



DOCTORAL INTERNSHIP IN CLINICAL PSYCHOLOGY

Training Brochure

Year: 2026-2027



APPIC Program Number: 1339

Health Psychology Track: 133913

Serious Mental Illness Track: 133914

Health Psychology/Serious Mental Illness Track: 133915

Application Deadline: __November 11, 2025__

*Tewksbury Hospital's Doctoral Internship in Clinical Psychology is accredited by the
American Psychological Association*

Questions related to the program's accreditation status should be directed to the Commission on Accreditation:
Office of Program Consultation and Accreditation
American Psychological Association
750 First Street NE
Washington, DC 20002
202-336-5979
Email: apaaccred@apa.org

Contents

Tewksbury Hospital.....	4
History	4
Mission and Values	5
Department of Public Health Medical Units	5
Department of Mental Health Psychiatric Units.....	6
Psychology Services	7
Scope of Service for Psychiatric Service Patients.....	7
Scope of Service for Chronic and Medical Patients	8
Clinical Psychology Staff.....	8
Credentialing	8
Diverse staff	9
Tewksbury Hospital’s Doctoral Internship Program in Clinical Psychology	10
Program Philosophy	10
Statement Of Commitment to Inclusivity, Representation and Equity	10
Training Model	10
Aims Of Professional Training	11
Profession Wide Competencies and Learning Elements	12
Didactic Training Plan.....	19
Core Training Curriculum	20
Policies and Procedures During Internship	23
Professional and Clinical Expectations.....	23
Requirements For Program Completion	23
Evaluation Of Interns	24
Intern Record Maintenance Procedures and Policy	24
Internship Due Process Policy and Procedures.....	25
Graduate Program Communication Policy	25
Time Policy	25
Stipend and Program Resources	26
Training Faculty & Supervisors.....	27
Internship Application Process	28
General Information	29
Internship Admissions, Support and Initial Placement Data - 2025	30

Tewksbury Hospital

Tewksbury Hospital is a large, multi-service, inpatient facility operated by the Massachusetts Department of Public Health. Tewksbury Hospital operates a 370-bed Joint Commission accredited hospital. The hospital is comprised of two departments operated by two separate state agencies: the Department of Public Health (DPH) and the Department of Mental Health (DMH). Approximately 220 complex chronic medical adult patients reside in seven inpatient units and more than 150 psychiatric clients reside in six inpatient units. The hospital provides comprehensive treatment, care, and comfort to adults with medical and/or mental illnesses. A full range of ancillary services is available at the site, including 24/7 nursing, medicine, and psychiatry as well as clinical laboratory, psychology, radiology, respiratory care, speech pathology, occupational therapy, physical therapy, clinical dieticians, clinical social workers and pharmacy, and on-site dialysis clinic. Department of Public Health and Department of Mental Health patients receive medical, psychiatric, and psychological treatment within the Thomas J. Saunders building.

History

Tewksbury Hospital has a long history of serving patients. It has undergone several name changes over the course of its existence. The hospital was established in 1852 and opened on May 1, 1854, as one of three state almshouses needed to help care for the unprecedented influx of immigrants and patients with tuberculosis. It also served patients with other infectious diseases as well as mentally, acutely, and chronically ill patients. In 1874 the institution was divided into three classifications: Mental Wards, Hospital, and Almshouse. During this period, rehabilitation services were also offered to individuals suffering from alcoholism. In 1887, an internship program for Harvard Medical School was approved. In 1894 the educational aspect of the hospital was also expanded for nursing. In 1900, the name of the institution was changed from the Tewksbury Almshouse to Tewksbury State Hospital, and additional wards were added for medical and surgical services. At that time, patients suffering from smallpox and typhoid fever were also treated by the hospital. In 1909, the hospital name was changed from Tewksbury State Hospital to the Massachusetts State Infirmary, and in 1938, the name was changed again to Tewksbury State Hospital and Infirmary.

In 1959, the administration was transferred from the Department of Public Welfare to the Department of Public Health, and again the name was changed to the present-day name of Tewksbury Hospital. Two new wings with several hundred new beds were added to the hospital in 1973. In 1976, the main hospital building was designated the Thomas J. Saunders building in honor of the eponymous hospital administrator. The Hathorne Mental Health Units opened on June 22, 1992, at the Thomas J. Saunders building after the closure of Danvers State Hospital, and serve the Northeast Area (e.g., North Shore and Merrimack Valley areas) of the Massachusetts Department of Mental Health (see www.mass.gov/dmh).

Mission and Values

The primary mission of Tewksbury Hospital is to provide comprehensive treatment, care and comfort to adults with medical and/or mental illness. The Hospital is operated by the Department of Public Health; it serves patients whose care is under the auspices of the Department of Public Health and/or the Department of Mental Health. Tewksbury Hospital serves its patients with dignity and respect, emphasizing active treatment in the least restrictive setting, with the goal of assisting the patient in reaching the highest level of independent functioning possible. Its services reflect the different needs of its patients. Tewksbury hospital values are-

1. Patient Focus
2. Quality of Care
3. Community of Caring
4. Collaboration & Dialogue
5. Continuous Learning & Improving

The socioeconomic and cultural composition of the patients on the medical and Hathorne Mental Health Units is diverse. This reflects the fact that the region surrounding the hospital spans old industrial centers, seaports, and suburban communities with immigrant population centers of Spanish, Portuguese, Cambodian, Vietnamese, Polish, Italian, German, and Irish descent, as well as Jewish and African American enclaves. Interns may have opportunities to gain experience working with interpreters and/or professionals with experience serving individuals from various communities.

Department of Public Health Medical Units

The Department of Public Health medical units at Tewksbury Hospital service patients with a varied and complex array of medical and psychiatric illnesses. Units vary in terms of the medical diagnoses of the patient populations they serve. The medical units admit adult patients aged 19 and over. Many of the patients at Tewksbury Hospital are wheelchair dependent. The patients are admitted for subacute rehabilitation with a plan for discharge. The units offer a collaborative, patient centered, multidisciplinary team approach designed to care for and help patients and their families achieve realistic and attainable goals. A biopsychosocial treatment model for care is utilized.

Units vary in terms of the physical health and medical diagnoses of the patient populations. One unit is designated to provide medical care and long-term rehabilitation to patients with traumatic brain injury. Another specialized unit consists of Huntington's disease patients who are in the middle and advanced stages of the disease. These patients receive extended care for cognitive, movement, and mood disorders. Another unit specializes in treating individuals who are being served by the Department of Developmental Services (DDS) and are admitted for short-term rehabilitation for medical illnesses/complications before returning to the community. One of the medical units offers treatment to patients presenting with sequelae of various infections and complications associated with chronic substance use disorders. Treatment for substance use

disorder is voluntary and available to the patients. Another specialized unit is the Men's behavior unit. This unit emphasizes the treatment of adult and geriatric males with voluntary sex offender treatment program for those requiring such services. Other medical units at Tewksbury Hospital serve patients with a variety of medical conditions including multiple sclerosis, medical and neurological conditions related to alcohol and drug abuse, end stage renal failure, chronic diabetes, stroke, dementia, cardiac disorders, and other acute and chronic diseases.

On the Department of Public Health medical units, clinical training activities take place on seven inpatient units. Patients often present with medical and behavioral needs. DPH Psychology Services provide a wide array of interventions for patients experiencing psychological distress and/or disorders in combination with traumatic brain injury, stroke, seizure disorders, Huntington's disease, multiple sclerosis, cerebral palsy, dementia, substance use disorders, and other chronic neurological and physical diseases. Patients on the medical units are served by a multidisciplinary treatment team, including a unit attending physician, nursing staff, consultant psychiatrist, consultant psychologist, social worker, recreation staff and rehabilitation staff. Weekly mental health rounds take place on all medical units, which provide treatment teams with opportunities to formulate diagnoses, develop treatment plans, monitor patient progress, and discuss discharge planning.

