareness, understanding, prevention, and treatment of autism spectrum disorders, fragile X syndrome, and other neurodevelopmental disorders. The MIND Institute employs a consortium of scientists, educators, physicians, psychologists, undergraduate and graduate level trainees, and parents. As part of the Advanced Rotations, one fellow will have an opportunity to co-lead a social skills group for children with autism spectrum disorder at the MIND Institute. The group is an evidence-based, manualized treatment that typically runs for 25 sessions (November through June) for school-aged children (ages 8-17). It largely utilizes CBT principles with a focus on helping the children have positive and successful social interactions. This rotation also provides additional opportunities learning about group therapy development and management, as well as the supervision of other MIND trainees. Responsibilities include: assisting with lesson planning, leading activities, providing supervision to volunteers who assist with the group, attending didactic seminars, and interfacing with parents.

COMPETENCIES AND LEARNING ELEMENTS

The primary goal of the one-year UC Davis Health Clinical Child and Adolescent Psychology (CCAP) Post-Doctoral Fellowship Training Program is to provide advanced and specialized training to promote professional development and prepare fellows for independent practice as health service psychologists with specialized experience with child and family populations. We firmly believe that is our responsibility to train interns and fellows who will exercise strong clinical judgment and contribute both to the welfare of society and to the profession. Our clinical child and adolescent psychology training program is committed to the lifelong learning process and aims to create an environment that supports trainees to develop across different competency areas by recognizing their strengths and areas for growth. We also respect each trainee's unique cultural identity that the trainee brings to the team, clinic, and community. The CCAP fellowship is challenging and dynamic. It provides advanced training in the areas of direct evidence-based, developmentally appropriate, and culturally-sensitive clinical service, professional development, ethical decision-making, and scholarly inquiry. We support fellows in reflecting on their self-care practices to increase their longevity and effective engagement in the field. Successful fellows are actively open to the learning process, adaptable, flexible, culturally curious, and collaborative.

Over the course of the one-year UC Davis Health CCAP Post-Doctoral Fellowship Program, the fellows will receive training and supervised experience in therapeutic interventions (e.g., individual, family, dyadic, and group therapy), psychological testing (e.g., comprehensive psychological evaluations, intake assessments, and brief psychological screening), and consultation (e.g., to fellow providers and to local agencies/schools). They also participate in training and supervision in an advanced rotation (Neurodevelopmental Group Therapy Management or Program Evaluation and Administration), lateral supervision of doctoral interns, and teaching. It is expected that the fellows will develop competencies in a range of areas outlined by the Association of State and Provincial Psychology Boards (ASPPB), the Association of Psychology Postdoctoral and Fellowship Centers (APPIC), the American Psychological Association (APA), the APA Standards of Accreditation (SoA) for Health Service Psychology (HSP). These competencies include:

Level 1 Competencies:

- 1) Integration of Science and Practice**
- 2) Individual and Cultural Diversity**
- 3) Ethical and Legal Standards**

Level 2 Competencies:

- 4) Intervention**
- 5) Assessment**
- 6) Professional Values, Attitudes, and Behaviors**
- 7) Interprofessional and Interdisciplinary Consultation**

- 8) **Supervision**
- 9) **Communication and Interpersonal Skills**
- 10) **Self-Care**

TRAINING ACTIVITIES AND EXPECTATIONS

COVID-19 Updates

Due to covid-19, the UCDH CCAP Post-Doctoral Fellowship Program is closely adhering to local, state, and national recommendations to maintain a safe environment for our staff and for our clients. The various training sites have supported the transition to provide telehealth services to our consumers (via video/Zoom or phone). These services can be provided in the office, or remotely, once approved by the fellow's supervisor and the clinic. If there is a clinical indication for providing services in-person, the program will provide personal protective equipment and ask the fellow to abide by the recommended safety practices. Examples include, but are not limited to: client presents a high-risk to self and others, client has demonstrated limited success in receiving services via telehealth, the administration of a testing measure cannot be modified with fidelity and testing can be conducted safely in-person, and/or a client lacks the resources to consistently engage in services. In addition, training activities will be provided in-person or via video/Zoom. This includes supervision (individual and group), didactic seminars, and case conferences. At this time field appointments are discontinued out of an abundance of caution.

