



VALLEY HEALTH

Quality healthcare in your neighborhood.

**Doctoral Internship in Psychology
Valley Health Systems
Huntington, WV**

**Internship Brochure
2022-2023**

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Doctoral Internship in Psychology Valley Health Systems

The doctoral internship in psychology is a crucial year of training. For some it may be the last formal training experience. For others internship helps solidify a clinical foundation upon which they continue to build through postdoctoral training. Whether interns graduate and pursue independent licensure or seek postdoctoral positions, the internship year serves a formative purpose. It is a year to build fluency and specificity with the competencies needed for a career as a health service psychologist. The Doctoral Internship in Psychology at Valley Health Systems aims to prepare psychologists for entry level practice in health service psychology.

Mission and Aims of the Program

The internship program is part of the Behavioral Health Department at Valley Health Systems, and as part of an integrated healthcare system, behavioral health providers are involved throughout the organization. Therefore, the internship program offers training in multiple roles and clinics within an integrated primary care system. We provide quality, evidence-based care through a breadth of services such as Behavioral Health Consultants working within the primary care clinics, Medication Assisted Treatment Programs for addiction treatment, psychiatry and psychiatric consultation services, psychological assessment, general outpatient psychotherapy, and specialized evidence-based interventions such as Dialectical Behavioral Therapy and Parent-Child Interaction Therapy.

The Internship in Psychology aims to prepare psychologists for entry level practice in health service psychology. The program exposes interns to a variety of roles that psychologists serve in integrated settings. These roles include providing clinical services, participating in quality improvement efforts, assisting with outreach efforts. Furthermore the program supports the development of interns' identity as a psychologist, by fostering an understanding of current trends in the field, advocacy responsibilities of psychologists, and readiness for leadership opportunities.

Accreditation Status

This program is *not* APA Accredited. The program is an APPIC member (#2424).

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

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

Director of Training

For more information about the program, please contact:

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About Valley Health

Valley Health has clinics throughout a region that is both geographically and culturally part of the Appalachian plateau. Surrounded by extensive natural resources and opportunities for recreation, this region has an industrial sector based in coal, oil, chemicals, and steel. The city of Huntington, home to several of Valley Health's clinics and business offices, is also home to Marshall University. The city sits along the Ohio River with the borders of Ohio and Kentucky. This region is rich in beauty, recreation, and hospitality. It also has faced challenges, including being the epicenter for the opioid epidemic, with one of the highest rates of overdose in the country. Census data indicates a poverty rate ranging from 15-20% and disability rates ranging from 7-20%, depending on the county.

Valley Health Systems is a Federally Qualified Health Center. Valley Health's mission is to provide quality healthcare to all individuals emphasizing outreach to those who are underserved. Therefore, Valley Health provides care and services regardless of ability to pay. This allows us to provide primary and preventative care to approximately 85,000 patients each year in southern West Virginia, southeastern Ohio, and eastern Kentucky. Valley Health operates over forty healthcare facilities with service lines including family medicine, women's health, dentistry, internal medicine, ear nose and throat, optometry, pediatrics, pharmacy, and behavioral health. Programs also include Women, Infant, and Children (WIC) nutrition services, school-based health centers, black lung treatment, and programs for people with housing barriers. Other areas of focus include community health programs and population health initiatives.

The Department of Behavioral Health includes providers in seventeen of Valley Health's clinics. The department is made up of over thirty providers including thirteen doctoral psychologists who provide services as Behavioral Health Consultants in our primary care clinics, contribute to interdisciplinary treatment teams for Medication Assisted Treatment (MAT) for opioid addiction, complete psychological assessments, and offer outpatient psychotherapy, including Dialectical Behavioral Therapy (DBT) and Parent-Child Interaction Therapy (PCIT) clinics. This breadth allows interns within our organization opportunities to receive training and clinical experiences to prepare them for practice as Health Service Psychologists.