Department of Mental Health Psychiatric Units

The Department of Mental Health (DMH) Psychiatric units at Tewksbury Hospital are comprised of six DMH units, five of which predominantly serve individuals who are committed for psychiatric care on an involuntary commitment. Patients are admitted following court orders for evaluation or treatment from a correctional facility, courts, or other psychiatric facilities. The remaining unit is the first and only medically enhanced psychiatric care unit in the state, serving adults with serious mental illness and complex medical needs.

DMH Units admit patients aged 19 and over with complex psychiatric and behavioral challenges, challenging differential diagnosis, and individuals with active legal issues. Frequently encountered psychiatric diagnoses include schizophrenia, schizoaffective disorder, bipolar disorder, major depression, eating disorders, complex PTSD, personality disorders, severe alcohol or substance use disorders, and varying degrees of dementias. Patients admitted for care must meet criteria indicating a high likelihood of imminent harm to themselves or others, or an inability to care for themselves due to mental illness. Patients sent by the courts may be committed for the purpose of evaluation of competency to stand trial, criminal responsibility, aid in sentencing or other relevant psycho-legal questions.

Many patients served on psychiatric units present with a history of complex risk issues and often require assessment of specific risk areas including suicide, violence, fire setting, substance use and problematic sexual behavior. These assessments aim to identify contributors to risk, formulate a conceptualization of risk related behaviors and their functions, and offer clinical recommendations for risk mitigation in the hospital and upon return to the community.

It is important to note that our clinical staff provide comprehensive services to all patients, regardless of their forensic status. However, we do not operate as forensic evaluators or designated forensic psychologists (DFPs). Prospective candidates should be aware that interns on the DMH units are not involved in conducting evaluations related to competence to stand trial, criminal responsibility, or aid-in-sentencing. That said, inpatient psychologists and psychology residents play a crucial role as the primary link between the inpatient clinical team and the independently assigned consulting DFPs who perform forensic evaluations for our patients

The DMH Units are served by a multidisciplinary team including psychology, psychiatry, social work, occupational therapy, nursing, and peer support. Interns are integrated as part of this team and attend daily rounds, treatment team meetings, staff meetings and community meetings that consist of both staff and people served. Psychiatric patients on DMH units may be referred to off-unit activities including a social club, therapeutic and vocational programs at the Psychosocial Rehabilitation Center, and off-ground trips into the community. DMH treatment programs embrace the recovery model which emphasizes person-centered planning and trauma-informed care.

Psychology Services

Psychology diagnostic and treatment services are provided to adult patients diagnosed with chronic medical and mental illness based on the need and conditions of the patients. The statement of purpose and rationale for the scope of services, consistent with the hospital's values, are- Patient Focus, Quality of Care, Community of Caring, Collaboration & Dialogue, and Continuous Learning & Improving.

Scope of Service for Psychiatric Service Patients

The clinical assessment and treatment services provided by the Psychology Service include psychological and neuropsychological screening and testing; individual, group and family therapy; psychodynamic, psychoeducational, psychosocial and behavioral approaches to treatment; rehabilitation psychology; substance use disorder counseling; consultation, supervision, teaching and conducting or assistance in the conduct of research. Any needed criminal court forensic evaluations and forensic risk management consultations are now performed by Designated Forensic Psychologists who are contracted by the Department of Mental Health to provide these evaluations on an as needed basis at Tewksbury Hospital and at other facilities with psychiatric service patients. The psychological services on the psychiatric floors are provided by the staff psychologists, one assigned to each floor. The Director of Psychology on the psychiatric units reports to the Director of Mental Health Services for Tewksbury Hospital.

Psychiatric unit psychology internship responsibilities include attending daily morning rounds on assigned units, attending and participating in select patient treatment team meetings, attending staff and community meetings, completing risk assessments, participating in risk review meetings, and conducting individual and group psychotherapy.

Scope of Service for Chronic and Medical Patients

Psychology Services at Tewksbury Hospital provides clinical assessment and psychological intervention and treatment based upon current scientific knowledge as it relates to clinical practice. These services include crisis prevention and intervention, risk assessment and management, neuropsychological and psychological assessments, evaluation of medical decision making and guardianship, design and implementation of individualized behavior support plans, as well as evidence based individual and group psychotherapy. On the medical units, psychological services are provided by the Psychology Department as part of the Behavioral Health Services, consulting on all seven medical floors. Additionally, Psychology Service staff members are part of the interdisciplinary treatment teams and provide psychoeducation to the staff through informal and formal presentations. The Director of Psychology on the medical units reports directly to the Chief Medical Officer of Tewksbury Hospital.

The medical unit psychology internship responsibilities include attending weekly rounds to 2-3 units per week; providing individual and group therapy services, cognitive evaluations, attending Patient Care conference, serving as an on-call clinician for the Rapid Response Team, which involves periodically carrying the pager; and responding to behavioral crises.

Clinical Psychology Staff

All clinical psychology staff are Allied Health Service Providers of the Medical Staff Organization of Tewksbury Hospital. These individuals: 1) are currently licensed for independent practice in the Commonwealth of Massachusetts as “Licensed Psychologists, Health Service Provider” by the Board of Registration for Psychology; 2) are required to have psychologist’s malpractice insurance; and 3) are credentialed and privileged by the Medical Staff Credentialing and Privileges Committee.

Credentialing

As above, all staff Psychologists are fully credentialed by the Medical Staff Credentialing and Privileges Committee. The credentialing process begins with an initial application submitted to the Credentialing Committee and reviewed by the Director of Psychology. The standards for Providers of Psychological Services are - Psychologists hold a doctorate in Psychology from an accredited program at an institution of higher education; be currently licensed as a Psychologist and Health Service Provider by the Massachusetts Board of Registration in Psychology; be capable of performing the duties and discharge the responsibilities of the position, and meet the standards put forth for this position by professional and accrediting agencies.

If all the requirements are met, the applicant's file is submitted to the committee. If granted clinical privileges by the committee, the applicant is given temporary privileges for six months. During this time the Psychologist's notes are reviewed monthly by the Director of Psychology, and they return to the committee for review and a determination to be fully credentialed. This medical appointment is valid for two years. Each Psychologist is required to apply for re-credentialing. The clinical competency of the Psychologist is evaluated during this period and

the Medical Staff Credentialing and Privileges Committee reviews their application every two years.

Diverse staff

Tewksbury Hospital is an Equal Opportunity/ Affirmative Action Employer. With respect to the Program's efforts to recruit and retain diverse staff, the hospital staff are Massachusetts' State Employees, and the recruitment complies with the required federal and all Massachusetts State laws. Tewksbury Hospital is a state hospital operated by the Commonwealth of Massachusetts. The following statement accompanies all job postings for the Commonwealth of Massachusetts:

An Equal Opportunity/Affirmative Action Employer. Females, minorities, veterans, and persons with disabilities are strongly encouraged to apply. If you have Diversity, Affirmative Action or Equal Employment Opportunity questions or need a Reasonable Accommodation, please contact Diversity Officer / ADA Coordinator: Tewksbury Hospital has its own Administrative Policy and Procedure to ensure that the hospital remains a diverse workplace characterized by a non-discriminatory atmosphere.

Tewksbury Hospital's Doctoral Internship Program in Clinical Psychology

Program Philosophy

Tewksbury Hospital's Doctoral Internship Program in Clinical Psychology focuses on providing comprehensive generalist training enabling interns to become professional psychologists who can function effectively as clinicians, consultants, and multidisciplinary team members. The primary goal of the internship is to prepare interns to transition towards more independent professional functioning. Accordingly, our aims are to provide training, supervision, and experiential learning experiences to assist interns to develop the necessary profession-wide competencies to be able to function as an entry level professional by the end of internship.

