

Commonwealth of Virginia
Department of Behavioral Health and Developmental Services

Central State Hospital

***DOCTORAL PSYCHOLOGY
INTERNSHIP BROCHURE
2023-2024***

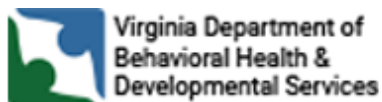


TABLE OF CONTENTS

About Central State Hospital.....	3
Diversity Value Statement.....	4
Program Philosophy and Training Model.....	4
Psychology Training Program Goals.....	5
Major Rotations.....	7
Minor Rotations.....	8
Additional Training Activities.....	9
Supervision and Training Faculty.....	10
Life in the Area.....	15
Administrative Details.....	16
COVID-19 Safety Modifications.....	16
How to Apply.....	17

ABOUT CENTRAL STATE HOPITAL

Central State Hospital (CSH) is a Joint Commission accredited inpatient psychiatric hospital that operates as a division of the Virginia Department of Behavioral Health and Disability Services. CSH provides services to adult men and women with severe and persistent mental illness, many of whom also have diagnoses of substance use disorders, Intellectual Disability, and other mental disorders. Our patient population includes pre- and post- trial forensic patients receiving court-ordered evaluation and treatment, patients who have been adjudicated Not Guilty by Reason of Insanity (NGRI) who are receiving evaluation and/or treatment, and non-forensic patients receiving treatment under civil commitment orders. Our setting is unique in that it is the only maximum security facility in the Commonwealth of Virginia. CSH also serves as a training site for psychology practicum students and post-doctoral residents, along with Pharmacy, Social Work, Rehabilitation Therapy, Physician Assistant, and Nurse Practitioner students.

CSH, originally known as the Central Lunatic Asylum, was the first institution in the country for “colored persons of unsound mind.” Initially, the hospital was established at a former Confederate facility at Howard’s Grove in Richmond, Virginia in 1868. In 1882, the Mayfield Farm in Dinwiddie County was purchased by the City of Petersburg and presented to the Commonwealth for development of a new mental health hospital. The first patients were transferred to the present site of the hospital on March 22, 1885.



CSH remains the site of Virginia’s only Maximum Security Forensic Mental Health Unit, which was built during the 1950's for the evaluation and treatment of patients referred by the courts from anywhere in the Commonwealth. In addition, The Civil Adult Treatment Programs at CSH provide services to clients over 18 years of age from the Central Virginia area. The Hospital was desegregated in 1968. Currently, CSH has approximately 110 beds in our Maximum Security Forensic Unit with an additional 167 beds located in lower-level security buildings on campus.

Should you wish to explore our history further, you may do so at: coloredinsaneasylums.org

DIVERSITY VALUE STATEMENT

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

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

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



PROGRAM PHILOSOPHY AND TRAINING MODEL

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

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

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

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

PSYCHOLOGY TRAINING PROGRAM GOALS

Goal 1: To develop competence of interns to practice as entry level psychologists in independent delivery of clinical interventions.

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

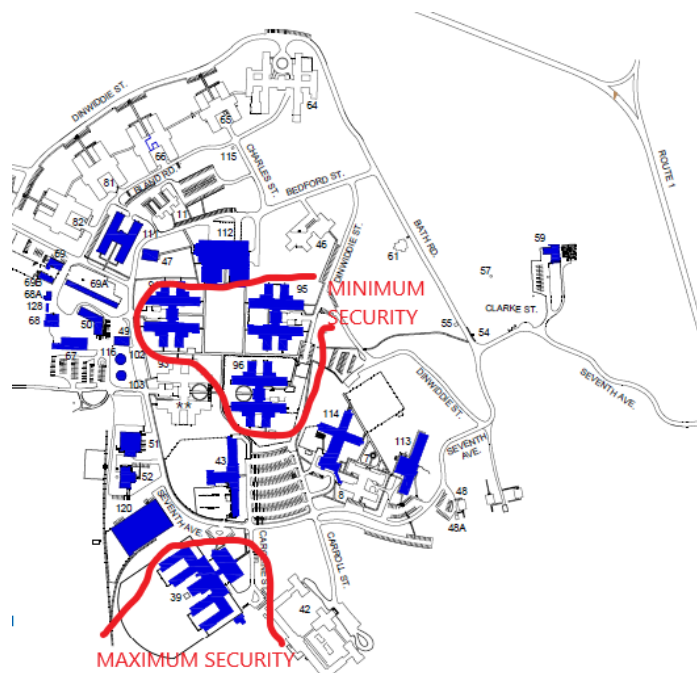
Goal 2: To develop competence of interns to practice as entry level psychologists in the areas of forensic and psychological assessment.