Following a developmentally appropriate, culturally sensitive, and trauma-informed systems approach to client care, fellows develop competencies throughout the training year in order to coordinate and collaborate with several professionals involved in the client's care, including those working in the mental health, medical, academic, and legal domains.

Fellows provide short-term and long-term individual, dyadic, and family therapy (in-person or via telehealth). Fellows also complete intake services for psychotherapy cases and psychological testing referrals. In addition, fellows conduct extensive psychological assessments that typically involve school observations, interviews with caregivers, treatment providers, and teachers, and the administration of objective and projective personality measures. During the course of their training year, fellows also participate on and lead the Comprehensive Multidisciplinary Assessment Team (CMAT) that is facilitated by our supervising psychologists at the CAPS Clinic. Fellows also have the opportunity to co-facilitate and develop therapy groups. In addition, fellows will have opportunities to provide consultation and/or brief psychological screening within the CAPS Clinic and with outside providers. Lastly, our fellows develop advanced professional skills in teaching and supervising.

Average 40 – 44 hours per week for about 50 weeks (1800 fellowship hours total)

a. 10 -15 Hours/Week: Direct Clinical Service (Face-to-Face; Telehealth)

- 10 to 12 Individual, Dyadic and/or Family Psychotherapy cases over the course of the year
- 1 to 3 Collateral cases over the course of the year
- Case Management (ongoing)
- 1 to 2 Intake Assessments (bi-monthly, as available)
- 4 to 8 Psychological Testing cases over the course of the year
 1. 2 to 4 Consultation and/or Brief Psychological Screening cases
 2. 1 to 2 Comprehensive Multidisciplinary Assessment Team (CMAT) case(s) and/or CMAT Consult Cases
- 2 to 3 Group Therapy Co-Facilitator (for clients and/or caregivers)
- 1 to 2 Infant-Parent Mental Health Cases

b. 10 -14 Hours/Week: Indirect Clinical Service (Not Face-to-Face)

- Psychological Screening and Testing (scoring, interpretation, report-writing)
- Case Management, Consultation, and Family Collateral Services (via phone)
- Clinical Documentation (progress notes, psychosocial assessments)

c. 5-8 Hours/Week: Indirect Service

- 2 to 7 hours: Training Seminars/Didactics/Case Conferences
- 2 to 3 hours: Non-billable services (i.e., documentation, managing appointments, emails, literature reviews, administrative duties)
- 2 hours/month: Staff meetings

d. 4 Hours/Week: Supervision

- 1 -2.5 hours: Individual Supervision (Primary,Therapy/Assessment)
- 1 hour: Individual Delegated Supervision (Advanced Rotation)
- 1-1.5 hours: Psychology Team Group Supervision; Pediatric Clinic Group Supervision (SCR); Professional Development Group Supervision

e. Additional Fellow Training Activities

- Lateral Supervision of Doctoral Interns
- Teaching and Presentations
- Department Grand Rounds and Other County Training Activities
- *Participate in Faculty's Research Opportunities (based on availability)*
- TY23-24 Advanced Rotations
 1. MIND Institute Group Therapy Management Rotation
 2. Program Development and Evaluation Rotation

**Please note that fellows may have adjustments to their therapy caseload (individual and group therapy) based on the additional clinical training they receive at the MIND Institute or the Pediatric Clinic.*

While the UCDH CCAP Fellowship Program encourages work/life balance, there may be weeks in which a fellow works more than 40 hours/week. The CA Board of Psychology will count a maximum of 44 hours/week towards your licensure requirements, therefore the program strongly supports fellows to average working 40-44 hours/week. Please note that the fellows' clinical training and supervision is the primary priority. The program monitors hours logs to ensure the fellow is receiving sufficient clinical hours as part of completing a clinically focused fellowship program.

