

APA-Accredited Doctoral Psychology Internship

Texas Children's Hospital Psychology Internship

Psychology Division
Department of Pediatrics
Baylor College of Medicine



Texas Children's Hospital



Program Director: Liza Bonin, Ph.D.
www.bcm.edu/pediatrics/psychology

HOUSTON, TEXAS
2024-2025

TABLE OF CONTENTS

I.	Introduction	3-4
II.	TCH Psychology Internship Overview	4-5
III.	Inclusive Excellence	5-6
IV.	Internship Clinical Training Experiences	6-14
	A. Internship Training Tracks	6-8
	B. Description of Major Rotations	9-11
	C. Description of Minor Rotations	11-13
	D. Description of Ongoing Clinical Training Experiences	14
V.	Research	14
VI.	Didactics and Supervision	14-17
VII.	Evaluation Process	17
VIII.	Administrative Resources	18
IX.	Internship Admissions, Support, and Initial Placements	18-22
X.	Opportunities for Post-Doctoral Training	22
XI.	Houston and Texas Medical Center Community	23
XII.	Internship Program Training Faculty / Contributors	24-28
XIII.	Current and Prior Interns – Academic Programs	29

Liza Bonin, Ph.D., Director of Training
Texas Children's Hospital Psychology Internship
Psychology Division, Department of Pediatrics
Baylor College of Medicine

6701 Fannin St., CC1630
Houston, Texas 77030-2399
Email: PsychologyInternship@TexasChildrens.org
Web: www.bcm.edu/pediatrics/psychology

The Texas Children's Hospital Psychology Internship training program through the Department of Pediatrics at Baylor College of Medicine is accredited by:

The American Psychological Association
Office of Program Consultation and Accreditation
750 1st Street, NE, Washington, DC 20002
Phone: (202) 336-5979
Email: apaaccred@apa.org
Web: <https://accreditation.apa.org/>

Introduction

The Division of Psychology within Pediatrics at Baylor College of Medicine offers an APA-accredited internship to doctoral students in psychology – the Texas Children's Hospital Psychology Internship. Dr. Karin Price is Chief of the Psychology Division in the Department of Pediatrics at Baylor College of Medicine as well as Chief of Texas Children's Hospital's Psychology Service. The Texas Children's Hospital Psychology Internship Training Program is directed by Dr. Liza Bonin.

The purpose of the Texas Children's Hospital Psychology Internship is to **provide training in individualized evidence-based practices of psychology with an emphasis in pediatric / child populations**. The program offers doctoral students in clinical, counseling, and school psychology a one-year, full-time psychology internship. This internship is designed to prepare interns for productive and meaningful careers in a variety of contexts.

Baylor College of Medicine / Department of Pediatrics: Baylor College of Medicine (BCM) in Houston, the only private medical school in the Greater Southwest, is recognized as a premier academic health center and is known for excellence in education, research, and patient care. Located in the Texas Medical Center, the College has affiliations with eight teaching hospitals, each known for medical excellence. [Baylor College of Medicine's Department of Pediatrics](#) ranks as one of the nation's largest, most diverse, and most successful pediatric programs. Our Department of Pediatrics is committed to providing superior programs of instruction for students and residents; advancing specialty knowledge in the medical sciences, particularly as it relates to the health problems of children; and maintaining its role as a major contributor to research training and scientific activities that enhance the health of children everywhere.

Texas Children's Hospital: [Texas Children's](#) is the primary teaching/training center for Baylor College of Medicine's Department of Pediatrics. The Texas Children's main campus is comprised of six main facilities. The **Wallace Tower** is the primary outpatient pediatric services facility. The **West Tower** is the



inpatient services facility. The **Feigin Tower** houses pediatric research facilities (including labs), administrative offices, and faculty offices. The **Abercrombie Building** houses additional patient care areas, other patient services (e.g., international patient services), and administrative offices. The **Pavilion for Women** is a comprehensive obstetrics/gynecology facility focusing on high-risk births. Finally, Texas Children's **Legacy Tower** houses new and expanded operating rooms, intensive care units, a progressive care unit, the Texas Children's Heart Center, and includes a helistop, allowing for even greater access for the most

critically ill patients. The 2023 ranking of Best Children's Hospitals by [U.S. News and World Report](#) once again placed Texas Children's on Honor Roll status in pediatrics, ranking Texas Children's as 3rd overall in the nation. We ranked among America's top-10 nationally in ten out of ten specialty areas, including Cardiology & Congenital Heart Surgery (#1), Pulmonology (#1), Nephrology (#1) Neurology & Neurosurgery (#2), Diabetes & Endocrinology (#2), Neonatology (#3), Cancer (#6), Gastroenterology & GI Surgery (#7) Urology (#7), and Orthopedics (#8). The Hospital is designed as a total children's hospital, serving as both a primary community hospital and as a tertiary referral center for children and adolescents with an extensive range of conditions within primary and specialized pediatric medicine.

For a 3.5-minute video highlighting some of what TCH has to offer, please view:

<https://www.youtube.com/watch?v=fDzyh4wBlsw&feature=youtu.be>

Texas Children's Psychology Service: Our Psychology Internship Training Program is housed within the Psychology Service at Texas Children's Hospital. The Psychology Service is uniquely suited to provide broad-based clinical training in assessment and treatment of children, adolescents, and their families. Our Service provides the preponderance of Texas Children's psychological and neuropsychological clinical services with patients ranging in age from infancy through young adult. In addition to serving general pediatrics, the Psychology Service has collaborative working relationships with pediatric subspecialty departments throughout the hospital, including the Texas Children's Cancer & Hematology Centers, Diabetes &, Endocrinology, Gastroenterology, Neurology, Pulmonology, Cardiology, Plastic Surgery, Neonatology, Genetics, Audiology, Renal/Urology, Retrovirology, Allergy & Immunology, Adolescent Medicine, Psychiatry, and Developmental Pediatrics.



The primary physical space of the Psychology Service occupies 13,000 square feet in the Wallace Tower, which is adjacent and connected to both the inpatient and research buildings. Space designated for outpatient care includes 10 testing/interview rooms and 13 therapy rooms. Much of our clinical space has been configured for dual use (i.e., can be used for both in person and telehealth visits). Our clinical space is also equipped with observation rooms, one-way mirrors, and recording/audio capability for supervision and consultation purposes. Interns also have access to a broad range of empirically supported treatment manuals, consultation and intervention handbooks, reference books, and an extensive selection of assessment tools, computerized assessment scoring programs, and access to a dictation system and a testing workroom.

Internship Training Program Overview

The mission of the Texas Children's Hospital Psychology Internship is to advance the profession of psychology and maximize child health outcomes through exemplary training in individualized evidence-based practices of psychology with an emphasis in pediatric / child populations. Our psychology internship program provides broad-based clinical training that will prepare emerging psychologists for productive and meaningful careers in a variety of contexts. As part of our mission, we are committed to providing the foundations for successful post-doctoral specialization in the fields of pediatric psychology, clinical child and adolescent psychology, and pediatric neuropsychology.

Our faculty aspires to train highly competent professionals who will:

- Uphold a strong commitment to scientist practitioner values
- Demonstrate sensitivity and responsiveness to developmental considerations and individual / cultural differences
- Be effective at contextually-relevant care as well as interprofessional teamwork

The internship is regarded as an intensive clinical training year wherein interns use this final phase of their formal doctoral training to develop broad and general professional competencies with an emphasis in pediatric / child populations. The model of training employed is predominantly experiential with supporting didactics and supervision. Experiential training is provided through participation in a variety of clinical rotations including outpatient, inpatient, and consultation services. These rotations provide extensive experiential training using evidence-based approaches in core areas of psychological practice. With an accomplished and diverse faculty including pediatric psychologists, clinical child psychologists, neuropsychologists and psychologists involved in funded research spanning a variety of areas, our program provides fellows with many professional role models.

To the extent feasible, clinical rotations and training experiences are tailored to the unique training needs and interests of each intern. Each intern is assigned a primary mentor who will guide the intern in development of his or her individualized training plan, monitor progress, and support professional development. The primary mentor works collaboratively with the intern to ensure that both the intern and program goals and objectives are achieved through development, ongoing discussion, and sometimes refinement of the intern's training plan. Intern caseloads are informed by educational needs and training goals – with training considerations taking precedence over service delivery. The training year is developmentally structured in terms of sequence and intensity with increased responsibility and independence as the year progresses.

The internship program maintains the following core aims for internship training:

- To provide broad-based experiential training in psychology - with an emphasis in individualized evidence-based practices with pediatric / child populations - that will prepare interns for professional practice within a variety of contexts.
- To promote the professional development of emerging psychologists who will uphold a strong commitment to the scientist practitioner model and evidence-based practices.

Inclusive Excellence

The Psychology community at Texas Children's Hospital/Baylor College of Medicine is dedicated to promoting an environment of respect, inclusion, equity, belongingness, and appreciation across all dimensions of identity. We are passionate about building and sustaining an inclusive, equitable, welcoming, and enriching working and learning environment that is conducive to the intellectual, emotional, and social development of our diverse community. We embrace providing high quality and culturally sensitive patient care, training, and scholarship that affirm the dignity, worth, and value of all individuals.