Training Experiences

Within Valley Health, our Behavioral Health services are integrated into primary care clinics. While all of our behavioral health providers work on-site together with primary care services, the level of integration varies, depending on the service area in which they work. To prepare interns for entry into these various roles, interns provide supervised services in four major service areas: Medication Assisted Treatment for Opioid Addiction (MAT), Integrated Primary Care, (IPC) Outpatient Psychotherapy, and Assessment. These are concurrent training experiences with interns participating in each clinic for the entire training year.

Medication Assisted Treatment for Addiction (MAT Program) The MAT program is an interdisciplinary program that involves Valley Health family practice providers, psychiatrists, nurses, nurse-practitioners, pharmacists, psychologists, and other behavioral health providers working together to promote recovery and independence from addiction. The multidisciplinary team also often works collaboratively with community agencies. In this clinic, interns work under their supervising psychologist to provide individual and group therapy, provide consultation regarding patients to the treatment team, and collaborate with the community agencies involved.

Integrated Primary Care Clinic Interns complete warm hand-offs from primary care providers to establish an initial face-to-face contact between behavioral health providers and patients. Interns are available for consultation to the medical team and provide diagnostic impressions, complete brief interventions, facilitate referrals to treatment, and foster patients' readiness for change. Interns also assist with patients who are experiencing acute distress. Interventions are brief and focused.

Psychiatric Consultation Clinic: As part of the IPC clinic, interns gain experience in our Psychiatric Consultation Clinic. This clinic serves to decrease barriers to access and to better support primary care providers managing behavioral health concerns. After primary care providers refer patients to this clinic, interns complete an intake assessment that they then staff with the psychiatric provider for the clinic. The psychiatric provider is then able to provide targeted feedback and recommendations to the PCPs. Interns provide brief intervention to the patients and continue to update both the psychiatric provider and the primary care providers on progress. The psychiatric provider then updates recommendations to the primary care providers as needed.

Outpatient Psychotherapy Interns carry a generalized caseload with patients across the age range who present with a variety of concerns. Collaborating or coordinating care with other health care professionals or other systems (e.g. school) is done as appropriate for the case. Interns receive training in utilizing evidence-based approaches and interventions. Interns can choose to maintain a generalized caseload. Alternatively, interns may opt to participate in one of the specialized clinics within our department.

Dialectical Behavioral Therapy. Valley Health has a comprehensive Dialectical Behavioral Therapy program, and interns may choose to receive training in this model as their outpatient experience. Interns participate in the DBT consultation team, co-lead skills groups, complete phone coaching, and see individual patients using this approach.

Parent-Child Interaction Therapy. Valley Health has PCIT certified therapists who are able to provide training and supervision in this evidence-based treatment. After completing the didactic training for PCIT, interns coach families in the PCIT skills with the supervisor "coaching the coach."

Assessment Interns must complete psychological assessments. The Department of Behavioral Medicine currently offers a limited range of formal psychological assessments. Interns complete

assessments for diagnostic clarity, ADHD, developmental disabilities, cognitive capacity, and pre-surgical clearance.

Interns Schedules

For the MAT, IPC, and Outpatient Psychotherapy clinics, interns spend an entire ten-hour day working in these clinics. For these three clinics, interns work with the same supervisors (one for each clinic) all year. The Assessment Clinic is typically scheduled on the same day as the two-hour didactic. Interns spend half a year in the child assessment clinic and half a year in the adult assessment clinic. They change assessment supervisors when they shift clinics. The structure of interns’ schedules is the same for each intern for the entire year.

Due to supervisor and clinic schedules, interns typically have a schedule that is based on four ten-hour days. Because the four clinics are offered at several different Valley Health sites in the region, interns travel between a few, typically three, of the sites to obtain these experiences. Each of the sites are within a thirty-minute drive of the others. On MAT, IPC, or Outpatient clinic days, interns are at one site for the entire day. On Didactic and Assessment clinic day, the interns typically travel after the didactic to the clinic at which their assessment training occurs. This travel time is built into their scheduled ten-hour day.