Fellows are expected to complete clinical documentation using an electronic medical record system (i.e., progress notes within 72 hours, treatment plans, psychosocial assessment paperwork, etc.) in a timely manner consistent with both professional expectations and specific county/clinic guidelines.

SUPERVISION

All primary supervisors of fellows are University of California Davis, Health clinical faculty who have doctoral degrees in Clinical or Counseling Psychology and are licensed to practice in the state of California. They are required to be free of any disciplinary action with the California Board of Psychology. In accordance with regulations set by APPIC, APA, SoA, and the California Board of Psychology, our training program provides post-doctoral fellows a minimum of **4 to 4.5 hours** of supervision per week or 10% of direct service time for a 40 to 44 hour work week (2-2.5 hours of individual supervision and 2-2.5 hours of group supervision). Recurring, protected time is scheduled for supervision to ensure consistency and predictability of the supervision time, as well as the availability of supervisors. When in-person supervision is not feasible, video supervision will be utilized as an alternative. Fellows are required to seek out supervision and/or consultation outside of the designated supervision hour for emergent and urgent issues (see Orientation-Specific Manual for further detail). In accordance with CA regulation, supervisors are available at all times the fellow is accruing Supervised Professional Experience (SPE), therefore the fellows' schedule is expected to fall between typical business hours (8:00am-5:00pm). Fellows can only provide services in California, which is the state their supervisors' are licensed to provide SPE. Please note that supervision must be provided in a private, confidential space, however, the content in supervision is not considered confidential and supervisors regularly communicate and consult with one another to support the trainees' growth and acquisition of skills. Supervisors will be available to address more informal trainee concerns, although they are required to communicate with the Training Director about these concerns to ensure issues are properly understood and addressed from a programmatic level.

- **Primary Supervision:** Post-doctoral fellows are assigned one of the supervising psychologists as their primary supervisor, with whom they meet on an individual and weekly basis for 1 hour. This supervision time allows the fellow to further develop their professional identity, as well as review the acquisition of their training goals across the training program rotations. They will also oversee administrative duties (documentation timeliness, submitting time-off requests, completing timecard, etc).
- **CAPS Therapy and Assessment Supervision:** Post-doctoral fellows are assigned one of the supervising psychologists as their CAPS Clinic supervisor, with whom they meet on an individual and weekly basis to discuss their therapy and assessment clients for 1-1.5 hours. CAPS supervisors will be responsible for reviewing therapy and assessment client documentation (i.e., notes, initial/annual clinical bundle, client treatment plans, etc.). The fellows are also expected to use this time to learn new measures and discuss various issues (e.g., responsibility, expectations, ethical concerns, interprofessional relationships, etc.) that pertain to the role of a provider of psychological testing to further develop this area of professional development. Lastly, participation in CMAT provides the unique opportunity for live supervision of psychological testing. During the last quarter of the training year, the fellow may be assigned a different supervisor to supervise 1 to 2 assessment cases in order to widen the fellow's exposure to different assessment supervision and report-writing styles.
- **Delegated Supervision/Advanced Rotation:** Our fellows are given the opportunity to apply to an Advanced Rotation in Group Therapy Management or Program Evaluation and Administration. They will each receive 1 hour of supervision per week for their Advanced Rotation.
 - **Program Administration**
 - A fellow will be selected to develop their skills in training program development, administration, and management with **Drs. Wheeler and Loyola**.
 - This rotation will support the fellow in better understanding the nuances of running an internship program, develop ways to measure program efficacy, and make proposals for program improvement. With approval, may be able to implement aspects of proposed changes. They rotate through the Pediatric Clinic, providing clinical services in order to learn best practices for designing and implementing a new clinical rotation.
 - *Preferred Qualifications:* Attention to detail and strong organizational skills, timeliness, willing to take on acceptable risks and open to learning from failures, creativity and problem-solving, gives and receives feedback well, maintains professionalism and strong boundaries.
 - **Group Therapy Management**
 - A fellow will be selected to co-lead a social skills group for children with autism spectrum disorder under the live supervision of **Dr. Danielle Haener** at the UC Davis MIND Institute.

