Program Description
Doctoral Internship in Psychology
Counseling Center
University of Maryland, Baltimore County (UMBC)

The University

The University of Maryland, Baltimore County (UMBC) is a state-run, co-educational university. Designated as an Honors University, the campus offers academically talented students a strong undergraduate liberal arts foundation that prepares them for graduate and professional study, entry into the workforce, and community service and leadership. The university has approximately 10,000 undergraduate students. An additional 3,000 students are enrolled in the university’s graduate programs which emphasize science, engineering, information technology, human services and public policy. UMBC’s student body is among the most diverse universities in the United States; minority enrollment is over 50%. About 16% of the student population is African or African-American, 18% Asian or Asian-American, and 6% Hispanic/Latino; about 3% are multiracial. Approximately 8% of students are international students. Fifty-four per cent of the student body identify as male (UMBC Office of Institutional Research, 2014-2015). The campus is located on 500 acres 15 minutes from Baltimore’s Inner Harbor and 30 minutes from Washington, D.C. BWI airport is five minutes away, as are Amtrak and light rail stations. UMBC Transit provides transportation to surrounding areas as well.

UMBC Non-Discrimination Policy Statement

UMBC does not discriminate on the basis of race, color, national origin, ancestry, ethnic background, genetics, disability, age, sex, gender identity and expression, marital status, sexual orientation, religion, creed, and/or veteran status in admission to and participation in education programs and activities, or employment practices in accordance with federal laws, including, but not limited to Titles VI and VII of the Civil Right Act, Title IX of the Education Amendments, Section 504 of the Rehabilitation Act, and the Americans with Disabilities Act as amended, as well as state laws, and regulations.

Counseling Center

The mission of the Counseling Center is to offer psychological services to UMBC students to enhance their personal growth, enrich their lives, and maximize their ability to function well academically. The Counseling Center further strives to contribute to the mental and emotional health of the campus community through consultation, outreach, training, and educational programs. Professional services include assessment, crisis intervention, individual counseling, group counseling, consultation, and outreach, including a variety of psycho-educational workshops (e.g., time management, stress management, procrastination, and test anxiety). Both personal and career concerns can be addressed. All counseling services are free and confidential.

The Counseling Center provides interns with the opportunity to gain experience working with a wide variety of presenting concerns and broad range of diagnoses. Presenting issues of students include problems with social relationships, depression, academic concerns, grief and loss, anxiety, stress, career concerns, sexual assault or abuse issues, eating disorders and related concerns, and drug and alcohol use/abuse. The student population offers the opportunity to work with clients from diverse cultural and ethnic backgrounds. In 2012-2013, about 14% of clients were African or African American, 14% Asian or Asian American, 3% Hispanic/ Latino, and about 8% were multi-racial. Approximately 6% of clients were international students. The Counseling Center is staffed by seven full time psychologists, a case
manager/social worker, and a part-time psychiatrist, and two administrative staff. In addition to the internship, an externship is also offered to doctoral psychology students. Staff members are currently licensed or license-eligible in MD and are actively involved in professional organizations. Staff work from a variety of theoretical orientations, including psychodynamic, interpersonal, humanistic, and cognitive-behavioral and emphasize integrating evidence-based practice.

The Internship Program

The Counseling Center at UMBC offers a Doctoral Internship in Professional Psychology to qualified students who are enrolled in APA-accredited doctoral programs in clinical and counseling psychology. The primary purpose of the internship program is to train practitioners who are interested in developing the competence and confidence to work as psychologists in a comprehensive university counseling center. Competencies developed in the program are also applicable to other counseling settings, such as outpatient mental health programs, employee assistance programs, and private practice. The training experience offers supervised practice of a broad range of professional skills, including assessment, short-term individual and group counseling, crisis intervention, outreach, consultation, supervision, and program development.

