



**PRIMARY CARE PSYCHOLOGY
ASSOCIATES LLC**
Adult and Pediatric Psychology

**400 SKOKIE BLVD, SUITE 245
NORTHBROOK, IL, 60062**
847.686.0090 Phone or Fax

PRIMARY CARE PSYCHOLOGY ASSOCIATES
APA ACCREDITED PSYCHOLOGY INTERNSHIP
2023-2024 BROCHURE

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Primary Care Psychology Associates, LLC

Primary Care Psychology Associates (PCPA) is a private group practice of psychologists, social workers, and behavioral health clinicians. PCPA offers dynamic outpatient health psychology services to adult and pediatric populations throughout the Chicagoland area. PCPA has strong relationships with local primary care providers, including Internal Medicine and Pediatric Providers, Specialists, and Psychiatrists. Services provided include evidence-based time-limited therapy, psychological assessment, and consultations with physicians.

PCPA's mission is to promote behavioral health across the lifespan through easy-access, excellent interdisciplinary team and integrated care. PCPA is committed to providing the highest quality of assessment, consultation, and therapy services. We work in collaboration with primary care and specialty physicians, as well as community agencies, to foster patient wellness and satisfaction in a warm, therapeutic, and respectful manner. Training at PCPA is unique in that Interns gain firsthand experience in being a core part of a group practice merged with ongoing collaboration with offsite primary care providers.

Psychology Internship Program Overview

PCPA's psychology internship has two tracks (**Pediatric Psychology** and **Adult Behavioral Medicine**).

Our 12-month psychology internship is designed to integrate your formal academic preparation with comprehensive clinical training. The aim of the clinical training experience is to expose interns in both tracks to the following:

- Assessment, treatment, and consultation utilizing a range of treatment modalities
- Opportunities to consult with primary care and speciality care physicians
- A variety of theoretical orientations (e.g. cognitive-behavioral, psychodynamic, relational-interpersonal, family systems, solution-focused, ACT, Adlerian)
- Diverse developmental (children, adolescents, adults, elderly) and ethnic populations



Pediatric Psychology Track - (MATCH CODE: 220311)

The pediatric psychology division of PCPA includes clinicians who provide therapy, assessment, and consultation for children, adolescents, and families. As an intern within this division, you will be exposed to a range of difficulties commonly presented in children and adolescents, including depression, anxiety, ADHD, sleep difficulties, toileting issues, behavioral concerns, and adjustment difficulties. Training will also focus on health-related issues as they impact psychological and family functioning. Interns in the Pediatric track will have the opportunity to be placed 1-2 days/week at one of our pediatric integrated care sites through our partnership with Peditrust, a large pediatricians group in the Chicagoland area. At these sites, interns will have the opportunity to provide same-day warm-hand offs and provide behavioral health consultations for children presenting to their pediatrician's office for a medical appointment. These consultations are an opportunity to learn firsthand about collaborating with medical staff in a primary care setting, while also providing brief behavioral health assessment and interventions for families.

Adult Behavioral Medicine Track - (MATCH CODE: 220312)

The adult behavioral medicine division of PCPA includes therapy (individual, couples and family) and assessment (Psychoeducational Testing, Full Psychological Evaluations, and specific diagnostic clarification). Common presenting problems include, but are not limited to, depression, anxiety, adjustment to illness, life transitions, trauma, ADHD, relationship concerns, managing medication compliance, and managing chronic physical illness.

Why an Internship with PCPA?

- Opportunity to gain experience and learn the intricacies of group practice
- Be part of a team that treats each other with respect and professionalism
- From externs to the owners, we take pride in the practice environment we create and maintain together
- Obtain outstanding training in health psychology in an outpatient setting
- Opportunity to consult with leading primary care physicians throughout the Chicagoland area
- Gain direct clinical hours providing therapy and assessment services to diverse populations with a wide range of presenting problems
- Learn evidence-based treatments within a short-term therapy model
- Work and learn within a supportive and caring environment with a dynamic supervisory team of dedicated psychologists
- Work in the heart of downtown Chicago and one of Chicago's most exciting neighborhoods!

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Accreditation Status

The Psychology Internship program at Primary Care Psychology Associates is accredited by the American Psychological Association, with the next site visit taking place in 2023. 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
Email: apaaccred@apa.org

PCPA actively supports equal and fair recruitment and selection of psychology interns. We provide equal opportunities in training for all qualified persons and do not discriminate on the basis of race, religion, sex, national origin, age, or sexual orientation

Model of Training

At Primary Care Psychology Associates (PCPA), we formulate our internship training program utilizing a developmental model for all clinical supervision. PCPA upholds a **practitioner-scholar model** of training. Evidence-based clinical training and practice builds upon the theoretical, empirical, and clinical foundations that interns accumulate in their respective academic training programs and previous practicum experiences. The evidence-based practices we employ in our program are geared towards the specific populations and diagnoses we serve.