- The group is an evidence-based, manualized treatment that runs for 25 sessions (typically from November through June). It largely utilizes CBT principles with a focus on helping the children have positive and successful social interactions. It provides additional opportunities learning about group therapy development and management, as well as the supervision of other MIND trainees.
 - *Preferred Qualifications:* Interest and enthusiasm for intervention/client-facing activities, understanding of social deficits in children with ASD and co-morbid diagnoses, creativity in delivering curriculum and skill building, flexibility, and additional supervision opportunities.
- **CAPS Psychology Team Group Supervision:** The purpose of this group supervision is to spend 1 hour as a team on a weekly basis discussing a variety of issues, while also fostering a sense of community, building relationships, and increasing socialization across the team. Each meeting will have either a focused topic for the team to discuss and/or include a case conference. These topics typically will fall under the following categories: Law and Ethics, Research, Individual and Cultural Diversity, Trauma, and Self-Care. The focus is often on emergent interprofessional issues. While **Dr. Richelle Long** facilitates the Psychology Team Group Supervision, interns and fellows are provided opportunities to lead the team group supervision throughout the year through case presentations and journal clubs.
 - **Pediatric Group Supervision (Systematic Caseload Review [SCR]):** Following an integrated behavioral health model, the fellow completing their Advanced Rotation at the Pediatric clinic will meet with the doctoral interns, psychiatry residents, and Child and Adolescent psychiatry fellows for group supervision for 1 hour. Fellows will be asked to bring case-related material to engage in case consultation opportunities for therapy clients at the Pediatric Clinic. New intakes, acute issues, medication questions, and client updates (using outcomes measures) are prioritized. This group supervision is facilitated by **Melissa Hopkins, M.D.**, and **Elizabeth Loyola, Psy.D.**
 - **Professional Development Group Supervision:** For the first four months of the training year, the fellows will participate in this bi-monthly supervision with the interns to develop their professional identity and acquire competencies to support their growth across the training year. This group supervision space, facilitated by **Dr. Elizabeth S. Loyola**, will focus on a range of professional issues, including setting professional goals, learning time management skills, understanding the licensure process, and applying to fellowship or a job. The focus of supervision will help the fellow further develop their supervision skills (via role-playing and peer supervision). Once the fellow has acquired a sufficient understanding of theories and models of supervision, as well as the supervisor role and expectations of supervision, the fellow will have opportunities implementing Lateral Supervision/Supervision of Supervision with the doctoral interns. Under the supervision of **Dr. Carlina R. Wheeler**, who facilitates the Lateral Supervision/Supervision of Supervision

component for the post-doctoral fellows, fellows gain exposure to running group supervision spaces, the supervision of a testing client, and the supervision of a therapy client. During the last three months of the training year, the fellows also provide training and administrative supervision to the incoming interns, by opening new therapy and/or assessment cases and having the intern shadow them.

DIDACTIC SEMINARS AND CASE CONFERENCES

Some of our required seminars meet on a regular basis throughout the entire training year, while others are time-limited. As part of the fellowship, we are committed to providing our fellows with opportunities to learn from psychologists who have experience with a wide range of clients in a variety of treatment settings. As such, our seminars are facilitated by the program's attending psychologists as well as several volunteer clinical faculty members who are employed throughout the Sacramento area. Didactic seminars and cases conference aim to provide additional training in:

- Theories and effective methods of psychological assessment, diagnosis, and interventions
- Consultation, program evaluation, supervision, and/or teaching
- Strategies of scholarly inquiry
- Professional conduct, ethics, law, and related standards
- Issues of cultural and individual diversity

Advanced Trauma-Informed Care (TIC) Seminar

- Fellows will provide clinical services to clients who have experienced developmental, complex trauma and other adverse childhood experiences (ACES). As such, **Richelle Long, Ph.D.** facilitates the Advanced TIC Seminar in order to provide fellows with a strong foundation in assessing and treating trauma and other stressor-related disorders, as well as preventing vicarious traumatization and compassion fatigue.