Service Activities	Hours/Week	Description of Activities
MAT Program	9	group psychotherapy, individual psychotherapy, interdisciplinary treatment teams, documentation
Integrated Primary Care	9	Brief interventions, consultation to primary care teams, psychiatric consult clinic, warm hand offs, documentation
Outpatient Psychotherapy	9	Individual psychotherapy, group psychotherapy, documentation
Assessment	5	Child assessment clinic, adult assessment clinic, integrated report writing

Training Activities	Hours/Week
Didactic Seminar	2

Individual Supervision	4
Group Supervision	1
Cohort Time	1

Supervision

Interns receive four hours of scheduled individual supervision each week. For each intern, one hour is blocked with each supervisor. In addition to this formally scheduled time, supervisors are available throughout the clinic days for “curbside” supervision and when urgent or emergent situations that arise. Supervisors also schedule co-therapy or live observation of sessions throughout the training year in addition to the scheduled weekly individual supervision time. Supervisors are on-site with the interns for each clinic. If the supervisor is unavailable for any reason (e.g. illness, vacation), interns contact another of their supervisors as needed.

Interns attend one hour of group supervision weekly. During this time, interns participate in case presentations, lead discussions of articles and other literature, and engage in professional development discussions on topics chosen by the interns (e.g. preventing burnout, preparing for independent practice, applying for post-doc positions). Peer consultation or umbrella supervision may also occur during this time.

Didactics

Interns attend two hours of structured didactics weekly. Didactics are presented by psychologists within the Department of Behavioral Medicine as well as by other professionals. All didactics are directly relevant to psychologists’ clinical practice in a primary care setting. Didactics generally follow a developmental progression from basic clinical knowledge and skills competencies to increased specificity and specialization.

Sequence of Training

It is our intent to provide an experience that fulfills each intern’s identified training needs in a progression from basic knowledge and practical clinical skill competencies to preparation for an entry level doctoral psychology position.

During initial supervision appointments, interns collaborate with their supervisors to define individualized, specific training goals for the year. Interns work with their supervisors to assess their clinical skills which inform initial training goals on which they focus. Progress toward training goals and adjustment of training experiences is done collaboratively throughout the training year.

At the start of the year, interns participate in shadowing the supervising psychologist to familiarize themselves with specific service lines, teams, and approaches. Interns take the lead for providing the service while the supervisor observes and provides feedback. Supervisors continue to closely monitor interns’ work as the interns establish their caseload, become more familiar with policies and procedures, and demonstrate clinical skills. Interns complete intake assessments, which are often the point at which

the complexity of the case is first evaluated. Early in the training year, interns may take the lead on less complex cases and work closely with supervisors, sometimes providing co-therapy, on more complex cases. As the training year progresses and interns show growth in treatment decision-making and conceptualization, interns also take the lead in challenging cases. Cases with specific presenting concerns or treatment needs can also be referred to interns with training interests or needs in those areas.

Supervisors' involvement with the cases progress sequentially according to each intern's development. This is reflected in the content and practice of individual supervision. Initial supervision sessions include a more in-depth review of each case with a prescriptive approach to intervention and other professional responsibilities. As the year progresses and interns have received the foundational knowledge through early supervision sessions and didactics, individual supervision takes on a consultative format in which the interns prioritize clinical items to be discussed, engage in reflective discussions, and begin to consider goals as an early career psychologist.

The sequence of weekly didactics also follows a sequential, cumulative, and graded curriculum. Early in the year, didactics cover specific skills that are needed for interns to participate fully in the training clinics. For example, early in the internship year didactics will cover concepts related to common presenting concerns in our clinics, such as treatment of addiction and managing suicide ideation in primary care clinics. Early didactics also focus on specific skills such as Motivational Interviewing in Integrated Primary Care and training on assessment measures commonly used in our clinic (e.g. ADOS). As the year progresses, more advanced and specialized topics are incorporated into didactics (e.g. Mindfulness Based Stress Reduction and advocacy training). The didactic sequence is designed with the purpose of building upon prior training. For example, interns learn to work on interdisciplinary teams before focusing on managing crises in primary care clinics. Training on specialized presenting problems in primary care then follows (e.g. Black Lung Clinic).