Psychology Interns build upon the knowledge they gain in their academic education and the skills they have acquired from previous clinical experiences. Didactic presentations provided at the beginning of the training year are more basic to ensure that all of the interns start their training year with broad-based knowledge. As the training year progresses, the topics addressed in all seminars and didactic presentations become more specific and domain-focused. For example, a didactic presentation early on in the year addresses De-Escalation Training, during which training is provided on how to manage agitated patients and situations that have the propensity to escalate. In the Spring of this current training year, a didactic on the Social Determinants of Health will take place. This allows interns to gain the most out of the latter presentation later on in the year by first receiving more broad training out of a didactic presentation earlier in the training year. Similarly, in supervision we follow a developmental model and offer more hands-on support at the beginning of the year. In the earlier part of the training year, supervisors focus on more introductory topics and discussions that evolve into

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more complex and specific ones as the year proceeds. For example, interns observe their supervisors conduct an intake session and then the supervisor participates in the interns' intake sessions until both feel comfortable for the intern to conduct intake sessions independently. As the year progresses, we encourage the supervision to take on a more consultative model to help support and prepare the intern for more autonomous, postdoctoral experiences and beyond.

PCPA supports Psychology Interns to continue developing their sense of self as a therapist as they begin the program, but also challenges them to utilize the evidence-based treatments that are suited for the patients with whom PCPA works. Given the multiple levels of training offered at PCPA (Advanced Practicum, Psychology Internship, and PostDoctoral Fellowship) we encourage the training cohorts to utilize one another as sources of knowledge, but also as sources of social, emotional, and clinical support, which creates a nurturing and encouraging environment that fosters professional and clinical growth.



Goals, Objectives, and Competencies of Internship

Goal 1: Competence in Theories and Methods of Psychological Diagnosis and Assessment

Objectives:

Diagnostic Skill
Psychological Test Selection and Administration
Psychological Test Interpretation
Assessment Writing Skills
Feedback Regarding Assessment

Competencies Expected:

- Demonstrates a thorough working knowledge of psychiatric diagnostic nomenclature and DSM-5. Utilizes historical, interview and psychometric data to diagnose accurately.
- Promptly and proficiently administers commonly used tests in his/her area of practice. Appropriately chooses the tests to be administered. Demonstrates competence in administration of tests.
- Interprets the results of psychological tests used in his/her area of practice. Demonstrates competence interpreting tests.
- Writes a well-organized psychological report. Answers the referral question clearly and provides the referral source with specific recommendations.
- Plans and carries out a feedback interview. Explains the test results in terms the patient and/or caregiver can understand, provides suitable recommendations and responds to issues raised by the patient or caregiver.

Goal 2: Competency in Behavioral Health Intervention

Objectives:

Patient Rapport
Patient Risk Management and Confidentiality
Case Conceptualization and Treatment Goals
Therapeutic Interventions
Effective Use of Emotional Reactions in Therapy (e.g. countertransference)

Competencies Expected:

- Consistently achieves good rapport with patients.
- Effectively evaluates, manages and documents patient risk by assessing immediate



concerns such as suicidality, homicidality, and any other safety issues. Collaborates with patients in crisis to make appropriate short-term safety plans, and intensifies treatment as needed. Discusses all applicable confidentiality issues openly with patients.

- Formulates a useful case conceptualization that draws upon theoretical and research knowledge. Collaborates with the patient to form appropriate treatment goals.
- Interventions are well-timed, effective and consistent with empirically supported treatments.
- Understands and uses own emotional reactions to the patient productively and constructively during the course of treatment.

Goal 3: Competency in Professional Conduct, Ethics, and Legal Matters

Objectives:

Professional Responsibility and Documentation
Efficiency and Time Management
Knowledge of Ethics and Law
Administrative Competency
Using Positive Coping Strategies

Competencies Expected:

- Responsible for key patient care tasks (e.g., phone calls, letters, progress notes, consultation notes), completes tasks promptly. All patient contacts, including scheduled, rescheduled, and canceled appointments, along with phone contacts are well documented. Records include crucial information.
- Efficient and effective time management. Keeps scheduled appointments and meetings, and arrives on time. Keeps supervisors apprised of whereabouts as needed. Minimizes unplanned leave, whenever possible.
- Demonstrates good knowledge of ethical principles and state law. Consistently applies these appropriately, seeking consultation as needed.
- Demonstrates a growing ability to accomplish administrative tasks. Prioritizes appropriately. Shows a growing autonomy in management of larger administrative, research or clinical projects.
- Demonstrates positive coping strategies with personal and professional stressors and challenges. Maintains professional functioning and quality patient care.

Goal 4: Competency in Individual and Cultural Diversity

Objectives:

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Sensitivity to Patient Diversity
Awareness of Own and Cultural Background

Competencies Expected:

- Sensitive to the cultural and individual diversity of patients and is committed to providing culturally sensitive services.
- Aware of own background and its impact on patients. Committed to continuing to explore own cultural identity issues and relationship to clinical work.

Goal 5: Competency in Scholarly Inquiry and Application of Current Scientific Knowledge to Practice

Objectives:

Seeks Current Scientific Knowledge
Program Evaluation

Competencies Expected:

- Displays necessary self-direction in gathering clinical and research information, practices independently and competently. Seeks out current scientific knowledge as needed to enhance knowledge about clinical practice and other relevant areas.
- Displays understanding and application of evaluating outcomes in their internship project. Informing treatment based on the outcome data.

Goal 6: Competency in Professional Consultation

Objectives:

Consultation with Medical Professionals

Competencies Expected:

- Gives the appropriate level of guidance when providing consultation to other health care professionals, taking into account their level of knowledge about psychological theories, methods and principles.