The internship program at the Counseling Center was developed in accordance with APA competency benchmarks and accepted its first cohort of two part-time interns in 2009. The program was accepted for membership in APPIC in 2011. In 2013, the Counseling Center became a full-time internship program, with two positions. Beginning with the 2015-2014 training year, three intern positions were offered. Staff members are excited about the growth of the internship, viewing the interactions with trainees as an integral part of keeping the Counseling Center a vibrant place of professional learning and development. The internship was accredited by the American Psychological Association for seven years in June, 2014. Questions related to the program’s accreditation status should be directed to:

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

Eligibility and Intern Selection

Applicants must be enrolled in an APA-accredited graduate program in Clinical or Counseling Psychology. Academic coursework and preparation must be in accordance with APA accreditation standards, and all required coursework must be completed prior to the start of internship in mid-July. To be considered for the internship, applicants should have passed their comprehensive examinations, successfully submitted their proposal for dissertation, and accrued a minimum of 500 intervention hours prior to submitting their application. The Counseling Center values diversity and encourages applicants of diverse ethnic, racial, religious, sexual orientation, and other backgrounds to apply.

Successful applicants have a strong interest in working with young adults and college student mental health, particularly within a highly multi-culturally diverse setting. They are typically interested in increasing their breadth of knowledge and clinical experience not only in individual and group counseling, but also in outreach, consultation, and supervision. Most have an interest in working in a university counseling center after graduation, although past interns have gone on to careers in other settings as well. It is strongly preferred that applicants have clinical experience in a college counseling
setting, although we will consider those with relevant experience if a strong case is made for why the applicant is interested in such an internship setting.

The Doctoral Internship program at the UMBC Counseling Center is a member of the Association of Psychology Postdoctoral and Internship Centers (APPIC) and participates in the APPIC National Match Process. All internship applications must be submitted via the on-line APPIC Applications for Psychology Internship (APPI On-line) system, available at www.appic.org (click on "APPI On-Line"). The program code for this internship is 208711. The deadline for application is November 1. Beginning in 2015, we ask that recommenders use the Standardized Letter of Reference (SLR) available on the AAPI website.

Applications are initially reviewed by at least two staff members (potentially including a current intern) who each assign an initial rating based on the applicant’s educational preparation, clinical experience, personal essays, and letters of recommendation. The Selection Committee will then narrow this down to approximately 25 applicants who seem to be the best match based on their training needs and interests and the Counseling Center’s training and clinical opportunities.

Applicants will be notified via email whether or not they will be offered an interview no later than December 15th. Interviews will be scheduled for the beginning of January; in-person interviews are strongly preferred, but phone or Skype interviews are available without prejudice. Interviews will last a half day (either a morning or afternoon session) and will include one-on-one interviews with the Training Director as well as two groups of staff members. All staff members are involved in the interview process unless they have an unavoidable scheduling conflict. Applicants will also interview with the current interns. A brief introductory meeting with all applicants and staff will be held at the beginning of the process, and a follow-up meeting with the Training Director will be held before applicants leave for the day. An optional tour of campus will be offered for those who are interested.

The Counseling Center abides by the APPIC policy that no person at this training facility will solicit, accept, or use any ranking-related information from any intern applicant.

Training Model and Philosophy

The Counseling Center operates from a Practitioner-Scholar model of training, emphasizing applying the knowledge that interns have gained from courses, seminars, research, and readings into their clinical work. The training program emphasizes (1) the importance of integrating theory and research into clinical practice, (2) developing advanced clinical skills, (3) the importance of attending to the intern’s developmental needs, and (4) the importance of teaching interns about professionalism and being a part of a multidisciplinary staff.

