# Pre-Doctoral Internship in Clinical Psychology

**2018-2019**

**University of Massachusetts Medical School**
**Worcester Recovery Center and Hospital**
**Worcester, Massachusetts**

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PRE-DOCTORAL INTERNSHIP IN CLINICAL PSYCHOLOGY
2018-2019

UNIVERSITY OF MASSACHUSETTS MEDICAL SCHOOL
WORCESTER RECOVERY CENTER AND HOSPITAL
WORCESTER, MASSACHUSETTS

The University of Massachusetts Medical School and Worcester Recovery Center and Hospital (WRCH) offer a pre-doctoral internship in psychology. The program is accredited by the American Psychological Association. It is one of the oldest continuously offered internships in psychology in the country.

The program offers four full-time funded internship positions that carry a stipend of $31,200 per year, subject to availability of funds. The program is a member of the Association of Psychology Postdoctoral and Internship Centers and subscribes to its uniform notification procedures.

Applicants must be in good standing in a doctoral program in psychology in an accredited educational institution and must have completed at least two years of graduate study prior to the internship year. Applicants must have completed appropriate practica and be approved by their Director of Training as prepared for internship. Preference will be given to students from clinical psychology programs accredited by the American Psychological Association.

The contact information for the Commission on Accreditation of the American Psychological Association is:

Office of Program Consultation and Accreditation
American Psychological Association
750 First Street, NE
Washington, DC 20002-4242
(202) 336-5979
apaaccred@apa.org

Requests for printed brochures should be sent to:
John P. Terry, Ph.D.
Director of Psychology Intern Training
Worcester Recovery Center and Hospital
309 Belmont Street
Worcester, MA 01604

Deadline: Online applications must be received no later than November 1, 2018.
Admission Policy

The Internship requires the AAPI online application, three letters of reference, graduate transcripts, a cover letter, and typically applicants submit their curriculum vitae.

Each year the internship program receives many more completed applications than the number of available intern positions. (We typically have four interns and receive thirty times as many applications as there are positions available.) Most candidates are highly qualified, both in terms of academic performance and letters of recommendation, and it is often very difficult to differentiate the candidates on these bases alone. Consequently, our criteria for selection must examine other variables.

One factor to which we pay close attention is whether the training experiences that we provide are consistent with the needs and interests of the candidate, insofar as those needs and interests are expressed in the application. If it is clear to us that the nature or quantity of certain experiences that a candidate seeks are unlikely to be provided at the University of Massachusetts Medical School/ Worcester Recovery Center and Hospital, we inform the candidate of this and suggest that training needs would be better met at a different facility. Frequently this decision is not based on the candidates' qualifications, but rather on their stated professional goals and needs.

Secondly, we believe that peer-group learning is an important aspect of the internship training experience. Our experience is that this learning is maximized when the interns each year come from very different professional backgrounds and represent widely divergent theoretical orientations. The training program at the University of Massachusetts Medical School/ Worcester Recovery Center and Hospital is not committed to a single theoretical position. We believe that the issues in clinical psychology can be conceptualized from different theoretical stances, and that interns benefit from having their ideas examined and evaluated from frameworks other than their own. This evaluation process and dialogue are as important from other interns as from supervisors. Thus, we attempt to select a heterogeneous intern group.

Thirdly, we especially welcome applications from minority group members. While the law of the Commonwealth of Massachusetts expressly prohibits asking for such information, those candidates who wish to provide this information will enable us to be consistent with valuable affirmative action policies.

Interview Process

One goal of the Intern Selection Committee is to match the training needs of the applicant with what our program has to offer. The Selection Committee will thoroughly review each completed application and identify those applicants where there is this “goodness of fit.” These intern applicants will then be contacted and invited to come for an interview with members of the internship training staff. Several dates will be selected in December and January for the applicant
interviews and in-person interviews are a requirement of the program. The interview day includes contact with current interns to give the applicant an intern's perspective on the program.

*The interview dates for the 2018-2019 training year are:*
- Tuesday, December 11, 2018
- Tuesday, January 8, 2019
- Friday, January 4, 2019
- Friday, January 18, 2019

**Training Philosophy**

The University of Massachusetts Medical School/Worcester Recovery Center and Hospital pre-doctoral internship is designed to provide an American Psychological Association accredited internship to students from doctoral programs in psychology. Our mission is to provide training experiences across a broad range of ages, ethnic backgrounds, types of psychopathology, clinical settings, and types of assessment and intervention approaches to prepare interns to function professionally in a variety of public sector contexts. Our allegiance is to the notion that any comprehensive view of human behavior must include assessment of functioning at different levels of organization. Thus, understanding one person involves the integration of that individual's thoughts, feelings, and behavioral interactions in a variety of interpersonal and group structures, cultural contexts, and ethnic origins. In addition, we must be prepared, especially in the case of individuals experiencing severe problems in living, to design programs for change at different levels of psychosocial organization. Our philosophy of training is an extension of the scientist-practitioner model of psychology training developed by Dr. David Shakow at Worcester State Hospital. This training occurs in the context of a psychology internship program whose staff members provide clinical service, basic and evaluation research, and training, and where a multidisciplinary or team approach is utilized for training and research. We believe that the context for training should also be broad rather than narrow, based on principles rather than particular techniques. Because interns have diverse backgrounds and interests, we are particularly attentive to individual differences in training needs. Under the guidance of the Director of Training, a diversity of opportunities and resources is available for interns to develop a program in keeping with their unique interests and professional goals. Moreover, this sensitivity to individual differences, needs, and goals is repeatedly stressed with interns in their work with clients.

As stated by Dr. Shakow in a 1946 article describing the Worcester State Hospital internship program, "Another principle emphasized from the beginning was the social responsibility which contact with patients involves. The fact that the intern's findings might actually play a significant role in the disposition of a case required not only an appreciation and respect for the subject as a person, but also an understanding of the social implications of his examination." Respect for the dignity and rights of those with whom the intern works continues to be central to our training philosophy.
Setting

The grounds of the Worcester Recovery Center and Hospital (WRCH), formerly Worcester State Hospital, are now the site of a developing health and research complex which includes the University of Massachusetts Medical School (UMMS), the Worcester Youth and Family Services, a biotechnology park, the WRCH, and the Irving S. and Betty Brudnick Neuropsychiatric Research Institute and the Center for Comparative Neuromaging. The UMMS and WRCH campuses are located within walking distance of each other.

The University of Massachusetts Medical School campus consists of the University of Massachusetts Medical School (UMMS) and the UMass Memorial Health Care (UMMHC) teaching hospital, community clinics, and outpatient services. Forty doctoral-level psychologists are on the UMMS staff, many of whom have a role in the training program. The Director of Psychology Intern Training in the Department of Psychiatry at UMMS coordinates and reviews all intern activities at the Medical School. UMMS provides several rotations involving outpatients that complement the inpatient work at the state hospital.

The Worcester Recovery Center and Hospital is a large, urban psychiatric facility primarily for adult patients. The current census, dramatically lower than the 2,800 patients served in the 1950's, represents a wide cross section of psychiatric disorders. In addition to the admission and rehabilitation psychiatric units, the hospital has an adolescent long-term treatment unit, intensive treatment units, and a forensic service. The hospital population generally consists of individuals with severe and persistent mental illness. Between 50 and 70% of this population has a co-occurring substance use disorder and significant medical co-morbidities.

Benefits

Interns in Psychology are employees of the University of Massachusetts Medical School. Interns receive a stipend of $31,200, a choice of employee health insurance plans (cost varies), and paid vacation and holidays.