Patients Seen During Training

The aim of our program is to prepare psychologists for entry level practice in health service psychology. To meet this aim, it is necessary to ensure that interns have a range of clinical training experiences with a breadth of patients. As a Federally Qualified Healthcare Center serving western West Virginia and southern Ohio, Valley Health is a constellation of over 30 sites spread across the region. Valley Health's mission is to meet the needs of an underserved population who have historically encountered barriers associated with limited access to healthcare. Appalachian culture informs the how these barriers have been experienced and navigated as well as the current needs and challenges of our patients. Appalachia culture is evident in the role of family, religious and political beliefs, and the connection of the community. Currently our Appalachian heritage also includes systemic, devastating implications of the opioid epidemic and the accumulation of consequences of longstanding inadequate access to healthcare.

Data related to the demographics of the patient population of both the Department of Behavioral Health and the organization is included below. This data is for the 2020-2021 fiscal year.

Table 1

Patient Demographics: Percent Poverty Level Based on Reported Annual Income

Percent Poverty	Patients within Behavioral Health	Patients within Valley Health
0%	4.22%	2.68%
1-49%	2.42%	1.92%
50-99%	4.51%	4.34%
100-149%	3.10%	3.36%
150-199%	1.41%	1.61%
200-249%	0.26%	0.52%
250-299%	0.11%	0.16%
300+%	0.11%	0.14%

Table 2

Patient Demographics: Race within Behavioral Health Compared to that within Valley Health

Race	Patients within Behavioral Health	Patients within Valley Health
American Indian or Alaskan Native	0.13%	0.15%
Black/African-American	3.12%	37.76%
Caucasian (white)	90.13%	89.37%
Hispanic/Latino	0.41%	0.33%
Indian /not Native American	0.02%	0.03%
More than One Race	0%	0.01%
Native Hawaiian	0.03%	0.11%
Other pacific Islander	0.03%	0.03%
Race Not Reported	6.13%	6.21%

Table 3

Patient Demographics: Ethnicity within Behavioral Health Compared to that within Valley Health

Ethnicity	Patients within Behavioral Health	Patients within Valley Health
Latino	0.63%	0.59%
Non-Latino	6.28%	6.06%
Other/Not Disclosed	93.09%	93.35%

Table 4

Patient Demographics: Disability Status within Behavioral Health Compared to that within Valley Health

Disability Status	Patients within Behavioral Health	Patients within Valley Health
Not Disabled	92.70%	92.86%
Disabled	0.55%	0.66%

Table 5

Patient Demographics: Gender Diversity within Behavioral Health Compared to that within Valley Health

Gender Identity	Patients within Behavioral Health	Patients within Valley Health
Female	48.99%	47.55%
Genderqueer	0.05%	0.01%
Male	29.91%	29.50%
Other	0.24%	0.17%
Transgender	0.41%	0.09%

Table 6

Patient Demographics: Sexual Orientation within Behavioral Health Compared to that within Valley Health

Sexual Orientation	Patients within Behavioral Health	Patients within Valley Health
Bisexual	2.30%	0.85%
Gay	0.55%	0.24%
Lesbian	0.88%	0.42%
Straight	62.21%	62.44%

Table 7

Patient Demographics: Spoken Language within Behavioral Health Compared to that Within Valley Health

Spoken Language	Patients within Behavioral Health	Patients within Valley Health
English	99.89%	99.92%
Other/Non-English	0.11%	0.02%

To accomplish the aim of preparing interns for the variety of roles psychologists serve, our internship program utilizes currently utilizes four of our sites. While the patient demographics are relatively consistent across the sites used for the internship, the training experiences are different because the clinical services interns provide differ across sites.