The Division of Psychology has an Inclusive Excellence (IE) Steering Team with representation from staff; clinical, training, and research leadership; trainee liaison; family liaison; Committee of Diversity and Inclusion (CODI); and TCH Diversity, Equity, and Inclusion leadership. The IE Steering Team works in tandem with CODI to plan and carry out DEI initiatives. In addition, the Psychology Division currently has six “pillars” of Inclusive Excellence, including: 1) Cultural & Linguistic Diversity, 2) Racial & Ethnic Inclusion for Black Youth, 3) Disability Inclusion, 4) Gender & Sexual Diversity, 5) Immigrant & Undocumented Youth, and Economic Justice. Each pillar has distinct faculty leadership who champion these areas. Interns are welcome to participate in pillar initiatives and/or join monthly CODI meetings.

Internship Clinical Training Experiences

Texas Children's Hospital's Psychology Service serves patients ranging in age from infancy to young adults. The patient population seen within Psychology is racially, ethnically, and linguistically diverse, providing interns with experiential training in delivering services to families from a broad range of backgrounds. Service delivery and training experiences involve a contextually-relevant and interdisciplinary approach. Interns coordinate care with multiple systems impacting children, which include working with family systems, schools, interprofessional health care teams, and other providers of patient care. Interns serve as consultants to other departments at Texas Children's and to ancillary service providers in the community.



For most tracks, the training year is divided into two six-month major rotations and two six-month minor rotations (as well as some opportunity for year-long training experiences). The training rotations provide extensive experiential training in core areas of psychological practice with pediatric / child populations (i.e., assessment, consultation and intervention). Approximately 38 percent of an intern's time is spent engaged in assessment and consultation activities, 35 percent in intervention, 16 percent in supervision/case consultation, and 11 percent in seminars, conferences, and staffings.

Including supervision and rotation-specific conferences and staffings, roughly 60-65% of intern time is spent in their Major Rotation, 24-26% in their Minor Rotation, 5% in Ongoing Outpatient Therapy, and 5% in core (non-rotation specific) Internship Program didactics.

Internship Training Tracks

The Texas Children's Hospital Psychology Internship currently has three training tracks:

Track I: Clinical Child / Pediatric Health Psychology - 3 intern positions (194814)

Track II: Pediatric Neuropsychology – 1 intern position (194813)

Track III: Pediatric Primary Care / Clinical Child Psychology – 1 intern position (194811)

The program currently maintains three psychology intern positions with an emphasis in clinical child / pediatric health psychology (Track I), one position with a pediatric neuropsychology focus (Track II), and one position focused on preparation for integrated pediatric primary care psychology / collaborative care in the community (Track III).

When an intern matches to a training track, the intern can expect to participate in the major/core rotations corresponding to the training focus of the track. Remaining rotations of the intern's training plan are based on track and general training needs and rotation availability. The details of the plan

are determined via consultation and collaborative decision-making with primary mentor and training director. This training track structure provides for both depth and breadth of clinical training and allows the program to individualize an intern's training year.

Major Rotations: (2 Majors, each for 6 months)

- 1) Pediatric Neuropsychology
- 2) Pediatric Health Psychology
- 3) OCD & Anxiety Disorders
- 4) Preschool (includes BBI)
- 5) Autism Evaluation (major an option for Neuropsych track)

Minor Rotations: (2 Minors, each for 6 months)

- 1) Pediatric Health Psychology
- 2) OCD & Anxiety Disorders
- 3) Brief Behavior Intervention (BBI)
- 4) Inpatient Rehabilitation
- 5) Autism Center - Evaluation
- 6) Autism Center – Intervention
- 7) Primary Care (Primary Care/Clinical Child Track)**
- 8) Pediatric Neuropsychology
- 9) Diagnostic Interviewing
- 10) Research Rotation

***The Primary Care/Clinical Child track is designed for breadth. Interns on this track participate in three minor rotations each semester, with the option to pursue two "minors" in primary care to yield the equivalent of a major rotation in Primary Care.*

Year-long training activities include:

- 1) Ongoing Outpatient Therapy
- 2) Didactic seminars and conferences
- 3) Clinical supervision/case consultation

Track I: Clinical Child Psychology & Pediatric Health Psychology:

Interns on this training track participate in a Clinical Child Psychology major rotation and the program's Pediatric Health Psychology major rotation. The primary options for the Clinical Child Psychology major are OCD & Anxiety Disorders or the Preschool Rotation. While also ensuring breadth, this track aims to **prepare interns for post-doctoral specialization in either Pediatric Psychology or Clinical Child Psychology subspecialty areas** of OCD/Anxiety Disorders or Preschool. Potential minors on this track include the full range of options available, taking into consideration training needs and availability. In keeping with the APA's taxonomy for specialization within professional psychology, interns spend at least 50% of their training time in service delivery within the recognized specialty of Clinical Child & Adolescent Psychology.

Clinical Child / Pediatric Health Psychology track Example:

	July – December	January – June
Major Rotations	Pediatric Health Psychology	OCD & Anxiety Disorders
Minor Rotations	Autism Evaluation	Pediatric Health Psychology

Track II: Pediatric Neuropsychology:

Interns on training track II will have a **year-long pediatric neuropsychology focus**. Interns on this track complete two neuropsychology/assessment-focused majors. Potential minors for interns on this track often include intervention focused option(s) to round out the internship training year and provide strong preparation for practice as a neuropsychologist. Training track II is suitable for interns **building upon a strong background in assessment who are preparing for post-doctoral specialization in pediatric neuropsychology**. In keeping with the APA's taxonomy for specialization within professional psychology, interns on Track II spend at least 50% of their training time in service delivery within the recognized specialty of Clinical Neuropsychology.

Pediatric Neuropsychology Track Example:

	<i>July – December</i>	<i>January – June</i>
Major Rotations	Pediatric Neuropsychology	Pediatric Neuropsychology
Minor Rotations	Brief Behavior Intervention	Inpatient Rehabilitation

Track III: Pediatric Primary Care Psychology & Clinical Child Psychology:

The intern on this training track participates in the program's Integrated Pediatric Primary Care Psychology rotation all year. The constellation of rotations for this track will prioritize **generalist breadth in Clinical Child Psychology central to high quality collaborative care and community-based evidence-based practice**. Toward this end, the intern on this track also participates in the following Clinical Child Psychology rotations with attention to breadth of competencies rather than a specialization focus: Preschool/Brief Behavior Intervention, OCD & Anxiety Disorders, and Autism Screening & Intervention. The track's targeted **preparation for effective clinical practice in the integrated primary care environment** involves diagnostic consultation, developmental & behavioral screenings, and brief, problem focused evidence-based interventions.

Pediatric Primary Care/Clinical Child Psychology Track Example:

	<i>July – December</i>	<i>January – June</i>
3 "Minor" Rotations each semester, with option of 2 in Primary Care Psychology	Pediatric Primary Care Psychology	Pediatric Primary Care Psychology
	OCD & Anxiety Disorders	Pediatric Primary Care Psychology
	Brief Behavior Intervention	Autism (Screening & Intervention)

In keeping with APA's taxonomy for specialization within professional psychology, interns on Track I & III spend at least 50% of their training time in service delivery within the recognized specialty of Clinical Child & Adolescent Psychology. Similarly, interns on Track II spend at least 50% of their training time in service delivery within the recognized specialty of Clinical Neuropsychology.



Descriptions of Major Rotations

Pediatric Neuropsychology Rotation: The patient population served through the Pediatric Neuropsychology Program is representative of the wide variety of conditions seen in primary and specialized pediatric medicine practice. Particular emphasis is placed on chronic medical illnesses, including leukemia, brain tumors, sickle cell disease, epilepsy, stroke, traumatic brain injury, organ failure and transplantation, and cochlear implantation. Other typical referrals include neurodevelopmental delays, genetic disorders, diabetes, lupus, HIV, neuropsychiatric disorders, pre- and post-surgical evaluations, and other neurological or systemic medical conditions.



Primary services in which interns engage include outpatient neuropsychological assessment, associated intervention planning, and consultation with families, schools, and referring physicians. The clinical populations served and specific services provided vary by specialty area(s) of the rotation supervisor. Interns may also participate in multidisciplinary clinics/staffings as well as rotation-specific clinical/didactic meetings (e.g., multidisciplinary staffings for autism, cochlear implant, brain tumor, or long-term survivors of childhood cancer; Brain Tumor Boards, Bone-Marrow Transplant Boards, and Epilepsy Rounds). Interns will have the option (and expectation) of attending a variety of didactics, including Child Neuropsychology Conference, Neuropsychology Readings Group, and Neurology Grand Rounds). This major rotation is suitable for interns building upon a strong background in assessment and preparing for post-doctoral specialization in neuropsychology. Training experiences will be selected and scaffolded -- based on intern experience and previous training. Faculty supervisors for the Pediatric Neuropsychology rotations include: Leandra Berry, Ph.D., Douglas Bloom, Ph.D., Kimberly Davis, Ph.D., ABPP/CN Karen Evankovich, Ph.D., Mary Reeni George, Ph.D., ABPP/CN., Lynnette Harris, Ph.D., Lisa Noll, Ph.D., Kimberly Raghubar, Ph.D., M., and David Schwartz, Ph.D., ABPP.

Pediatric Health Psychology Rotation: The Pediatric Health Psychology Program serves children, adolescents, and young adults and their families broadly presenting with concerns such as coping/adjustment to medical conditions, adherence and self-management in acute and chronic medical conditions, managing physical symptoms while optimizing functioning, and other topics. Referrals are received from numerous pediatric subspecialties throughout the hospital system, including: Cardiology, Diabetes/Endocrinology, Gastroenterology/Nutrition, Hematology-Oncology, Neurology, Orthopedics, Palliative Care, Physical Medicine & Rehabilitation, Plastic Surgery, Pulmonology, and Transplant Services with additional referrals coming from Allergy/Immunology, Bariatric Surgery, the Fetal Center/NICU, Gynecology, Retrovirology, Rheumatology, and Trauma Service, among others.