To achieve the goals of the internship, the program incorporates the following:

- Opportunities to learn through direct experience
- Seminars and other professional development programs to enhance the interns’ knowledge of the current literature and theoretical perspectives so as to integrate these into practice
- Opportunities to share work, discuss experiences, and teach others
- Opportunities to learn through listening to staff’s discussion of their clinical work
The internship works from a developmental perspective by assessing each individual intern’s entering skill level and working to expand skills beyond that. Training proceeds in a sequential fashion, allowing interns to gradually assume increasing levels of autonomy. Intern seminars are planned so that trainees are introduced in didactic form to topics that coincide with where they are in their developmental process. For example, introductory supervision seminars are offered before interns begin supervising practicum students; group therapy seminars are presented early in the interns’ training before groups are running and then again as the interns have had opportunities to co-lead groups. Prior to doing intakes, interns first learn about conducting intakes at the Counseling Center in a seminar format. They then observe intakes conducted by staff and gradually take on a more active role in subsequent intakes. Finally, staff observe interns conducting the intake independently, and then they will be permitted to conduct them on their own. Concomitantly, supervision of intakes is more intensive as the interns initially conduct their own intakes and decrease in intensity as interns become more experienced.

Counseling Center staff members strive to demonstrate through modeling that professional development extends well beyond the internship year. Staff and interns join together on a weekly basis for Case Consultation meetings to discuss their clinical work with students. Professional development programs for all clinical staff are offered throughout the year to enhance knowledge about specific topics particularly relevant to college students. Staff strive to demonstrate to interns that theory and research inform clinical work and that clinical work is enhanced through discussion and learning from the experience of others. Multicultural competency is stressed in all endeavors. Ethical and legal issues are addressed in seminars as well as within staff meetings and case conference times, where dilemmas that occur are often addressed.

Finally, the training program supports interns in developing teamwork and administrative skills. Interns are incorporated into staff meetings at the Counseling Center and meetings with other departments in the Division of Student Affairs. This inclusion allows for interns to truly experience the ins and outs of counseling center operations and the importance of working with the wider campus community.

Goals and Objectives of the Internship Program

**Goal I:** To Produce Graduates who have the Requisite Knowledge and Skills for the Independent Practice of Professional Psychology in a Counseling Setting

- **Objective 1:** To Prepare Interns as Practitioners who have Knowledge and Clinical Skills in Assessment
- **Objective 2:** To Prepare Interns as Practitioners who have Knowledge and Clinical Skills in Individual Therapy
- **Objective 3:** To Prepare Interns as Practitioners who have Knowledge and Clinical Skills in Group Therapy
- **Objective 4:** To Prepare Interns as Practitioners who have Knowledge and Clinical Skills in Crisis Intervention
- **Objective 5:** To Prepare Interns as Practitioners who have Knowledge and Skills in Outreach and Consultation
- **Objective 6:** To Prepare Interns as Practitioners who have Knowledge and Skills in Providing Clinical Supervision

**Goal II:** To Enhance the Development of Professional Identity as Psychologist

- **Objective 1:** To further promote interns’ knowledge of and adherence to Professional Behavior and Standards
- **Objective 2:** To prepare interns to engage in Ethical and Legal Professional Practices
- **Objective 3:** To enhance interns’ Commitment to Scholarship and Life-long Learning
Objective 4: To reinforce the value and importance of Supervision and Consultation
Objective 5: To facilitate the development of a professional identity that incorporates an Awareness of Self
Objective 6: To prepare interns with the knowledge, sensitivity, and clinical skills needed to work as a Multiculturally-Competent Professional

Components of the Internship

The internship training is highly experiential. Interns are expected to accrue a minimum of 500 hours of face-to-face direct clinical service. Approximately half of the intern’s hours are spent in direct service: intake, individual therapy, group therapy, crisis intervention, outreach, consultation, and supervision of externs or practicum students. Interns participate in staff meetings, case consultation meetings, and professional development to permit them opportunities to work collaboratively with the staff, seek feedback on their work, and become actively involved in the process of policy decision making. Interns witness staff’s work as they observe intakes, co-lead group therapy, and attend case conference. Mentorship is an important part of the intern’s experience. The wide variety of supervisory experiences enables interns to have individual contact with most, if not all, staff members. As such, the interns have a variety of mentors and role models.