Diversity Seminar

- **Carlina R. Wheeler, Ph.D.** leads this seminar twice per month throughout the training year, which provides an environment to bravely discuss cases and explore different aspects of individual diversity (Arao & Clemens, 2013). Although the Diversity Seminar is required for the interns and fellows, this space has been opened to other clinical trainees (from the MIND Institute), CAPS clinical staff, psychiatrists, youth advocates, and managers to further enrich the discussions. A primary goal for fellows will be to improve their understanding of diversity, the role it plays in client interactions, and how to replace fear and mistrust with cultural humility, mutual understanding, and respect. Fellows will be provided a space to learn the RESPECTFUL Model (D'Andrea & Daniels, 1997; 2001) and ADDRESSING Model (Hays, 1996) to deepen their insight into how each aspect of their identity influences their personal perspective and approach to client care.

Advanced Assessment Seminar

- This bi-monthly seminar is provided to fellows to allow them the opportunity to gain skills in the administration, scoring, interpretation, and report-writing for a number of more complex assessments.
 - Foundational Series (Dr. Loyola/Dr. Wheeler)
 - Collaborative/Therapeutic Assessment (Dr. Long)
 - Neuropsychological Functioning (Dr. Haener, MIND Institute)
 - Neurodevelopmental Functioning (Dr. Long)
 - Projective Series
 - Roberts-2 (Dr. Long)
 - R-PAS (Drs. Wheeler and Loyola)

Neurodevelopmental Seminar

- Through the MIND Institute's Leadership Education in Neurodevelopmental and Related Disabilities (LEND) Program, fellows receive specialized training in understanding, treating, and assessing for neurodevelopmental disabilities. The LEND Program provides the opportunity to learn from experts in this area, while also participating in interdisciplinary trainings with professionals from various disciplines (e.g., social work, child psychiatry, developmental pediatrics, speech/language, physical therapy). By participating in these trainings, fellows are considered "short-term" LEND trainees. For more information about the LEND Program: <https://health.ucdavis.edu/mindinstitute/education/lend/lend-index.html>

Seminar topics may include:

- | | |
|--|---|
| ○ Attention-Deficit/
Hyperactivity Disorder | ○ Panel of Adults with Autism |
| ○ ADOS-2 | ○ Neurodiversity |
| ○ Early Intervention for ASD | ○ Comorbid Mental Health
Challenges and NDDs |

Evidence-Based Practices for Infants and Young Children

- These training experiences provide fellows with an opportunity to learn skills in evidence-based practices for infant and very young child population.
 - In the past, fellows have completed certification-level training with UC Davis CAARE Center in Parent Child-Care (PC-CARE), a brief, evidence-based parent management training program. The training includes Phase I (two day training) and Phase 2 (experiential training and consultation calls) components. *Please note this training is offered if space and funding are available.*
 - The **0-5 Series and Case Conference** is a half- year rotating seminar and case conference led by **Richelle Long, Ph.D.** to provide fellows with ongoing clinical training for infants and young children and their families. The series focuses specifically on the unique developmental needs and key issues affecting children ages 0-5. Topics may include: Bruce Perry's Neurosequential

Model of Therapeutics (NMT), brain development, relational needs, behavioral and mental health concerns, role of screening and early intervention, cultural influences, and the specific impacts of maltreatment on early childhood development. Depending on their caseloads, fellows may also receive training within the Parent-Child Interaction Therapy (PCIT). Or Child-Parent Psychotherapy (CPP) model. They can utilize the 0-5 Case Conference time to conduct case conferences on their infant-parent mental health cases.