- Select from and administer multiple methods and means of evaluation in ways that are responsive to and respectful of diverse individuals and contexts.

- Interpret, integrate, and conceptualize assessment results to accurately address the referral question
- Communicate results in written and verbal form clearly, constructively, and accurately in a conceptually appropriate manner

Goal 3: To develop professional competencies of interns to function as entry level psychologists in professional conduct and decision-making.

- Interns will understand and act in accordance with professional standards and guidelines (including laws and regulations at the organizational, state, and federal level as well as the current version of the APA Ethical Principles of Psychologists and Code of Conduct; recognize ethical dilemmas should they arise and resolve the dilemmas in an ethically-informed manner; conduct oneself in an ethical manner during all professional activities.
- Develop and maintain productive relationships with colleagues representing psychology and other disciplines (e.g., psychiatric, nursing, social work, etc.) as well as supervisors and supervisees, community organizations, clients and their families; communicate integrated findings in both oral and written formats that demonstrate proficiency with professional language and concepts; exhibit effective interpersonal skills
- Develop familiarity with ethical standards and regulations pertaining to forensic psychological practice, including relevant state and federal case law; assess and conceptualize forensic issues to inform treatment recommendations and communication with attorneys and other legal personnel; evidence knowledge of risk assessment procedures using both direct and collateral sources to develop appropriate risk management strategies
- Conduct themselves in ways that reflect important values and attitudes of psychologists to include personal integrity, professional responsibility, a commitment to lifelong learning, and concern for the welfare and rights of others; engage in effective self-monitoring and self-care to enhance professional effectiveness; actively seek out and respond to supervisory feedback; manage increasingly complex clinical decisions and situations with independence and confidence
- Congruent with goals one and two, interns will utilize critical thinking to become informed consumers of relevant empirical literature, and to apply this knowledge to their emerging clinical and assessment praxis.



MAJOR ROTATIONS

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



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



Maximum Security CSH houses the only maximum-security forensic units in the state. Adults in this building highlight the rare intersection of serious mental illness and risk of harm to self or others. The vast majority of these men and women comprise two distinct categories: treatment of defendants adjudicated incompetent to proceed; and patients adjudicated Not Guilty by Reason of Insanity who are remanded to the custody of the Department of Behavioral Health and Disability Services (DBHDS)

during the temporary custody and/or conditional release process. Individuals in this building are most likely to be charged with serious or high-profile offenses.

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

MINOR ROTATIONS

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

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

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



ADDITIONAL TRAINING ACTIVITIES

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

In late September or early October of the training year, the Fellow attends the Basic Forensic Evaluation training offered by the ILPPP, a one-week intensive workshop covering the basic principles of forensic evaluation. The cost of this program is covered by the hospital. In addition to this training, a number of other training seminars may be offered by the ILPPP during the Fellow's training year. Examples from previous years include Risk Assessment, Evaluating Individuals Found Not Guilty by Reason of Insanity, Assessing Individuals Charged with Sexual Crimes, Conducting Mental Health Evaluations for Capital Sentencing Proceedings, and other advanced seminars or symposia. *Please note that these trainings have been conducted virtually during the 2020-2021 training year due to the COVID-19 pandemic.