The primary emphasis of this internship is the critical and flexible application of psychological concepts and current scientific knowledge, principles, and theories to the delivery of professional psychological services. The program aims to strengthen interns' knowledge of and skills in theoretical conceptualization and clinical practice and to provide specialized training in the application of these clinical skills and knowledge with individuals diagnosed with serious medical, neurological, and persistent severe mental illness in an inpatient facility.

Statement Of Commitment to Inclusivity, Representation and Equity

Tewksbury Hospital is part of the Bureau of Public Health Hospitals system of four multi-specialty hospitals overseen by the Massachusetts Department of Public Health. Throughout the fabric of the Commonwealth, belonging and inclusion are the threads with which we weave the tapestry of cultural inclusion for our employees and the citizens of Massachusetts to see and experience. Equal Employment Opportunity (EEO), Affirmative Action (AA) and Diversity are critical components in creating an inclusive work environment. As part of The Executive Office of Health and Human Services (EOHHS) Tewksbury Hospital is an Equal Opportunity Employer and does not discriminate on basis of race, religion, color, sex, gender identity or expression, sexual orientation, age, disability, national origin, veteran status, or any other basis covered by appropriate law. Research suggests that qualified women, Black, Indigenous, and Persons of Color (BIPOC) may self-select out of opportunities if they don't meet 100% of the job requirements.

The Clinical Psychology Internship Program does not discriminate on the basis of any factor that is irrelevant to the successful completion of internship training. We aim to create a work environment that values and supports trainees of diverse backgrounds. We especially welcome applications from underrepresented and marginalized group members.

Training Model

Tewksbury Hospital's Doctoral Internship program adheres to a competency-based approach to training, building on the foundational training the interns gain from their doctoral programs. Our internship training philosophy embraces a **practitioner-scholar training model**, emphasizing experiential and didactic learning informed by scholarly inquiry.

The internship year builds upon the existing knowledge and skills of interns, offering diverse opportunities for further skill development and refinement. The internship program provides clinical and training activities that are based in a developmental approach that includes a sequential, graded, and cumulative format. Throughout the year, we tailor aspects of the internship experience to each intern's strengths, interests, and ongoing development needs. With the development of professional competencies and increased confidence, interns progressively take on more responsibility and autonomy. Didactic training also parallels this process and is organized in a manner to support the interns' competency development process.

Aims Of Professional Training

The program's primary goal is to prepare interns for generalist entry level professional functioning by providing training, supervision, and hands-on learning experiences to help them develop essential profession-wide competencies for entry-level professional practice. The primary emphasis of this internship is the critical and flexible application of psychological concepts and current scientific knowledge, principles, and theories to the delivery of professional psychological services. The program aims to strengthen interns' knowledge of and skills in theoretical conceptualization and clinical practice and to provide specialized training in the application of these clinical skills and knowledge with individuals diagnosed with serious and medical, neurological, and persistent mental illness in an inpatient facility.

Interns are guided in their understanding of their professional, legal, and civic responsibilities, as defined by legal statutes and professional ethics codes. The internship training experiences are designed to facilitate the intern's transition from student to a professional ready for entry level practice. The goal is achieved through the provision of clinical experiences, training, and supervision. Interns deepen their appreciation of the variability and range of human capabilities through a variety of activities, including provision of supervised diagnostic-psychological and neuropsychological assessments and a range of psychotherapies. Interns also develop an understanding of the nature of public sector health care, including the larger systems issues of funding, models and integration of services, continuity of care, and organizational communications and change. Throughout, interns are challenged to develop and exercise balanced judgment, poise, emotional maturity, interfacing, and negotiation skills, as well as appropriate professional presentation and demeanor.

Interns are systematically supported in transitioning from the role of a trainee to that of a professional through the development and supervised application of essential, profession-wide competencies. It is expected that by the conclusion of the internship year, interns will have achieved competence demonstrating that they are prepared for entry level independent practice. Consistent with the American psychological Association Commission on Accreditation's (CoA) guidance, "Readiness for Entry Level Practice" is defined as-

1. the ability to independently function in a broad range of clinical and professional activities;
2. the ability to generalize skills and knowledge to new situations; and,
3. the ability to self-assess when to seek additional training, supervision, or consultation.

The program has 3 training aims that are consistent with the 9 profession-wide competencies. These competencies and related elements are consistent with the APA CoA Standards of Accreditation. The program training aims are:

AIM 1- Assessment- Develop competence in psychological and neuropsychological assessment and the diagnostic skills necessary for the treatment and rehabilitation of individuals diagnosed with serious medical, neurological, and persistent severe mental illness in an inpatient facility.

AIM-2- Intervention- Develop competence in providing a wide range of psychotherapies in individual and group format to adults (19 years and older) diagnosed with serious medical neurological, and persistent mental illness in an inpatient facility.

AIM-3 - Professional Development- Develop overall professionalism and consultation skills and experience working effectively with a multidisciplinary treatment team. (This program's specific aim of professional development includes the remaining 7 areas of profession wide competencies.)

Profession Wide Competencies and Learning Elements

The nine APA profession-wide competency areas are: 1) Research; 2) Ethical and Legal Standards; 3) Individual and Cultural Diversity; 4) Professional Values, Attitudes, and Behaviors; 5) Communication and Interpersonal Skills; 6) Assessment; 7) Intervention; 8) Supervision; and 9) Consultation and Interprofessional/ Interdisciplinary Skills. Each profession-wide competency area is defined as below:

1. Research

This competency is comprised of the demonstration of the integration of science and practice. It requires the ability to utilize empirical/research literature to inform professional practice. This includes critically evaluating and using existing knowledge to solve problems and disseminate research. This area of competence requires substantial knowledge of scientific methods, procedures, and practices.

The internship program recognizes science as the foundation of health service psychology. The internship program builds on the foundational training the interns gain from their doctoral programs. We help the doctoral interns further develop this profession-wide foundational competency with didactic learning, experiential learning, clinical discussions, and supervision. These educational hospital-wide presentations by psychology interns serve as a didactic and experiential activity which helps them to communicate a comprehensive review of relevant literature in professional presentations to a multidisciplinary audience. Journal Club provides an additional didactic opportunity to demonstrate knowledge, skills, and competence sufficient to critically evaluate and use existing knowledge and apply scientific findings to their clinical work. During the monthly journal club interns learn to critically evaluate scholarly literature related to clinical work and to apply knowledge to case conceptualization and intervention. Interns are expected to-

- Critically evaluate scholarly literature related to clinical work and apply knowledge to case conceptualization and intervention.

- Participate in journal club and seminars that involve reading, discussion, and application of research findings to clinical work.
- Demonstrate an ability to critically evaluate and disseminate research or other scholarly activity (e.g., case conference, presentation, publications) at the local (including hospital wide audience), regional, or national level.
- Uses literature to support ideas in professional activities and presentations.
- Demonstrate significant independent ability to review, understand, and apply scientific and scholarly literature to clinical interventions with diverse populations.
- Demonstrate the ability to independently evaluate research or other scholarly activities utilizing scientific methods, procedures, and practices (e.g., case conference, presentation, publications).