Goal 7: Competency in Supervision

Objectives:

Supervision Knowledge
Seeks Consultation/Supervision



Professional Interpersonal Behavior
Training Goals and Use of Feedback

Competencies Expected:

- Understands theories and methods of supervision, including standards and ethical issues, as evidenced by participation in group discussions during didactic presentations, participation in supervision activities, and competence in leading the Evidence-Based Group Supervision.
- Seeks consultation or supervision as needed and uses it productively.
- A professional and appropriate interaction with treatment teams, peers and supervisors; seeks peer support as needed.
- Identifies goals for supervision, tracks progress toward achieving these goals, and sets new goals. Seeks, integrates, and applies supervisory feedback to professional activities, and then reports back in subsequent meetings. Routinely reflects on the supervisory process. Identifies areas of strength and relative weakness. Engages in conversations and furthers professional identity and development.

Clinical Services:

PCPA's Psychology Internship includes a supported experiential training component. Interns are engaged in direct services provided by interns to service recipients. Interns can expect to typically receive 20 hours of direct clinical services per week. Implementation of evidence-based practices addressing mental health concerns (primarily cognitive-behavioral, family systems, ACT, mindfulness, interpersonal, and solution-focused therapy) is highly encouraged. Interns are responsible for all case reports, documentation of patient progress, and psychological reports.

PCPA Psychology Interns in the Pediatric Track Required Experiential Training Activities:

Individual Therapy
Family Therapy
Psychological Assessment (includes intake interviewing, school observations, administering psychological batteries, analyzing data, writing the report, and meeting with family for feedback session)
School Consultations
Consultations with pediatricians and warm-hand offs

PCPA Psychology Interns in the Adult Behavioral Medicine Track Required Experiential Training Activities:

Individual Therapy
Family Therapy
Couples Therapy

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Psychological Assessment (includes intake interviewing, administering psychological batteries, analyzing data, writing reports, and meeting with the patient for the feedback session)

Supervision:

Psychology Interns receive a total of **5 hours** of supervision per week, including:

- Two hours of face-to-face **individual supervision** by two different licensed clinical psychologists
- One hour of **Group Supervision**:
 - Group Supervision is an opportunity for interns to review cases, discuss professional development topics, and engage in a process-oriented discussion.
 - The group hour is supported with the reading of a book that is focused on professional development issues specific to psychologists, along with topics related to the therapy process. Past books have included: *The Gift of Therapy* by Irvin Yalom; *The Dance of Anger* by Harriet Lerner; *On Being a Therapist* by Jeffrey Kottler.
- One hour of **Group Supervision in Evidence-Based Treatments**:
 - Group Supervision in Evidence-Based Treatments focuses on a different evidence-based treatment each week and application to interns' current cases. Articles and resources are provided weekly before the supervision to ensure meaningful discussion of topics.
- One hour of **Group Assessment Supervision**:
 - Group Assessment Supervision focuses on trends in psychological assessment, new testing measures, testing case discussions, analyzing testing data, assessment report writing, and feedback sessions.



Training Activities:

Multicultural Competency Seminar:

The Multicultural Competency Seminar (MCC) is led by a PCPA staff member. The Multicultural Competency Seminar includes a didactic component while providing interns relevant knowledge about diversity within clinical training and practice. This seminar also includes deep self-reflection as diversity is best learned and understood through utilization of an experiential component.

Peer Consultation Group:

PCPA Psychology Interns participate in Peer Consultation Group with one another. During this hour, Psychology Interns have the opportunity to discuss cases and provide feedback and clinical support to one another.

Didactic Seminar/Case Conference:

Didactic and Case Conference presentations are held bi-weekly on alternating Wednesdays for one hour each. Didactic topics are presented by senior PCPA staff and outside speakers. Cases are presented by Psychology Interns, Advanced Practicum Externs, and Post-Doctoral Fellows during Case Conferences.

Experiential Learning Group:

The Experiential Learning Group is designed to be an immersive learning experience where interns will learn how to facilitate core components of skill-based psychotherapies including CBT, DBT and ACT. Through active completion and participation in these common therapeutic interventions, trainees will enhance their working knowledge of how to facilitate and process these therapeutic tools. It will also enhance trainees' ability to utilize the theoretical background of each approach in a way that increases their ability to discuss it with clients in a more accessible format.

Staff Business Meeting:

PCPA requires Psychology Interns and staff to participate in the bi-monthly PCPA Staff Business Meeting. The PCPA Staff Business Meeting is led by the Clinical Director of PCPA, who is also a Licensed Clinical Psychologist. During PCPA Staff Business Meetings, Psychology Interns have the opportunity to participate and learn the business side of PCPA and clinical practice. The following topics are typically discussed during this meeting: upcoming local and national trainings/conferences, new PCPA policies or procedures, community outreach opportunities, clarifying insurance and billing issues, upcoming PCPA events and opportunities, and acknowledgment of positive accomplishments within the practice.



Internship Project:

PCPA Psychology Interns are required to complete an Internship Project of relevance to both themselves and PCPA. Projects can be natural extensions of clinical service or administrative tasks in which the intern is involved or interested. The intent of the intern project is to showcase an intern's interests and expertise and make a contribution to the practice. A copy of the materials created by the intern will be maintained at PCPA for future reference for staff and future interns. To assist interns in completing their project, drafts of the project are due on specified dates throughout the year.

Meeting with Training Director

Interns meet quarterly with the Training Director to discuss the interns' training experience at PCPA and to suggest any improvements that would maximize the interns' clinical, supervisory, and/or training experiences throughout the training year; this recurrent meeting includes a process component in addition to solution-focused discussion.