Evidence-Based Practices for Adolescents Series

- This half-year rotating seminar and case conference provides fellows with an opportunity to learn skills in evidence-based practices for an adolescent population. Lecturers may include psychologists from the department and in the community, who will rotate through a number of topics.
 - Dialectical Behavior Therapy (DBT)- Dr. Meera P. Ullal, UCDH, Dept. of Psychiatry and Behavioral Sciences
 - Acceptance and Commitment Therapy (ACT)- Dr. Don Koelpin, UCDH, Volunteer Clinical Faculty
 - Functional Family Therapy (FFT) or Attachment, Self-Regulation, and Competency (ARC) Model- Dr. Carlina Wheeler

Advanced Topics Seminar

- In line with APA's Level 1 competencies for post-doctoral fellows, our training program provides additional training at the end of the year to further prepare them for independent practice as licensed psychologists. These seminars primarily allow fellows to demonstrate their acquired skills, knowledge, and attitudes across the following advanced topics:
 - Skills in Teaching
 - Ethical and Legal Issues
 - Diversity-Related Issues
 - Integration of Science and Practice

Teaching and Training

- Some of our training faculty teach seminars for the general psychiatry residents as well as the child and adolescent psychiatry fellows (e.g. Introduction to Psychological Assessment, Family Therapy, Cognitive Behavior Therapy, Group Therapy, etc.). Fellows are invited to shadow and possibly co-facilitate or provide a guest lecture in one of these seminar series, depending on availability, interest, and experience.
- During the last three months of the training year, fellows will have the opportunity to co-facilitate and develop training seminars for incoming doctoral interns. Fellows complete final projects, with an emphasis on trauma-informed care, which are presented to the interns to prepare for providing intervention and assessment services with CAPS Clinic clients. Other seminars series that fellows can participate in, include Orientation Seminar, Intervention Seminar, and Assessment Seminar.
- Fellows will have an opportunity to teach first year psychiatry residents (PGY-1) introductory therapeutic intervention skills.
- In the past, each year our fellows and psychologists were invited to lead 4- to 6-week training in Psychiatric Interviewing Skills (PSY403) for UC Davis' medical

students. As part of the training, our fellows lead a small group of medical students through live interviews with adults who are inpatients in a psychiatric facility. Our fellows have been highly regarded by the medical students and the Department for their ability to educate and support medical students with their first exposure to individuals suffering from severe mental illness. Due to covid-19 it is possible that this opportunity, along with other training opportunities at the inpatient unit (MERT/ISU) will not be available.

APPOINTMENT, STIPEND, AND BENEFITS

Two applicants will be accepted for the 2023 - 2024 training year. Clinical fellowship appointments are **full-time** (average 40-hour week) for one year. Our post-doctoral fellows acquire a total of **1800 supervised hours** during the training year in order to fulfill licensure requirements for the state of California and qualify for various states' licensure requirements *Clinical moonlighting is not permitted.*

2023 - 2024 Training Year: September 1, 2023 - August 31, 2024

Fellows receive a stipend of **\$52,500** (gross amount) for the training year, which is paid on a monthly basis. This stipend is competitive with other community mental health/academic medical center fellowship stipends in the area. Applicable taxes, social security deductions, and benefits-related costs are also withheld.

Fellows receive approximately **32 days of paid time off** (including **20 vacation days** and **12 days** of sick time per year) **and paid holidays** (approximately **13 days off** per year for county, UCD, and federal holidays). In addition, fellows receive **4 educational/professional leave days**, which they can use for training, dissertation release time, and/or licensure preparation. At this time, we are pleased to offer our fellows **UCD Resident and Fellow benefits**. Fellows are eligible for coverage in the UC medical, dental, vision, life and disability insurance plans. For more information about the Resident and Fellow benefits plan, please visit: <https://ucdavis.app.box.com/s/4t1285hh4ydcgtvmcn8yhka0t6u71tvv>