Community

The University of Massachusetts Medical School and Worcester Recovery Center and Hospital provide services primarily to citizens of Worcester and other areas in central Massachusetts, although some clinics or services are statewide. The ethnic and cultural populations in central Massachusetts are diverse. As public-sector institutions, the client populations tend to be from lower socioeconomic groups. Census information for Worcester (2010) indicated 77.1% Caucasian, 12.5% Hispanic, 6.9% African American, and 3.5% Asian. Hospital units and clinics reflect the community composition closely, except that inpatient psychiatric admissions are 60% male, 40% female.
Orientation Period

The training program begins on or about September 1st, with an orientation period lasting several weeks. During this period, the intern becomes acquainted with the daily routines of the hospital, is given a formal introduction to the staff and programs of various departments of the hospital and is systematically introduced to the principal emphases and lines of work within the Psychology Department. As part of their orientation to the hospital and to psychiatric patients, the interns participate in staff conferences, engage in diagnostic interviewing, observe admission procedures, and attend lectures on administrative and legal aspects of hospital procedures. In preparation for later community work, interns visit several community programs and review with key leaders the goals, the organizational structure, and the day-to-day functioning of these special programs. Intensive training in interview techniques and behavioral assessment techniques is given during the orientation period to prepare the interns for a variety of clinical activities. By the end of the orientation period, interns are able to map out individualized internship training experiences in the core areas.

Structure of the Internship

Each intern engages in training activities in three areas throughout the year:

- Inpatient assessment and treatment,
- Outpatient assessment and treatment, and
- Supervision, seminars, consultation, and research.

In general, about one-third of the intern's schedule each week is devoted to each area.

Our program is particularly attentive to individual differences in training needs. Under the guidance of the Director, a diversity of opportunities and resources is available for the interns to utilize in developing a program in keeping with their unique interests and professional goals. While some experiences are required of all interns, our philosophy of flexibility dictates that the individual needs, interests, and professional goals of each intern must be considered in determining supervised activities throughout the year. Through the development of an individualized learning contract at the beginning of the training year, each intern will select rotations that reflect the core competencies of internship training at UMass Medical School and Worcester Recovery Center and Hospital. These competencies are Assessment, Treatment Interventions, Multicultural Diversity, Collaboration with Multidisciplinary Treatment Teams, and Supervision.

Interns are expected to gain training experience in health psychology in the UMass/WRCH Predoctoral Internship through their work in clinical rotations that integrate health psychology principles and interventions. These opportunities may include formal rotations in health psychology and a wide array of inpatient and outpatient mental health rotations where health psychology is an integrated component.
INPATIENT ROTATIONS

For the inpatient component of their training, interns select from several sites based on their training needs. Over the course of the internship, interns choose two hospital rotations to learn about the care and treatment of individuals with severe and persistent mental illness.

Worcester Recovery Center and Hospital

The hospital currently has 10 treatment units that are divided into 5 programs. These programs focus on court evaluation, continuing care, deaf/complex medical needs, and behavioral/developmental engagement and treatment. All the units are closely connected to the hospital-wide Skills Training and Rehabilitation program. This psychosocial rehabilitation program includes therapeutic, vocational, educational, and recreational elements. Opportunities exist in several specialized areas:

WRCH General Psychology Rotation
Supervisor: Gregory Plante, PsyD

This is a major, inpatient rotation that meets the internship requirements for ethics/legal standards, cultural diversity, professional development, interpersonal communications, assessment, intervention, consultation and interdisciplinary competencies.

Interns choosing this rotation will be assigned to two multidisciplinary treatment teams that serve one of the two continuing care programs, each of which is responsible for the care and treatment of 26 individuals with severe and persistent mental illness. Under the supervision of the team psychologist, the intern will conduct admissions assessments, specialized evaluations for risks of violence, suicide, and fire setting, and make referrals to Department of Mental Health risk consultants for individuals with more serious histories of violent crime or sexually problematic behavior. The intern will also provide an average of at least four sessions per week of individual and group psychotherapy addressing at least two of the following: Cognitive Behavior Therapy, Motivational Interviewing, Relapse Prevention Planning, Dual Recovery Treatment, and/or Cognitive Rehabilitation Therapy. Interns will also conduct at least two full batteries of cognitive and personality/projective tests for diagnostic formulation and treatment/discharge planning and refine their consultation skills in ongoing dialogue with their treatment team(s). This rotation also provides the intern with supervised experience in supervising a third- or fourth-year doctoral student in the hospital’s Psychology Traineeship Program. All clinical activities are supported with a minimum of two hours of individual supervision and Rorschach group supervision with psychology staff.

WRCH Dialectical Behavior Therapy (DBT) Rotation
Supervisor: Rebecca Hanson Richardson, PhD

This is a minor, inpatient rotation that meets the internship requirements for ethics/legal standards, cultural diversity, professional development, interpersonal communications, assessment, intervention, and interdisciplinary competencies.
Since 2002, when the first multidisciplinary DBT team was intensively trained in DBT by Charles Swenson, M.D. and Cindy Sanderson, Ph.D., all components of standard, outpatient DBT have been adapted to inpatient settings at WRCH. A Performance Improvement team implemented the program in 2002 with consultation from Dr. Sanderson, and WRCH staff across disciplines has engaged in formal Behavioral Technology Transfer Group training annually since then. Under the aegis of the Recovery Therapies Steering Committee, the DBT program is available to all inpatients, and comprises: 1) individual DBT; 2) weekly skills groups, including two regular skills groups for those who are engaged in the complete program and an introductory skills group that is open to all; 3) crisis consultation; and 4) therapist participation in one of two weekly consultation teams. Psychology interns provide individual DBT and crisis consultation, co-lead weekly skills groups, and participate in a weekly consultation team. In addition, they consult to multidisciplinary treatment teams for DBT clients, conduct initial psychology assessments and risk assessments, support development of Crisis Plans informed by DBT, and consult with community treaters to help generalize skills to natural, community treatment settings. During their rotation, interns may opt to provide other evidence-based modalities to clients with a variety of other difficulties, e.g. providing anxiety management for a person with panic disorder. In addition to weekly DBT consultation teams, individual DBT supervision is provided. Interns have often assisted with regular, in-service DBT training for WRCH staff, as well as assisted with two-day workshops provided for licensed clinicians in community training settings.

**WRCH Rotation in Clinical Risk Assessment and Mitigation**

**Supervisor:** Peter LaCanfora, PsyD

This is a minor, inpatient rotation that meets the internship requirements for ethics/legal standards, cultural diversity, professional development, interpersonal communications, assessment, intervention, and interdisciplinary competencies.

Interns choosing this rotation will be assigned to one of the hospital’s unit-based multidisciplinary clinical teams and will also function as a service provider and consultant to other teams around issues of risk assessment and mitigation. Based on case referral, the intern will participate in and/or provide clinical risk assessments in collaboration with his or her psychology supervisor and treatment team. These assessments will provide the intern with experience in at least three of the following areas: suicide risk, violence risk, problematic sexual behavior risk, and fire setting risk. The intern will also be expected to conduct at least four assessments that include the use of psychological tests, standardized inventories, and/or structured risk assessment protocols. Using Behavior Analysis and Cognitive Behavior Therapy techniques, the intern will provide an average of at least four sessions per week of individual and group psychotherapy focused on Relapse Prevention Planning. The intern will gain consultation experience in working with treatment teams to develop Crisis Intervention Plans that integrate information from the patient and collateral sources including direct care staff to
prevent inpatient restraint or post-discharge re-hospitalization. This rotation also provides the intern with supervised experience in supervising a third- or fourth-year doctoral student in the hospital’s Psychology Traineeship Program. All clinical activities are supported with a minimum of two hours of individual supervision and, time permitting, an opportunity to participate in Rorschach group supervision with psychology staff.