Landmark Case Law Series

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

Forensic Seminar Series

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

Didactic Trainings

The Department of Psychology holds a series of didactic trainings throughout the year, covering such topics as risk assessment, the NGRI graduated release process, suicide risk assessment, cultural competency, Dialectical Behavior Therapy, substance use assessment and treatment, sex offender evaluations, assessment of malingering, trauma-informed care, ethics, etcetera. CSH also offers a variety of trainings throughout the year that are available to all staff members.

SUPERVISION AND TRAINING FACULTY

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

Administration



Rachel Lane, Psy.D. - Director of Psychology - Dr. Lane received her Doctorate of Psychology from Alliant University in Irvine, CA. Her graduate program focused on both clinical and forensic psychology. She completed her predoctoral internship at an inpatient psychiatric facility, BHC Alhambra Hospital, which provided acute crisis stabilization, detox/substance use disorder treatment, and intensive eating disorder treatment. Her postdoctoral experience led her to Virginia in 2016 when she joined Catawba Hospital, which is a state psychiatric facility located in Southwest Virginia serving civil and forensic clients. There, she served as a treatment team psychologist and completed pre-trial evaluations related to Competency to Stand Trial and Mental Status at the Time of the Offense. She also completed violence risk assessments related to management of clients adjudicated Not Guilty by Reason of Insanity (NGRI). She chaired several hospital committees and performance improvement teams, focusing on safety culture and staff recognition. She became the Director of Psychology & Forensics at the hospital, where she led staff training efforts related to competency restoration, risk assessment, behavioral intervention, and recovery-oriented principles. In 2021, she relocated to Central Virginia and was excited to join the Central State Hospital (CSH) team. Currently, she is the Director of Psychology at CSH and serves on the state's Forensic Review Panel, which provides consultation to state hospitals across Virginia on risk management of NGRI acquittees. In her spare time, Dr. Lane enjoys video games and burritos.

Maximum Security Staff



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



Carol Clay, Psy.D., CSOTP – Treatment Team Psychologist - Dr. Carol Clay is a licensed clinical psychologist providing services on a treatment team within the maximum security unit of CSH. After graduating from Spelman College with a B.A. in Psychology, Dr. Clay went on to obtain the degrees of Master of Psychology and Doctor of Psychology (clinical) at The George Washington University. Dr. Clay's passion is serving individuals whose presenting problems represent the overlapping stigma of mental health and the criminal justice system. Dr. Clay also serves as Section Chief for forensic treatment groups, in which she maintains the curriculum and addresses the necessary treatment needs for individuals

hospitalized for the purpose of competency to stand trial, as well as those adjudicated Not Guilty by Reason of Insanity. Dr. Clay is a Certified Sex Offender Treatment Provider (CSOTP) and uses these skills within the setting to address sexually inappropriate behaviors and/or evaluating risk of sexual violence as these issues serve as barriers to discharge. Dr. Clay serves as the Internship Program Director and Student Training Coordinator for practicum and doctoral interns.



Jacquelyn Harris, Psy.D. – Treatment Team Psychologist - Dr. Harris earned her B.S. in Psychology with a minor in Neuroscience at George Mason University. She went on to obtain the degrees of Master of Clinical Psychology and Doctor of Clinical Psychology at National Louis University. Her training experiences have been focused on working with individuals who have been diagnosed with a severe mental illness and have legal involvement. She completed her doctoral internship at the Federal Bureau of Prisons where she worked with inmates in the Residential Drug Abuse Program, Sex Offender Treatment Program, and Special Housing Unit. At CSH, she has primarily served as a treatment team psychologist

and is currently on the admissions unit in maximum security. Her clinical interests include: racial and gender minorities, complex trauma, psychosis, personality disorders, and substance use disorders. In her current role, the primary focus is on maintaining the safety of the milieu via suicide and violence risk assessments, crisis interventions, and short-term individual therapy. Dr. Harris serves as a rotation supervisor and the Intern Representative. In her free time, she enjoys being at the beach, traveling, and exploring new cuisines and cultures.