A. Clinical training components:

1. **Assessment.** Interns conduct an average of three to four intake evaluations each week. Intakes form the basis for establishing rapport, clarification of client needs and goals, behavioral observation, diagnostic assessment, and treatment and disposition planning. The number of intakes will vary over the course of the internship to assist interns in building an initial caseload and to maintain a reasonable number of cases. In addition to intake evaluations, interns assess clients’ symptoms and progress during each session using standardized measures, such as the Behavioral Health Measure-20™ (BHM-20) College Counseling Version. Interns will have the opportunity to conduct alcohol and other drug (AOD) assessments using BASICS during the second half of the internship. Finally, opportunities for gaining experience with career and vocational assessment may also be available.

2. **Psychotherapy.** Psychotherapy is primarily with individual clients, although the intern may have the opportunity to conduct couples therapy depending on availability of such cases. Training will be based on a variety of theoretical approaches and evidence-based practice. The Counseling Center employs a short-term treatment model; however, interns may have the opportunity to carry one or two long-term clients. Interns are typically expected to see an average of 10-14 individual clients per week, although the number may be higher in times of peak demand and lower during winter and summer breaks.

3. **Group Therapy.** The Counseling Center offers a variety of therapy groups, including interpersonal process groups, population-specific support groups, and skill building groups. For the past three years, the Center has held two interpersonal process groups each semester. Other groups have included an LGBQ support group, dissertation support group, and a grief and loss group. Generally interns are expected to co-lead at least one interpersonal process group, with an option to co-lead one additional group. Interns are encouraged to develop a group in their own area of interest with the guidance of staff. However, developing and sustaining additional groups cannot be guaranteed.

4. **On-Call Crisis Intervention and Consultation.** Interns cover day-time emergency hours, which involves seeing walk-in clients requiring immediate clinical attention or consulting with faculty, staff, or family members. Interns begin the year working in conjunction with the on-call therapists, providing triage, conducting evaluations, crisis intervention, and consultations. After interns demonstrate
sufficient competence as assessed by their supervisor, they assume a more independent role in providing emergency services. Interns participate in the rotation of after-hours coverage by the middle of the internship year; back-up coverage will be provided. Supervision of the interns’ crisis intervention work will be provided by the staff psychologist providing backup. If additional supervision is needed, this will be provided by the intern’s primary supervisor, the Training Director, or the Director. Seminars on crisis management and consultation are offered prior to their undertaking this experience.

5. Outreach and Consultation. Interns are actively involved in the Center’s Outreach and Consultation Services to students, faculty, staff and others within the UMBC campus around mental health issues. Outreach activities may include training of residence hall assistants, participation in student and parent orientation programs, campus-wide mental health screenings, and topic-focused presentations and workshops. Program development and evaluation are integral parts of the outreach experience, and interns are expected to complete an Intern Project based on their interests. Consultation may also be provided to students, staff, faculty, parents, student groups, and other campus offices. In addition, interns are paired with a Community Director and meet monthly to provide consultation related to student mental health needs and concerns. Interns may have the opportunity to supervise externs or practicum students on the development and delivery of outreach.

6. Supervision of Externs. Interns have the opportunity to provide individual clinical supervision to an extern each semester. A series of seminars on supervision is offered early in the internship year. During the period of time when the intern is providing supervision, they attend weekly Supervision of Supervision with a senior staff member.

B. Evaluation Components:

1. Evaluation and Feedback to Interns. The Counseling Center recognizes the importance of interns receiving timely feedback regarding their progress and performance. Informal feedback is an integral part of supervision. Additionally, formal assessment of the interns’ progress will be made twice a year, in January and July. Interns are evaluated on all of the goals, objectives, and competencies for the internship. On the mid-year evaluation, interns must achieve an average rating of 3 out of 5 (“Satisfactorily Proficient”) on the Intern Evaluation form to maintain good standing and to progress through the program. Ratings of 1 (“Not Proficient”) or 2 (“Minimally Proficient”) will result in remediation efforts. By the end of the internship, interns are expected to achieve ratings of 3 out of 5 (“Satisfactorily Proficient”) on 95% of the items, with no ratings of 1 out of 5 (“Not Proficient”). In order to successfully pass the internship, the average score for each of the competencies and objectives must be a minimum of 3, which would indicate that the intern’s level of competency is “Satisfactorily Proficient” overall.