Hours and Schedules

Psychology Interns are required to be on site 40 hours per week. Psychology Interns will acquire a total of 2000 hours over the course of the 12-month internship. The following is an approximate breakdown of the amount of time interns spend in various activities and roles within a typical week:

- 20 hours of direct clinical service (including individual therapy, couples and family therapy, intake assessments, administration of psychological testing, testing feedback sessions)
- 2 hours of individual supervision with two different licensed clinical psychologists
- 1 hour of Group Supervision
- 1 hour of Group Assessment Supervision
- 1 hour of Group Supervision in Evidence-Based Treatments
- 1 hour of Multicultural Competency Seminar
- 1 hour of didactic seminar/case conference (every other week)
- 1 hour of Peer Consultation Group (every other week)
- 1 hour of Experiential Learning Group (every other week)
- 1 hour of participation in the PCPA Business Meeting (every other week)
- 8-10 hours of documentation time (progress notes, scoring and analyzing testing data, writing psychological reports, chart review, and treatment summaries)
- 1-2 hours devoted to Internship Project as decided upon by individual interns and depending on the chosen topic
- Meeting with Training Director (quarterly)

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*Please note that individual schedules will be discussed individually in the first supervision meeting with the intern and primary supervisor

*Please note that interns are expected to work 2 evenings per week and on Saturdays (with Sundays and Mondays off)

Location:

PCPA Streeterville
160 E. Grand Ave Suite 500
Chicago, IL 60611

*Accessible by public transportation

Evaluation:

Formal evaluation of interns' performance by supervisors is part of the training process and is completed twice during the training year (at the mid-year and at the end of the year). Formal evaluations are forwarded to the Training Director and to the academic institution (if required). An informal evaluation will be performed by the interns' primary supervisor within the first three months of commencing internship as a way of providing consistent, fluid, and more immediate guidance and feedback. Similarly, interns complete program evaluations and supervisor evaluations at the mid-year and at the end of training year.

Orientation:

Interns will be introduced to PCPA in an inviting, informative, and collaborative manner. Orientation covers Adult Behavioral Health Medicine, Pediatric Psychology, documentation training, staff introductions, and assignment of supervisors. To promote ongoing learning and development, interns will be given a recommended reading list prior to orientation.



Intern Selection and Academic Preparation Policy Application Requirements and Procedures

Applicants submit their applications to the AAPI Applicant Portal (<https://portal.appics.org>).
The complete application for internship includes:

- APPIC application
- Cover letter specifying the track to which you wish to apply (please specify only **ONE** track)
- Curriculum vitae (CV)
- Three letters of recommendation
- An official transcript from the APA-accredited doctoral program
- One sample de-identified testing report to be uploaded to the AAPI applicant portal as “supplemental materials”
- Application deadline is **Thursday November 3, 2022 by 5:00 PM Central Time (CT)**

Pediatric Psychology Track – MATCH CODE: 220311

Adult Behavioral Medicine Track – MATCH CODE: 220312

All complete applications will be reviewed and applicants will be invited for an interview. Interviews will be virtual. Interviews will be conducted in both individual and group formats. An orientation to PCPA begins the day, followed by group and individual interviews, and an informal meeting with present interns offers the opportunity for applicants to discuss the internship. Unfortunately, we are not able to offer interviews to all applicants. If you are not invited for an interview, you will not be considered for our internship and will not be ranked in the Match. Intern applicants will be notified of match results via the Matching Program in which Primary Care Psychology Associates is participating. Interviews are conducted during the first few weeks of January 2023.

In order to qualify for the internship, all applicants must demonstrate that they will complete the following before the first day of the internship:

- The applicant must be matriculated in an APA-accredited academic training program.
- Evidence of at least 600 hours of supervised practicum experience:
 - A Masters-level practicum experience counts toward these hours, as well as experience not yet completed at the time of application.
 - At least 500 hours of intervention experience and 100 hours of assessment experience

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- Supervision must be amply provided during these practicum experiences
- Successful completion of all doctoral coursework.

Preference is given to applicants who possess the following:

- Experience/interest in health psychology and/or group practice
- Strong therapy and assessment skills
- Strong critical thinking skills
- Flexibility

Applicants must also satisfy PCPA's practice-wide eligibility requirements, including proof of COVID vaccinations or completion of an exemption request form and a background check. Acceptance into the program is contingent on passing the background check. These will be completed after the match process.

****Please Note:** Interns are prohibited from maintaining clinical positions outside of PCPA throughout their employment at PCPA as it may violate our non-compete clause or be a conflict of interest**

Stipend and Benefits

Interns receive a stipend of \$28,000 for the 12-month training year. The internship year is 50 weeks, with time off on national and religious holidays, as well as allotted time for professional development. Interns are expected to work approximately a 40-hour week, including several evenings per week (usually two) and Saturdays (with Sundays and Mondays off), accumulating 2,000 hours over the course of the year. During the year, interns' assignments or various aspects of the program may be modified in accordance with new opportunities and needs of the practice. Interns are eligible to receive health, life, dental insurance, along with 401K. Additionally, interns receive 10 days of PTO and 5 days of sick leave. PCPA also supports interns' professional development and offers an additional \$150 stipend to be used for workshops and conference attendance, with requested days off being used as part of the PTO allotment.