In this rotation, the intern will be provided with training in evidence-based practices and education regarding pediatric medical conditions, psychological sequelae, and correlates of such conditions. Common presenting concerns include adaptation to acute and chronic illness, self-management/adherence to medical regimens, procedural anxiety, pre- and post-surgical evaluations and care, reactions to accidental injury/medical trauma, anticipatory grief and coping at end-of-life, and conditions related to the interaction of physical and behavioral factors such as chronic pain, feeding and elimination disorders, and medically unexplained symptoms. Depending on interest, interns may also have the opportunity to provide brief, evidence-based intervention for youth experiencing symptoms of depression, anxiety, or disruptive behavior occurring within the context of and directly affecting their medical condition. Interns often gain experience with patients with pronounced medical complexity or rare conditions, and our program offers access to a very diverse patient population. Opportunities include inpatient and outpatient assessment,

therapy, and consultation and liaison services within the medical setting, and some multidisciplinary clinic opportunities. Interns may attend various rounds and multidisciplinary staffings/clinics and receive mentoring in effective work with interprofessional health care teams. Depending on interest and feasibility, interns have the opportunity to participate in on-going research projects. Faculty supervisors for this rotation include Marni Axelrad, Ph.D., ABPP, Samantha Carreon, Ph.D., Ginger Depp Cline, Ph.D., ABPP, Katherine Cutitta, Ph.D., Danita Czyzewski, Ph.D., Petra Duran, Ph.D., Katherine Gallagher, Ph.D., ABPP, Rachel Kentor, Ph.D., Lisa Noll, Ph.D., Nicole Schneider, Psy.D., ABPP, and Mariella Self, Ph.D., ABPP, and Ashley Teasdale, Ph.D.

OCD & Anxiety Disorders Rotation: The OCD and Anxiety Disorders Program provides specialized assessment and intervention services to preschoolers, school-age children, and adolescents with anxiety and obsessive-compulsive related disorders, including Obsessive-Compulsive Disorder, Health Anxiety/Panic Disorder, Selective Mutism/Social Phobia, and medically-related Specific Phobias. Patients may also have somatic symptoms or co-morbid medical conditions that are treated by the pediatric medical specialists at Texas Children's Hospital. The OC-ADP assessment and treatment approach is strongly evidence-based, with interventions placing significant emphasis on exposure based Cognitive-Behavioral Therapy (CBT) and patient/family centered care. Interventions are either individual-focused with significant family involvement or conducted via a family-based approach. Continuous outcome assessment and judicious use of data to guide treatment are incorporated.

Interns in the OCD and Anxiety Disorders Program have opportunity to develop clinical expertise in: 1) conducting accurate and efficient assessment of OCD, anxiety, and related issues in children and adolescents; 2) identifying and using ongoing outcome assessment to measure progress in treatment and inform treatment decisions; 3) providing modular, evidence-based interventions that are data-driven and research-based; and 4) collaborating with school personnel, psychiatrists, pediatricians, and medical subspecialists. Opportunities for clinical research, program development, quality improvement, and community outreach are also available as a component of the program. Supervision is provided by clinical psychologists trained in exposure-based cognitive-behavioral and family-based approaches to treatment. Faculty supervisors for this rotation include: Kelly Banneyer, Ph.D., Liza Bonin, Ph.D., and Karin Price, Ph.D., ABPP.

Preschool Rotation: The Psychology Division provides specialty care for toddler through preschool populations. The preschool rotation provides interns with the opportunity to conduct diagnostic evaluation, conceptualization, and intervention for toddler through preschool age children with and without chronic/life threatening illness. Healthy children who have difficulty with behavior, mood, and/or family relationships are treated within the Brief Behavioral Intervention. Families are self-referred to this intervention or referred when they present to their pediatricians with these concerns. A preventative, developmentally-based behavioral treatment model is applied within the Brief Behavioral Intervention. Therapy focuses on short-term, goal-oriented techniques and parent training with live coaching of skills. Interns have the opportunity to participate in extensive training and receive live supervision while providing services. Within the Brief Behavioral Intervention component of this rotation, interns will have the opportunity to interact with members of multidisciplinary teams including preschool teachers and directors as well as medical residents in family medicine and developmental pediatrics.



Services for children with chronic/life threatening illness include family-based intervention focused on behavior and mood, medical adherence, adjustment, and normalization. Our pediatric patients are typically referred through their primary medical team (e.g. pediatric cancer, neurology, cleft palate, medical trauma, etc.), and we are often called on to provide recommendations to the medical team in addition to family-based intervention. Within the pediatric component of this rotation, interns will have the opportunity to work both inpatient and outpatient and interact with physicians, nurses,

and other medical professionals involved in the child's medical care. Our patient population is ethnically and culturally diverse, and specialized training is available in providing culturally competent care. Interns have many opportunities to strengthen their multicultural awareness and translate their knowledge regarding individual and cultural diversity into daily clinical practice. The rotation also includes the opportunity for bilingual (Spanish) supervision. Marni Axelrad, Ph.D., ABPP and Petra Duran, Ph.D. are the faculty supervisors for the Preschool rotation.

Autism Program Rotation: The Autism Program offers diagnostic, developmental, psychological and neuropsychological evaluation for individuals suspected of having an autism spectrum disorder (ASD). The patient population includes children from a range of referral sources (e.g., school, physicians, and families) who may have pre-existing diagnoses (e.g., developmental delays or other neurodevelopmental disorders), and the child is also suspected of having an ASD. Our program also provides evaluation for those who have been diagnosed with ASD and are in need of a comprehensive evaluation to aid in development of treatment recommendations. The Autism Program faculty work in conjunction with faculty in a range of other disciplines and evaluate children in clinics ranging from a multidisciplinary format to an individual practitioner. In the multidisciplinary clinics, interns have the opportunity to work on teams that include faculty and staff from psychiatry, developmental pediatrics, neurology, social work, speech/language pathology, and occupational therapy.



Within this rotation, interns will have the opportunity to engage in psychological, behavioral, and/or neurocognitive assessment of individuals with (or suspected of having) ASD, including evaluations using gold standard diagnostic tools such as the Autism Diagnostic Observation Schedule, 2nd Edition (ADOS2). Interns will also have the opportunity to: (1) conduct psychological/neurocognitive assessment of children with various neurologically-based developmental problems, including screening at risk populations; (2)

participate in diagnostic differentiation and formulation of further assessment and treatment plans; and (3) participate in family consultations/feedback and provide recommendations for intervention services. Opportunities also exist for clinical research, particularly projects involving behavioral phenotyping of ASD. Leandra Berry, Ph.D. and Madeline Racine, Ph.D. are the faculty supervisors for the Autism Program rotation. Additionally, Robin Kochel, Ph.D. provides ADOS/ADI-R training and research experiences. Please note: The major rotation placement at the Autism Program is an opportunity for interns matched to the internship's Pediatric Neuropsychology track.

Descriptions of Minor Rotations

Pediatric Health Psychology Minor Rotation: For interns on Track II who do not participate in Pediatric Health Psychology as a major rotation, they have the option of participating in this program on a more limited basis as a minor rotation.

When central to an intern's overall training plan and professional trajectory, interns on Track I have the option to pursue an additional pediatric health psychology experience on a more limited basis as a minor rotation (typically implemented for interns intending to pursue a career as a pediatric psychologist; see Major Rotation Description for details).

OCD & Anxiety Disorders Minor Rotation: For interns who do not participate in OCD & Anxiety Disorders as a major rotation, they have the option of participating in this program on a more limited basis as a minor rotation.

When central to an intern's overall training plan and professional trajectory, interns on Track I have the option to pursue an additional OCD & Anxiety Disorders experience on a more limited basis as a minor rotation (typically implemented for interns intending to pursue career specialization in OCD and/or anxiety disorders (See Major Rotation Description for details).

Brief Behavior Intervention Minor Rotation: For interns who do not participate in Preschool as a major rotation, this is an opportunity to participate in the Brief Behavior Intervention (BBI) component of the Preschool Program. The BBI is designed to provide short-term services for parents and children, ages one to six years, for a wide range of behavioral and developmental concerns such as temper tantrums, noncompliance, aggression, sleep problems, and daycare difficulties. Families are referred to the BBI when they present to their pediatricians with these concerns. A preventative, developmentally-based behavioral treatment model is applied. Therapy focuses on short-term, goal-oriented techniques and parent training with live coaching of skills. The intervention is most similar to Parent Child Interaction Therapy (PCIT), using many of the same live training opportunities for parents, as well as similar intervention techniques. Interns have the opportunity to participate in an extensive training, receive live supervision while providing services, and will have the opportunity to interact with members of multidisciplinary teams including preschool teachers and directors as well as medical residents in family medicine and developmental pediatrics. Interns participating in this minor rotation will also have opportunity to participate in the diagnostic intake process, including conceptualization, for preschool aged children. Marni Axelrad, Ph.D., ABPP and Petra Duran, Ph.D. are the faculty supervisors for the BBI rotation.