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



Amanda Banks, Ph.D. – Treatment Team Psychologist- Dr. Banks earned a B.A. in Criminal Justice with a Minor in Psychology at Sam Houston State University. She completed her M.A. in Counseling and Ph.D. in Clinical Adolescent Psychology at Prairie View A&M University. Dr. Banks completed predoctoral internship at Central State Hospital and remained on staff as the treatment team psychologist in the women’s unit on maximum security. She also serves as the Research and Review Committee Chair and conducts research on clinical intervention for competency restoration. Dr. Banks enjoys cooking, traveling, painting, and watching true crime and reality tv in her free time.

Forensic Evaluation Team (FET)



Melissa Schroers, Ph.D. - Forensic Coordinator - Dr. Melissa Schroers is a licensed psychologist who has several years of clinical experience working in both outpatient and inpatient treatment capacities. In 2000 she obtained her Bachelor’s Degree in psychology from the University of Rochester, and went on to obtain her doctorate in clinical psychology from St. John’s University in 2006. She began her career in New York State, treating patients in a wide variety of settings including outpatient therapy practices, inpatient psychiatric facilities, and correctional facilities. She has also conducted various forensic evaluations for the courts including child abuse and neglect evaluations, juvenile delinquency evaluations, mental state at the time of offense evaluations, evaluations of competency to stand trial, and violence risk assessments. She currently works as the Forensic Coordinator at Central State Hospital.



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



Helen Greenbacker, Psy.D. - Forensic Evaluation Team Supervisor -

Dr. Greenbacker chose to pursue a career in psychology after deciding it was the more practical of her two undergraduate majors, the other being history. She obtained her graduate degree from Florida Institute of Technology. Dr. Greenbacker completed an APA-accredited internship with Southeast Human Service Center in Fargo, North Dakota, where she gained experience in pre-trial sex offender evaluations, parental capacity evaluations, and driving in snow. She then moved to Kansas City, Missouri, where she completed her post-doctoral residency as a member of the forensic evaluation team at Center for Behavioral Medicine, completing evaluations regarding competency, responsibility, and sexually violent predator determination. Following her residency year, she returned to her home state of Virginia to work as a treatment team psychologist at CSH. During her time in this position she was placed on a ward predominantly housing Not Guilty by Reason of Insanity acquittees, and subsequently completed risk assessment evaluations. Dr. Greenbacker also briefly spent time as the Director of Psychology at CSH before choosing to pursue her passion for forensic evaluation. She has been appointed by the Commissioner to the Forensic Evaluation Oversight Review Panel, providing review and quality assurance of competency to stand trial and sanity at the time of the alleged offense evaluations completed by evaluators on the state-wide approved evaluator list. In her spare time, Dr. Greenbacker enjoys weightlifting, volunteering, and running with her dog, who is, of course, a good boy.



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



Colleen Ewing, Ph.D., LCP – Forensic Evaluator - Dr. Ewing obtained her doctorate in Clinical Psychology from Oklahoma State University. She completed the APA accredited Clinical Psychology Internship at the University of Oklahoma Health Sciences Center. Dr. Ewing completed the two-year Clinical Neuropsychology Fellowship at the New York-Presbyterian/Columbia University Medical Center where she was Chief Fellow during her second year. Dr. Ewing has worked in medical and forensic settings.