2) **Ethical and Legal Standard**

This competency involves demonstrating professionalism in handling increasingly complex situations. It encompasses understanding and applying ethical and professional standards, guidelines, and practices, as well as recognizing legal considerations in professional interactions with individuals, groups, and organizations. Interns receive guidance in cultivating both their personal and professional responsibilities, while also adhering to legal and ethical standards. During orientation the interns are provided with a copy of the current Ethical Principles of Psychologists and Code of Conduct and The Board of Registration of Psychologists Psychology Jurisprudence book. Throughout the training year the doctoral interns and supervisors discuss the Ethics Code as it relates to their clinical work including issues regarding the limits of confidentiality, clinical responsibility, boundaries, and limit setting, the role of guardians, hospital staff, and the role patients have in their care, as well as, the patient's right to refuse treatment, informed consent, and the ethical implementation of privileges and restrictions as a part of individual treatment plans.

The Psychology Program's direct supervisors, as well as other staff of varying disciplines are accessible to the Interns and help to provide them with guidance and supervision regarding their clinical work, professional standards, and the organizational, local, state, and federal laws. The staff are professional role models and engage in actions that promote the Intern's acquisition of knowledge, skills, and the ability to be able to recognize ethical dilemmas in their practice and be able to approach and resolve them in accordance with the ethics code and professional standards. Interns are expected to demonstrate competence in each of the following areas:

- Be knowledgeable of and act in accordance with the current version of APA's Ethical Principles of Psychologists and Code of Conduct.
- Comply with all relevant laws, regulations, rules, and policies governing health service psychology at the organizational, local, state, regional, and federal levels.
- Comply with HIPAA standards and follow the limits of confidentiality.
- Demonstrate understanding of relevant state and local laws, their interaction with the APA Ethics Code, and their application to professional practice.
- Provide patients with their status of training, the date of internship completion, and the name of the supervising psychologist.

- Recognize ethical dilemmas as they arise and apply ethical decision-making processes to resolve the dilemmas.
- Discuss ethical dilemmas and decision making in supervision, staff meetings, and presentations.
- Proactively seek consultation for collaborative problem-solving of ethical dilemmas.
- Conduct self in an ethical manner in all professional activities.

3) **Individual and Cultural Diversity**

This competency is comprised of the ability to conduct all professional activities with sensitivity to human diversity, including the ability to deliver high quality services to an increasingly diverse population. This includes demonstrating knowledge, awareness, sensitivity, and skills when working with diverse individuals and /or communities who embody a variety of cultural and personal background and characteristics. “Diversity” includes, but is not limited to, age, disability, ethnicity, gender, gender identity, language, national origin, race, religion, culture, sexual orientation, and socioeconomic status. Interns are required to –

- Demonstrate an understanding of how their own personal/cultural identity, values, beliefs, attitudes, and biases may impact their understanding and interactions with people different from themselves.
- Demonstrate adequate knowledge of the current theoretical and empirical framework for culturally competent care in all professional activities including research, training, supervision/consultation, and service.
- Demonstrate the ability to integrate awareness and knowledge of current theoretical and empirical literature as it relates to addressing diversity in all professional activities.
- Demonstrate that they can apply the knowledge-based skills required to provide effective clinical care to patients from diverse cultural groups.
- Work effectively with individuals whose group membership, demographic characteristics, and/or worldviews create conflict with their own.
- Recognize various aspects of identities and how they intersect (e.g., race, gender, sexual orientation, religion)
- Be sensitive to the multi-faceted aspects of diversity in patient presentation.
- Remain sensitive to ethnic, cultural, gender, sexuality, and disability issues as they pertain to ethics.
- Demonstrate awareness of the impact of social and cultural differences on patients’ medical and mental health care.

4) **Professional Values, Attitudes, and Behaviors**

This competency is required at the internship level. Trainees are expected to respond professionally in increasingly complex situations with a greater degree of independence across levels of training. This includes demonstrating honesty, personal responsibility, professional conduct, organization, and the development of a professional identity. Additionally, this competency reflects the ability to appropriately engage in supervision, including utilizing supervisor guidance/suggestions efficiently. Interns are expected to demonstrate competence in each of the learning elements listed below:

- Accept responsibility for meeting deadlines and holds self-accountable for professional standards.
- Display emerging professional identity as a psychologist by reliably preparing for, attending, and participating in didactics.
- Behave in ways that reflect the values and attitudes of psychology, including integrity, behavior, professional identity, accountability, lifelong learning, and concern for the welfare of others.
- Demonstrate an understanding of professional language and concepts.
- Respond professionally to increasingly complex situations with a greater degree of independence as they progress across levels of training.
- Demonstrate professionalism in staff meetings, treatment teams, and other relevant settings. maintains professional deportment in the face of challenging professional interactions.
- Demonstrate the ability to think through and problem-solve complex professional interactions; seeks appropriate guidance and/or supervision in complex professional interactions.
- Demonstrate an understanding of and follow all hospital rules and procedures.
- Engage in multiple methods of self-assessment and self-reflection (e.g., through supervision, peer feedback, introspection)
- Manage work absences effectively by communicating to all impacted patients and staff and arranging coverage appropriately.
- Attend appointments/meetings regularly and punctually.
- Effectively manage time.
- Complete work on time.
- Demonstrate self-awareness.
- Communicate regularly with supervisor
- Come prepared for supervision sessions.

5) Communication and Interpersonal Skills

Communication and interpersonal skills are foundational to education, training, and practice in health service psychology. This competency involves the capacity to relate effectively and meaningfully with other professionals, peers, staff, groups, and/or interdisciplinary teams. This includes knowledge of key issues and concepts in related disciplines and the ability to interact with the professionals in other disciplines. The learning elements listed below measure this required competency.

- Develop and maintain effective relationships with colleagues, supervisors, peers, and those receiving professional services.
- Demonstrate ability to process issues within the supervisory relationship including difficulties and conflicts in an open and non-defensive manner.
- Demonstrate effective ability to express and respond to verbal and nonverbal communications utilizing professional language and concepts.
- Demonstrate effective interpersonal skills and the ability to reasonably manage difficult communication.

6) Assessment:

This profession wide competency is one of the program training aims. Interns are expected to develop competence in psychological and neuropsychological assessment and the diagnostic skills necessary for the treatment and rehabilitation of individuals diagnosed with serious medical, neurological, and persistent severe mental illness in an inpatient facility. This competency is comprised of skills in conducting evidence-based assessments consistent with the scope of health service psychology. This includes important components such as selecting assessment measures with the application of scientific/critical thinking with attention to issues of reliability and validity, cultural and age specific issues, and considering testing factors/confounds including cooperation, exaggeration of symptoms, medication, and ability to attend. Interns are expected to demonstrate competency in each of the following learning elements:

- Clarify and gain full understanding of the referral question(s).
- Review, gather, and use pertinent information from the treatment team and available records; seek important records as necessary to inform assessment.
- Conduct an effective and respectful clinical-diagnostic interview, bedside assessment, and/or mental status exam.
- Select assessment methods/tests that are appropriate to the referral question and patient.
- Administer and score tests according to standardized procedures (as cited in the manual).
- Integrate ethical and professional decision-making into assessment activity; seek consultation as needed.
- Identify, assess, and report on risk issues (e.g., suicide, violence, injury), including mandatory reporting.
- Articulate an integrated case formulation/interpretation, including provision of DSM-5 diagnoses as appropriate.
- Write assessment consultation notes/reports and communicate test results clearly and concisely.
- Develop and communicate clear, practical, and evidence-based recommendations.
- Address and integrate cultural and individual diversity components into assessment approach, interpretation, and recommendations.
- Communicate therapeutic feedback and implications of the assessment in an accurate and effective manner sensitive to the patient, family, and/or treatment team.
- Manage time to complete assessment process, consultation notes and/or report in accord with departmental expectations.