Inpatient Rehabilitation Minor Rotation: The TCH inpatient Rehabilitation Unit (IRU) is a CARF accredited, 12-bed unit. Interns work with a multidisciplinary team in the care of patients with a variety of injuries/diseases of the central nervous system (CNS), including brain tumors, traumatic brain injury, CNS infections, demyelinating conditions, cerebral vascular accidents, cerebral palsy, and other conditions with known or suspected CNS involvement. The population is diverse with respect to age (toddler through young adulthood) as well as language dominance, culture, and socioeconomic status. Specific responsibilities of rotating interns, under the supervision of the attending faculty member, will be individualized based on the intern's training goals and area of focus (Clinical Child/Pediatric Health Psychology vs Pediatric Neuropsychology). Clinical activities will also vary based on the admitted children's need for services. On this rotation, all interns will gain experience in team consultation and participation in multidisciplinary team and family conferences, comprehensive clinical interviews aimed at care planning, and family education and training about brain injury and home/school/community re-entry. Additional clinical experiences may include performance of serial assessments of neurobehavioral status and neurobehavioral management, pre-discharge neuropsychological evaluations, Parent Management Training (for children ages 2-to-5), and interventions for behavior and pain management. Kimberly Davis, PhD is the primary supervisor for this rotation with supplemental supervision of behavioral intervention services provided by select pediatric health psychology faculty.

Autism Center – Evaluation Minor Rotation: For interns who do not participate in the Autism Center as a major rotation, they have the option of participating in this center on a more limited basis as a minor rotation focused on diagnostic evaluation/assessment (See Major Rotation Description for details).

Autism Program – Intervention Minor Rotation: The Autism Program offers training in short-term caregiver- focused behavioral treatment for families of children with a diagnosis of Autism Spectrum Disorder (ASD) and concerns related to challenging behaviors. The population served includes children 6 years-of-age and under with a diagnosis of ASD and associated challenging behaviors. Challenging behaviors may include physical aggression, noncompliance, tantrums and other developmental concerns (e.g., sleep problems, toileting problems, mild behavioral feeding problems, and adaptive skill deficits). Goals of treatment include teaching caregivers the skills

necessary to reduce challenging behaviors and to increase more adaptive behaviors. Through participation in this rotation, interns have the opportunity to 1) conduct brief diagnostic assessment of ASD and related concerns; 2) gain specialized skills in implementing the RUBI Parent Training Program as well as an adapted version of the Brief Behavioral Intervention program, which are both manualized, evidence-based intervention programs that emphasize caregiver training and live in-session coaching; 3) engage in peer consultation or supervision with other trainees through co-therapy and live consultation; and 4) interact and consult with other specialties, including, faculty, staff and trainees from developmental pediatrics, psychiatry, neurology, and social work. The faculty supervisor for this minor clinical training experience is Madeline Racine, Ph.D.

Integrated Pediatric Primary Care Rotation: Psychology's Pediatric Primary Care Psychology Program is a hospital-community partnership that extends behavioral health services to children and families outside the hospital in integrated primary care settings. Interns learn to effectively assess and triage children and adolescents presenting with a broad range of concerns including toileting resistance, sleep problems, procedural anxiety, disruptive behavior and ADHD, obesity, emotional concerns, suicidality, medication adherence, social determinants of health, and many others. Clinical training



emphasizes use of brief, evidence-based screening, assessment, consultation, and intervention practices, including translation of common evidence-based practices into brief, targeted treatments feasible for the primary care setting. Clinical training will also include introduction to population health interventions commonly implemented in primary care environments. Interns work closely with physician and allied health partners to provide care that is both collaborative and integrated. Behavioral health services are provided on-site and coordinated with other aspects of primary health care (e.g., consultations following well child examinations). The faculty supervisors for the

Pediatric Primary Care Rotation are Stephanie Chapman, Ph.D. and Monika Parikh, Ph.D.

Pediatric Neuropsychology Minor Rotation: Interns on Track I have the option of participating in this clinical program on a more limited basis as a minor rotation. The rotation would be designed based on the intern's background, skill level, and goals (see Major Rotation Description for details).

Diagnostic Interviewing Minor Rotation: The Diagnostic Interviewing rotation provides opportunity for interns to participate in efficient clinical interviewing, behavioral assessment, and diagnostic consultation to inform intervention planning. This rotation can be implemented when the development of diagnostic skills is a priority and/or when there are gaps in diagnostic interviewing experience. There are opportunities to conduct diagnostic evaluations within Psychology Division clinics (e.g., Pediatric Health Psychology).

Research Minor Rotation: For interns who have demonstrated exceptional research competencies and solid preparation for clinical practice, a research minor rotation is a possible option. Participation in the Research Minor is an exception rather than a routinely implemented rotation (see below).

Ongoing Clinical Training Experiences

Ongoing Outpatient Therapy: Most interns will carry several outpatient cases to extend or complement their training year rotation selections and provide the opportunity for longer-term therapy. Typically, these outpatient cases are an extension of an intern's therapy experience from first semester into the second half of the year; however, there is also the potential to add an outpatient therapy experience outside of major and minor rotations - if feasible and important to an intern's training goals. Outpatient therapy cases are available from the Pediatric Health Psychology Program, OCD & Anxiety Disorders Program, and Preschool Program, as well as PMT intervention through the Autism Program, and/or traumatic stress provided through the Psychology Division. Interns will be supervised by training faculty with expertise suited to each outpatient case. Potential supervisors include: Marni Axelrad, Ph.D., ABPP, Kelly Banneyer, Ph.D., Liza Bonin, Ph.D., Samantha Carreon, Ph.D., Ginger Depp Cline, Ph.D., ABPP, Katherine Cutitta, Ph.D., Danita Czyzewski, Ph.D., Petra Duran, Ph.D., Katherine Gallagher, Ph.D., ABPP, Mackenzie Hughes, Ph.D., Rachel Kentor, Ph.D., Lisa Noll, Ph.D., Karin Price, Ph.D., ABPP, Madeline Racine, Ph.D., Nicole Schneider, Psy.D., ABPP, Mariella Self, Ph.D., ABPP., and Ashley Teasdale, Ph.D.

Research

The internship year is designed to foster a research-minded approach to clinical work. Interns will develop their knowledge and skills in the clinical application of evidence-based assessment and intervention practices for a wide range of pediatric / child presenting problems.

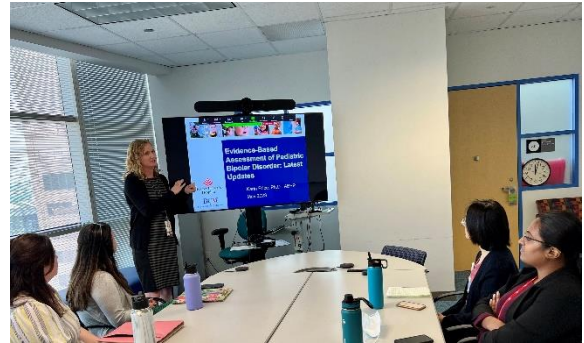
While the internship is primarily a clinical training year, our training faculty adheres to a scientist practitioner model and research programs are ongoing. Protected time for research is possible through the program's research minor; however, most research involvement by interns is conducted as part of an intern's clinical rotation and/or entails supplemental or "extra" involvement beyond the requirements of a clinical rotation. Supplemental activities might include participation in poster preparation, development of manuscripts, and grant writing activities.

Didactics and Supervision

DIDACTICS: The broad range of clinical experiences afforded to interns is enhanced by both formal and informal didactics, clinical and professional conferences, and opportunities to attend various rounds and staffings.

Training Program Seminar: All interns attend the internship's weekly Psychology Training Program Seminar. The presentations within this seminar series address core topics pertinent to profession wide competencies in health service psychology with an emphasis in pediatric / clinical child psychology (e.g., evidence-based assessment and intervention practices; pediatric medical conditions and psychological disorders; current research / best practices in a pediatric care; collaborative care in a pediatric health care environment). Seminars are conducted by Psychology Division faculty and, on occasion, invited guest speakers from outside of the Division. The order of seminars within this didactic series is structured to allow for an appropriate developmental sequence that facilitates intern learning and augments clinical experiences. Ginger Depp Cline, Ph.D., ABPP coordinates the Training Program Seminar.

Psychology Practice Conference: This practice-focused conference typically consists of Case Conceptualization Presentations for cases in ongoing psychosocial intervention or, on occasion, recent evaluations/consultations. Attendees include all psychology interns and pediatric/clinical child psychology postdoctoral fellows involved in the following clinical programs: Pediatric Health Psychology, OCD & Anxiety Disorders, Preschool, Autism/Developmental Disabilities, and Primary Care Psychology. Clinical cases, typically from the aforementioned programs, are rotated through the conference schedule to allow for peer supervision and consultation for a range of presenting problems, assessment methods, and treatment modalities; this format allows for all interns to benefit from the breadth of internship clinical rotations and programs. All case conceptualization presentations are expected to include discussion of evidence-based and developmentally appropriate practices, methods of individualizing assessment/intervention, and relevant ethical considerations and diversity issues. Research articles and/or scholarly reviews relevant to case presentations are expected. The Psychology Practice Conference is held ~ 3 times per month and is coordinated by Ginger Depp Cline, Ph.D., ABPP and Petra Duran, Ph.D.



Multicultural Diversity Seminar: This once per month interactive, practice-focused forum explores themes such as racial/ethnic backgrounds, acculturation, identity, language, equity, inclusion, belonging, and transition. This seminar is coordinated by Petra Duran, Ph.D.