Tallie Armstrong, Ph.D. - Forensic Evaluator - Dr. Armstrong received her clinical psychology doctoral degree from Sam Houston State University, and completed her internship at the Eastern Virginia Medical School/Eastern State Hospital. She then completed a postdoctoral fellowship in forensic psychology at the Medical University of South Carolina. Generally, her clinical work has focused on treatment and assessment of forensically-admitted individuals recovering from serious mental illnesses, sexual offenders, violence risk assessment, and civil and criminal forensic assessments of adults and juveniles. Her former position was as a forensic psychologist and research coordinator for Bridgewater State Hospital in Massachusetts. While there, she conducted criminal forensic evaluations of adult males in a strict-security environment, focusing specifically on competency to stand trial, criminal responsibility, violence and sexual violence risk. She also created a research laboratory within the Division of Forensic Services, coordinated research for the hospital, chaired the hospital's Research & Review Committee, and supervised the Division of Forensic Service's postdoctoral fellows as their research preceptor. In addition, she served as a clinical assessment supervisor to doctoral practicum students within the department. Research efforts and publications include understanding reasons for readmission, mitigating institutional violence, and examining trends in forensic evaluation reports and hospital admissions over time. She has presented seminars in the broad area of violence risk, juvenile forensics and juvenile forensic civil evaluations. She currently serves as a manuscript reviewer for multiple forensically relevant journals, and is the Senior Editor of *The Gavel*, the bi-annual newsletter of the Criminal Justice Section within Division 18 of the American Psychological Association. Dr. Armstrong enjoys cooking, running, traveling, and living by the maxim, “What would the notorious RBG do?” Dr. Armstrong currently provides metasupervision for the internship’s research minor rotation and serves as a forensic evaluator for DBHDS Central Office.

Minimum Security Staff



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



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

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



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

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

LIFE IN THE AREA

While CSH is located in Petersburg, many staff members choose to reside in Richmond or surrounding areas, such as Chesterfield, Midlothian, and Colonial Heights. An economically progressive city and Virginia's capital, Richmond offers a wealth of amenities not easily found among other East Coast municipalities. Richmond's livability can be measured in numerous ways:

- beautiful neighborhoods with striking architecture and an abundance of rental options
- a vast cultural and educational heritage befitting its more than 200,000 citizens
- noted historic prestige tracing back to the early English settlers

Nationally recognized for its vitality and New Economy embrace, Richmond's diversified employment base extends from chemical, food and tobacco manufacturing to biotechnology, semiconductors and high-tech fibers. The city consistently ranks among "Best Places to Live and Work in America" in several national publications.

Richmond is among a handful of mid-sized cities to offer a flourishing cultural community enhanced by several first-class museums and prominent universities, its own symphony, professional ballet and opera, and numerous theater companies and art galleries.

While offering easy access to the Atlantic Ocean, Appalachian Mountains, the Blue Hills and Washington, D.C., Richmond features countless pastimes at home. The city is home to many trendy boutiques and independent restaurants, breweries/wineries, numerous sports and entertainment attractions, outdoor pursuits among one of the nation's largest river park systems, and a treasure trove of historic landmarks provide fun times galore. This area of Central Virginia is particularly known for its spectacular Fall foliage displays, agrotourism, and support of independent businesses.

Petersburg is an historic small city with a wealth of Civil War sites in the near vicinity and a newly burgeoning downtown area. It is located just 21 miles south of Richmond, offering additional residential options.



ADMINISTRATIVE DETAILS

Calendar

The internship begins on August 10th and terminates 12 calendar months later. The granting of educational leave (beyond the required training workshops to be attended at the Institute for Law, Psychiatry, and Public Policy) shall be at the discretion of the Training Director.

Stipend

The stipend for the internship is \$37,000.

Professional Liability Insurance

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

Health Insurance and Leave Time

The Fellow will receive health, dental, and disability insurance as offered to all Virginia state employees. The Fellow receives four (4) days per year of family/personal leave, eight (8) days per year of sick leave, and he or she also earns four (4) hours of general leave time per pay period (1 day per month). This is in addition to twelve (12) paid holidays per year.

