New York-Presbyterian Hospital

Columbia University Medical Center

CLINICAL CHILD POSTDOCTORAL FELLOWSHIP

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BACKGROUND AND GENERAL INFORMATION

The New York-Presbyterian Hospital clinical child psychology postdoctoral fellowship is conducted in conjunction with the Department of Psychiatry. It makes use of the Medical Center's various outpatient clinical services. A full range of clinical services also supports training for psychiatrists, social workers, nurses and members of other clinical disciplines with whom the psychology fellow interacts regularly.

THE HOSPITAL SETTING

The NewYork-Presbyterian Hospital, Columbia University Medical Center, is a comprehensive, private hospital that serves its neighborhood in northern Manhattan, as well as private patients from around the world who are drawn to its state-of-the-art medical facilities and reputation for outstanding care and treatment.

The NewYork-Presbyterian Hospital, Columbia University Medical Center asserts its mission "to be a leader in the provision of world class patient care, teaching, research, and service to local, state, national, and international communities." As a portion of this overall mission, it includes a "core mission of educating and training future generations of health care professionals." Thus, the mission of the Medical Center highlights commitments to the highest standard of patient care, ongoing research, and excellence in clinical training.

The NewYork-Presbyterian Hospital is a full service academic medical center. In 2010, the Medical Center recorded 743,418 inpatient days, 1,469,226 outpatient visits, and 195,294 emergency department visits. The Department of Psychiatry provides 1,800 annual inpatient admissions, over 80,000 child and adult outpatient visits, and over 3,000 annual visits to the comprehensive psychiatric emergency program.

The NewYork-Presbyterian Hospital, Columbia University Medical Center is located in the Washington-Heights-Inwood area of northern Manhattan. Our community has a highly diverse population and thus provides a rich socio-cultural experience for trainees. According to a 2006 American Community Survey, 75% of the population of our neighborhood is Latino, 14% is White, and 9% is African American. Among the Latino majority, the Dominican population has been increasing rapidly, from 55% in 2000 to 72% in 2006. Seventy-two per cent of Washington Heights-Inwood residents speak a language other than English in the home.

The catchment area served by our Medical Center is an urban poor one, with an estimated population (2009) of 83,078 and a median household income of \$26,237. Almost one third of residents (32.5%) are living below the federal poverty line. Thirty-seven per cent have attained less than a ninth grade education. A New York State Department of Health report of age adjusted rates (2004) observes that mental illness is the second most frequent cause of hospitalization among the residents of this neighborhood.

Secondary to our local neighborhood, the New York-Presbyterian Hospital provides care to its employees and to national and international patients who opt to seek care at our institution. This provides additional richness and diversity in the patient populations seen by our fellow.

PHILOSOPHY AND TRAINING MODEL

The mission of the Clinical Child Psychology Postdoctoral Fellowship is to train professional psychologists who are able to evaluate and treat pediatric patients in an urban medical environment with clinical skill and humane understanding. The fellowship is a comprehensive and intensive training program that aims to educate the fellow toward the standard of clinical practice expected within this Medical Center. The model of training is experiential with an emphasis of training in empirically supported psychotherapies, and provides the fellow with closely supervised clinical work, while introducing the fellow to the wide range of services performed by psychologists at a major medical center.

Our model of training includes the following components:

Hands-on Experience: In order to achieve proficiency and, ultimately, independence in clinical work, the fellow requires immersion in direct patient care. All rotations afford the fellow a direct service role. The fellow is given evaluation privileges (usually granted to physicians on service) during their tenure in the Emergency Services.

<u>Supervision</u>: Our training model emphasizes intensive supervision, substantial in both quality and quantity, and tailored to the needs of the fellow. The fellow generally receives between six to eight hours of weekly supervision. We believe that close supervision is imperative to build clinical skills, identify and correct errors, alleviate insecurities, and resolve concerns as the fellow assumes direct clinical responsibility.

<u>Heterogeneity</u>: In order to practice within an urban medical center, the fellow requires familiarity with the many roles that psychologists may assume. Accordingly, the fellow trains in various hospital services and obtains clinical experience with a heterogeneous patient population. The fellow's clinical caseload includes patients of various ages, ethnicities, and socio-economic levels. Levels of psychopathology range from patients with severe and persistent mental illness to adjustment disorders.

To practice within a medical center, the fellow requires knowledge about the full range of treatment techniques and their proper application. The fellow is introduced to a variety of treatment modalities and educated in psychodynamic and behavioral and cognitive behavioral treatments. They receive training in individual psychotherapy (both brief and extended), group therapy, and family therapy.

The full-time supervising and training staff represents a broad range of orientations and clinical specialties. Staff members are able to familiarize the fellow with the array of clinical subspecialties in which they practice and conduct research, including chronic self-injury, disruptive behavior disorders, child and adolescent mood disorders, psychiatric care for patients with chronic medical illness, and HIV/AIDS.