2. Evaluation and Feedback from Interns. As with feedback to interns, interns are encouraged to offer informal feedback about their supervisors, Training Director, and the internship program throughout the year. In addition, interns formally evaluate and provide feedback to their supervisors twice a year and the Training Director at the end of the internship. Interns will discuss these in meetings with the supervisor and Training Director. Interns evaluate and provide feedback on intern seminars. They also complete a formal evaluation on their overall internship experience at the end of the training year. Counseling Center staff are eager for and highly value constructive feedback in order to continually monitor the quality of the training program and make changes as needed.

C. Didactic, Supervision, and Administrative Components:
1. **Intern Seminar.** Interns will attend regularly-scheduled seminars that are designed to provide didactic and experiential opportunities to explore topics relevant to working in a university counseling center in greater detail. Senior staff as well as professionals from outside the Counseling Center provide these seminars. Interns will be expected to read and discuss professional references provided by the presenters. Typically seminars are offered weekly on Tuesdays from 8:30 a.m. to 10:00 a.m. However, during the summer and winter breaks, more than one seminar is offered each week. In contrast, during periods of high clinical demand, seminars will not be scheduled.

2. **Supervision.** Interns have four to five hours of supervision each week as follows:
   a. **Individual Supervision:** Each intern will have two hours of individual supervision per week to discuss individual therapy cases. Interns have a minimum of two different individual supervisors over the course of the internship.
   b. **Peer Supervision:** Interns meet as a group with a senior staff member for one hour weekly to discuss individual therapy cases. Interns will present cases and practice applying specific theories, diagnoses, and evidence-based practice to their work. Discussion is facilitated by the senior staff member, who will also model offering consultative feedback to the presenting intern.
   c. **Group Therapy Supervision:** Interns will meet individually with their group co-leader for each therapy group for one hour per week. Supervision is not held when groups are not being conducted.
   d. **Supervision of Supervision:** Interns meet together for one hour weekly with a senior staff member to discuss and get feedback on the interns’ supervision of practicum students/externs.
   e. **Outreach Supervision.** Interns will meet periodically with the Outreach Coordinator for supervision regarding their outreach presentations.

3. **Case Consultation Meeting.** During this weekly meeting, senior staff and interns have the opportunity to informally present new clients for the purpose of treatment and disposition planning as well as receive peer consultation for ongoing clients who are presenting a challenge.

4. **Professional Development Hour.** Senior staff and trainees meet weekly as a group for an hour for the purpose of furthering our professional development. Activities may include multicultural training, journal readings, outside presenters, and case conference. During case conference, clinical staff, including interns, offer an in-depth presentation on a therapy case for consultation and peer supervision. Interns present at least one case each semester, including clinical and didactic information based on one or more theoretical frameworks. In addition, interns are expected to provide peer supervision and other feedback to the staff member or trainee who presents a case.

5. **Case Management.** Interns are expected to conduct case management activities relevant to the clients with whom they are working. This activity includes writing intake reports, case notes, termination reports, and necessary correspondence. Interns also make referrals to and have contact with faculty, staff, administrators, other treatment professionals, and parents as appropriate. Interns work with their supervisors to conduct case management in an ethical and legal manner. They are responsible, along with their supervisors, for making sure that relevant documents are reviewed and counter-signed by a licensed clinician. Interns will complete paperwork in a timely and professional manner.

D. **Professional Development Components:**

1. **Professional Behavior and Standards.** Interns are expected to demonstrate behavior consistent with UMBC’s Staff Handbook and the Counseling Center’s Policy & Procedure Manual. These standards include taking responsibility for their schedules, meeting expectations of the work place, working cooperatively and courteously with others, representing the agency well, and demonstrating sensitivity to
diversity issues in their interactions within and outside the agency. Professional staff model these behaviors for interns and provide necessary instructive information and feedback regarding expected standards.