Research/Professional Development Series: This seminar series meets monthly and focuses on scholarly professional development. This meeting provides an opportunity to model and discuss the integration of science and practice. The faculty/interns discuss practical guidelines for developing programs of research and methods to integrate clinical and research activity. Other topics include pursuing grant funding, licensure, and post-internship opportunities such as postdoctoral training and potential career trajectories in pediatric psychology, child and adolescent clinical psychology, research/academia, and clinical neuropsychology. Liza Bonin, Ph.D. coordinates this internship didactic series.

Clinical Child /Pediatric Psychology Psychology Program Meeting: The Clinical/Pediatric Psychology Meeting provides a weekly forum for Clinical and Pediatric Psychology faculty, fellows, interns, and graduate students to come together for consultation, discussion, and education to support patient care, program development, and faculty and trainee growth. The forum includes discussion of clinical program procedures and improvement initiatives and is a valued opportunity for case consultation/peer supervision. The meeting schedule incorporates clinically focused topic seminars as well as journal club discussions. Katherine Gallagher, Ph.D., ABPP coordinates this clinical program meeting.

Child Neuropsychology Conference: This conference is attended by neuropsychology faculty and interns while on a Pediatric Neuropsychology rotation. Postdoctoral fellows in pediatric neuropsychology and graduate students conducting a neuropsychology practicum also attend and participate in this conference. All Psychology Division faculty and trainees are welcome to attend. The conference format is one of didactic and actual case presentation as well as periodic modeling of ABPP-CN fact finding by faculty and post-doctoral fellows. Didactic presentations by program and guest faculty and, to a lesser extent, postdoctoral fellows cover a selection of core topics in pediatric and life span neuropsychology. Cases for case presentations are selected from recent evaluations in the Psychology Service to illustrate basic concepts in child neuropsychology. The structure of case presentations involves development and revision of differential diagnoses through statement of reason for referral, review of background information, description of behavioral observations, presentation of test data, interpretation of information, and elucidation of recommendations. In addition to providing interns with modeling of case conceptualization and experience in presenting case information to colleagues, this conference allows for exposure to a

variety of presenting problems and peer consultation on current challenging cases. This weekly conference is coordinated by Kim Davis, Ph.D., ABPP/CN

Neuropsychology Readings Group: This seminar is intended for postdoctoral fellows, neuropsychology interns, and select graduate student externs. Junior and other faculty preparing for the written examination for ABCN certification may also regularly attend, and there is faculty representation at every scheduled (biweekly) readings group. The selection of readings and topics is based upon a two-year curriculum in support of our postdoctoral training program. The selection of readings includes topics from 5 main domains that span the developmental spectrum through adulthood, including neuropsychological assessment, clinical neuropsychology, basic and clinical neurosciences, behavioral (clinical) neurology, and general clinical psychology. The purpose of this readings group is to provide 1) a broad range of foundational topics in neuropsychology and 2) specific preparation for the ABCN written examination. This didactic is coordinated by Kim Davis, Ph.D., ABPP/CN.

Council of Houston Area Training Sites (CHATS): Approximately once per month interns participate in a didactic seminar/networking opportunity sponsored by the Council of Houston Area Training Sites (CHATS). CHATS is comprised of all APA-accredited doctoral psychology internship programs in the Houston area. CHATS member programs collaborate each year to provide participating interns with professional development activities and peer networking opportunities beyond those offered within the individual internship programs.

Psychology Grand Rounds: The Psychology Grand Rounds series is the primary forum for the Department of Pediatrics Psychology Division Continuing Education (CE) programming. Our Psychology Division is approved by the American Psychological Association to sponsor continuing education for psychologists. Our Grand Rounds CE activities are held approximately once per month. The aim of this educational series is to provide up-to-date knowledge and skills relevant to: (1) evidence-based assessment and intervention practices; (2) psychological disorders as well as behavioral, developmental, and neurocognitive functioning in children and adolescents; (3) standards of care, quality improvement methods, research methods and professional issues pertinent to psychological practice in a medical center and children's hospital, and (4) ethical standards and legal issues pertinent to the care of children in a pediatric medical environment. Dr. Cline is the Psychology Division's APA CE Director and coordinates the Division's CE Committee and Psychology Grand Rounds didactic programming.

Texas Children's Hospital Pediatric Grand Rounds: Weekly TCH Pediatric Grand Rounds are sponsored by the Baylor College of Medicine Department of Pediatrics and feature both research and clinical presentations by BCM faculty and invited lecturers.

Additionally, all interns are welcome to participate in range of pediatric subspecialty rounds and/or seminars as time allows (and depending on their rotations, might be encouraged to attend; e.g., Neurology Rounds, Epilepsy Grand Rounds, Brain Tumor Boards, BMT Psychosocial Rounds, Palliative Care Conference).

Finally, in addition to the aforementioned seminars, conferences, and rounds, some specific clinical rotations have their own clinical program staffings (e.g., Autism Center, OCD & Anxiety Disorders Program) with opportunities for program development discussions, consultation and peer supervision. Over the course of the training year, interns will conduct several scholarly presentations within clinical program meetings.

SUPERVISION: Individual supervision is provided for all major rotations, minor rotations, and ongoing training experiences. Interns receive a *minimum* of 2 hours per week of regularly scheduled individual supervision from their primary supervisors and *at least* 4 hours total scheduled supervision per week. Beyond individual supervision, interns receive supervision through group format, reflecting team live supervision, joint sessions, and supplemental tiered supervision. The Psychology Service suite includes

observation rooms, one-way mirrors, and digital video capacity with microphones that are utilized for supervision purposes.

Early supervision and consultation with primary mentor includes self-assessments to identify strengths and targeted domains for development. In consultation with primary mentor and training director, the intern develops an individualized training plan (see Program Overview) within the first weeks of the training program. This plan will be refined as the year progresses and used as a method to ensure both program and individualized intern training goals are met.

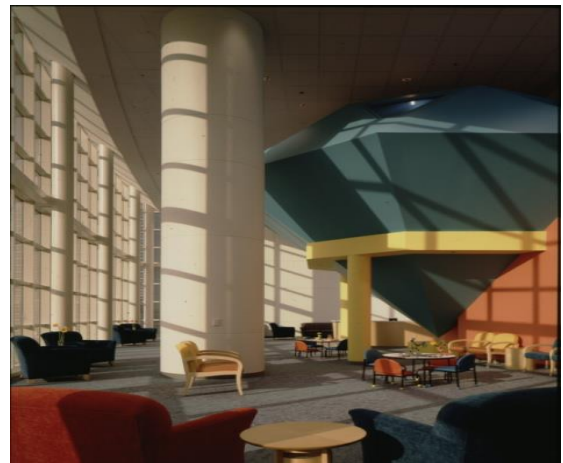
Intern Meeting: Interns routinely meet as a group with the Training Director (weekly or every other week). This time is provided for interns to ask questions, raise issues, and provide feedback and suggestions. It affords an opportunity to discuss the training program, clarify expectation and procedural issues, and maintain open lines of communication.

Evaluation Process

Evaluation and feedback are regarded as ongoing processes that occur through both formal and informal means. All supervising faculty and interns are encouraged to share feedback with each other throughout training rotations and the training year. Evaluation provides the opportunity to further individualize an intern's training program as well as improve the overall Internship Program.

Expectations and Procedures: At the start of the internship training year, all interns are provided with an Intern Handbook that delineates program requirements and competency expectations as well as policies and procedures that outline steps to be followed if an intern is not fulfilling program requirements or performing at the expected level of competence. The program's Intern Handbook as well as Due Process Procedures are available for review on request.

Intern Evaluation: To ensure preparation for practice in health service psychology, the program fosters intern development of and assesses intern achievement of profession-wide competencies (PWC). Interns are expected to demonstrate performance commensurate with their level of training and strong preparation for entry level practice (and postdoctoral specialization). In keeping with this standard, interns are expected to achieve competency domain ratings of "*Developing Competence*" or above on all rated competency elements during internship (Quarters 1, 2, and 3). By the end of the internship training program (end of 4th Quarter), interns are expected to achieve competency domain ratings of "*Competent*" or above on all profession-wide competency elements.



The program's profession-wide competency evaluations are conducted by major rotation, minor rotation, and ongoing clinical training supervisors. Evaluations are conducted four times per year (at 4, 6, 9, and 12 months). All evaluations are based in part on direct observation of the intern by the training supervisor. Each supervisor is responsible for reviewing evaluation feedback with the intern during supervision and providing a copy of the evaluation form to the Director of Training.

Supervisor/Program Evaluation: Interns are provided with a venue for feedback on an ongoing basis through the Intern Meeting with the Director of Training. Additionally, interns complete supervisor evaluation/program feedback forms at 6 and 12 months.

Administrative Resources

Interns are provided with designated office space to conduct their clinical administrative work. Interns are provided with an individually assigned computer, private telephone line with voicemail, and pager. Each computer is connected to TCH and BCM intranet systems with access to electronic medical records and access to Houston Academy of Medicine-Texas Medical Center Library with its vast catalog of electronic journals and Pub-Med access.

Within the Psychology Division suite, interns have access to computers with programs for statistical analysis and research. Interns benefit from the administrative support provided by the Psychology Division's administrative assistants, referral center coordinators, and practice manager as well as the hospital's information services, scheduling, admissions, and billing department personnel.