Medication Assisted Treatment: The primary presenting problem for patients within the MAT program is Opioid Use Disorder. Additional common concerns are substance use disorders related to methamphetamine, marijuana, alcohol, and tobacco use or dependence. Many patients present with co-occurring diagnoses of mood disorders, trauma disorders, and anxiety disorders. Most patients in the program are between 20 and 60 years old.

General Outpatient: There is a range of presenting problems seen within the outpatient clinic. Some of the most common include depressive disorders, anxiety disorders, personality disorders, and trauma-related disorders. Patients are between preschool to older adulthood.

Integrated Primary Care: The IPC providers offer consultation and intervention for the primary care patients. While they target health behaviors, including smoking cessation, medication compliance, and exercise, the IPC providers also often provide intervention for the mental health diagnoses and crisis behaviors. Patients' ages range as the clinics include Family Medicine, Pediatrics, and OB/GYN providers.

Adult Assessment: The adult clinic serves to identify the cause of problems with attention and concentration. Primary diagnoses include ADHD and depressive disorders. Most individuals are young or middle-aged adults.

Child Assessment: The primary presenting problems are autism spectrum disorders, developmental disorders, ADHD, and oppositional defiant disorder. Patients seen in this clinic are birth to 18 years old.

Evaluation Process

Valley Health's Doctoral Internship in Psychology requires interns demonstrate minimum level of achievement (MLA) for each learning element for each Profession Wide Competency (PWC). To support the development of these competencies, it is required that there is ongoing feedback between interns, supervisors, the Internship Training Committee, and interns' doctoral training programs. This feedback allows for continued improvement of the training program.

Each week in supervision interns receive ongoing feedback about their performance and provide feedback to the supervisor regarding the program supporting their development. This feedback is recorded in supervision logs maintained by each supervisor.

Quarterly, supervisors assess intern performance using the Evaluation of Intern Progress. Supervisors assign ratings for each learning element for each Profession Wide Competency. Supervisors also provide written descriptions of areas of strength and opportunities for growth. Each supervisor with whom the intern trained during that quarter completes an evaluation and reviews this evaluation with the intern. Intern progress data across supervisors are then summarized by the Director of Training into one Summary Evaluation of Intern Progress. This is the same evaluation that each supervisor completes, but the Summary Evaluation averages the ratings for each learning element for each Profession Wide Competence and combines all comments. The Summary Evaluation of Intern Progress is reviewed with the intern.

The first and third quarter Summary Evaluation of Intern Progress provide an opportunity to make adjustments prior to the second and fourth quarter evaluations. The second and fourth quarter (mid- and end-of-year) Summary Evaluation of Intern Progress are used to determine whether minimum level of achievement is met. Minimum level of achievement by the mid-year evaluation is defined as an average of three on each Profession Wide Competence, with no lower than an average of three on any learning element for that area. Minimum level of achievement on the end of year Summary Evaluation of Intern Progress is defined as an average of four on each Profession Wide Competence, with an

average of no lower than a four on any learning element. Successful attainment of minimum level of achievement on the final Summary Evaluation of Intern Progress, as well as completion of 2000 hours of training, is a requirement for successful completion of the internship program.

Interns are entitled to Due Processes as described in the Intern Handbook and available on the website. Due Processes are initiated if the intern achieves a rating lower than 3 on any Learning element on the mid-year Summary Evaluation of Intern Progress. Due Processes are also initiated if any supervisor expresses concern that the intern is in danger of not meeting the required minimum levels of achievement by the end of the training year.

The rating scale on the Evaluation of Intern Progress is as follows:

Competency Ratings Description

1. **Remedial.** Development of remediation plan necessary.
2. **Developing Competence.** Expected level of competence at pre-internship or with new clinical experience; close supervision required on most cases.
3. **Intermediate Competence.** Expected level of competence for intern by mid-year evaluation. Routine or minimal supervision required.
4. **Sufficient Competence.** Expected level of competence for intern at completion of training program. Ready for entry level position in health service psychology.
5. **Advanced Competence.** Able to function autonomously with a level of skill representing beyond that expected at conclusion of internship training.