**WRCH Clinical Leadership and Program Evaluation Rotation**

**Supervisor:** Dan Lambert, PhD

This is a major, inpatient rotation that meets the internship requirements for research, ethics/legal standards, cultural diversity, professional development, interpersonal communications, consultation and interdisciplinary competencies.

Interns choosing this rotation obtain hands-on experience in program development and/ or program evaluation through leadership participation in one or more projects prioritized by the hospital and/ or psychology department. Participants obtain clinical experience through direct involvement in delivery of services associated with the program or project. Experience with each of the following elements of Clinical Leadership and Program Evaluation occur in the context of the selected project: organizational change processes, program design/ development based on the evidence/ knowledge base, use of performance improvement tools, data management/ integrity processes, and data analysis as applied to administrative decision-making. Additionally, participants can observe a variety of administrative meetings and get exposure to processes related to standards compliance (Joint Commission, CMS, Regulations, and Policies). Past projects have included development of cultural competence curriculum materials, innovating new manual-based therapy groups, developing assessment tools for statewide DMH use, implementation/ evaluation of treatment programs, reorganization of treatment services, consultation to hospital committees such as the Cultural Diversity Committee and various Psychology Department Performance Improvement initiatives. This rotation also provides the intern with supervised experience in supervising a third- or fourth-year doctoral student in the hospital’s Psychology Traineeship Program, generally in relation to their involvement in the project/ program. All clinical activities are supported with a minimum of two hours of individual supervision.

**WRCH Inpatient Psychiatric Neuropsychology**

**Supervisor:** Anthony J. Giuliano, PhD and Katie Treiber, PhD

This is a major, inpatient rotation that meets the internship requirements for ethics/legal standards, cultural diversity, professional development, interpersonal communications, assessment, intervention, consultation and interdisciplinary competencies.

Psychiatric neuropsychology is a growing subspecialty of clinical neuropsychology. The clinical neuropsychology rotation in inpatient psychiatry is designed to provide interns with competency-focused training in clinical neuropsychological and psychological assessment, consultation and cognitive rehabilitation services to adults with serious and persistent mental
illness (SPMI). Many people with SPMI often have complex presentations associated with pre-illness or co-morbid trauma, neurodevelopmental or neurocognitive disorders, substance use disorders, and/or chronic health/medical conditions.

Interns will interact with multidisciplinary teams consisting of psychiatry, nursing, social work, and occupational therapy, in addition to occasional consultation with other disciplines such as neurology, neuropsychiatry, and forensic psychology. Interns will develop proficiencies in the administration, scoring, and interpretation of a range of neurocognitive and psychological assessment measures. Neuropsychological assessment training will often integrate psychological assessment methods (e.g., structured multi-scale and narrow band self-report and/or performance-based measures of psychopathology and personality). A person-centered developmental-lifespan approach to case conceptualization that integrates data obtained from multiple sources (clinical interview, records, consultation with treatment providers, collateral informants/family or significant others) will be emphasized.

Depending on an intern’s interests/competency goals, participation in the Cognitive Enhancement and Restructuring (CERT) Program is available. An average of 2 hours of weekly supervision will be provided in the form of individual supervision/case review. The opportunity for didactics and guided readings may also be available, depending upon the intern’s interests and schedule. Interns have the opportunity to create some training emphases that match their competency benchmarks and professional goals within the rotation’s resources.

Interns with the following training goals are encouraged to consider this rotation in psychiatric neuropsychology: (1) development of specific professional competencies in psychological and neuropsychological assessment, particularly for postdoctoral training in neuropsychology and/or psychological assessment; (2) understanding the cognitive features of SPMI in adults and their relationship to treatment and functional outcome, particularly for those seeking a postdoc or careers in inpatient or public sector psychiatric settings (e.g., Veteran’s Administration, state psychiatric hospital, or community mental health settings); (3) understanding how neuropsychological and psychological assessment can inform forensic evaluations, particularly among individuals with SPMI, and meaningful treatment planning; (4) interns who would like to practice (and/or teach) psychological and/or neuropsychological assessment as part of their professional role.

The structure of this psychiatric neuropsychology and psychological assessment rotation varies somewhat from year to year, depending upon the availability of supervisory resources. For 2018 and 2019, a 16 hour/week rotation is available during the second half of the training year (March through August). I am open to considering individualized rotation structures if able to provide adequate resources to achieve an intern’s key training competency goals (e.g., stronger emphasis on cognitive rehabilitation, 8 hour/week option).

Didactics and case-based learning opportunities may be included in the rotation, depending upon the intern’s schedule and goals. In the past, these have included regular
seminars/discussions on topics relevant to neuropsychological assessment and intervention. While there are some established training topics that are regarded as essential, many topics, articles, and/or case studies are selected to meet the competency benchmarks and match the professional interests of individual interns. Some of the didactic/discussion topics that have been covered include: conduct of a developmental-neuropsychologically relevant interview, collaborative and therapeutic assessment methods, effort/response bias/malingering, domains of neuropsychological assessment, functional neuroanatomy, structured personality assessment measures and cases (MMPI-2/MPPI-2-RF, PAI, MCMI-III), neuropsychology of schizophrenia-spectrum, bipolar, depression with psychosis, obsessive-compulsive, post-traumatic stress and personality (psychopathy) disorders, AD/HD and specific learning disabilities, neuropsychology of traumatic brain injury and its impact on clinical presentation of adults with SPMI, SPMI and aging/dementia (e.g., vascular dementia, Parkinson’s disease, Huntington’s disease), variables that influence neuropsychological test performance, neuropsychology in forensic and health contexts/settings, and problems and challenges in neuropsychological assessment.

WRCH/UMass Adolescent Continuing Care Units

Supervisor: Brian Denietolis, PsyD

This is a major, inpatient rotation that meets the internship requirements for ethics/legal standards, cultural diversity, professional development, interpersonal communications, assessment, intervention, consultation and interdisciplinary competencies.

The UMass Adolescent Continuing Care Units (ACCU), sited at the Worcester Recovery Center and Hospital, are comprised of two 15-bed units for youth, ages 13 to 18. This population is culturally, ethnically, racially, and socioeconomically diverse.

Each treatment team, comprised of psychiatrists, social workers, nurses, occupational and recreational therapists, mental health counselors, and psychologists, works collaboratively to develop optimal treatment planning. Because of the significant trauma and/or persistent mental illness that these youth have faced, patients typically stay from 4 to 12 months allowing for extensive clinical services and qualitative changes in behavior. Family therapy is a significant component of the treatment offered to adolescents on the UMass ACCU. As such, families are actively involved in the treatment process. There is also a considerable focus on strategies that are trauma-informed and developmentally appropriate. Those providing psychotherapeutic services balance evidence-based practices with theoretically driven, creative interventions that are highly individualized. Ultimately, youth are empowered to guide their own recovery.

Four beds are allocated to forensic services. These youth are admitted from the courts for evaluation of competency to stand trial, criminal responsibility, or aid in sentencing. Interns with forensic interests have ample opportunity to appreciate the complicated interface of clinical and legal matters.
This rotation is a six-month inpatient elective. Interns are expected to be on site three days per week with a minimum commitment of 16 hours per week. While a challenging population, there are few sites in the Commonwealth that provide this type of dynamic learning environment. At least one hour of individual supervision per week will be offered by an on-site licensed psychologist. Additional supervision will be offered for psychological testing.

This rotation will actively engage the intern in the complexities of adolescent inpatient care within the context of a supportive multidisciplinary team. The intern will enhance skills in assessment, various forms of treatment, and milieu management. By the end of this rotation, the intern will have a broader grounding in differential diagnosis, risk management, and the child service delivery system. We expect that the intern’s confidence in dealing with complex cases will increase significantly.