Internship Admissions, Support, & Initial Placements

INTERNSHIP PROGRAM TABLES Date Program Tables are Updated: 9/1/2023

Program Disclosures

<i>Does 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, admission, hiring, retention policies, and/or requirements for completion that express mission and values.</i>	No
<i>If yes, provide link or content from brochure when this specific information is presented: NA</i>	
Please note that COVID-19 vaccination is an institutional requirement of BCM/TCH and therefore is required for psychology interns.	
Per BCM policy, the credentialing process involves a criminal history check, health screening, and a reference check.	
The TCH Psychology Internship Training Program requires a full-time commitment. Accordingly, any additional outside employment/coursework is discouraged, and rarely permitted. If permitted, it must be pre-approved by the Training Director.	

Internship Program Admissions:

<i>Briefly describe in narrative form the important information to assist potential applicants in assessing their likely fit with program.</i>
The Texas Children's Hospital Psychology Internship recruits for five full time interns across 3 distinct tracks (see pages 6-8 for information about the program's three training tracks). Psychology intern selection is based on factors deemed directly relevant to prospective interns' potential success in the program's track and in the profession of psychology, including prospective intern preparation in pediatric psychology, clinical child psychology, and/or pediatric neuropsychology.
Relevant factors in the program's selection / decision process include: clinical and research experiences; education; references from past supervisors, internship training objectives; and long-term professional goals.

We endeavor to accept interns from a broad range of graduate training programs as this enriches the Internship Program. Graduate students in clinical, counseling, and school psychology are considered for admission to the Internship Program.

The Psychology community at Baylor College of Medicine/Texas Children's Hospital is dedicated to promoting an environment of respect, inclusion, equity, and belongingness. We are committed to the recruitment, retention, development, and promotion of Interns and Psychology team members of all backgrounds and experiences. Bicultural/bilingual students and those underrepresented in psychology are encouraged to apply.

Does the program require that applicants have received a minimum number of hours of the following at the time of application? If Yes, how many:

Total Direct Contact Intervention Hours: No minimum number of hours

Total Direct Contact Assessment Hours: No minimum number of hours

The program expects applicants to have obtained a combination of intervention and assessment hours but does not have a specific minimum hours requirement for intervention or assessment. While the overall **quality of supervised experience is substantially more important than the number of hours** conducted, applicants typically have completed approximately 750 direct contact hours at the time of application. Successful applicants typically present with experience / hours that are commensurate with the preparation needed to be successful on the track for which they are applying (e.g., solid breadth and more assessment experiences than intervention if applying to pediatric neuropsychology track).

Describe any other required minimum criteria used to screen applicants.

Requirements for admission include:

- Completion of at least three years of graduate coursework at an APA-accredited doctoral training program
- Practicum training in assessment and treatment of pediatric / child populations
- Passed comprehensive exams by application deadline
- Completion of dissertation proposal defense and initiation of data collection at the time of internship application submission. The completed application deadline is **November 1, 2023**.

Application Procedures:

In order to apply, prospective interns should submit their completed application via the AAPI Online Applicant Portal by **November 1, 2023 by 11:59pm CST**.

The AAPI Online Portal is accessed through the Association of Psychology Postdoctoral and Internship Center's (APPIC) online application service. <http://www.appic.org>.

To be considered, the following materials must be submitted through the APPIC's Online Service by November 1, 2023:

- **Cover Letter (letter of intent)**
 - **Please include statement of career goals and interest in the Texas Children's Hospital Psychology Internship through the Department of Pediatrics at Baylor College of Medicine.**

- Please clearly state within your cover letter in bold type the name of the specific training track for which you are applying (see page 6 for names of training tracks).

Note: Given that each of our training tracks are meant to prepare interns for distinct career trajectories, we strongly encourage applicants to be specific and targeted (i.e., apply to the track best aligns with your training goals, trajectory, and preparation).

- Curriculum Vitae
- APPIC Application for Psychology Internship (AAPI)
- Official copy of all Graduate transcripts
- Three letters of recommendation (preferably one from applicant's academic advisor and two others from clinical supervisors).

After all application materials have been reviewed by the Psychology Internship Selection Committee, virtual interview days (via Zoom) will be arranged for those applicants still under consideration. These virtual interviews will be conducted in January on select Mondays and Fridays (precise days to be determined). These interview days will include an internship training program and Psychology Division overview and virtual tour, individual interviews with several training faculty supervisors, and a meeting with the current intern class. Please feel free to contact us for more information at any time at PsychologyInternship@TexasChildrens.org.

Please address inquiries about program, training experiences, or selection practices to Dr. Bonin and Thembi Thomas. Inquiries about application submission logistics should be sent to Thembi Thomas.

Thembi Thomas, MEd
Senior Program Coordinator
Department of Pediatrics, Psychology Division
Texas Children's Hospital
6701 Fannin Street, MWT 1630.00
Houston, TX 77030-2399
Phone: 832-822-3177
Txthom15@texaschildrens.org



We look forward to reviewing your application!

The Texas Children's Hospital Psychology Internship Program adheres to Baylor College of Medicine's community engagement, health equity, and inclusion policies as well as other applicable BCM employment policies. The internship program also supports and agrees to abide by the APPIC policy that no person at this training facility will solicit, accept, or use any ranking-related information from any intern applicant prior to the Internship Match. The internship follows APPIC Match Policies; applicants should register for the match. Please directly contact the APPIC office with any policy issues: **APPIC Central Office** 10 G Street, NE Suite 750 Washington DC 20002 Appic@aol.com Phone: 202-589-0600 Fax: 202-589-0603.

Following receipt of the computerized match results, matched candidates will be contacted via telephone. Applicants will be required to complete BCM's credentialing process before a formal internship offer can be extended. Per BCM policy, the credentialing process involves a criminal history check, health screening, and a reference check.

Financial and Other Benefit Support for Upcoming Training Year:

Annual Stipend/Salary for Full-time Interns	\$34,500	
Annual Stipend/Salary for Half-time Interns	NA	
Program provides access to medical insurance for intern?	Yes	
Trainee contribution to cost required?	Yes	
Coverage of family member(s) available?	Yes	
Coverage of legally married partner available?	Yes	
Coverage of domestic partner available?	Yes	
Hours of Annual Paid Personal Time Off (PTO and/or Vacation)	208*	
Hours of Annual Paid Sick Leave	96	
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	
<p>Other Benefits: In addition to medical insurance, interns have the option to purchase dental and vision benefits for themselves, with the option of adding family members at a standard price. Interns are also entitled to participate in the medical school's Flexible Spending Accounts, 403B tax-deferred investment plan, and BCM Wellness Program. Malpractice insurance is provided. \$750 in professional funds to be used for approved professional endeavors (e.g., virtual conference attendance/registration, poster printing, etc.) are expected to be available.</p>		

The intern stipend and benefits are provided by Baylor College of Medicine.

*Note: Paid personal time off is comprised of 7 BCM paid holidays, 4 paid floating time off, and 15 additional paid time off to be used for vacation and personal days. Additionally, interns receive 5 days of professional release time for in person or virtual conferences or other professional development activities approved by the training director.

Initial Post-Internship Positions:

	2019-2022	
Total # of interns who were in the 3 cohorts	15	
Total # of interns who did not seek employment because they returned to their doctoral program/are completing doctoral degree	0	
	Post doc	Employed
Academic Teaching	0	1
Community Mental Health Center	0	0
Consortium	0	0
University Counseling Center	0	0
Hospital/Medical Center	13	0
Veterans Affairs Health Care System	0	0
Psychiatric Facility	0	0
Correctional Facility	0	0
Health Maintenance Organization	0	0
School District/System	0	0
Independent Practice Setting	1	0
Other	0	0

The **majority of our intern graduates go on to pursue post-doctoral fellowship training in academic medical centers and children's hospitals** including: Baylor College of Medicine/Texas Children's Hospital, Boston Children's Hospital, Children's Hospital of Philadelphia, Kennedy Krieger Institute, Cincinnati Children's, Children's National Medical Center, Nationwide Children's, UCLA, Children's Hospital of Orange County, Children's Healthcare of Atlanta/Emory University, St. Louis Children's Hospital, Riley Children's Hospital, Children's Medical Center Dallas, Dell Children's Hospital, McLean OGI, Medical College of Wisconsin, University of Miami, Oregon Health Sciences Center, University of Oklahoma Health Sciences Center. Additionally, some of our intern graduates have pursued post-doctoral research fellowships in university settings (e.g., Harvard University, Temple University, University of Pittsburgh) or transitioned from internship directly into faculty positions (e.g., University of New Orleans).

Opportunities for Post-Doctoral Training

The Psychology Division also offers post-doctoral fellowship training. Postdoctoral training typically involves focused training within one of the Psychology's clinical programs, with opportunities for adjunct clinical experiences in other programs.

Potential postdoctoral options include specialization through the following clinical programs: 1) Pediatric Neuropsychology; 2) Pediatric Psychology; 3) OCD & Anxiety Disorders; 4) Preschool; 4) Primary Care; and 5) Autism Spectrum Disorders/Intellectual Developmental Disabilities.

Postdoctoral training in Pediatric Neuropsychology is a two-year residency, with the program being a member of the Association of Postdoctoral Programs in Clinical Neuropsychology (APPCN). Our Division's other fellowship positions are one-year with potential opportunity to extend for a second year.