The Director of Training is responsible for communicating the intern's progress toward completion of the internship program to the Director of Clinical Training for the intern's doctoral program. This includes, but is not limited to, Due Process outcomes, mid- and end-of-year Summary Evaluation of Intern Performance, and completion status and certificate. The Director of Training communicates with the intern's doctoral training program within one month of the mid- and end of year evaluations as well as within one month of the initiation and completion of Due Processes.

The internship Director of Training is responsible for maintaining information regarding intern progress. Each Summary Evaluation of Intern Progress and completion certificate is maintained indefinitely as a digital file.

Graduation Requirements

Successful completion of the Doctoral Internship in Psychology Program requires a rating of 4 or higher on each Learning Element for each Profession Wide Competency on the final evaluation. Interns must also complete the 2000 hours across the twelve months of the training program. Finally, interns must attend at least 80% of didactics and other training experiences.

Application Process

The Doctoral Internship in Psychology at Valley Health currently offers two full-time internship positions. Interested students submit an online application through the APPIC website (www.appic.org) using the APPIC Application for Psychology Internships (AAPI).

A complete application consists of the following materials:

1. A complete online AAPI

2. Cover letter for our site (as part of the AAPI)
3. A current Curriculum Vitae (as part of the AAPI)
4. Three Standard Reference Forms, two of which must be from people who have directly supervised your clinical work (as part of the AAPI)
5. Official transcripts of all graduate coursework

All application materials must be received by the date noted in the current APPIC directory listing in order to be considered.

The program evaluates the entire application package to determine whether requirements are met:

1. Current enrollment and good standing in an APA- or CPA-accredited doctoral program
2. Master's degree in psychology

Applicants with the following qualifications will be considered preferred:

1. Experience or interest in working with rural and underserved populations or goal of working in an integrated primary care setting
2. Academic or practicum experience with health psychology and/or in medical settings
3. Dissertation proposal defended

Applicant Screening: All applications are reviewed by supervisors for the internship program using a standard Applicant Rating Form. Each reviewer makes recommendations regarding inviting the applicant to interview for the program based upon this review process. Applicants are notified whether they have received an interview by email on or before December 21. Interviews are scheduled in early to mid-January on a first come, first serve basis. Interviews take place via videoconference with the Director of Training and at least two supervisors from the internship program. Standardized questions are used during the interviews, though supervisors may ask additional questions to determine the fit between the applicant and the program. The Internship Training Committee meets after the last interviews are conducted to determine applicant ratings. The decisions regarding ranking are made based upon the entire application as well as the interviews themselves. The Director of Training enters the program's ratings in the National Matching Service before the APPIC Rank Order Deadline.

Participation in the APPIC Match: The Doctoral Internship in Psychology at Valley Health is a member of APPIC and participates in the national internship matching process. The program abides by the APPIC policy that no person at this training facility will solicit, accept, or use any ranking-related information from any applicant. Valley Health is an equal opportunity employer and adheres to APPIC's nondiscrimination policies.

Post-Match Employment Process: All interns who match to the Doctoral Internship in Psychology at Valley Health must provide proof of citizenship or legal residency. Additionally interns must successfully pass both a background check and drug screen. The employment process would halt and discontinue if the candidate had one or more of the following issues with their pre-employment processes:

A positive drug screen result that is unexpected due to not matching any valid prescriptions

- 1) A physical where the provider is unable to certify the candidate is physically able to fill the position
- 2) A flagged discrepancy on the candidate's background check that may include:

- a. a lack of verification of complete course work/degree
- b. misdemeanor or felony that could directly relate to the candidate's ability or trustworthiness to complete expected duties

Once interns have been matched to Valley Health, it is important for interns to respond to correspondence from Valley Health's Human Resources department to complete the pre-employment process. Matched interns must remain in touch with Director of Training to respond to information requests and program updates. Trainees must obtain a Gold Card through the West Virginia Board of Examiners of Psychologists and the Director of Training assists in navigating this process. It is essential that the application for the Gold Card be completed in a timely fashion so as to avoid a delay in the start of employment and clinical training. Trainees must submit to the Director of Training a copy of their master's degree, CV, and Gold Card prior to beginning internship. Interns will also need to monitor their email for updates from Valley Health's Human Resources to begin the pre-employment process, including completing a physical and drug screen as well as a background check.