Our fellows have their own designated office at the CAPS Clinic and share a private office space at the Pediatric Clinic. Fellows are provided a personal computer, voicemail, email (UCD and Sacramento County). All workstations are equipped to provide telehealth services (webcams). There is a possibility for requesting a telework schedule, which will have to be approved by their supervisor and Training Director in advance. At the CAPS Clinic, fellows may request locked storage clipboards, county-issued cell phones, laptops, and noise machines, if approved to telework. Across clinical sites, fellows are also provided administrative assistance (faxing, scanning, phone appointment reminders to clients, and phone calls when clients arrive to the office). Fellows also have full access to the UC Davis libraries and associated services. They can utilize available art/play therapy materials located at the CAPS Clinic. In addition, fellows can reserve a number of offices, observation

rooms (with one-way mirror and audio/visual equipment), and the psychological testing office to provide confidential, direct services with CAPS Clinic clients. Postdoctoral fellows who satisfactorily complete the postdoctoral fellowship program will be awarded a certificate of post-doctoral fellowship completion from the UC Davis School of Medicine.

ELIGIBILITY AND APPLICATION PROCEDURES

Applicants must have attended an **APA-accredited doctoral graduate university** preferably in **clinical or counseling psychology**. Applicants from educational psychology with a strong emphasis in clinical training will be considered. Applicants must have attended an APA-accredited doctoral internship program. Applicants must have completed **all requirements for their doctoral degree prior to August 31, 2023**. Successful applicants will have acquired doctoral level **experience with children and adolescents** and have written at least **five child or adolescent integrated psychological assessment reports**.

Our application deadline is **Friday December 23, 2022 (11:59PM, EST)**. Early application is encouraged and applications will be reviewed as they are received. If you have any questions, please contact the Training Director.

To apply, please submit your application materials directly to our program email at: hs-ucdhchildpsychfellowship@ucdavis.edu. We recommend converting your attachments to pdf and indicating in the subject line: UCDH CCAP Fellowship Application (Full Name).

Your application will be considered complete upon receipt of the following:

	A completed UCDH CCAP Fellowship Application
	A cover letter
	A current Curriculum Vitae
	A psychological evaluation of a child or adolescent with all identifying information removed
	Three signed letters of recommendation submitted directly to the program or by the applicant (preferably including clinical supervisors and/or training directors from your current internship and recent externships)

SELECTION PROCEDURES

Fellow selection is made by a committee comprised of the training director, the associate training director, and the supervising training psychologists. Applicants are rated on the

basis of their clinical training (i.e., assessment and therapy), academic coursework, letter of recommendation, clinical and research interests, progress toward dissertation completion, and stated goals for fellowship. Strong writing skills are also favorably evaluated, as evidenced by the Fellowship Application essay and redacted psychological report. Those prospective candidates assessed by the committee to hold interests and goals most closely matching those opportunities offered by our program will be asked to participate in a virtual interview (via Zoom).

Prospective candidates will be notified via email by **Friday January 13, 2023** whether or not they will be granted an interview with the training staff and supervisors. Candidates will also have the opportunity to virtually meet with the current post-doctoral fellows, clinical staff, and virtually tour the clinic. Half-day interviews will be held in early February (tentatively on **Wednesday February 1, Thursday February 2, and/or Monday February 6, 2023**). Interviews are required and weigh heavily in the selection process, as this provides an opportunity for program staff and applicants to determine fit. In addition, the program values applicants who are able to demonstrate an ability to balance strong interpersonal skills with professionalism. Interviews will only be offered to applicants who have submitted a complete application and only after these applications have been screened by the faculty. Applicants who wish to be considered for interviews should submit application materials by **December 23, 2022**.

The post-doctoral fellowship training program agrees to abide by the APPIC guidelines for Common Hold Date (CHD) on **Monday February 27, 2023**. Information regarding APPIC Selection Standards can be found at: <https://www.appic.org/Postdocs/Postdoctoral-Selection-Standards>

PERFORMANCE EVALUATION

The evaluation process is approached in a manner to provide timely feedback to and from the fellow to ensure training goals and expectations are being met. At the beginning of the fellowship year, fellows complete a self-assessment of their experience relative to training objectives of the fellowship. The initial self-assessment opens a dialogue about the fellow's strengths and specific training areas of growth. Progress is monitored throughout the fellowship year, however, more formal verbal and written feedback provided at the mid-year (March) and end of the training year (September). During these biannual evaluations, the fellow will meet with their primary, assessment, and/or delegated supervisors to review the Fellow Performance Evaluation completed jointly by the supervisors, then time is spent in individual supervision to discuss more specific aspects of the evaluation. These evaluations are used to provide an opportunity to communicate the fellow's progress. At the end of the fellowship year, formal summative feedback is provided to the fellow. The Training Director may participate in the final performance evaluation.