7) Intervention:

This competency is one of the primary training aims. It requires that interns develop competence in providing a wide range of psychotherapies in individual and group format with consideration for evidence based/empirical factors, cultural issues, age considerations, or any other factors affecting the success of the intervention. This competency is comprised of clinical interventions designed to alleviate suffering and to promote health and well-being of adults (19 years and older) diagnosed with serious medical neurological, and persistent mental illness in an inpatient facility. Interns are expected to demonstrate competency in each of the following learning elements:

Individual Intervention

- Establish and maintain effective therapeutic alliance with patients, including those who have a range of backgrounds and presenting problems.
- Assess risk/safety issues and make contingency plans with patients and staff as needed.
- Develop treatment plans with realistic person-centered goals and modify goals as needed.
- Implement therapeutic interventions informed by the current scientific literature, assessment findings, diversity characteristics, and contextual variables.
- Modify and adapt evidence-based approaches effectively when a clear evidence-base is lacking.
- Evaluate intervention effectiveness on an ongoing basis; demonstrate flexibility in adapting treatment goals and approaches.
- Utilize articulated cohesive theoretical approach in clinical therapeutic work.
- Attend to the dynamics in the therapeutic relationship.
- Communicate pertinent issues of therapy to the treatment team.
- Write timely and thorough therapy notes that accurately reflect therapeutic work and progress.

Group Intervention

- Establish group therapy goals.
- Understand and apply common developmental themes related to stages of group treatment; Be aware of group dynamics.
- Demonstrate awareness of individual, interpersonal (dyadic, triadic), and whole-group dynamics, and ability to intervene at each level.
- Integrate clinical/professional/research knowledge for different group types (e.g. skill groups, process therapy groups, support groups, psychoeducational groups, etc.)
- Co-create effective, respectful co-therapy relationships that are conducive to effective group interventions.
- Effectively demonstrate group leadership skills.
- Conceptualize and articulate group issues within an appropriate theoretical framework.
- Establish and maintain an effective and safe therapeutic space for group members.
- Appropriately attend to issues of individual and cultural differences/similarities, and how these impact individual group members, and the group as a whole
- Maintain group cohesiveness while dealing with difficult group dynamics and other complications.

8) Supervision

This is a functional competency that is comprised of the knowledge and application of various supervisory models or philosophies, and the understanding of the complexities of supervision, including the ethical and contextual issues in various supervisory roles. Competency based supervision is integral to the activities of health service psychology. Supervision involves the mentoring and monitoring of peers and others in the development of competence and skill in professional practice and the effective evaluation of those skills. Supervisors act as role models

and maintain responsibility for the activities they oversee. Interns apply this knowledge in direct or simulated practice with their peers and other health professionals. Interns are expected to

- Actively participate in discussions of supervision theory, method, and rationale while receiving supervision.
- Demonstrate an understanding of supervisory methods by providing peer supervision in psychotherapy case conference.
- Apply supervision knowledge in direct or simulated practice with psychology trainees or other health professionals.
- Apply the supervisory skill of observing in direct or simulated practice.
- Apply supervisory skill of evaluating in direct or simulated practice.
- Apply the supervisory skill of giving guidance and feedback in direct or simulated practice.
- Demonstrate the ability to reflect on their own projected methods of supervision and underlying theory.
- Actively participate in didactic training experiences related to provision of supervision.

9) Consultation and Interprofessional/ Interdisciplinary Skills

This competency is comprised of the skills reflected in the intentional collaboration of professionals in health service psychology with other individuals, professionals, or groups to address a problem, seek or share knowledge, or promote effectiveness in professional activities. Interns are expected to demonstrate competency in the following learning elements.

- Actively participate in multi-disciplinary treatment team meetings
- Demonstrate an understanding of when multi-disciplinary collaboration/consultation is appropriate or needed, and display skills that support effective interdisciplinary team functioning
- Formulate treatment plans in consultation with patients' treatment teams.
- Contribute to discharge planning with treatment team.
- Incorporate feedback from other professionals into professional activities.
- Determine situations that require different role functions (consultant, clinician, etc.) and shift roles accordingly to meet referral needs.

Didactic Training Plan

Tewksbury Hospital's Doctoral Internship program adheres to a competency-based approach to training, building on the foundational training the interns gain from their doctoral programs. It emphasizes the practitioner-scholar model, integrating science and practice through clinical experiences, didactic seminars and supervision. This approach supports systematic development of skills and knowledge for our program doctoral interns. The internship training follows a developmental approach, offering sequential and progressively complex activities. This structured method ensures doctoral interns systematically build skills and knowledge in alignment with the 9 profession-wide competencies defined by the American Psychological Association Commission on Accreditation.

The profession-wide competencies are developed through the integration of: 1) a variety of training seminars, didactics and lectures (including a broad-based approach to individual and cultural diversity, evidence-based practices, supervision, professional development issues and topics, and neuro-psychological/psychological testing methods and practice 2) working on the units with professional psychologists and members of multidisciplinary teams (engaging in - completing various assessments, individual and group therapy, consultations, etc.); 3) through opportunities to learn to become effective supervisors via peer supervising; and 4) through scholarly professional presentations to hospital staff on current topics and/or research related to health service psychology. By developing required profession-wide competencies and practicing these competencies under the supervision of staff psychologists, the internship program systematically guides the interns to move from the role of intern to that of a generalist professional ready for entry level practice.

Given our unique setting and diverse clinical services, interns have opportunities to individualize their training experiences. Interns also develop an understanding of the nature of public sector health care, including the larger systems issues of funding, models and integration of services, continuity of care, and organizational communications and change. Throughout, interns are challenged to develop and exercise balanced judgment, poise, emotional maturity, interfacing and negotiation skills, as well as appropriate professional presentation and demeanor.

Interns are guided in understanding their professional and civic responsibilities as outlined by legal statutes and ethical codes. These objectives are achieved through comprehensive clinical experiences, targeted training, and personalized supervision. Additionally, interns engage in activities such as supervised diagnostic-psychological and neuropsychological assessments and diverse psychotherapy approaches, fostering a deeper understanding of human variability and capabilities. In summary, the program training supports doctoral interns in transitioning to entry-level professionals, by emphasizing expertise in theoretical conceptualization, clinical practice, and applying these skills to individuals with severe medical, neurological, and mental health conditions in an inpatient setting.

Core Training Curriculum

All interns engage in the core training curriculum that includes both clinical and didactic components. The year-long training program in psychotherapy and assessment is structured to fulfill three training objectives, encompassing nine profession-wide competencies. General clinical responsibilities include individual and group psychotherapy, psychological and neuropsychological assessments, behavioral consultations, and active participation as members of assigned multidisciplinary treatment team.

Tewksbury Hospital units provide a setting for multidisciplinary collaboration with psychiatrists and other physicians, social workers, nurses, rehabilitation counselors, occupational therapists, and other professional disciplines. Integral to the training experience are the many opportunities interns have for interaction and training with staff and students of other disciplines (e.g., social work interns, psychiatry residents) on both the Medical and Psychiatric units. Group and individual therapy, crisis intervention, psychological and neuropsychological assessments interventions take place on and off the units depending on the clinical needs of the case.

Psychotherapy

Comprehensive psychotherapy training is central to the training curriculum. Interns provide individual and group therapy during their training year. Individual therapy cases range from brief (6-12 week) interventions to therapeutic relationships which may extend for the entire internship year. A full-time case load generally consists of four to six individual therapy clients for interns on DMH units or six to ten clients for interns on DPH units. Interns are also required to lead or co-lead 2 groups weekly. Each intern has two clinical supervisors for psychotherapy and participates in a weekly case conference led by a rotation of supervisors. This allows interns exposure to a variety of theoretical frameworks and therapeutic models, as they can access supervisory input from all supervisors.

Another key focus of the internship program involves fostering professional collaborations with multidisciplinary teams to enhance the effectiveness of clinical consultation and other professional activities. Each intern is expected to work closely with the assigned treatment teams. The interns also provide consultative input on diagnosis, treatment recommendations, behavior support plans, treatment/recovery goal development, privilege status, and assessment needs at treatment team meetings and morning clinical-medical rounds. Training and supervision in these skill areas are provided to all interns.