The Pediatric Neuropsychology and Pediatric / Clinical Child Psychology Post-Doctoral Fellowships are academic programs offered through Baylor College of Medicine's Psychology Division within the Department of Pediatrics. www.bcm.edu/pediatrics/psychology



Houston & the Texas Medical Center (TMC)

The [TMC](#) is the world's largest medical complex. Today, TMC comprises: 21 renowned hospitals, 8 academic and research institutions, 3 public health organizations, 3 medical schools, 6 nursing programs, 2 universities, 2 pharmacy schools, and a dental school. The TMC institutions are joined in their common dedication to the highest standards of patient and preventative care, research, and education as well as local, national, and international community well-being.



Houston is the 4th largest U.S. city. Thirty-seven percent are 24 or younger and 32 percent are between ages 25-44. Houston has a multicultural population of more than 5.5 million in the metro area, giving the city a rich diversity and cosmopolitan feel. Houston is an international city that is a leader in the arts, education, and health care. Compared with other big cities, Houston offers a relatively low cost of living and affordable housing. Plus, there are not state or local income taxes.



Houston offers a wide range of cultural and recreational activities appealing to a diversity of interests. Cultural attractions in the city include numerous museums and a thriving theater district. In fact, Houston is one of only a few U.S. cities with permanent ballet, opera, symphony, and theater companies performing year-round. Nightlife is alive and well in downtown Houston and in many other areas of town. If you're into

sports, Houston is home to numerous professional teams including the Texans, Astros, Rockets, Comets, Aeros, and Dynamos. If you want to play, the greater Houston area offers almost all sporting and hobby interests, including tennis, golf, water sports, cycling, and running. The city maintains more than 350 municipal parks and 200 open spaces. In addition, the city provides many golf courses and operates a modern zoological garden for public use. Houston is also considered to have one of the best culinary scenes in the country, boasting over 11,000 restaurants and food trucks that serve diverse cuisine representing over 70 countries and American regions.

So, what about that heat? Yes, the summers are hot, but there's plenty of air conditioning, and there are water activities to beat the heat. And the upside is that winters are mild, with snowfall and ice being rare. With an average rainfall of 46 inches, you can enjoy the outdoors as much as you'd like.



Houston Highlights

- Ranked #11 on [America's Best Cities](#) list (September 2022)
- [Culturally diverse communities](#) and [affordable cost of living](#)
- A dozen [colleges & universities](#) with many degree programs
- Renowned [ballet](#), [opera](#), [symphony](#), and [theater](#) companies and a large [museum district](#)
- Over [300 parks](#), [200 green spaces](#), & [125 hike-and-bike trails](#)
- NASA's [Johnson Space Center](#)
- Over 11,000 [restaurants](#)
- Professional and college [sports leagues](#)

Internship Program Training Faculty

Marni E. Axelrad, PhD, ABPP (SUNY Binghamton), Professor of Pediatrics, Clinical Child Psychologist; Clinic Chief. Prevention of and treatment for disruptive behavior disorders in young children with and without chronic/life threatening illness, short term relationship/behavior consultation with families with young children, diagnostic assessment in young children (infant through preschool) with and without chronic/life threatening illness, psychosocial assessment and treatment of children with Disorders of Sexual Differentiation. Interests also include program development and professional development.



Kelly Banneyer, Ph.D. (University of Texas at Austin), Assistant Professor of Pediatrics. Clinical interests: Diagnostic assessment and treatment of anxiety and obsessive compulsive disorders in preschoolers, school-age children, and adolescents via evidence-based practices; Diagnostic assessment of attention-deficit/hyperactivity disorder in school-age children.

Leandra Berry, Ph.D. (University of Connecticut), Assistant Professor of Pediatrics, Pediatric Neuropsychologist; Director of Autism Program. Evidence-based diagnostic, developmental, and neuropsychological assessment of children at risk for or diagnosed with Autism Spectrum Disorder (ASD); provision of general outpatient neuropsychological services; evidence-based treatment of ASD and commonly occurring comorbidities. Research interests include early identification and diagnosis of ASD, clinical phenotyping, evidence-based treatment, and factors associated with treatment outcome.



Liza Bonin, PhD (University of Texas at Austin), Associate Professor of Pediatrics, Clinical Psychologist; Director of Doctoral Psychology Internship Training Program – Assessment and treatment of OCD and anxiety disorders via evidence-based and patient/family centered practices, with specialization in pediatric obsessive-compulsive disorder and health anxiety. Interests also include professional development/clinical training and quality improvement.

Douglas Bloom, PhD (University of Houston), Assistant Professor of Pediatrics. Neuropsychological assessment and consultation of pediatric brain dysfunction; assessment and treatment of learning disorders; AD/HD; systemic lupus erythematosus, traumatic brain injury, neurofibromatosis, hydrocephalus.



Ashley Butler, PhD (University of Florida), Associate Professor of Pediatrics. Clinical interests: assessment and treatment of preschool- and school-age disruptive behavior disorders and ADHD; integrated behavioral health care in primary care settings. Research interests: outcomes of behavioral health care in non-specialty settings; racial/ethnic minority parent access to and engagement in young child behavioral health care; interventions to improve outcomes of behavioral health care among minority children and families

Samantha A. Carreon, PhD, is a Pediatric Psychologist and Assistant Professor in the Department of Pediatrics and Division of Psychology at Texas Children's Hospital and Baylor College of Medicine. She specializes in evidence-based interventions for youth with diabetes and other endocrine conditions. Dr. Carreon provides support and assists children, adolescents, and young adults with adjusting and coping with illnesses, diabetes distress or "burn out," difficulties engaging in treatment and management, as well as anxiety, depressive symptoms, emotion dysregulation, and behavioral difficulties co-occurring with medical conditions. Dr. Carreon is also a

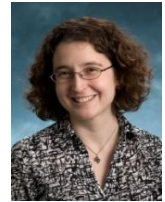


member of the Resilience and Diabetes (RAD) Behavioral Research Lab. Her research interests include studying the psychosocial impact of living with diabetes, supporting resilience and strengths in young people with T1D, transitioning to adult care, health disparities and health equity, and evaluating and improving sleep in youth and young adults with T1D.



Stephanie Chapman, Ph.D. (University of Houston), Assistant Professor of Pediatrics, Counseling Psychologist. Assistant Professor of Pediatrics, Clinical Director of Primary Care Psychology; Bilingual English/Spanish psychologist. Clinical interests: preschool and school-age disruptive behaviors, primary care psychology, pediatric health psychology, maternal behavioral health, and improving access of behavioral health for historically underserved communities.

Ginger Depp Cline, PhD, ABPP (University of Kentucky), Associate Professor of Pediatrics – Pediatric Health Psychology and Primary Care Psychology; psychosocial adjustment and CBT for children/adolescents with health conditions (injuries, orthopedic surgery, liver transplant, etc.); pediatric medical traumatic stress and injuries; multidisciplinary orthopedic and PM & R clinics (orthopedic deformity and deficiency clinics); pre-liver transplant evaluations; primary care diagnostic evaluations.



Katherine E. Cutitta, Ph.D. (East Carolina University), Assistant Professor of Pediatrics, Clinical Psychologist. Evidence-based cognitive and behavioral interventions for management of congenital heart disease and cardiovascular disease, particularly illness adjustment and coping, activity limitations/ re-engagement, difficulties with treatment adherence, transplant and medical device evaluations, as well as cardiac related depression and anxiety in children and adults with cardiac conditions.

Danita Czyzewski, Ph.D. (Purdue University), Assistant Professor of Pediatrics, Pediatric Psychologist. Evidence-based treatment related to adjustment, adherence, and treatment of pediatric disorders, especially gastrointestinal disorders including functional abdominal pain, young child feeding disorders, IBD, encopresis; pulmonary disorders including cystic fibrosis, lung transplant; Management of somatic symptom and related disorders. Research interests in understanding and management of functional abdominal pain disorders.



Kimberly Davis, Ph.D., ABPP/CN (Purdue University), Assistant Professor of Pediatrics, Director, Neuropsychology Postdoctoral Fellowship Program, Pediatric Neuropsychologist. Evaluation, consultation, and intervention for children with acute and/or recently acquired neurologic injury. Services provided to children admitted to the inpatient rehabilitation unit (IRU) and across the continuum of care through outpatient follow-up clinics and outpatient neuropsychological evaluation. Research Interests: prediction of outcome following traumatic brain injury and linear modeling for trajectories of brain injury recovery.



Petra A. Duran, Ph.D. (Kent State University), Assistant Professor of Pediatrics, Director, Pediatric/Clinical Child Psychology Postdoctoral Fellowship Program; Bilingual/Bicultural Pediatric Psychologist. Clinical interests include prevention of disruptive behavior disorders in young children, adaptation of evidence-based treatments for Spanish speaking families and underserved populations. Provision of behavioral intervention to preschoolers with complex medical conditions, Autism Spectrum Disorder, and pediatric medical traumatic stress and injuries; Diagnostic and psychosocial assessments across specialty clinics, pre-liver transplant evaluations, and multidisciplinary team member within the department of Plastic Surgery.



Karen D. Evankovich, PhD (University of Houston), Associate Professor of Pediatrics. Clinical Director Pediatric Neuropsychology; Neuropsychological evaluation of children with a wide variety of neurological and neurodevelopmental disorders, ranging in age from early childhood through late adolescence. Special interests include pediatric epilepsy and pediatric demyelinating disorders.