Other questions about the internship program may be directed to:

Shauna Freedman, Psy.D.
Training Director
(847) 686-0090 ext 127
sfreedman@pcpachicago.com

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Psychology Internship Training Team

Shauna R. Freedman, Psy.D.

Training Director, Director of Pediatric Behavioral Health; Licensed Clinical Psychologist

Dr. Shauna Freedman received her master's and doctoral degrees in Clinical Psychology from The Chicago School of Professional Psychology, with a specialization in children and adolescents. Prior to that, she received her Bachelor's degree in Psychology from Indiana University. Dr. Freedman completed her Psychology Internship at Pillars Community Mental Health Services through The Chicago School of Professional Psychology's Internship Leadership Consortium. She has also completed a Certificate program in Primary Care Behavioral Health through the University of Massachusetts Medical School, Department of Family Medicine and Community Health. In addition to her responsibilities as the Training Director, Dr. Freedman provides individual supervision to interns in the Pediatric track and leads the weekly Group Supervision in Evidence-Based Treatment. Her areas of clinical expertise include pediatric gastrointestinal disorders, adjustment/coping with chronic medical illness, pediatric anxiety disorders, disruptive behavior in preschoolers, psychological assessment, and adjustment to life transitions.

Meryl Pankhurst, Psy.D.

Associate Director of Training, Director of Business Development; Licensed Clinical Psychologist

Dr. Meryl Pankhurst received her Master in Counseling (M.A.C.) and her Doctor of Psychology in Clinical Psychology (Psy.D.) degrees from the Adler School of Professional Psychology, along with a concentration in Primary Care Psychology. Before that, Dr. Pankhurst attended the University of Michigan in Ann Arbor, Michigan, where she obtained her Bachelor of Arts degree in Psychology and an academic minor in Crime and Justice. Dr. Pankhurst provides individual supervision to interns in the Adult Behavioral Medicine Track and leads the Multicultural Competency Seminar. Her areas of clinical expertise include adjustment, relationship, work, and school difficulties, trauma, depression, anxiety, ADHD, loss/grief, and health issues.

Boris Todorov, Ph.D.

Director of Clinical Services; Licensed Clinical Psychologist

Dr. Boris Todorov earned his doctorate in Clinical Psychology from Ohio University and completed his psychology internship at the University of San Diego Counseling Center. After earning his doctorate, Dr. Todorov spent two years developing and managing an integrated primary care program that improved access to behavioral health services for under-served and underprivileged patients in Southeast Ohio. Dr. Todorov has completed the Primary Behavioral Health Integrated Care Training Academy program with Cherokee Health Systems, Knoxville, Tennessee. Dr. Todorov is recognized by the National Registry of Health Service Providers in

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Psychology. Dr. Todorov provides individual supervision to interns in the Adult Behavioral Medicine Track. His areas of clinical expertise include behavioral interventions for patients with chronic health conditions, including but not limited to chronic pain, diabetes and cardiovascular problems, anxiety and mood disorders, relationship problems, substance use, and adjustment to college life and young adulthood.

Valerie Weed, Psy.D.

Director of Operations; Licensed Clinical Psychologist

Dr. Valerie Weed is a Supervising Clinical Psychologist in the Adult Track at Primary Care Psychology Associates. She earned her doctoral degree in clinical psychology from the Massachusetts School of Professional Psychology with a specialization in health psychology. Before pursuing her doctorate, she graduated from Middlebury College with a double major in Neuroscience and Religion. She also completed post-baccalaureate work in psychology at New York University. Since that time, Dr. Weed has been certified as a wellness coach and has trained in a variety of therapeutic techniques. Her passion for learning is an enduring part of her life and she continues to study the latest empirically-validated treatments in the field. Her areas of expertise include chronic illness, stress management, life transitions, anxiety, chronic pain, weight management, health behavior change, and wellness.

Laura Higdon, Ph.D.

Licensed Clinical Psychologist

Dr. Laura Higdon earned her doctoral degree at The Chicago Medical School/ University of Health Sciences in North Chicago, IL. Her research involved emotional and interpersonal factors on the treatment of chronic pain. She completed her Clinical Internship at Camp Hill Medical Centre in Halifax, Nova Scotia where she concentrated in anxiety disorders and Behavioral Medicine. Dr. Higdon specializes in behavioral medicine & health psychology, focusing on patients with medical issues such as pain, cancer, heart disease, diabetes, as well as anxiety, adjustment issues, depression as well as cognitive assessment. Dr. Higdon is an individual supervisor in the Adult Track at PCPA.

Denise Gardner, Ph.D.

Associate Director of Pediatric Behavioral Health; Licensed Clinical Psychologist

Dr. Denise Gardner is a licensed Pediatric Psychologist. Dr. Gardner earned her Ph.D. in Clinical Psychology at Marquette University, with a specialization in child psychology. Her research focused on examining social relationship factors and piloting a friendship-building intervention for adolescents with ADHD. Dr. Gardner gained extensive experience in pediatric psychology during her pre-doctoral internship at the Children's Hospitals and Clinics of Minnesota and postdoctoral fellowship at Nationwide Children's Hospital. She has provided psychology services in a variety of settings, including hospitals and community clinics. Through her work in medical settings, Dr. Gardner has developed an expertise in working with youth with gastrointestinal (GI)

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disorders. Dr. Gardner uses an evidence-based approach to working with children and families, including cognitive-behavioral therapy, behavior therapy, and mindfulness. Dr. Gardner is an individual supervisor in the Pediatric Track at PCPA.