Assessment

Psychological and neuropsychological assessments are integral to the clinical training curriculum. Interns conduct comprehensive and targeted evaluations throughout the training year, using a flexible battery approach. Prior experience with test administration, scoring, and interpretation is preferred but expertise is not required for program selection. Completion of 12 evaluations is required during the training year. Interns also play a vital role in delivering assessment feedback

to patients and communicating results to multidisciplinary team members. Evaluation protocols are guided by clinical necessities and generally follow a flexible battery approach.

Training includes didactic seminars, clinical practice, and supervision, covering areas such as Suicide Risk Assessment, Cognitive Disorders Assessment, and Decisional Capacity Evaluations. Depending on placement, interns may engage in specialized assessments, such as evaluating decision-making capacity within the Department of Public Health (DPH) or conducting admission screenings and risk assessments in the Department of Mental Health (DMH). Interns on DMH units do not perform forensic evaluations concerning competence to stand trial, criminal responsibility, or aid-in-sentencing. However, inpatient psychologists and psychology residents serve as key intermediaries between the inpatient clinical team and independently assigned consulting DFPs responsible for conducting forensic evaluations for patients.

Individual Supervision (2 hours weekly)

Interns receive regular and scheduled clinical supervision, at a ratio that exceeds a rate of 1 hour of supervision per 16 hours of clinical work. Supervision is provided by the licensed psychologists that serve as staff members of the Psychology Services for DMH and DPH. Interns receive two hours of individual supervision every week on a regular basis. Additional supervisory sessions may be arranged as needed, particularly early in the training period or as circumstances require throughout the year. We encourage interns to proactively approach supervisors and engage in formal/informal consultations on as needed basis.

Group Supervision (1 hour weekly)

Group supervision is provided by the Training Director and focuses on interns' experiences within the training program. Group supervision also provides an opportunity for interns to develop group cohesion and learn from each other by discussing and examining individual as well as common experiences in the training program.

Weekly Professional Development Seminar (1 hour weekly)

This didactic seminar serves several functions. This seminar includes didactic presentations on relevant evidence-based interventions and practices that can be utilized in the public health sub-acute setting. These seminars include topics relevant to profession-wide competencies. It also provides a forum for the presentation and discussion of numerous professional issues such as ethics, confidentiality laws, and transition to practice, as well as the presentation of speakers from within the hospital and the greater Boston area who are involved in psychological practice and research.

Case Conference Group Supervision (1 hour weekly)

Case conference is a weekly case presentation seminar, in a group supervision format facilitated by two clinical supervisors, with the aim of developing and enhancing skills in individual psychotherapy, assessments and case formulation. On a rotating schedule, interns present their clinical cases with the aim of developing and enhancing case conceptualization, individual psychotherapy, and presentation skills. Interns contribute to a weekly case conference in which they provide and receive supervisory input on a case from the intern cohort. This allows them to

apply the supervisory skill of observing, evaluating, giving guidance and feedback to their peers and supervisors.

Journal Club (1 hour monthly)

The Journal Club is a monthly meeting focused on critically appraising recent psychology research to evaluate its implications for clinical practice. It is structured as group-based learning. The presenters select an article and deliver an informal presentation, fostering verbal communication skills, constructive feedback, and collaborative discussions on key clinical issues. The goal is for the interns to develop skills in forming clinical questions, conducting literature reviews, and performing critical analyses. It also provides a supportive space to assess research findings, review practices, and consider potential improvements. A strong focus is placed on equity, representation, intersectionality, inclusion, and advocacy, with at least four articles per internship year dedicated to these topics.

Professional Presentation Seminar (once every 2 months)

These educational hospital-wide presentations by psychology interns serve as a didactic and experiential activity which helps them to communicate a comprehensive review of relevant literature in professional presentations to a multidisciplinary audience. These professional presentations include review of research, identification of gap in findings, and dissemination of research to hospital wide professional audience. The interns also have the option to present on their dissertations (or another academic/clinical research). Completion of two professional Continuing Medical Education (CME) presentations is required for successful completion of internship.

Policies and Procedures During Internship

The program focuses on equipping interns with the knowledge and skills to apply psychological concepts and theories alongside current scientific research in clinical work with individuals diagnosed with serious medical, neurological, and persistent mental illnesses in an inpatient setting.

Professional and Clinical Expectations

The general expectations of the Tewksbury Hospital Clinical Psychology Internship training program about the intern behavior and performance during the internship experience, are that the intern will: Practice within the bounds of the APA Ethical Code of Conduct (www.apa.org/ethics/) ; Practice within the bounds of the laws and regulations of the Commonwealth of Massachusetts; Comply with the Tewksbury hospital policies and procedures; and Fulfill the internship requirements established by the Doctoral Internship in Clinical Psychology Internship at Tewksbury Hospital.

Requirements For Program Completion

To satisfy the requirement of internship, the program requires that

1. Interns complete a minimum of 1850 hours work on-site.
2. Interns need to be in the hospital building during assigned clinical hours.
3. Interns need to complete required hours of individual therapy and assessments, as defined individually at the start of the training year in each intern's "Internship/Rotation Training Contract."
4. Interns are required to maintain a minimal caseload (5-10 patients)
5. Interns are required to complete at least 12 assessments.
6. Interns are required to design and facilitate a therapy group that has identified goals, identified patient population and is designed to run for 7-8 weeks.
7. Interns are required to complete a minimum of 2 professional presentations
8. Complete required didactic tasks, engage actively in didactics (including case conference, journal club, pro-seminars etc.), participate actively in assigned clinical teams, and meet supervision requirements.
9. By the end of the training year, it is expected that interns will obtain a Minimum Level of Achievement (MLA) of Level 5 on each learning element/item.

During the intern orientation period, interns are provided with a template noting the minimal requirements. They are encouraged to customize the contract to meet their own professional goals. Intern progress in respect to meeting these requirements is discussed in weekly supervision, at the monthly Training Committee meetings, and formally addressed in the quarterly Intern Competency Evaluation Forms. Interns have opportunities to provide input, raise concerns, and suggest changes and modifications to the training program. The Training Director will meet regularly with the interns to facilitate open communication about their training

experiences. Every quarter the training director will meet individually with the interns to review overall progress and address any concerns.

Evaluation Of Interns

At Tewksbury Hospital Clinical Psychology Doctoral Internship, the interns are systematically guided to move from the role of intern to that of a psychology professional ready for entry level generalist practice by developing required profession-wide competencies. Clinical psychology doctoral interns are closely supervised by staff psychologists and practice the 9 profession wide competencies under the supervision of licensed psychology staff. We acknowledge that the training program and the supervisors inherently have greater power due to the hierarchical and evaluative nature of the program. The faculty is mindful of this power imbalance in supervisory relationships and utilizes ongoing feedback during regularly scheduled supervision sessions.

During orientation the training director reviews the Intern Competency Evaluation form, which includes the 9 profession wide competencies. Training aims and objectives are discussed. The evaluation process unfolds from here in both informal/ongoing ways and in formal, written evaluations. The faculty members emphasize and do the best they can to ensure that there are no “surprises” in the feedback provided in a formal intern evaluation.

The interns in the program are formally assessed using the intern competency evaluation form. The evaluations are completed at the end of September, December, March, and the final evaluation is completed in June. All individuals formally designated as clinical supervisors of an intern assess the intern using the intern competency evaluation form at each evaluation point. Areas for improvement will be clearly identified, as supported by the data, and discussed with the intern at each evaluation point. The supervisors will discuss the evaluation and review their feedback with the intern. Each intern typically receives evaluations from at least two supervisors, which provides a diverse set of perspectives on the intern’s performance. A direct observation of the intern work is incorporated into the competency evaluations.