Pay Periods and Pay Days

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

Offices

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

COVID-19 SAFETY MODIFICATIONS

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

- Prior to entering work buildings, all employees are screened for risk factors and symptoms related to COVID-19 and have their temperatures taken
- All employees are required to wear surgical or appropriately fit-tested KN95 or N95 face masks when in contact with others (masks and fit testing are provided by the hospital)
- All employees must either be vaccinated for COVID-19 or submit to weekly rapid screenings
- All patients are required to be screened for COVID-19 upon admission and prior to leaving the facility for medical appointments
- All acute admissions units require the use of full PPE, and any unit with a known exposure is required to test and possibly implement the use of full PPE
- Communal group treatment activities for patients have modified schedules and formats
- Onsite free COVID-19 testing is offered to employees and patients
- Onsite free COVID-19 vaccinations are available for employees and residents

HOW TO APPLY

To apply to the CSH Clinical Psychology Internship Program, applicants are asked to complete the online application (AAPI) that can be accessed from APPIC at the link below. The deadline for acceptance of the completed electronic materials is December 1, and according to APPIC requirements, the following information should be included in each candidate's application package:

- Completed General Application Form may be accessed at <http://www.appic.org/>
- Cover Letter
- Curriculum Vitae
- At least three letters of recommendation from persons familiar with applicant's professional skills and development
- Official transcripts of applicants graduate work
- Sample Assessment Report

APPLICATION DEADLINE: December 1, 2023

Academic/Practicum Preparation and Selection Process: All application materials are due by December 1, so that the process of scheduling interviews can begin. Interviews are not scheduled

until applications are complete. Thus, in order to be eligible for an interview, all application materials must be submitted to APPIC by the established deadline.

Selection of interns is based on comparative evaluation. In keeping with Equal Opportunity guidelines, the Internship Selection Committee will ensure equal employment opportunity to internship applicants with respect to all employment practices, including recruitment, and that such practices shall be administered without regard to race, color, religion, national origin, political affiliation, disability, age or sex.

Academic preparation required of applicants includes 500 intervention hours and 100 Assessment hours as well as the completion of a minimum of three years of graduate training. Only applicants from APA-accredited clinical or counseling psychology training programs are accepted. Applicants' dissertation proposals must be approved by the start of their internship training, and applicants must have successfully completed applicable comprehensive exams in their graduate training programs.

Following review of completed applications, the selection committee will contact selected applicants to schedule interviews. Interviews will be scheduled in January. In-person interviews are preferred but phone interviews will be accommodated at an intern's request. Once all interviews have been completed, the selection committee will rank order all candidates under consideration. The current number of funded internship slots is two.

The Clinical Psychology Internship Program abides by the APPIC policy that no person at this training facility will solicit, accept or use any ranking-related information from any Internship applicant.

Once matched, the Internship Program Coordinator will contact the intern by phone on Match Day. A letter will be sent to the intern and their Program Coordinator within seven days of the Match date. All interns must successfully complete the pre-employment requirements which include a criminal background check and drug screening. The Internship Program Coordinator oversees all aspects of the training program and will conduct regular quality assurance inspections to ensure that interns are receiving required supervision and training. In addition, the Internship Program Coordinator will also meet with each intern for one hour per week of supervision and provide quarterly written progress evaluations to the Intern and the DCT of their academic institution.

INTERVIEW DATES AND LOCATION

After a review of materials, applicants still under consideration will be invited to interview for an internship position. The interview will be an opportunity to learn more about the facility, meet internship faculty and current interns, and discuss the internship program. Persons invited for interviews will be contacted via phone or email. Internship interview appointments will occur throughout the month of January. While in-person interviews are preferred, the program will willingly accommodate remote interview.

TRAINING POSITION OFFERS

Internship position offers will be made through the APPIC Internship Matching Program and in compliance with APPIC Match Policies. This internship site agrees to abide by the APPIC policy that no persona at this training facility will solicit, accept, or use any ranking-related information from any internship applicant.