2. **Ethical and Legal Practices.** Interns are expected to be aware of and behave in a manner consistent with ethical standards established by the American Psychological Association. They must follow all Maryland state legal statutes regarding the practice of psychology. Interns receive training in ethical, legal, and professional standards through training seminars, supervision, and other professional development programs.

3. **Scholarly Activity.** Interns are expected to demonstrate a commitment to scholarly activity. They remain current with the scientific basis for practice in professional psychology through reading, intern seminars, supervision, and professional development programs. They demonstrate scholarly activity and competence by working to complete research requirements for their degree, participating in intern seminars, and practicing in a manner that is informed by theory and research. Interns are required to complete an Intern Project that is based on theory and research and serves to promote the mission of the Counseling Center. Program evaluation will be an essential component of the Intern Project.

4. **Supervision and Consultation.** Supervision and consultation are necessary components of effective clinical practice regardless of one’s level of training and experience. As described above, interns will receive both individual and group supervision by licensed staff members. They are also expected to provide peer supervision to other trainees and staff members in peer supervision meetings and case conferences. When dealing with clients in crisis, it is the expectation that interns will consult with on-call senior staff, their supervisor, the Training Director, and/or the Director of the Counseling Center, particularly as they build competency in crisis intervention.

5. **Awareness of Self.** Training staff at the Counseling Center value the power and complexity of the therapeutic relationship. Although Center staff and interns come from a variety of theoretical backgrounds, therapists’ awareness of themselves and their reactions to clients inform all our clinical work. Consequently, in our intervention, supervision, and training activities there is a focus on the “person-of-the-therapist” and how this may impact the quality and effectiveness of work with clients and consultees. Self-awareness is essential for therapists to provide accurate empathy and to ensure that therapists meet the ethical imperative to “do no harm”. Self-awareness minimizes the possibility that therapists will gratify their own needs at the expense of their clients.

The Counseling Center training program views supervision as a means for trainees to learn how to assess and intervene with clients as well as to recognize, understand, and manage their personal reactions to those under their care. We believe that the therapist’s response to the client “in the room” can be an important vehicle for understanding and helping the client. As such, an integral part of supervision is exploration of such issues. Interns are expected to explore and reflect upon their feelings and reactions to clients. Interns are encouraged, but not required, to participate in their own therapy to enhance their self-awareness and self-care.

6. **Multicultural Competency.** Staff and interns need to develop and maintain multicultural competency. A commitment to working with students from a multicultural perspective is particularly important given the diverse student population and staff at the Counseling Center. The multicultural competency component of the training program is designed to develop more intensive and comprehensive knowledge, understanding, and skills in working with students from diverse backgrounds and under-represented groups. Knowledge of, and sensitivity to, diversity issues are essential in all areas of practice and are included in didactic training seminars as well as in supervision, group work, and
outreach programming. As such, participation in the internship training program will not only involve increasing one’s skills and knowledge base with regard to multicultural competency, but will also involve some levels of self-disclosure as well as exploration, within the context of furthering personal awareness and professional development. Additionally, interns are expected to incorporate multicultural perspectives into supervision of practicum students, group therapy, outreach programming, and case conference.

Self-Disclosure Policy

At the Counseling Center, trainees are expected to reflect upon and share the ways that their own personal qualities, experiences, and reactions influence and are impacted by their clinical work in supervision and other training settings. Such exploration and disclosure is not intended to serve as psychotherapy for the trainee and is focused on enhancing self-awareness and professional development as related to the trainee’s clinical practice during the internship. Supervisors and other training staff are expected to explore relevant information in a respectful, non-coercive manner, within the context of a safe and supportive professional relationship. The staff believes that the decision as to how much or how little to share is a choice that needs to be made by the trainee. However, in accordance with APA Ethical Principle 7.04, the intern will be expected to share personal information “if the information is necessary to evaluate or obtain assistance for students (interns) whose personal problems could reasonably be judged to be preventing them from performing their training - or professionally related activities in a competent manner or posing a threat to the students or others.”