The Internship Training Director will meet with the intern cohort as a group weekly and will meet with interns individually once every quarter to provide an opportunity to discuss how the training experience is progressing. Specifically, interns are encouraged to discuss their workload, their need for support services, the equitable distribution of clinical assignments, and larger systemic issues impacting their professional training and functioning. Interns can request a meeting with the Training Director at any time to address any concerns, including topics related to feedback and evaluations. They are also encouraged to talk about these issues and provide feedback on an ongoing basis in meetings with their individual supervisors.

Intern Record Maintenance Procedures and Policy

The Tewksbury Hospital’s Doctoral Internship in Clinical Psychology maintains records on each doctoral intern which includes the Intern Training Agreement, the Intern Competency Evaluation forms, initial employment paperwork, correspondence with the home doctoral programs, the Intern’s evaluation of the Psychology Program, final documentation of total hours completed,

records of patients seen and clinical work, formal complaints and/or grievances, remediation procedures (if applicable), and certificate of internship completion. For future reference and credentialing purposes, the program maintains these records indefinitely in a secure drive “TH (\DPH-FP-Th-121\Data1)”.

Internship Due Process Policy and Procedures

The internship program has identified due process policy and procedures that include procedures for responding to deficiency and problem behaviors, possible interventions, and guidelines for implementation of decisions. The program also has guidelines for the intern grievance and appeal process. These guidelines emphasize due process and ensure fairness in the program’s decision about the intern. There are avenues of appeal that allow the intern to handle grievances and dispute program decisions. These are discussed with the interns during the orientation process and are included in the internship program manual.

Graduate Program Communication Policy

The internship year in health service psychology allows the doctoral students to bridge the gap between academic coursework and professional practice. Communication between intern’s graduate program and internship programs is integral to growth and development of doctoral interns. We believe that communication between the internship program and the doctoral program ensures the student’s preparedness for graduation and entry into the profession.

Various doctoral programs have different requirements regarding reports from the internship program to the university with respect to the intern’s progress. In keeping with APA policies, the internship program training director (TD) will provide the Intern’s graduate program with an assessment of the intern’s status twice a year (six months and final evaluation, unless the graduate program/university requires additional documentation). If any additional reports are required by the intern’s graduate program, it is the responsibility of the intern and their graduate program to request and provide the required forms for completion.

Time Policy

1. Sound clinical practice requires that you provide as much time as possible, no less than two weeks advance notice of vacation or professional time off.
2. Each intern is allotted 150 hours of Personal Time Off (PTO). PTO is defined as vacation days, sick days, professional time, and inclement weather days (Note: if the Governor orders all non-essential employees to stay home, then those work hours will not count toward PTO hours).
3. PTO must be pre-approved by the interns’ primary supervisor in writing and documented on the Time Off Request forms, which must be turned into the Training Director at least two weeks prior to the Intern’s absence.
4. If an unplanned PTO is taken (i.e., sick time, bereavement, weather, etc.), the intern must notify their primary supervisor and the Training Director immediately and a Time-Off Form

must be completed and submitted to the Training Director within the week of returning to work.

5. Interns may not take vacation time during the month in which they are terminating.
6. Interns must arrange coverage for their caseload prior to taking PTO.
7. Interns may be required to work above and beyond a 40-hour work week, depending on the demands of the workload needed to be complete in a timely manner.
8. State holidays are an additional benefit. There are 12 state holidays, which are in addition to the allotted Personal Time Off.

Stipend and Program Resources

The Departments of Public Health and Mental Health have each funded 1.5 interns for each year, beginning in 2010. The stipend for the full-time, one year, internship is currently \$33,300. This is a recent increase, supported by the hospital administration, with the ongoing goal of continuing to increase the stipend. Stipends are funded by the Commonwealth of Massachusetts; therefore, all stipend offers, and continued funding are contingent upon appropriation, budgetary constraints, and operating needs. Stipends are paid out in weekly increments during the training year, until the stipend amount is fully dispersed. Funding does not include health insurance.

Regarding training materials and equipment, Tewksbury Hospital provides three computers in the Psychology Intern Office with a printer and copy machines nearby. Additional computers, printers and copy machines are accessible to the interns on each of the hospital units. Interns have access to read and document treatment in the computerized medical record.

The hospital has a locked testing room that has a full array of assessment and neuropsychological testing materials that are dedicated to the Psychology Department for use with patients. A computer in this room allows for computer-based assessments and assessment scoring. Patient assessment files are stored in this room in locked file cabinets. Reference books are available in the testing room, the Intern's office and each clinical supervisor's office. A newly renovated classroom is available for case conferences, continuing education program seminars, journal club, and other academic activities. The Commonwealth of Massachusetts supplies letterhead, paper, writing materials, and other office supplies needed to conduct clinical work.

Training Faculty & Supervisors

Department of Public Health

Brendan C. Lynch, Ph.D.

University of Tulsa, Clinical Psychology, 2006

Interests: Clinical neuropsychology, cognitive capacity, geriatric psychology, dementia, behavioral planning.

Orientation: Cognitive-behavioral

Tripti Bhaskar, Ph.D.

University of Tennessee, Knoxville, Counseling Psychology, 2011

Interests: Group therapy, individual therapy, program development, skills training, and health psychology.

Orientation: Cognitive Behavioral and Interpersonal

Department of Mental Health

Amanda Seirup, Psy.D.

William James College, 2014

Interests: Risk assessment and management, forensic involvement, individual and group therapy, cognitive training

Orientation: Cognitive-behavioral

Ben Killilea, Ph.D.

Southern Illinois University Carbondale, Clinical Psychology, 2006

Interests: Personality assessment, violence-risk assessment/management, individual and group therapy

Orientation: Cognitive-behavioral, mindfulness-based therapies

Meghan Mitchell, Ph.D.

University of Georgia, 2009

Interests: Clinical neuropsychology, dementia, TBI

Orientation: Cognitive-Behavioral

Peter LaCanfora, PsyD

University of Hartford, 2000

Interests: Violence Risk Assessment, Firesetting Risk Assessment, Mental Illness and Problematic Sexual Behavior-Assessment and Treatment (MIPSB), ACT, MBCT.

Orientation: Cognitive-Behavioral, and Acceptance and Commitment Therapy

Rob Salazar, Ph.D.

Boston University, 2019

Interests: Memory disorders, movement disorders, assessment/intervention for cognitive impairment

Orientation: Cognitive-Behavioral, Interpersonal

Internship Application Process

Process: Applications will be submitted through the APPIC Application for Psychology Internship Match process. The AAPI online link is on the APPIC website (www.appic.org). Applicants will submit materials through the AAPI on-line portals, described in the APPIC and National Matching Services materials.

Tewksbury Hospital's doctoral internship in clinical psychology is accredited by the American Psychological Association, and offers three one-year, full-time internship positions. The internship is also designed to conform to the Massachusetts Board of Registration of Psychologists requirements for internship experience. Applicants may apply to more than one track and will be considered independently for each track.

1. Health Psychology Track: Twelve-months, Department of Public Health (DPH) units.
2. Serious Mental Illness Track: Twelve-months, Department of Mental Health (DMH) units.
3. Health Psychology/Serious Mental Illness Track: Six-month rotation on DMH units (July – December), six-month rotation on DPH units (January – June).

NOTE- This internship offers a unique opportunity for prospective candidates interested in inpatient psychology. **Direct clinical experience and supervision by DFPs for forensic evaluations are not part of the role and the training experience.** DMH psychologists and trainees serve as vital liaisons between the inpatient clinical team and the independently assigned consulting DFPs who conduct forensic evaluations for our patients.