WRCH/UMass Forensic Track Inpatient Rotation

**Supervisor:** Andrea Dinsmore, PsyD, and Ashley Murray, PhD

This is a major inpatient or outpatient rotation that meets the Internship requirements for ethics/legal standards, cultural diversity, professional development, interpersonal communications, assessment, consultation and interdisciplinary competencies.

The Forensic Services Department at Worcester Recovery Center and Hospital (WRCH) provides forensic evaluation and consulting services to the staff and patients at WRCH, in addition to providing evaluation and consultation services to other Massachusetts Department of Mental Health facilities in Tewksbury and Springfield. Ira K. Packer, PhD, DFP, ABPP is the director of the department and there are nine part-time and full-time forensic psychologists employed in the Department. Much of the evaluation and consultation work is conducted with the adult population on the Court Evaluation Units at WRCH and, to a lesser degree, on the Adolescent Unit and Continuing Care Units at WRCH.

As a psychology intern on the forensic rotation, you will spend 16 hours per week for six months working either at the DMH Farmhouse, which houses the Forensic Services Department, on the above referenced Court Evaluation Units and/or Continuing Care Units at WRCH. Your time will be spent in individual supervision with the primary supervisor for the forensic rotation for a minimum of one hour, shadowing/observing forensic interviews, assessments, treatment team meetings, clinical rounds, and case consultation with various forensic evaluators; observing WRCH court hearings and, if possible, outside court hearings; completing psychological testing and writing evaluative psychological testing reports for forensic evaluators; conducting portions of forensic interviews or conducting full interviews (dependent on the trainee’s comfort and experience); writing forensic evaluations; and co-facilitating a Legal Education group focused on competency restoration. In addition, informal weekly didactic training will focus on Massachusetts legal statutes, topics in forensic evaluation and testimony, professional development, ethical considerations, and relevant case law. Interns will be expected to have completed a minimum of three shadowed forensic evaluations and one case law summary (case briefs) by the end of the rotation. The number of write-
ups from psychological testing will vary based on the Service’s need and the intern’s available time on the rotation.

The rotation is supervised by either Andrea Dinsmore, Psy.D., or Ashley Murray, Ph.D., both of whom specialized their graduate training in forensic psychology, completed the University of Massachusetts Medical School Postdoctoral Fellowship in Forensic Psychology, and currently serve as full-time evaluators for the Mobile Forensic Services Unit servicing WRCH, Tewksbury State Hospital, and VIBRA Healthcare.

UMass Psychiatric Treatment and Recovery Center (PTRC)
Supervisor: William Warnken, PsyD, ABPP (forensic)

This is a major, inpatient rotation that meets the internship requirements for ethics/legal standards, cultural diversity, professional development, interpersonal communications, assessment, intervention, supervision, consultation and interdisciplinary teams.

This is an acute-care unit that specializes in the evaluation and treatment of individuals with psychiatric disorders. The average length of hospitalization is one week. Approximately 80% of those admitted to the PTRC are discharged back to the community and 20% are transferred for further inpatient treatment to other units. Patients display severe psychopathology and are primarily diagnosed as having a schizophrenia-spectrum disorder, a major affective disorder, or a severe personality disorder. Approximately one-half of these individuals have abused alcohol and/ or illicit drugs and need substance abuse treatment. The PTRC utilizes a multidisciplinary clinical model with active participation by psychiatry, psychology, social work, rehabilitation therapists, and nursing staff. Psychology interns, as well as students in other disciplines, are an integral part of the clinical program on the unit.

The treatment wards at WRCH focus on preparing adults from diverse ethnic and socioeconomic backgrounds in the transition process from an inpatient stay to community living. The treatment approach is multidisciplinary in nature and aimed at assisting the individual in engaging in treatment, maintaining adequate behavioral and emotional control, and taking the steps necessary to successfully return to the community. The treatment model incorporates a thorough diagnostic work-up, psychosocial rehabilitation, relapse prevention, motivational interviewing, and Dialectical Behavior Therapy (DBT)/Cognitive Behavior Therapy models. Individuals receiving inpatient care are empowered to understand symptoms associated with mental illness and follow through with strength-based interventions and plans that will maximize adjustment and transition to less restrictive alternatives to hospitalization.

At WRCH, DBT/ CBT programs have been implemented on several treatment wards, with several members of the staff trained intensively in DBT and CBT for Psychosis. The psychology interns participate in all phases of the individual’s hospital course from assessment/ psychological testing to providing treatment interventions to helping the individual work through an integrative discharge plan. The staff at WRCH has implemented an Illness Management and Recovery (IMR) treatment program, an evidence-based group and individual treatment protocol to assist individuals in learning
more about their psychiatric disorders and effective coping skills. Additionally, WRCH has a robust dual recovery program for people in all stages of change and has developed a relapse prevention model for mental health.

OUTPATIENT ROTATIONS

Neuropsychology at UMass Memorial Medical Center

Supervisor: Brian Dessureau, PhD

This is a major, outpatient rotation that meets the Internship requirements for ethics/legal standards, cultural diversity, professional development, interpersonal communications, assessment, consultation, and interdisciplinary competencies, and with a specific focus on practice in neuropsychological assessment.

The outpatient rotation in Neuropsychology provides supervision and training in the neuropsychological assessment of patients from neurological, neuropsychiatric, and general medical populations. Training takes place within the outpatient service of the Department of Psychiatry on the UMMS campus. A commitment of 16 hours per week for 12 months is generally required. In addition, at a minimum, a commitment of three to five hours of off-site time is required for activities such as report writing. The rotation is especially designed for individuals wishing to establish themselves professionally as clinical neuropsychologists. While this represents the standard rotation, alternative training arrangements involving fewer hours can be arranged for those who do not plan to focus their careers on neuropsychology.

The rotation provides training in the administration, scoring, and interpretation of neuropsychological assessment instruments, and focuses on the consolidation of this information into succinct reports. A considerable amount of training time will be focused on building each report into a document that effectively communicates both diagnostic conclusions and treatment recommendations. There is an emphasis on communicating effectively with referring providers so that our conclusions are understood and implemented, in a manner that assures that neuropsychological assessment enhances the care of the patients that we see. Interns will see 1-2 outpatients weekly, and patient populations include the full range of neuropsychological disorders. Referrals come from multiple services both within and outside of the hospital, providing an extremely varied training experience. The use of both explicit and implicit methods for validity testing is a central component of the training. Though the rotation is primarily adult-focused, opportunities are available to see child patients if interested. Trainees will participate in testing with ethnically and culturally diverse populations, including work with interpreters and formulating conclusions from a diversity-informed clinical perspective. In addition to neuropsychological assessment, interns will often be able to observe and assist with neurosurgical procedures including Wada and Intraoperative Language Mapping. An opportunity to provide psychotherapy to individuals with medical conditions within the hospital is also available. Supervision is conducted through direct observation during testing, scheduled weekly sessions to discuss cases, during report preparation, and on an as-needed
basis. Various didactic offerings are also available within the Department and the greater Medical School to supplement the learning experience, including Neuropsychology Seminar, Psychiatry and Neurology Grand Rounds, Neuropsychiatry Seminar, and Epilepsy Conference.

**UMass Adult Ambulatory Psychiatry Clinic**
**Supervisor:** Robert Carey, Ph.D.

This is a major or minor rotation that meets the Internship requirements ethics/legal standards, cultural diversity, professional development, interpersonal communications, assessment, intervention, consultation and interdisciplinary competencies.