Also in accordance with APA Ethics Code, Section 7.05, it is important for trainees to be aware that the due process procedures for our training programs indicate that the staff may require trainees to obtain psychotherapy in those cases in which a trainee or his/her behavior is deemed problematic.

Internship Hours

At a minimum, interns are expected to be at the Counseling Center from 8:00 a.m. to 5:00 p.m. There will be times during the year when it is necessary that interns work additional evening or weekend hours. It is likely that interns will find that they need to work extra hours in order to keep up with administrative demands, particularly during peak client weeks during the Fall and Spring semesters. Interns are required to complete a total of at least 2000 hours, including a minimum of 500 hours of direct clinical service, which includes individual and group therapy, outreach, consultation, crisis intervention, and supervision of trainees. Interns who intend to accrue more than 2000 hours as required for licensure in other states can be readily accommodated.

Typical Intern Weekly Schedule

<table>
<thead>
<tr>
<th>Clinical Services</th>
<th>Hours per Week</th>
</tr>
</thead>
<tbody>
<tr>
<td>Counseling Services</td>
<td></td>
</tr>
<tr>
<td>• Intakes</td>
<td>4</td>
</tr>
<tr>
<td>• Individual Counseling/Therapy</td>
<td>10-14</td>
</tr>
<tr>
<td>• Group therapy</td>
<td>1.5</td>
</tr>
<tr>
<td>• Day-time On-Call</td>
<td>3</td>
</tr>
<tr>
<td>Other Clinical Services</td>
<td></td>
</tr>
<tr>
<td>• Outreach</td>
<td>1-2</td>
</tr>
<tr>
<td>• Consultation</td>
<td>0-1</td>
</tr>
<tr>
<td>• Supervision of Trainee</td>
<td>1</td>
</tr>
<tr>
<td>Total Clinical Service Hours</td>
<td>20-25</td>
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Professional Training and Development

<table>
<thead>
<tr>
<th>Supervision</th>
<th>.getHours</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Individual Supervision</td>
<td>2</td>
</tr>
<tr>
<td>• Group Supervision</td>
<td>1</td>
</tr>
<tr>
<td>• Group Therapy Supervision</td>
<td>1</td>
</tr>
<tr>
<td>• Supervision of Supervision</td>
<td>1.5</td>
</tr>
<tr>
<td>• Case Consultation Meeting</td>
<td>1</td>
</tr>
<tr>
<td>Total Supervision</td>
<td>6.5</td>
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<table>
<thead>
<tr>
<th>Professional Development</th>
<th>.getHours</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Professional Development Hour (e.g. Case Conference)</td>
<td>1</td>
</tr>
<tr>
<td>• Intern Seminar</td>
<td>1.5</td>
</tr>
<tr>
<td>• Reading Time</td>
<td>1-2</td>
</tr>
<tr>
<td>Total Professional Development</td>
<td>3.5-4.5</td>
</tr>
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</table>

| Total Professional Training and Development       | 10 - 11   |

<table>
<thead>
<tr>
<th>Administrative Activities</th>
<th>.getHours</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Staff Meeting</td>
<td>1</td>
</tr>
<tr>
<td>• Case Management/Note Writing</td>
<td>5</td>
</tr>
<tr>
<td>• Supervision Administrative Tasks (weekly logs, note review)</td>
<td>2</td>
</tr>
<tr>
<td>• Review of session recordings (intern’s and externs)</td>
<td>1-2</td>
</tr>
<tr>
<td>• Outreach Preparation</td>
<td>0-2</td>
</tr>
<tr>
<td>• Other Projects (more during Summer and Winter breaks)</td>
<td>Varies</td>
</tr>
<tr>
<td>Total Administrative Activities</td>
<td>9-10+</td>
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</tbody>
</table>