Margaret Christie, Ph.D.

Director of Assessment; Licensed Clinical Psychologist

Margaret Christie, Ph.D. is a Pediatric Psychologist. She earned her Doctoral and Master's degrees from Illinois State University in School Psychology with an emphasis on working with children, adolescents, and families. Prior to this, she earned her bachelor's degree from Loyola University Chicago. Dr. Christie completed her pre-doctoral internship and post-doctoral fellowship at the Munroe Meyer Institute for Genetics and Rehabilitation at the University of Nebraska Medical Center. There, she completed specialized training in providing services in primary care medical settings. Dr. Christie has worked in a variety of settings including schools, hospitals, and community clinics. Her research has focused on the development and delivery of valid and reliable evaluations for ADHD and Autism. Her areas of expertise include ADHD, Autism Spectrum Disorders, OCD, anxiety disorders, depressive and mood disorders, disruptive behavior disorders, behavior management, sleep, and habit/tic disorders. Dr. Christie is an individual supervisor in the Pediatric Track and leads group assessment supervision.

Sara Rusk, Psy.D.

Licensed Clinical Psychologist

Dr. Sara Rusk is a licensed clinical psychologist. She earned her doctoral degree from the Illinois School of Professional Psychology and has had over 10 years of clinical experience providing services to adults and children over the age of 12. Dr. Rusk completed her predoctoral internship and postdoctoral fellowship in a certified self-injury treatment program. In addition to this work, Dr. Rusk has worked in hospital settings, residential treatment and integrative primary care with family and internal medicine. Her areas of expertise include: Post-Traumatic Stress Disorder, Acute Stress Disorder, Eating Disorders (Anorexia, Bulimia and Binge Eating, Atypical Anorexia), Self-Injury, Anxiety (Social and Separation Anxiety), Mood Disorders (Depression and Bipolar Disorder), Behavioral Management of Chronic Illness, Obsessive Compulsive Disorder, Attachment & Relational Problems, Gender Identity and Expression. She provides individual supervision to interns in the adult track and leads the Experiential Learning Group.

Lauren Shapiro, Psy.D.

Associate Director of Business Development; Licensed Clinical Psychologist

Dr. Shapiro received her doctorate in Clinical Psychology from The Chicago School of Professional Psychology. Dr. Shapiro has experience in a variety of settings, including hospitals, community mental health centers, outpatient clinics, and schools. Her clinical experience working with clients spans the lifecycle, with specialized training in the treatment of children,



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adolescents, and families. Areas of interest include anxiety, depression, trauma, grief, anger management, relationship challenges, stress management and adjustment difficulties. Dr. Shapiro also works with Spanish-speaking clients and families. She leads the weekly group supervision for interns.

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Psychology Intern Due Process and Grievance Procedures

Due Process

Due Process Procedures are implemented in situations in which a supervisor or other PCPA staff member raises a concern about the functioning of a psychology intern. These procedures are a protection of intern rights and are implemented in order to afford the intern with every reasonable opportunity to remediate problems and to receive support and assistance. These procedures are not intended to be punitive, but rather focus on supporting the intern in the successful completion of internship.

A problem is defined broadly as an interference in professional functioning which is reflected in one or more of the following ways: 1) an inability and/or unwillingness to acquire and integrate professional standards into one's repertoire of professional behavior; 2) an inability to acquire professional skills in order to reach an acceptable level of competency; and/or 3) an inability to control personal stress, psychological dysfunctions, and/or excessive emotional reactions which interfere with professional functioning.

It is a professional judgment as to when an issue becomes problematic rather than of concern. Interns may exhibit behaviors, attitudes or characteristics that, while of concern and requiring attention, can be expected and not considered excessive for professionals in training. Issues typically become identified as problems that require remediation when they include one or more of the following characteristics:

Examples of Problematic Behavior:

- Failure to make adequate progress in a Performance Improvement Plan.
- Consistent lack of responsibility in one's professional duties at PCPA.
- Significant emotional instability or problematic language that interferes with the ability to deliver adequate services to clientele or to work with other professionals.
- A serious breach of the ethical standards of APA or the laws of Illinois.
- An inability and or unwillingness to acquire and integrate professional standards into one's repertoire of professional behaviors.
- An inability to acquire professional skills in order to reach an acceptable level of competency.
- An inability to control personal stress, psychological dysfunction, and/or strong emotional reactions.
- More specifically, problems will typically become identified if they include one or more of the following characteristics:
- The Psychology Intern does not acknowledge, understand or address the problem when identified.



- The problem is not merely a reflection of a skill deficit that can be rectified by academic or didactic training.
- The quality of services delivered by the Psychology Intern is seriously impacted and not at an acceptable level for PCPA.
- The problem is not restricted to one area of professional functioning.
- A disproportionate amount of attention by training staff is required.
- The Psychology Intern's behavior does not change as a function of feedback, remediation efforts, and/or time.

Informal Review

When a supervisor believes that an intern's behavior is becoming problematic, the first step in addressing the issue should be to raise the issue with the intern directly and as soon as feasible in an attempt to informally resolve the problem. This may include increased supervision and/or structured readings. This process should be documented in writing in supervision notes and discussed with the Training Director, but will not become part of the intern's professional file. The resolution of the problem is considered achieved when the individual who raised the concern reports satisfactory improvement.