Interns will receive training in evaluation and individual and group psychotherapy for a variety of psychiatric conditions including psychosis, affective disorders, somatoform disorders, marital discord, substance abuse, and personality disorders. A variety of theoretical approaches including cognitive behavioral and psychodynamic strategies provide interns with a broad range of experiences with adult outpatients. Weekly treatment team meetings provide a further opportunity for interns to more thoroughly examine the processes involved in assessment, differential diagnosis, and treatment selection. In addition to the general clinic and the three programs described separately (Anger Management, Health Psychology, Addictions) there are also opportunities to do personality test batteries and participate in various specialty programs including DBT, Women’s Mental Health, and CBT for Anxiety.

**UMass Anger Management Program**
**Supervisor:** Mary Bennett, LICSW and Lynn Dowd, PsyD

This is a minor, outpatient rotation that meets the internship requirements for ethics/legal standards, cultural diversity, professional development, interpersonal communications, and intervention.

The Men’s & Women’s Anger Management Program and Nonviolent Communication Group Treatment for Couples have been offering treatment and conducting research on interpersonal violence at UMass Memorial since 1986. Interns will receive training in the assessment and treatment of individuals and couples who have difficulty expressing angry feelings in healthy and appropriate ways. Interns will learn the program’s psycho-educational cognitive behavioral treatment model that focuses on improving self-regulation of emotional arousal and developing effective strategies for non-violent attainment of goals. Interns may choose to co-lead a Men’s, Women’s, or Nonviolent Communication Group for Couples, participate in Anger Management Treatment Team Meetings, and become involved in ongoing research projects including our research on women’s anger that is gaining national attention.

**UMass Addiction and Co-Morbidity Treatment Services**
**Supervisor:** Melissa L. Anderson, PhD, MSCI
This is a minor, outpatient rotation that meets the internship requirements for ethics/legal standards, cultural diversity, professional development, interpersonal communications, intervention, consultation and interdisciplinary competencies.

The outpatient Addiction and Co-morbidity Treatment Services (ACTS) rotation is an optional component of the broader Ambulatory Psychiatry Service rotation. The interns engage in the ACTS rotation for 6 to 12 months, typically from 4 to 8 hours per week, and are provided with didactic and clinical training opportunities with individuals who are seeking outpatient treatment for substance use disorders, often combined with other psychiatric disorders and chronic medical conditions. Didactic materials focus on assessment, treatment, and peer-based approaches. Clinical training consists of conducting intake assessments and psychotherapy under the supervision of a psychologist specializing in treatment of addiction and co-occurring disorders. Moreover, by joining the multidisciplinary ACTS team, the interns can learn about and observe the application of various treatment modalities, such as pharmacotherapy with buprenorphine for treatment of opioid dependence.

**UMass Health Psychology Outpatient Rotation**

**Supervisor:** Angela R Wendorf, PhD

This is a minor, outpatient rotation that meets the Internship requirements for an Integrated Health experience, ethics/legal standards, cultural diversity, professional development, interpersonal communications, intervention, consultation and interdisciplinary competencies.

This rotation is located within Ambulatory Psychiatry Services. The service consists of psychologists working with medical and surgical outpatients due to a host of issues, including: Depression or anxiety associated with medical illnesses, individual and family adjustment to illness, coping with disease management demands, adoption of healthy lifestyles, non-pharmacological symptom management, preparation for surgery, and coping with medical interventions. Referrals come from any of the primary or tertiary care clinics within the hospital system.

This rotation is intended to provide experience consistent with specialized psychological care with medically-based populations known as Clinical Health Psychology or Behavioral Medicine. Common goals of the rotation are to:

- Understand the role of psychology in interprofessional medical settings and work collegially with other health professionals in such settings
- Utilize health psychology principles and strategies to provide psychoeducational and/or psychotherapeutic interventions for promoting health and wellness
- Provide intervention for insomnia, pain management, smoking cessation, adjustment to physical injury or disease, and rehabilitation
- Work with acute and chronically ill patients and support the patient and family/loved ones

Interns will conduct intake assessments and provide evidence-based treatment with patients with a variety of chronic health conditions. Some topics for treatment include adjustment to and
coping with chronic health conditions, health behavior change, and chronic pain self-management. As is typical of the health psychologist role, work would also include contact with multi-disciplinary treatment teams. Regularly-scheduled supervision will be conducted for 1 hour a week with additional opportunities for drop-in supervision and curbside consultation. Interns will be required to track their encounters, submit billing when applicable, and track hours in the rotation.

**UMass Diabetes Center of Excellence**  
Supervisor: Kristin L. MacGregor, PhD

This can be a minor or major, outpatient rotation that meets the Internship requirements for an Integrated Health experience, ethics/legal standards, cultural diversity, professional development, interpersonal communications, intervention, consultation and interdisciplinary competencies.

This rotation is set in the Diabetes Center of Excellence (DCOE) at UMass Memorial Medical Center. We work in collaboration with endocrinologists, nurse practitioners, diabetes educators, registered dieticians, and nurses. We work with patients across the adult lifespan with both Type 1 and Type 2 diabetes. This rotation offers specialized training in working with issues specific to this population. Referrals come in from endocrinologists and nurse practitioners, and we see patients for a variety of presenting issues related to diabetes including: diabetes burn out, mood/anxiety interfering with diabetes management, needle phobia, health behavior change (e.g., helping patients implement treatment recommendations, improve diet, increase exercise, take medications as prescribed), fear of low blood sugars. The rotation offers experience working on a multidisciplinary team and providing specific treatment recommendations to both patients and providers. It also offers experience with diagnostic assessment and evidence-based therapy, as well as writing reports that incorporate both medical and mental health specific information. Interns will learn how to apply clinical knowledge and skill to this specific population.

**UMass Women’s Health Rotation**  
Supervisor: Kristin L. MacGregor, PhD

This can be a minor or major, outpatient rotation that meets the Internship requirements for an Integrated Health experience, ethics/legal standards, cultural diversity, professional development, interpersonal communications, intervention, consultation and interdisciplinary competencies.

This rotation is set in the OB/GYN Department of UMass Memorial Medical center, housed on Memorial campus. We work to serve OB/GYN providers and their patients from all over UMass. We provide services to women struggling with issues related to women’s health including perinatal anxiety/depression, pregnancy loss, infertility, gynecological cancers, adjustment to menopause, and sexual dysfunction. Interns will have the opportunity to conduct psychodiagnostic assessments with patients and apply evidence-based therapies for a host of presenting problems. Interns will also have the opportunity to work collaboratively with OB/GYN providers and nurses.

**UMass Cancer Center of Excellence, Breast Cancer Center**  
Supervisor: Ellen Sharenow, PhD
This is a minor, outpatient rotation that meets the internship requirements for an Integrated Health experience, ethics/legal standards, cultural diversity, professional development, interpersonal communications, intervention, consultation and interdisciplinary competencies.

On this rotation, interns will meet with newly diagnosed breast cancer patients to assess his/her mental status, understanding of his/her treatment plan, and current coping strategies/family support. Interns will also have the opportunity to attend the multidisciplinary treatment team meeting, where you will meet with medical and surgical oncologists to develop a comprehensive treatment plan for the patients. Half or full year rotations available.

**UMass Primary Care Psychology in Family Medicine**

**Supervisor:** Jeanna R Lee, PhD

This is a major, outpatient rotation that meets the Internship requirements for an Integrated Health experience, ethics/legal standards, cultural diversity, professional development, interpersonal communications, intervention, supervision, consultation and interdisciplinary competencies. Interns will spend 1 full day or 2 half days in the clinic for the entire training year.