<u>Cultural and Economic Diversity</u>: The New York-Presbyterian Hospital is located within a federally designated poverty area in northern Manhattan. Although fellowship training has been constructed to afford clinical experience with a range of cultural and economic backgrounds, the catchment area we serve is largely Latino and economically very poor. Responsible and competent service to this population mandates that the fellow become educated about the local environment and the needs of its people.

The Fellowship, as well as The New York-Presbyterian Hospital, is committed to promoting and respecting diversity among fellow and training staff. We recruit trainees and supervisory staff with varied backgrounds and histories. We believe that this mix of personal and demographic characteristics enriches our program, fosters learning, and contributes to the quality of service we can provide for the diverse populations we serve.

<u>Medical Health and Illness</u>: Psychologists who function within a medical environment must be familiar with the medical problems that afflict patients and also with the range of psychiatric treatment modalities they need. The fellow is introduced to these issues in several ways: a didactic seminar on psychopharmacology, clinical supervision, and discussion of relevant issues during clinical service meetings.

Ethical Principles and Professional Behavior: The importance of practicing ethically as well as skillfully is stressed in our model, and reference to ethical principles is woven through every venue of fellowship instruction.

INTEGRATION OF SCIENCE, RESEARCH, AND PRACTICE

While the emphasis of this fellowship is on the practice of clinical psychology, we address the integration of science, research, and practice throughout the curriculum. Seminars address research findings relevant to specific clinical populations and treatment techniques. Reading lists are provided, and the fellow has full use of two Medical Center libraries. In addition, attendance is encouraged at the weekly Grand Rounds for the Department of Psychiatry, as well as at lectures throughout the Medical Center where current scientific research is reviewed.

The New York State Psychiatric Institute is an invaluable resource for fellowship training. It is one of the nation's leading recipients of funds from NIMH and has been the site of many of the major discoveries in mental health. There are over twenty research divisions at the Psychiatric Institute, including Epidemiology, Child Psychiatry, Therapeutics, and the Division of Gender, Sexuality, and Health.

CORE CURRICULUM

Evaluation and Psychotherapy:

The fellow conducts treatment with children and adolescents in the Pediatric Psychiatry Outpatient Department at Morgan Stanley Children's Hospital of New York. The Department serves children and adolescents ages 3 years and above from the Washington Heights/Inwood area of northern Manhattan.

The fellow's treatment responsibilities include initial intake evaluations, psychological assessment, and psychotherapy. The fellow devotes approximately 20 hours a week to direct clinical services. This time includes both brief and long-term individual psychotherapy, family therapy, group therapy, rapid evaluations with disposition referrals, intensive evaluations, psychological testing, participation in a multi-disciplinary team, and consultation with schools.

- 1. <u>Evaluation (Diagnostic Intake Service)</u>: The fellow is assigned to an evaluation team that meets weekly for approximately 2.5 hours. During this meeting, the fellow interviews new patient referrals. The fellow's supervisor typically is present for the initial evaluation and continues to supervise the remaining sessions. The supervisor addresses issues of interview techniques, clinical diagnosis and planning disposition. At the conclusion of the evaluation, patients can be referred to subspecialty clinics and/or the fellow may elect to treat the patient. The fellow participates in the evaluation team for a six-month rotation.
- 2. <u>Treatment</u>: The fellow gains experience in individual, group, parent training, and family therapy. Supervisors are drawn from a range of orientations including psychodynamic, cognitive-behavioral, behavioral, interpersonal, and family systems. The fellow conducts one long-term psychotherapy for the year, for which they receive psychodynamic psychotherapy supervision. In addition, they spend six months to a year receiving specialized CBT or DBT supervision for one case, and six months to a year in interpersonal psychotherapy supervision for one or more cases. This specialized supervision is conducted in a group format. Fellows also carry a caseload of patients in their subspecialty rotations. Overall, the fellow gains experience in long-term psychotherapy, brief psychotherapy, consultation, and crisis intervention. Medical back-up is provided for those patients needing medication.

Subspecialty Clinics:

The fellow selects three subspecialty clinic rotations for their main clinical experience. The fellow remains in the subspecialty clinics for the entire year, conducting psychotherapy and clinical evaluations.

Elective rotations/clinics currently available are:

1. Disruptive Behavior Disorders Clinic - This clinic offers specialized training in the treatment of children and adolescents with attention deficit disorder with and without hyperactivity, oppositional defiant disorder, and conduct disorder. Patients are frequently treated with a combination of medication and psychotherapy. Within this rotation, the fellow can elect to treat a patient utilizing Parent-Child Interaction Therapy and/or the fellow may also co-lead the *Incredible Years* group therapy program.