In addition, the mid-year Supervisor Evaluation allows the fellow to informally specify what the fellow would like more (or less of) from the supervisor, while the end of year Supervisor

Evaluation provides more specific feedback about the fellow's perspective and experience of the supervisor meeting supervisory standards and competencies defined by ASPPB Supervision Guidelines for Health Service Psychologists (February 2020). At the end of the fellowship year, formal summative feedback is provided to the fellow. The Training Director may participate in the final performance evaluation.

Lastly, the fellow is given the opportunity to provide informal feedback throughout the training year during the Training Committee, when acting as a fellow representative. In addition, the fellow is responsible for providing formal feedback about the training program by completing the Program Evaluation at the end of the training year (September). Fellows will be provided an opportunity to meet with the Training Director and the Associate Training Director to provide verbal feedback in addition to their written feedback.

Serious concerns regarding a fellow's performance will be addressed through due process procedures. Fellows are strongly encouraged to address grievances related to training, supervision, or evaluation with their primary supervisor first and resolve concerns informally. Supervisors will inform the Training Director of issues that arise in order to determine if additional programmatic support/response is required to maintain the integrity of the program.

ACCREDITATION STATUS

Our fellowship training program is currently a member of the Association of Psychology Postdoctoral and Fellowship Centers (APPIC, 9908). At this time, we **are not** accredited by the American Psychological Association (APA). Any questions about accreditation may be addressed to: Office of Accreditation, American Psychological Association, 750 First Street, NE, Washington, DC 20002. Telephone: (202) 336-5979.

NON-DISCRIMINATION PRACTICES

The University of California, Davis, does not discriminate on the basis of race, color, national origin, religion, sex, gender identity, pregnancy (including pregnancy, childbirth, and medical conditions related to pregnancy or childbirth), physical or mental disability, age, medical condition (cancer related or genetic characteristics), ancestry, marital status, citizenship, sexual orientation, or service in the uniformed services (includes membership, application for membership, performance of service, application for service, or obligation for service in the uniformed services) status as a Vietnam-era veteran or special disabled veteran, in accordance with all applicable state and federal laws, and with university policy. As required by Title IX, the University of California, Davis, does not discriminate on the basis of sex in its educational programs, admissions, employment or other activities.

Inquiries related to Title IX and to Section 34 CFR § 106.9 may be referred to the Title IX coordinator:

Wendi Delmendo
Mrak Hall, Fourth Floor
One Shields Ave., Davis,
California, 95616
530-752-9466

Inquiries may also be directed to:
Assistant Secretary for Civil Rights of the Dept of Education
San Francisco Office
U.S. Department of Education
50 Beale St., Suite 7200
San Francisco, California, 94105-1813
415-486-5555

TRAINING PROGRAM CONTACT INFORMATION

More information about our program is available on our UC Davis webpage:

https://health.ucdavis.edu/psychiatry/education/child_psychology/fellowship-overview.html

For additional information, please contact:

University of California, Davis Medical Center
Department of Psychiatry and Behavioral Sciences
Clinical Child and Adolescent Psychology (CCAP) Training Program
2230 Stockton Blvd. Sacramento, CA 95817-1419
Deb Matsumoto, Fellowship Programs Administrator: (916) 734-5514

dmatsumoto@ucdavis.edu

Dr. Carlina R. Wheeler, Training Director: (916) 875-1183

ccrwheeler@ucdavis.edu

Dr. Elizabeth S. Loyola, Associate Training Director:

emsolomon@ucdavis.edu

General Questions: hs-ucdhchildpsychfellowship@ucdavis.edu