The Department of Family Medicine and Community Health offers a longitudinal experience in Primary Care Psychology. The experience takes place at Hahnemann Family Health Center on the UMMHC Hahnemann campus. This rotation is intended to provide experience consistent with the trend for collaborative psychological services in a primary care setting, known as Integrated Primary Care Behavioral Health.

Interns will provide consultation, rapid assessment, and behaviorally oriented brief therapy to patients in a primary care medical setting. Family Medicine serves patients from birth to death, so the intern will be expected to work with all ages and issues across the developmental spectrum as well as family and couples’ issues. Interns will also see patients in collaborative appointments with family medicine residents and develop skills for consultation to the multidisciplinary primary care team including physicians, nurse practitioners, physician assistants, social workers, nurses, medical students and residents, clinical pharmacy students, and often practicum-level psychology trainees as well as a Behavioral Health post-doctoral fellow. Interns will participate in Chart Rounds, which is an interdisciplinary learning experience within the health center each day to review interesting and challenging cases from that day’s clinical sessions.

**SUPERVISION, SEMINARS, CONSULTATION, AND RESEARCH**

Approximately one-third of the intern’s time is spent in these areas. All interns receive both individual and group supervision for their inpatient work throughout the year. In addition, supervisors are assigned for psychological testing and forensic assessments on a case-by-case basis. The number of outpatient supervisors varies somewhat but all work is closely supervised. In general,
Interns may have 2-4 supervisors for their outpatient rotations. Licensed doctoral psychologists provide clinical supervision.

Interns have an extensive series of seminars. Major topics include: assessment with particular emphasis on interviewing, neuropsychology, and forensic evaluation; psychopathology and psychopharmacology; physiological and hormonal factors; and psychological treatment modalities with particular emphasis on family and group approaches. The seminar series also includes topics such as empirically-based treatment interventions, psychosocial rehabilitation, and the importance of the assessment and integration of multicultural and ethnic diversity. Two regularly scheduled seminar times throughout the year provide an opportunity to cover these assessment and intervention topics in some detail. Interns are welcome to attend weekly Grand Rounds on a variety of mental health topics, which are held at the Medical School, as well.

Although research is not a required activity, interns are encouraged to continue their own research or to participate in ongoing research in the Worcester area. Four hours per week are dedicated to the interns’ research.

Finally, there are numerous teaching conferences, grand rounds presentations, and professional activities in the Worcester/ Boston area. There are weekly teaching conferences that utilize the case presentation format both at the PTRC and WRCH.
PSYCHOLOGY INTERNSHIP LEADERSHIP

John P. Terry, Ph.D.
Assistant Professor of Psychiatry
Director of Psychology Intern Training
University of Massachusetts Medical School
Staff Psychologist
Worcester Recovery Center and Hospital

<table>
<thead>
<tr>
<th>Education</th>
<th>Iowa State University (1983)</th>
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<tr>
<td>Rotation</td>
<td>Supervisor, WRCH General Psychology Rotation</td>
</tr>
<tr>
<td>Interests</td>
<td>Projective testing; therapy and client value systems; individual psychotherapy with children, adolescents, and young adults; treatment of persons with dual disorders (major mental illness and substance abuse); spiritual issues of those with severe and persistent mental illness</td>
</tr>
</tbody>
</table>

Andrea L. Dinsmore, Psy.D., DFP
Assistant Professor of Psychiatry
University of Massachusetts Medical School
Asst. Director of Intern Training
UMass Medical School Psychology Internship Program
Designated Forensic Psychologist
Worcester Recovery Center and Hospital

<table>
<thead>
<tr>
<th>Education</th>
<th>Massachusetts School of Professional Psychology (2013)</th>
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<tr>
<td>Rotation</td>
<td>Supervisor, WRCH/UMass Forensic Inpatient Rotation</td>
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<tr>
<td>Interests</td>
<td>Forensic psychology; psychologists in the public services; malingering assessment; police psychology; serious and persistent mental illness, clinical psychology training. Specialized training in Latino Mental Health and conversationally fluent in Spanish.</td>
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CLINICAL SUPERVISORY STAFF

Melissa L. Anderson, PhD, MSCI
Psychologist and Clinical Researcher
Assistant Professor, SPARC, Department of Psychiatry
Director of Research, DeafYES! Center for Deaf Empowerment and Recovery

<table>
<thead>
<tr>
<th>Education</th>
<th>Gallaudet University (2012)</th>
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<tr>
<td>Rotation</td>
<td>UMass Addiction &amp; Comorbidity Treatment Service</td>
</tr>
<tr>
<td>Interests</td>
<td>Trauma treatment; addiction treatment; Deaf mental health; Linguistic and cultural adaptation of evidence-based therapy and assessment tools; Community engagement/participatory action research</td>
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<tr>
<td>Name</td>
<td>Title and Details</td>
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</table>
| Robert J. Carey, Jr., PhD, ABPP (clinical) | Clinical Associate Professor of Psychiatry  
Associate Director, Ambulatory Psychiatry Service  
University of Massachusetts Medical School  
UMass Memorial Medical Center  
Diplomate in Clinical Psychology, ABPP  
**Education** Ohio University (1985)  
**Rotation** Ambulatory Psychiatry Service  
**Interests** Cognitive Behavioral Therapy; managed mental health care; MMPI-2 testing; anxiety and somatoform disorders |
| Jonathan Carroll, PsyD      | Clinical Psychologist, Core Staff Psychologist  
Education Rutgers University, PsyD, 2015  
Rotation Outpatient, Adult Psychiatry Services  
Dept UMass Ambulatory Psychiatry  
**Interests** Schizophrenia, existential phenomenology, psychodynamic psychotherapy, personality, group psychotherapy, projective testing |
| Brian M. Denietolis, PsyD   | Clinical Psychologist, Department of Psychiatry  
University of Massachusetts Medical School  
Education Antioch University New England (2010)  
Rotation Adolescent Continuing Care Unit (ACCU), Worcester Recovery Center and Hospital  
**Interests** Clinical child and adolescent psychology; developmental models of psychopathology; child maltreatment; evidence-based treatments for trauma and trauma related disorders; the intersection between attachment theory, affect regulation, and reflective functioning |
| Brian K. Dessureau, PhD     | Clinical Associate Professor of Psychiatry  
University of Massachusetts Medical School  
Clinical Neuropsychologist, Depts. of Psychiatry & Pediatrics  
UMass Memorial Medical Center  
**Education** Clark University (2001)  
**Rotation** Outpatient Neuropsychology  
**Interests** Neuropsychological assessment of adults and children; traumatic brain injury; geriatric neuropsychology; life-span developmental psychology |
Lynn S. Dowd, PsyD
Director, Domestic Violence and Anger Management Treatment Program
Ambulatory Psychiatry Service
UMass Memorial Medical Center

Education
Antioch New England Graduate School (2001)

Rotation

Interests
Men's and women's aggression; intersection of attachment, trauma, and substance abuse issues; developmental transition from adolescence to adulthood; mood disorders

Anthony J. Giuliano, PhD

Education
University of Rhode Island (1993)

Rotation
WRCH Inpatient Psychiatric Neuropsychology

Interests
Lifespan clinical neuropsychological and psychological assessment of individuals with SMI; developmental psychopathology of SMI; cognitive remediation; cognitive-behavioral therapy for psychosis; person-centered recovery and functional outcomes

Rebecca Hanson Richardson, PhD
Staff Psychologist, Worcester Recovery Center and Hospital

Education
Clark University (1999)

Rotation
WRCH DBT

Interests
Assessment and treatment of individuals with severe and persistent mental illness; Dialectical Behavior Therapy with inpatients

Specialized Training
DBT Intensive training (2002); Skills Teaching (2001); Individual Therapy (2003); Emotion Regulation (2005); Treatment of Chronically Suicidal Clients (2006); DBT for Substance Use Disorders (2008); DBT Training in Emotion Regulation and Distress Tolerance Skills (2010); Advanced DBT Training: Case Conceptualization, Treating In-Session Dysfunctional Behaviors & Providing DBT Skills Groups (2011); Treating Anxiety Disorders in Multi-Problem Clients with BPD: How, When, and Why to Use Exposure Procedures in DBT (2011); Adapting DBT to Inpatient Units (2012); and Marsha Linehan on DBT: Where We Were, Where We Are, and Where We Are Going (2012).