Katherine A. Gallagher, Ph.D., ABPP (University of Kansas), Assistant Professor of Pediatrics, Pediatric Psychologist. Clinical Director Clinical Child & Pediatric Psychology Program. Cognitive and behavioral interventions for psychosocial aspects of pediatric diabetes and other Endocrine conditions. Assist children, adolescents, and young adults with illness adjustment and coping, diabetes distress and "burnout", diabetes-related family conflict, difficulties with treatment adherence, as well as depression, anxiety, emotion dysregulation, and behavioral difficulties occurring in the context of medical conditions. Diagnostic assessment and gender-affirming supportive psychotherapy for transgender youth, especially pre-adolescents and adolescents.

Mary Reeni George, PhD, ABPP/CN (National Institute of Mental Health and Neurosciences, India), Assistant Professor of Pediatrics. Pediatric Neuropsychologist; Interim Co-Director of Pediatric Neuropsychology Postdoctoral Fellowship Program. Neuropsychological evaluation of children with sickle cell disease, pediatric stroke, genetic/developmental disorders, hydrocephalus, and other neuropsychiatric disorders.



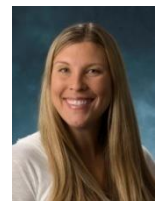
Lynnette L. Harris, PhD (Southern Illinois University at Carbondale), Associate Professor of Pediatrics. Neuropsychological evaluation of chronic medical conditions and their treatments, primarily including patients from neuro-oncology, hematology, and bone marrow transplant, as well as patients with metabolic storage diseases, genetic disorders, and HIV/AIDS or other immune dysfunction.

Marisa E Hilliard, PhD (The Catholic University of America), Associate Professor of Pediatrics, Pediatric Psychologist; Research interests: Research interests: Strengths-based assessment and intervention strategies to promote good quality of life, high self-management, and optimal health outcomes of youth and young adults with type 1 diabetes and their families.

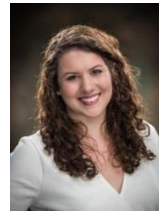


Mackenzie Hughes, PhD (Texas Tech University), Assistant Professor of Pediatrics, Clinical Psychologist. Evidence-based assessment and treatment of trauma-related symptoms for children, adolescents, and young adults in foster care. Inpatient consultations for non-accidental and violent trauma. Professional interests include improving access to evidence-based trauma treatments; cross systems collaboration; trauma-informed care; and provider well-being.

Lisa S. Kahalley, PhD (University of Memphis), Associate Professor of Pediatrics and Director of Research for the Psychology Division. Research interests include: neurocognitive late effects and functional outcomes in pediatric cancer survivors, treatment-related differences in white matter development, neurocognitive functioning, and quality of life outcomes in pediatric neuro-oncology.



Rachel Kentor, Ph.D. (Eastern Michigan University), Assistant Professor of Pediatrics, Clinical Psychologist. Clinical interests include inpatient consultation and liaison, oncology and bone marrow transplant, palliative care, anticipatory grief and bereavement, d/Deafness, and Acceptance and Commitment Therapy in pediatric chronic illness. Research and professional interests include illness-related communication, impact of family functioning on child adjustment to illness, and provider well-being



Lisa Noll, PhD (Loyola University), Assistant Professor of Pediatrics. Pediatric health psychology; neuropsychological assessment and consultation; infant consultation and support; intervention with children with chronic illness.

Karin Price, PhD, ABPP (University of Connecticut), Division Chief; Associate Professor of Pediatrics; Clinical Psychologist; Evidence-based assessment and treatment of anxiety disorders in children and adolescents with specialty emphasis in selective mutism and social anxiety disorder; evaluation of ADHD and comorbid conditions; measurement based care; organizational factors that impact implementation of evidence-based practice.



Monika Parikh, PhD (Washington State University), Assistant Professor of Pediatrics, Primary Care Psychology. Bilingual English/Gujarati psychologist. Clinical interests: behavioral parent training, primary care psychology, prevention efforts, improving access to behavioral health care to all patients, and anxiety and depression in adolescents.

Madeline Racine, Ph.D. (University of Houston), Assistant Professor of Pediatrics, Clinical Psychologist. Clinical interests include assessment of neurodevelopmental differences and autism spectrum disorder (ASD), parent-mediated interventions for children with ASD and challenging behaviors, treatment of anxiety disorders in youth with ASD. Research interests broadly surround ASD with an emphasis on early identification and diagnosis and evidence based interventions for commonly occurring comorbidities.



Kimberly Raghubar, PhD (University of Houston), Assistant Professor of Pediatrics, Duncan Family Scholar in Pediatric Neuropsychology. Neuropsychology consultation and assessment. Research interests include neurocognitive correlates and academic functioning in survivors of pediatric cancer, the role of epigenetic mechanisms on neurocognitive outcomes following treatment for pediatric cancer.

Nicole Schneider, Psy.D., ABPP (George Fox University), Assistant Professor of Pediatrics, Clinical Psychologist. Pediatric Health Psychology; pediatric consultation and liaison; adjustment to chronic and acute illness; adherence to medical regimens; adolescent/young adult health psychology; oncology and bone marrow transplant; palliative care.





David Schwartz, PhD, ABPP (University of Delaware), Associate Professor of Pediatrics, Clinical Program Director, Pediatric Neuropsychology. Neuropsychology and pediatric health psychology; psychosocial screening of children with diabetes, solid organ transplant, and other chronic illnesses; adherence to medical regimens; neuropsychological assessment of pediatric cancer (brain tumors, leukemia), diabetes, thyroid disorder, other endocrine disorders, congenital heart disease, renal disease.

Mariella M. Self, Ph.D., ABPP (Texas A&M University). Associate Professor of Pediatrics; Pediatric Psychologist. Inpatient consultation and outpatient psychotherapy to improve medical regimen adherence/self-management, pain or symptom management, and adjustment/functional adaptation for children with chronic illnesses including cardiac conditions and heart transplantation, functional and organic gastrointestinal disorders, medically unexplained physical symptoms, demyelinating disorders, among others.



Ashley E. Teasdale, Psy.D. (Baylor University), Assistant Professor of Pediatrics, Pediatric Psychologist. Evidence-based family-centered assessment and treatment related to a variety of pediatric health conditions. Assist children, adolescents, and families with managing social, emotional, and behavioral challenges occurring in the context of chronic and acute medical conditions, including neurological disorders, gastrointestinal disorders, feeding and elimination disorders, infant/young child liver transplant, cleft lip and palate, and more. Targeted intervention for somatic symptom and related disorders.

Additional Program Supervisors / Potential Contributors

Kristin Adkins, MA, LPA
Nicole Entrekin, M.A., LPA
Ashley Ney, MA, LPA
Jessica Nunez, MA, LPA

Charla Clark, Ph.D., LPA
Robin Kochel, Ph.D.
Eric Storch, Ph.D

Current and Prior Interns – Academic Programs

2023-2024 PSYCHOLOGY INTERNS

Emory University
Georgia State University (2)
University of Alabama at Birmingham
University of Connecticut
University of Texas at Austin

2022-2023 PSYCHOLOGY INTERNS

Duke University
San Diego State University / UC San Diego
Texas A & M University
University of Alabama at Birmingham
University of Nevada – Las Vegas
University of Texas at Austin

2021-2022 PSYCHOLOGY INTERNS

Florida International University
Georgia State University
Oklahoma State University
University of Houston (2)

2020-2021 PSYCHOLOGY INTERNS

Northwestern University Medical School
Suffolk University
University of Houston
University of Pittsburgh

2019-2020 PSYCHOLOGY INTERNS

Eastern Michigan University
Georgia State University
Illinois Institute of Technology
Temple University
University of Florida

2018-2019 PSYCHOLOGY INTERNS

George Mason University
University of Central Florida
University of Connecticut
University of Houston
University of Nevada

2017-2018 PSYCHOLOGY INTERNS

Eastern Michigan University
University of Alabama at Birmingham (2)
University of Houston
University of Memphis

2016-2017 PSYCHOLOGY INTERNS

Rosalind Franklin University of Medicine
University of Cincinnati
University of Florida
University of Houston
University of Wisconsin

2015-2016 PSYCHOLOGY INTERNS

University of Houston
University of Massachusetts
University of Memphis
University of Texas at Austin
University of Windsor

2014-2015 PSYCHOLOGY INTERNS

Auburn University
Brigham Young University
Nova Southeastern University
University of Houston
Virginia Commonwealth University

2013-2014 PSYCHOLOGY INTERNS

Kent State University
Loyola University
University of Cincinnati
University of Houston
Virginia Tech University

2012-2013 PSYCHOLOGY INTERNS

Carlos Albizu University
Marquette University
Jackson State University
University of Florida
Virginia Commonwealth University

2011-2012 PSYCHOLOGY INTERNS

Southern Illinois University
Texas Tech University
University of Houston
University of Miami
University of Tennessee

2010-2011 PSYCHOLOGY INTERNS

Southern Methodist University
University of Houston
University of New Mexico
University of South Florida
University of Texas at Austin

2009-2010 PSYCHOLOGY INTERNS

American University
Kent State University
Purdue University
University of Cincinnati
University of Texas at Austin

2008-2009 PSYCHOLOGY INTERNS

Michigan State University
Purdue University
University of Connecticut
University of Florida
University of Houston

2007-2008 PSYCHOLOGY INTERNS

Indiana University/Purdue
Michigan State University
University of Cincinnati
University of Texas at Austin
University of Wisconsin

2006-2007 PSYCHOLOGY INTERNS

Brigham Young University
University of Kentucky
University of North Carolina

2005-2006 PSYCHOLOGY INTERNS

Texas A & M University
University of Houston
University of Minnesota