APPIC Program Number: 1339
Health Psychology Track: 133913
Serious Mental Illness Track: 133914
Health Psychology/Serious Mental Illness Track: 133915

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

Office of Program Consultation and Accreditation
American Psychological Association
750 First Street NE
Washington, DC 20002
202-336-5979
Email: apaaccred@apa.org

Stipend: One-year, Full Time: \$ 33,300 _____

Stipends are paid out in bi-weekly increments during the training year, until the stipend amount is fully dispersed. Currently the stipend does not include health insurance. Stipends are funded by

the Commonwealth of Massachusetts; therefore, all stipend offers, and continued funding are contingent upon appropriation, budgetary constraints, and operating needs.

The internship positions are open to doctoral students who have substantially completed their doctoral course work within a Clinical or Counseling Psychology program at APA-accredited professional schools or educational institutions, and for whom an internship is required to fulfill the requirements for a doctoral degree. A minimum criterion of direct contact intervention or assessment hours is not required for application. We generally prefer applicants to have some experience with conducting assessments, individual therapy, and group therapy in inpatient settings. Applicants are advised to have finished three integrated reports. Successful applicants must have sufficient and relevant clinical practicum experience and must provide a verification of internship eligibility and readiness from their graduate program director.

Director of Psychology Internship Training:

Tripti Bhaskar, PhD

Tewksbury Hospital

365 East Street, Tewksbury, MA 01876

Telephone: 978-851-7321, ext. 2893

Fax: 978-858-3795

E-mail: tripti.bhaskar@mass.gov

General Information

Program Requirements

Hours/week: 40 hours per week (8 hours per day) from July 1, 2026, to June 30, 2027

Total number of on-site hours required to complete the program for the year: 1850

Application materials are due in November each year. The application deadline for the 2026-2027 year is **November 11, 2025**.

Application Deadline: November 11, 2025

Required Materials:

Completed AAPI Online application

Curriculum Vitae

Cover Letter / Essays

Transcripts of graduate work

AAPI verification by doctoral program

Three letters of recommendation

Supplemental: Work sample of a neuropsychological report or integrated psychological assessment report

Interviews: All internship program interviews will be held remotely via videoconferencing.

Important Information: The Commonwealth is an Equal Opportunity Employer and does not discriminate on the basis of race, religion, color, sex, gender identity or expression, sexual orientation, age, disability, national origin, veteran status, or any other basis covered by appropriate law. Research suggests that qualified women, Black, Indigenous, and Persons of Color (BIPOC) may self-select out of opportunities if they don't meet 100% of the job requirements. We encourage individuals who believe they have the skills necessary to thrive to apply for this role.

Title 101 CMR 23.00 (“Regulation”) requires certain agency staff to have received the COVID-19 vaccination and Influenza vaccination, or have taken required mitigation measures, to prevent viral infection and transmission in State Hospitals and State Congregate Care Facilities. The Regulation applies to this position. Successful candidates will be required to acknowledge and attest to your vaccination status for both COVID-19 and Influenza.

COVID-19 Update: The internship program at Tewksbury Hospital is an inpatient-only training setting. The hospital follows Massachusetts DPH guidelines for healthcare workers. Due to the conclusion of the Public Health Emergency on May 11, 2023, use of surgical masks is no longer mandatory. These modifications are subject to change based on the relevant and current at that time, Massachusetts DPH guidelines.

Internship Admissions, Support and Initial Placement Data - 2025

Program Disclosures INTERNSHIP PROGRAM TABLES Date Program Tables updated: 07/15/2025	
Briefly describe in narrative form important information to assist potential applicants in assessing their likely fit with your program. This description must be consistent with the program’s policies on intern selection and practicum and academic preparation requirements:	
<p>As you consider whether this program is a fit for you, please review the full statement of our program’s philosophy, model, and aims of professional training in this brochure. In determining the applicant’s potential fit with our program, we consider the following: interest in inpatient multi-theoretical training, interest in integrating the evidence-based contributions of clinical science with the reality of daily practice in a hospital-based setting clinical experiences, skills and interests relevant to the track to which the applicant is applying; and the applicant’s interpersonal and communication skills (as assessed via letters of recommendation and essays).</p> <p>Fit is assessed based on relevant clinical interests and experience, interpersonal and communication strengths, and alignment with the program’s philosophy and training aims. Candidates with a strong interest in inpatient settings, patient-focused evidence-based practice, and diverse theoretical frameworks are likely to thrive within the program.</p>	

<p>The Tewksbury Hospital Doctoral Internship Program in Clinical Psychology offers comprehensive generalist training to prepare interns for professional roles as psychologists in hospital-based settings. The training program views the internship as a meaningful developmental experience, where trainees gradually strengthen their clinical skills through consistent exposure and active participation in inpatient hospital settings. The internship follows a practitioner-scholar model, integrating experiential and didactic learning with scholarly inquiry. The training is structured to build on interns' existing knowledge and skills in a sequential, cumulative, and increasingly complex manner. A multi-theoretical, patient focused and evidence-based approach to inpatient clinical work that aligns with applicants' clinical experiences, interests, and interpersonal strengths is emphasized. Interns are trained to transition toward independent professional functioning, developing necessary competencies through tailored supervision, training, and experiential opportunities.</p>			
<p>Does the program or institution require students, trainees, and/or staff (faculty) to comply with specific policies or practices related to the institution's affiliation or purpose? Such policies or practices may include, but are not limited to, admissions, hiring, retention policies, and/or requirements for completion that express mission and values.</p>			NO
<p>Financial and Other Benefit Support for Upcoming Training Year</p>			
Annual Stipend/Salary for Full-time Interns	\$33,300		
Annual Stipend/Salary for Half-time Interns	N/A		
Program provides access to medical insurance for intern	NO		
If access to medical insurance is provided			
Trainee contribution to cost required	N/A		
Coverage for family members available	N/A		
Coverage of legally married partner available	N/A		
Coverage domestic partner available	N/A		
Hours of annual Paid Personal Time Off (PTO and or Vacation)	150		
Hours of annual Paid Sick Leave	N/A		
In the event of medical conditions and/or family needs that require extended leave, does the program allow reasonable unpaid leave to interns/residents in excess of personal time off and sick leave?	Yes		
Other benefits (please describe):			
<p>In addition to the PTO noted above, interns also receive 12 Commonwealth of Massachusetts/National holidays.</p>			
Legal Holiday	Date	Day	
Independence Day	July 4, 2026	Saturday	
Labor Day	September 7, 2026	Monday	
Indigenous Peoples' Day/ Columbus Day	October 12, 2026	Monday	

Veterans Day	November 11, 2026	Wednesday
Thanksgiving Day	November 26, 2026	Thursday
Christmas Day	December 25, 2026	Friday
New Year's Day	January 1, 2027	Thursday
Martin Luther King Jr. Day	January 18, 2027	Monday
Presidents Day	February 15, 2027	Monday
Patriots' Day	April 19, 2027	Monday
Memorial Day	May 31, 2027	Monday
Juneteenth	June 19, 2027	Saturday

Initial Post-Internship Positions

Preceding Four Internship Cohorts: 2021-2025 (2021-2022; 2022-2023; 2023-2024; 2024-2025)	2021-2025	
Total # of interns who were in the 4 cohorts	12	
Total # of interns who did not seek employment because they returned to their doctoral program/are completing doctoral degree	0	
	PD	EP
Academic Teaching		
Community mental health center	1	
Consortium		
University Counseling Center		
Hospital/Medical Center	2	
Veterans Affairs Health Care System	4	
Psychiatric Facility	3	
Correctional Facility		
Health Maintenance Organization		
School District/System		
Independent practice setting	2	
Other		

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