Gregg A. Januszewski, PsyD
Staff Psychologist, Worcester Recovery Center and Hospital

Education
University of Hartford (1997)

Rotation

Interests
Suicide assessment and treatment, CBT-I, Dual diagnosis treatment, Individual psychotherapy.
Eydie I. Kasendorf, PhD
Psychologist, Dept. of Ambulatory Psychiatry
UMass Memorial Medical Center
Assistant Professor of Family Medicine

<table>
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<tr>
<th>Education</th>
<th>Clark University (1992)</th>
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<tr>
<td>Rotation</td>
<td>Outpatient Ambulatory Psychiatry Service</td>
</tr>
<tr>
<td>Interests</td>
<td>Long-term clinical practices in multiple locations, with diverse populations, a wide variety of diagnoses, and multiple theoretical orientations (including, but not limited to, psychodynamic, CBT, DBT, mindfulness). Long-term teaching and training of Psychology undergraduate and graduate students, Family Medicine and Psychiatry residents, social work interns, and NP students.</td>
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Peter LaCanfora, PsyD

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<td>Interests</td>
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Daniel R. Lambert, PhD
Director of Psychology
Worcester Recovery Center and Hospital

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<tr>
<th>Education</th>
<th>Case Western Reserve University (1982)</th>
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<tr>
<td>Rotation</td>
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<tr>
<td>Interests</td>
<td>Clinical leadership; program development and evaluation; implementation of group and individual CBT with persons with severe and persistent mental illness; Cognitive Rehabilitation Therapy; Development of Culturally Competent programs, Rorschach scoring and interpretation; consultation skills development.</td>
</tr>
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</table>

Jeanna Lee, PhD
Assistant Professor, Dept. of Family and Community Medicine
University of Massachusetts Medical School
Clinical Health Psychologist, Hahnemann Family Health Center
UMass Memorial Medical Center

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<tr>
<th>Education</th>
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<tr>
<td>Rotation</td>
<td>Primary Care Psychology in Family Medicine</td>
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<tr>
<td>Interests</td>
<td>Rapid diagnostic assessment, Motivational Interviewing, Health Behavior Change, neuroplasticity, self-compassion, chronic pain management, weight loss, lifespan development, family systems, trauma-informed care, culturally-informed care, education and training of medical and psychology trainees</td>
</tr>
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</table>
| **Kristin MacGregor, PhD** | **Director of Health Psychology**  
**Assistant Professor of Psychiatry**  
**Clinical Health Psychologist**  
**UMass Diabetes Center & Women’s Health Clinic** |
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<tr>
<td><strong>Education</strong></td>
<td>Syracuse University (2012)</td>
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<tr>
<td><strong>Rotation</strong></td>
<td>Adult Diabetes; Women’s Health</td>
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<tr>
<td><strong>Interests</strong></td>
<td>Psychosocial factors affecting diabetes management; health behavior change; adherence behaviors; behavioral weight management; women’s health, particularly psychological impact of infertility</td>
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| **Ashley Murray, PhD** | **Designated Forensic Psychologist, Worcester Recovery Center and Hospital**  
**Assistant Professor, University of Massachusetts Medical School** |
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<tr>
<td><strong>Education</strong></td>
<td>Simon Fraser University (2014)</td>
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<tr>
<td><strong>Rotation</strong></td>
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<tr>
<td><strong>Interests</strong></td>
<td>Adult forensic clinical assessment, psychopathic personality disorder, tailored violence risk assessment</td>
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| **Jennifer O’Leary, Ph.D., ABPP (Clinical)** | **Lecturer in Psychiatry**  
**University of Massachusetts Medical School**  
**Staff Psychologist**  
**UMass Memorial Medical Center** |
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<tr>
<td><strong>Education</strong></td>
<td>University of Massachusetts Boston (2007)</td>
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<tr>
<td><strong>Rotation</strong></td>
<td>Outpatient, Adult Psychiatry Services</td>
</tr>
<tr>
<td><strong>Dept</strong></td>
<td>Ambulatory Psychiatry &amp; Weight Center (Bariatric Clinic)</td>
</tr>
<tr>
<td><strong>Interests:</strong></td>
<td>Integrative psychotherapy, psychosocial rehabilitation, assessment and treatment of schizophrenia spectrum illnesses, military/Veterans, mood and anxiety disorders, personality disorders, eating disorders/bariatrics, and trauma.</td>
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| **Gregory Plante, PsyD, CPRP** | **Clinical Psychologist**  
**Worcester Recovery Center and Hospital** |
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<tr>
<td><strong>Education</strong></td>
<td>William James College (formerly Massachusetts School of Professional Psychology) (2006)</td>
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<tr>
<td><strong>Rotation</strong></td>
<td>WRCH General Psychology</td>
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<tr>
<td><strong>Interests</strong></td>
<td>Motivational Interviewing, Relapse Prevention Planning, Trauma-Focused Training (CR for PTSD, Exposure interventions), Psychological Assessment, Risk Assessment, Program Development</td>
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</table>
Elizabeth G. Reese, PsyD
Clinical Assistant Professor of Psychiatry
University of Massachusetts Medical School
Clinical Neuropsychologist, Dept. of Psychiatry
UMass Memorial Medical Center

**Education**  Wright Institute (2012)
**Rotation**  Outpatient Neuropsychology

**Interests**  Neuropsychological assessment of adults; traumatic brain injury; geriatric, vascular and endocrine disorders and general medical topics; nutrition; schizophrenia; neuroplasticity

Meredith B. Ronan, PsyD
Clinical Psychologist, Worcester Recovery Center and Hospital
Assistant Professor, University of Massachusetts Medical School
Director of Postdoctoral Training

**Education**  William James College (2015)
**Rotation**

**Interests**  Clinical psychology; Positive Behavior Support; assessment and treatment of persons with severe and persistent mental illness; cognitive and personality assessment; Cognitive Behavior Therapy for Psychosis (CBT-P)

Pooja Saraff, PhD
Clinical Psychologist
UMass Memorial Medical Center

**Education**  University of Wyoming (2015)
**Rotation**  Outpatient Ambulatory Psychiatry Service

**Interests**  Anxiety Disorders, Mood disorders, cognitive-behavioral therapy, intensive exposure treatments, dialectical behavior therapy, personality disorders, suicide and self-injury

Ellen Sharenow, PhD
Assistant Professor of Psychiatry
Clinical Health Psychologist, Cancer Center of Excellence

**Education**  Western Michigan University (1993)
**Rotation**  Breast Cancer Center of Excellence (Health Psychology)

**Interests**  Psycho-oncology, brief assessment of cancer patients; adjustment to cancer diagnosis, treatment, aftereffects, survivorship, and death and dying.