Questions regarding the selection process, requirements, or preferences may be directed to the Director of Training.

COVID 19 Note: Operational and Human Resources policies and procedures may exist that contain additional employment requirements (e.g. vaccination policies). Please contact Human Resources for up-to-date information as the policies may change in response to the changing situation.

HumanResources@valleyhealth.org

Salary, Benefits, and Resources

Salary. The salary for interns at Valley Health Systems is \$28,000 annually in biweekly payments. As salaried employees, interns are eligible for additional supplemental compensation equal to 10.35% of their salary (\$2898) that can either be received as taxable income or be contributed into a 403(b) plan. Additionally, interns have access to the same benefits as our other salaried staff. Valley Health Systems offers a comprehensive benefits plan including health insurance and dental insurance. Insurance is provided for employees and dependents, as is the Employee Discount Process, which offers discounts on services obtained within the Valley Health system. Questions regarding specific benefits packages should be directed to Valley Health's Human Resources department at HumanResources@valleyhealth.org.

Benefits. Employees accrue Paid Time Off (PTO) at a rate of 6.15 hours biweekly, totaling 160 hours annually. PTO is used to cover the six days annually that Valley Health is closed as well as vacation, holidays, personal illness, and other personal and family needs. Unused PTO is paid out at the end of the internship year.

Interns also accrue time in an Extended Illness Bank (EIB). EIB leave is defined as necessary absence caused by illness, injury, pregnancy or absence from work to receive medical, dental, or psychological examination or treatment for self or immediate family. EIB is accrued at a rate of 2.46 hours biweekly

(64 hours in the year). Employees have immediate access to 16 hours from this bank, which is labelled Personal Time. EIB benefits can be used immediately if the employee were hospitalized. Unused EIB benefits are not compensated.

Interns should plan for time off with their supervisors in advance, and interns are responsible for communicating with each clinic that will be missed. When unexpected time off is needed, such as when sick, interns must communicate with their supervisor for that day's clinic as soon as they are able to do so. Supervisors can address questions related to arrangements for time off.

Interns receive two days and \$500 toward educational experiences outside the internship itself. Valley Health allows the days and money to be used toward conferences, dues, trainings, educational materials, or supplies that support continuing education. Supervisors will assist interns in submitting the requests for reimbursement for these expenses.

Resources. Interns have access to the same clerical, technical, and electronic support as any provider within our system. At each of the sites where interns train, reception staff work to schedule patients into the template created by the Director of Training and individual supervisors. Interns communicate through reception staff both verbally and through the tasking system within the electronic health record in order to request assistance with scheduling, obtaining releases of information, and requesting records from other facilities. Reception staff also field phone calls and transcribe messages into the task system within our EHR to get patient messages to providers and interns. Reception staff handle checking-in patients and assisting patients in completion of necessary registration and consent paperwork. Reception staff also walk patients through the online completion of telehealth consent forms when needed.

Interns work with our Behavioral Health Advocates to facilitate linking patients with resources in our community, including assistance with transportation, housing, food, and specialty services. They also utilize our Referral Specialists to connect patients to other health care providers within and outside of the Valley Health system.

Valley Health's IT team is accessible through phone and an online ticketing system to help with immediate concerns during office hours as well as in the evenings or weekends, if needed. Interns each have access to a laptop provided by Valley Health that they can take between the sites, though most offices also have a desktop available to the provider using the office. They can log-in remotely, as needed, for completion of documentation or for telehealth purposes. Interns have access to recording devices and IT staff assist in ensuring that the data is handled in a HIPPA-compliant manner, consistent with our established procedures.