Formal Review

If the identified problematic behavior is not deemed resolved by the individual who identified it initially within 30 days, a formal review process is initiated. The identified problem behavior is not limited in resulting from a formal evaluation. If an intern receives a rating below "3" on any broad competency goal, which is derived from obtaining ratings of below "3" on 80% of the items in that competency goal, a Performance Improvement Plan is initiated.

- 1) Concern about a Psychology Intern's behavior is brought to the attention of the Training Director.
- 2) The Psychology Intern will be asked to meet with the Training Committee (Training Director and Assistant Training Director), both individual supervisors, and a colleague invited by the psychology intern in an advocacy role for the intern within 10 working days. The intern will have the opportunity to provide a written statement related to his/her response to the problem to present at this meeting. In this meeting the problem will be discussed and action will be determined to address the issue. The outcome will be a Performance Improvement Plan, which summarizes the concerns that exist and outlines the remedial steps that the Psychology Intern must take.
- 3) Once a Performance Improvement Plan is created, it is to be signed by all parties in attendance, and copies distributed to all attendees within 5 working days of the meeting. The Psychology Intern's home academic program will be notified and a copy of the plan



will be sent to the home academic program's director of clinical training also within 5 working days.

- 4) The purpose of the Performance Improvement Plan is to provide the psychology intern with a clear written statement of what behaviors are deemed problematic and to facilitate the Psychology Intern's ability to make the desired changes. The need to protect patient and practice welfare will be incorporated into this plan when these issues are relevant to the problematic behavior.
- 5) In cases in which it is determined that the welfare of the Psychology Intern and/or the patient has been jeopardized; the Psychology Intern's case privileges will either be significantly reduced, or suspended, for a specified period of time.
- 6) The Training Committee, psychology Intern's primary supervisor, and the Psychology Intern will meet at a designated time (no later than 30 working days) after the development of the Performance Improvement Plan to assess compliance with the plan and progress in the program. Failure to adhere to the plan or to make sufficient progress in the designated behaviors of concern will be evaluated for appropriate consequences and/or the need for modification of the plan. A written statement by the Training Director noting the failure to comply will be saved in the intern's file and a copy sent to the home academic programs director of clinical training.
- 7) Failure to comply with the remedial plan, or to significantly improve the concerns, can result in a number of consequences to be decided by the Executive Management Team, including but not limited to:
 - a. The Psychology Intern may be required to complete additional coursework or attend relevant workshops in order to supplement knowledge in deficient areas. In some cases, additional training may be required outside of PCPA.
 - b. Increase monitoring of the Psychology Intern's performance, by measures such as additional review of case notes and therapy tapes by the primary supervisor and/or other designated senior staff.
 - c. The Psychology Intern may be required to obtain therapy in order to address personal issues that are seen as interfering with her/his professional development or behavior.
 - d. In special cases, the intern may be allowed to switch supervisors within PCPA. This option would be applicable in situations in which it is believed that the intern's difficulties are the result of a poor "fit" between the intern and supervisor and that the intern could be successful in a different supervisory relationship.
- 8) In cases involving severe violations of the APA Code of Ethics, where imminent harm to a patient is a salient concern, where there is a preponderance of unprofessional behavior, or where there is a lack of change in behaviors identified in the Performance Improvement Plan, suspension of agency privileges or dismissal may be recommended consequences. In such cases, this decision will be made by the Executive Management Team and will be subject to approval by the PCPA CEO/Chief Psychologist. Written



documentation will be given to the Psychology Intern with a copy of the grievance and appeal procedures. The home academic program will be notified within three days of this decision and APPIC will be notified. Suspension would take the form of a required leave of absence from PCPA; Dismissal means that the Psychology Intern will be terminated from the training program.

Appeals Process

If the Psychology Intern is in disagreement with decisions made, the intern may request an Appeal's Hearing before the Training Committee. The Psychology Intern may appeal the validity of concerns that have been raised, the requirements of a Performance Improvement Plan, and/or the process used during the remediation procedure. This appeal must be made in writing- an email will suffice- to the Training Director within 5 working days of notification regarding the decision(s) made. If requested, the Appeals Hearing will be conducted by a review panel convened by the Training Committee, the CEO/Chief Psychologist, a senior PCPA staff member, and a colleague chosen by the intern. The Appeals Hearing will be held within 10 working days of the intern's request. The review panel will review all written materials and have an opportunity to interview the parties involved or any other individuals with relevant information. The review panel may uphold the decisions made previously or may modify them. The review panel has final discretion regarding outcome.

Grievance Procedures

At any time during the training year, a Psychology Intern may take issue with a staff member regarding a particular behavior or pattern of behaviors, or with the entire staff regarding policy or procedure. The Psychology Interns are made aware of these policies during orientation, which is the first day on site for Psychology Internship. These guidelines are intended to provide the psychology intern with a means to resolve perceived conflicts. Interns who pursue grievances in good faith will not experience any adverse professional consequences.

Informal Review

It is expected that the Psychology Intern will take the concern directly to the person(s) with whom s/he takes issue and that the parties will work to resolve the concern in a manner satisfactory to both.