Katie Treiber, PhD

**Education**
**Rotation**
**Interests**
Kelly Wolf Craig, PhD  
Licensed Clinical Psychologist  
UMass  

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<th>Education</th>
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<td>Rotation</td>
<td>Outpatient Ambulatory Psychiatry Service</td>
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<tr>
<td>Interests</td>
<td>Women’s mental health, Deaf mental health treatment and psychological assessment, assessment and treatment of SPMI, mood disorders, perinatal mood disorders, eating disorders, and trauma</td>
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William Warnken, PsyD, ABPP (forensic)  
Assistant Professor  
University of Massachusetts Medical School  
Diplomate in Forensic Psychology, ABPP  

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<tr>
<th>Education</th>
<th>Antioch University/ New England (1992)</th>
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<tr>
<td>Rotation</td>
<td>WRCH Psychiatric Treatment and Recovery Center</td>
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<tr>
<td>Interests</td>
<td>Forensic evaluations; marital violence and treatment of batterers; head injury and marital violence</td>
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Angela Wendorf, PhD  
Assistant Professor, Psychiatry and Pediatrics  
University of Massachusetts Medical School  
Health Psychologist (clinics: Infectious Disease, Ambulatory Psychiatry, Pediatric Nephrology, Student Counseling Services)  
UMass Memorial Medical Center  

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<tr>
<th>Education</th>
<th>University of Wisconsin-Milwaukee (2014)</th>
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<tr>
<td>Rotation</td>
<td>Outpatient Rotation in Health Psychology</td>
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<tr>
<td>Interests</td>
<td>Health/medical psychology; infectious disease; organ transplant; sleep disorders; pain management; obesity; smoking cessation; stress and coping in the context of chronic illness; health disparities and social determinants of health; quality improvement in healthcare</td>
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Karen L. Wentworth, PsyD  
Clinical Psychologist  
Core Staff Psychologist  
UMass memorial Medical Center  
Department of Ambulatory Psychiatry  

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<tr>
<th>Education</th>
<th>Massachusetts Professional School of Psychology (1998)</th>
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<tr>
<td>Rotation</td>
<td>Outpatient Ambulatory Psychiatry Service</td>
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<tr>
<td>Interests</td>
<td>CBT, trauma, anxiety, depression, bipolar, adults.</td>
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# ADDITIONAL CONSULTANTS

## Alan Bodnar, PhD
Worcester Recovery Center and Hospital

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<tr>
<th>Education</th>
<th>Boston University (1975)</th>
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<tbody>
<tr>
<td>Rotation</td>
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<tr>
<td>Interests</td>
<td>Projective testing; individual psychotherapy; relapse prevention; cognitive style and team problem solving; leadership development; therapeutic uses of creative writing and literature</td>
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## John Finneran, EdM
Assistant Professor in Health Science/ Addiction Option, Keene State College  
Certification in Alcoholism Studies, Boston University  
Coordinator of Substance Abuse Services, Psychiatric Treatment and Recovery Center  
UMass Memorial Medical Center

<table>
<thead>
<tr>
<th>Education</th>
<th>Suffolk University (1975)</th>
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<tr>
<td>Interests</td>
<td>Addiction; psychosis; recovery; assessment and treatment of individuals with dual disorders</td>
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## Stuart G. Fisher, PhD
Director of Family/ Couple Training, Psychiatry Residency Program  
University of Massachusetts Medical School  
Private Practice

<table>
<thead>
<tr>
<th>Education</th>
<th>University of Illinois at Urbana-Champaign (1978)</th>
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<tr>
<td>Interests</td>
<td>Family therapy; couples therapy; theories of psychotherapy; treatment of seriously emotionally disturbed children &amp; their families; training of mental health professionals</td>
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## Raymond B. Flannery, Jr., PhD
Associate Clinical Professor of Psychology, Department of Psychiatry  
Harvard University  
Adjunct Assistant Professor, Department of Psychiatry  
University of Massachusetts Medical School

<table>
<thead>
<tr>
<th>Education</th>
<th>University of Windsor, Ontario, Canada (1970)</th>
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</thead>
<tbody>
<tr>
<td>Rotation</td>
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<tr>
<td>Interests</td>
<td>Psychological trauma; crisis intervention theory; assultive psychiatric patients; prevention of youth violence; stress management</td>
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<tr>
<td>Name</td>
<td>Title and Affiliation</td>
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<tr>
<td>Thomas Grisso, PhD, ABPP (forensic)</td>
<td>Professor Emeritus, University of Massachusetts Medical School, Diplomate in Forensic Psychology, ABPP</td>
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<tr>
<td><strong>Education</strong></td>
<td>University of Arizona (1969)</td>
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<tr>
<td><strong>Rotation</strong></td>
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<tr>
<td><strong>Interests</strong></td>
<td>Adolescent offenders; law &amp; psychology; patients' competence to consent to treatment; forensic (criminal) mental health issues and evaluations; mental health issues of youths in the juvenile justice system</td>
</tr>
</tbody>
</table>

| Denise Mumley, PhD                    | Assistant Professor, Department of Psychiatry, University of Massachusetts Medical School, Forensic Psychologist, Worcester Recovery Center and Hospital |
| **Education**                         | Emory University (1996)                                                              |
| **Rotation**                          |                                                                                      |
| **Interests**                         | Competence to stand trial; violence risk assessment; expert witness testimony          |

| Kevin R. Murphy, PhD                  | Associate Professor, University of Massachusetts Medical School, Director of the Adult ADHD Clinic of Central Massachusetts |
| **Education**                         | University of Connecticut (1990)                                                     |
| **Rotation**                          |                                                                                      |
| **Interests**                         | Clinical psychology; adult ADHD-assessment and treatment; co-morbidity disorders; test accommodations; workplace accommodations; Americans with Disabilities Act |

| Ira K. Packer, PhD, ABPP (forensic)   | Associate Professor of Clinical Psychiatry, Director of Forensic Psychology Training, Law & Psychiatry Program, University of Massachusetts Medical School, Director of the Forensic Service, Worcester Recovery Center and Hospital |
| **Education**                         | University of Pennsylvania (1979)                                                    |
| **Rotation**                          |                                                                                      |
| **Interests**                         | Forensic mental health services for adults and juveniles; correctional mental health; quality assurance for forensic reports |

| Lawrence E. Peterson, PhD, ABPP (clinical) | Affiliate Professor of Psychology, Clark University, Psychologist, Worcester State Hospital (retired), Diplomate in Clinical Psychology, ABPP |
| **Education**                             |                                                                                      |
| **Rotation**                              |                                                                                      |
| **Interests**                             |                                                                                      |
Paul M. Rosen, PhD
Associate in Psychiatry, University of Massachusetts Medical School
Clinical Psychologist, Worcester Public Schools

**Education**  University of Denver (1977)
**Rotation**
**Interests**  Children and adolescents; cognitive-behavior therapy; suicide and self-mutilation in adolescents; clinical interviewing

Gina M. Vincent, PhD
Assistant Professor, Research Forensic Psychologist
Director of Translational Psychiatry & Law Research, CMHSR
University of Massachusetts Medical School

**Education**  Simon Fraser University (2003)
**Rotation**
**Interests**  Risk assessment for violence/re-offending; screening & assessment for risk and/or mental health in juvenile justice; psychopathic personality disorder; psychometrics; translating research into practice in juvenile justice

Barent Walsh, DSW
Director, The Bridge of Central Massachusetts
Worcester, MA

**Education**
**Rotation**
**Interests**

Edward Wang, EdD
Director of Multicultural Affairs
Massachusetts Department of Mental Health

**Education**
**Rotation**
**Interests**

Elizabeth White Henrikson, PhD, ABPP (neuropsychology)
Associate in Psychiatry
University of Massachusetts Medical School
Consulting Neuropsychologist & Forensic Evaluator, WRCH

**Education**  UMass Amherst (1988)
**Rotation**
**Interests**