In addition to clerical and technical staff, our program works closely with members of the administrative team, including the Behavioral Health Program Director, the Chief of Staff, and Human Resources to ensure that the program has the resources need to adequately support our aims.

Internship Training Committee

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Internship Admissions, Support, and Initial Placement Data

Date Program Tables are updated: 2/2022

Program Disclosures

Does the program or institution require students, trainees, and/or staff (faculty) to comply with specific policies or practices related to the institution's affiliation or purpose? Such policies or practices may include, but are not limited to, admissions, hiring, retention policies, and/or requirements for completion that express mission and values?	<p style="text-align: center;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>
If yes, provide website link (or content from brochure) where this specific information is presented:	

Internship Program Admissions

Briefly describe in narrative form important information to assist potential applicants in assessing their likely fit with your program. This description must be consistent with the program's policies on intern selection and practicum and academic preparation requirements:

The Doctoral Internship in Psychology at Valley Health has two internship slots available. The program bases interview decisions on information provided in the AAPI. Applicants with experience and interest in working with rural, underserved populations or with a goal of working in integrated care settings are most likely to be a fit for the training and experiences offered through our training program. Applicants who are seeking a broad, generalist training experience for internship may find our training experiences in substance abuse treatment, general outpatient treatment, integrated primary care, and assessment to be a fit for their goals for internship.

Does the program require that applicants have received a minimum number of hours of the following at time of application? If Yes, indicate how many:

Total Direct Contact Intervention Hours	Yes	No	Amount:
Total Direct Contact Assessment Hours	Yes	No	Amount:

Describe any other required minimum criteria used to screen applicants:

Applicants are required to have earned a Master's Degree in psychology as part of their preparatory training. Applicants with academic and/or practicum experience in health psychology and/or in integrated medical settings are preferred. Employment is contingent upon successful completion of a pre-employment physical, drug screen, and background check procedure.

Financial and Other Benefit Support for Upcoming Training Year*

Annual Stipend/Salary for Full-time Interns	\$36,000	
Annual Stipend/Salary for Half-time Interns	N/A	
Program provides access to medical insurance for intern?	Yes	No
If access to medical insurance is provided:		
Trainee contribution to cost required?	Yes	No
Coverage of family member(s) available?	Yes	No
Coverage of legally married partner available?	Yes	No
Coverage of domestic partner available?	Yes	No
Hours of Annual Paid Personal Time Off (PTO and/or Vacation)	160	
Hours of Annual Paid Sick Leave	64	
In the event of medical conditions and/or family needs that require extended leave, does the program allow reasonable unpaid leave to interns/residents in excess of personal time off and sick leave?	Yes	No
Other Benefits (please describe): Additional supplemental compensation equal to 10.35% of their salary (\$2898) can be received as taxable income or contributed to a 403(b) plan; Health and dental insurance; Employee Discount Process, for services within Valley Health System; \$500 and 2 days paid leave for CE.		

*Note. Programs are not required by the Commission on Accreditation to provide all benefits listed in this table

Initial Post-Internship Positions

(Provide an Aggregated Tally for the Preceding 3 Cohorts)

	2017-2020	
Total # of interns who were in the 3 cohorts	2	
Total # of interns who did not seek employment because they returned to their doctoral program/are completing doctoral degree	0	
	PD	EP
Academic teaching	n/a	1
Community mental health center	n/a	n/a
Consortium	n/a	n/a
University Counseling Center	n/a	n/a
Hospital/Medical Center	n/a	1
Veterans Affairs Health Care System	n/a	n/a
Psychiatric facility	n/a	n/a
Correctional facility	n/a	n/a
Health maintenance organization	n/a	n/a
School district/system	n/a	n/a
Independent practice setting	n/a	n/a
Other	n/a	n/a

Note: "PD" = Post-doctoral residency position; "EP" = Employed Position. Each individual represented in this table should be counted only one time. For former trainees working in more than one setting, select the setting that represents their primary position.