Formal Review

If the matter cannot be satisfactorily resolved using informal means, the intern may submit a formal grievance in writing to the Training Director. If the Training Director is the object of the grievance, the grievance should be submitted to the Assistant Training Director. The Training Director (or Assistant Training Director, if appropriate) will meet with the intern and the individual being grieved within 10 working days. In some cases, the Training Director or Assistant Training Director may wish to meet with the intern and the individual being grieved



separately first. The goal of the joint meeting will be to develop a plan of action to resolve the matter. The plan of action will include:

- a) the behavior associated with the grievance;
- b) the specific steps to rectify the problem; and,
- c) procedures designed to ascertain whether the problem has been appropriately rectified.

The Training Director or Assistant Training Director will document the process and outcome of the meeting. The intern and the individual being grieved will be asked to report back to the Training Director or Assistant Training Director in writing within 10 working days regarding whether the issue has been adequately resolved.

If the plan of action fails:

Training Director or Assistant Training Director will convene a review panel consisting of him/herself and at least two other members of the Executive Management Team, except the CEO/Chief Psychologist within 10 working days. The intern may request a specific member of the Training Committee to serve on the review panel. The review panel will review all written materials and have an opportunity to interview the parties involved or any other individuals with relevant information. The review panel has final discretion regarding outcome.

If the Psychology Intern does not feel that his/her needs have been adequately addressed by the review panel, then the PCPA CEO/Chief Psychologist will meet with both parties to provide further mediation and resolution. The Psychology Intern may also invite another staff member or colleague to attend this meeting to serve in an advocacy role, or to present information supporting the Psychology Intern. PCPA Chief Psychologist will review all the information and make a final decision.

Diversity and Non-Discrimination Policy

PCPA strongly values diversity and believes in creating an equitable, hospitable, appreciative, safe, and inclusive learning environment for its interns. Diversity among interns and supervisors enriches the educational experience, promotes personal growth, and strengthens communities and the work place. Every effort is made by PCPA to create a climate in which all staff and interest feel respected, comfortable, and in which success is possible and obtainable. PCPA strives to make every effort to increase awareness, dispel ignorance, and increase comfort with multicultural experiences.

PCPA provides equal training opportunities to all interns without regard to race, creed, color, national origin, gender, religion, sexual orientation, marital status, physical or mental disability, age, veteran or disabled veteran status or any other legally protected status under applicable federal, state, or local laws. In addition, PCPA complies with applicable state and local laws

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governing non-discrimination in employment in every location. This policy applies to all terms and conditions of internship training, including but not limited to, recruitment, placement, termination, and leaves of absence. If you feel you have been discriminated, you should report a complaint to your supervisor or executive of the practice. There will be no retaliation against you if you make a complaint of discrimination in good faith. In addition, it is our policy to provide training opportunities to qualified disabled veterans.

Americans with Disabilities Act

Our practice is committed to providing equal training opportunities to qualified individuals with disabilities. This may include providing reasonable accommodation where appropriate in order for an otherwise qualified individual to perform the essential functions of the Internship. It is your responsibility to notify your supervisor of the need for accommodation. Upon doing so, your supervisor may ask you for input on the type of accommodation you believe may be necessary or the functional limitations caused by your disability.

Non-Harassment Policy

PCPA is committed to a professional work environment in which all individuals are treated with respect and dignity and require that all relationships among persons in the office will be business-like and free of bias, prejudice, and harassment. You have the right to work in a professional atmosphere that promotes equal opportunities and prohibits discriminatory practices, including sexual harassment and harassment based upon race, national origin, religion, disability, age, or any other protected characteristic.

Therefore, it is our policy that harassment in the workplace, including harassment because of race, color, religion, national origin, age, sex, pregnancy, marital status, disability, sexual orientation or any other protected characteristics under applicable federal, state or local laws, is unacceptable and will not be tolerated. This policy applies to all genders.

Sexual harassment constitutes discrimination and is illegal under federal, state and local laws. For the purposes of this policy, sexual harassment is defined, as in the Equal Employment Opportunity Commission Guidelines, as unwelcome sexual advances, requests for sexual favors, and other verbal or physical conduct of a sexual nature when, for example: (1) submission to such conduct is made either explicitly or implicitly a term or condition of an individual's employment; (2) submission to or rejection of such conduct by an individual is used as the



basis for employment decisions affecting such individual; or (3) such conduct has the purpose or effect of unreasonably interfering with an individual's work performance or creating an intimidating, hostile or offensive working environment.

Sexual harassment may include a range of subtle and not so subtle behaviors and may involve individuals of the same or different gender. Depending on the circumstances, these behaviors may include, but are not limited to: unwanted sexual advances; subtle or overt pressure for sexual favors; sexual jokes; sexual innuendoes, advances or propositions; verbal abuse of a sexual nature; graphic commentary about an individual's body, sexual prowess or sexual deficiencies; leering, whistling, touching, pinching, assault, coerced sexual acts, or suggestive, insulting, or obscene comments or gestures; display in the workplace of sexually suggestive objects or pictures; and any other physical, verbal or visual conduct of a sexual nature. This kind of behavior is unacceptable.

All PCPA interns are covered under the Harassment Policy, whether related to conduct engaged in by fellow trainees, supervisors, and other PCPA staff.

We require reporting of all perceived incidents of harassment (of any nature) or any behavior or conduct which is prohibited by this Policy, regardless of the offender's identity or position. If you reasonably believe you have been subjected to sexual harassment, or feel uncomfortable, you should discuss your concerns with your supervisor or HR. Please understand that if we are not made aware of the complaint, either informally or formally, we may not be able to timely investigate the matter and take any necessary corrective action.