- 2. Acute Care This rotation provides varied opportunities for the fellow to see patients in acute crisis. Within this rotation, the fellow will participate in the Dialectical Behavior Therapy Consultation Group, see patients in the Immediate Treatment Clinic which provides short-term interventions for patients referred from the Pediatric Emergency Department, and also rotate with the Home-Based Crisis Intervention program which provides brief services within the home to children at risk of hospitalization or facing acute crisis.
- 3. Children's Anxiety and Depression Clinic In this rotation, individual and group psychotherapy is offered to children and adolescents who are suffering from a mood and/or anxiety disorder. The fellow has the opportunity to conduct individual psychotherapy, group therapy, and family consultation. The fellow may elect to participate in a Trauma specialty or Tic Tourette's and Related Disorders specialty whereby they would treat at least one patient who presents with PTSD or with a Tic Disorder, OCD, or Body-Focused Repetitive Behavior.
- 4. Special Needs Clinic/Consultation Liaison The Special Needs Clinic serves families in which the child or adolescent is HIV seropositive or lives with an affected family member who is HIV seropositive. The fellow has the opportunity to conduct individual psychotherapy and group therapy within this clinic. In addition, as a member of the Consultation Liaison team, the fellow provides individual therapy to children and adolescents suffering from a variety of medical illnesses, such as kidney disease, juvenile rheumatoid arthritis, diabetes, cystic fibrosis, and children who have undergone transplant surgery. The fellow works with the pediatric department and its subspecialty clinics (such as pediatric neurology) and addresses the therapeutic issues involved in behavioral medicine.
- 5. School-Based Mental Health Program This service occurs off-site in a local elementary school and serves children from kindergarten through 5th grade. The mental health program is sponsored by the Division of Child Psychiatry. The fellow on this service spends a minimum of 4 hours a week working in the school providing individual, family or group therapy to children who have been identified as having difficulties in school and are at risk for more serious problems. The fellow also provides consultation to the teaching staff on the classroom management of behavioral problems and the effects of emotional problems on school performance.

In addition to these subspecialty clinic rotations, the fellow will also hold a Long Term Dynamic therapy case and can elect to either participate in the Toddler Infant Parent Program which provides a dyadic, relationship based treatment for parents and their young children or treat an adolescent from a psychodynamic approach.

Psychological Testing:

The fellow is expected to administer approximately 5 psychological test batteries during the fellowship year. Test batteries generally include tests of intellectual functioning and achievement, and neuropsychological tests as warranted. Interested fellows can obtain more extensive training in neuropsychological testing. The fellow is responsible for administering the test battery, completing the report, and providing feedback to the patient, family, and school personnel as indicated. Supervision is provided for test administration, test interpretation, and report writing.

Supervision:

Psychotherapy and evaluation supervision is provided by the division's senior multidisciplinary staff. Supervision for intellectual, achievement, and neuropsychological testing is also part of the training program. Supervision is furnished in a variety of therapeutic orientations providing the fellow with exposure to psychodynamic psychotherapy, as well as evidence-based treatments, brief treatments, and crisis intervention. Most supervision is provided in an individual format, except for the group and family therapy supervision, and the specialized practica in cognitive-behavioral, dialectical behavior, and interpersonal psychotherapy. The fellow receives approximately 6 to 8 hours of weekly supervision.

Didactic Seminars:

The fellow is invited to attend any of the curriculum planned for the child psychology interns and the child psychiatry clinical fellows (M.D.s) including a 10-month course on Evidence-Based Therapy Techniques. In addition, the fellow attends weekly Grand Rounds, a weekly case conference in Pediatric Psychiatry, and a monthly professional development series.

Scholarly Project:

The fellow will also pursue a scholarly project over the course of the training year. This project will be conducted under the supervision of a faculty mentor within the Division of Child and Adolescent Psychiatry and will culminate in a presentation at the end of the academic year. Projects can vary in their format and scope (e.g., co-author a chapter on panic disorder, conduct a literature review of acceptance and commitment therapy with child and adolescent populations).

STIPEND

The current stipend is approximately \$52,000.

The fellow receives four weeks (20 days) paid leave and may choose among several plans for medical insurance.

APPLICATION PROCEDURE

The New York-Presbyterian Hospital, Columbia University Medical Center (CUMC), adheres to a policy of nondiscrimination in the recruitment of employees and trainees. We welcome and encourage applications from all qualified applicants from APA approved doctoral programs in professional psychology who are in the process of completing or who have completed an APA approved internship.

To apply, please email a current curriculum vitae, two letters of recommendation, and a statement of interest in the fellowship to the following email address: cumcpsych.postdoc@gmail.com.

Deadline for Applications: January 1, 2019

The fellowship runs from September 1 to August 31. Only one position is available per year.

After your application has been reviewed, you may be contacted to arrange for an on-site interview.

Contact: Clare Gaskins, Ph.D.

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