| Total Weekly Hours                                | 40+       |

Compensation and Benefits

The internship is scheduled to begin on the third Monday in July and end on the Friday of the second week of July the following year. The current internship stipend is $24,500. Interns will have the status of Contingent I employees. Given this status, interns are not eligible for State benefits. However, they are eligible to purchase employer-subsidized health and dental insurance through UMBC. Interns are able to purchase a staff parking pass (for a yearly fee paid in advance) and have access to library and recreation facilities. Leave benefits include 14 University-recognized holidays; some of these holidays must be taken during the week between Christmas and New Year’s, when the university is closed. Interns are eligible for 10 days of vacation and 5 sick days; however, it is expected that interns save 5 vacation days for the final week of the internship. Administrative leave will be granted whenever UMBC is closed for inclement weather conditions or other reasons. Interns will be exempted from any furlough days and will receive administrative time to cover related time out. Up to 5 days of professional leave to attend conferences, complete dissertation work, and/or to attend job interviews may be granted in consultation with, and at the discretion of, the Training Director and the Director of the Counseling Center. All decisions regarding leave will take into account progress towards meeting the requirements for clinical (500) and total hours (2000) necessary for successful completion of the internship.

Interns are provided with their own office, which includes a desk and office chair, two therapy chairs, file cabinet, and book case. They are provided with an office telephone with a UMBC voicemail account as well as a personal computer, which has the capacity for video-recording. Thumb drives are provided to store video-recorded sessions. Administrative assistance is available for scheduling appointments.

Successful Completion of the Internship
Successful of the internship will be dependent on a number of factors, including accruing a sufficient number of clinical (500) and total (2000) hours to meet thresholds for licensure in most states. Although designed as a one-year internship, all hours must be completed within two years. In addition, interns need to achieve ratings of 3 out of 5 (“Satisfactorily Proficient”) on 95% of items on the end-of-the-year Intern Evaluation with no ratings of 1 out of 5 (“Not Proficient”). Accruing a minimum of 80 outreach hours, co-leading at least one therapy group, presenting two case conferences, and actively participating in meetings, seminars, and supervision are required. In addition, interns are required to complete an Intern Project. There can be no ethical or legal breaches. Finally, the internship will not be considered complete until all paperwork is completed and signed by supervisors.

Counseling Center Clinical Staff

**Doha Chibani-Talaat, MSW, LCSW-C. Case Manager.** Ms. Chibani-Talaat is a magna cum laude undergraduate alumna of UMBC’s psychology program. She went on to graduate with a Master's in clinical social work from the University Of Maryland Baltimore. Prior to joining the Counseling Center, Ms. Chibani-Talaat provided therapeutic services to individuals on the Autism Spectrum, refugees, survivors of torture and trauma as well as victims of sexual abuse. In addition to clinical practice, she spent several years involved in mental health and social service research. Ms. Chibani-Talaat espouses an integrative approach to therapy that incorporates trauma focused cognitive behavioral, developmental and existential components within a solution focused brief model. She has a strong interest in supporting the multicultural and international students, the transfer, commuter and non-traditional returning student body, as well as the LGBTQ population. She is fluent in English, Arabic and French.

**Susan Han, Ph.D., Outreach Coordinator.** Dr. Han graduated from Yale University and earned her doctoral degree in Clinical Psychology from George Mason University. She completed her Doctoral internship at the University of Michigan Counseling Center and a post-internship residency year at Cornell University's Counseling and Psychological Services. She became licensed as a Psychologist by the State of Maryland in 2013. Dr. Han draws upon Cognitive-Behavioral and Humanistic theories in her approach to therapy. Her special interests include cross-cultural counseling, multicultural identity development, and the college adjustment process.

**Bruce Herman, Ph.D., Director.** Dr. Herman graduated from Cornell University with a degree in Industrial and Labor Relations. He obtained his Ph.D. in Counseling Psychology from the University of Illinois at Champaign-Urbana. He came to UMBC in July 2012. Before coming to UMBC, he worked at Towson University Counseling Center from 1999-2012. From 1991-1998 Dr. Herman worked as a Psychologist at Loyola College in Maryland. Dr. Herman has taught in the Psychology and/or Education Departments at Towson University, Loyola College and University of Illinois. For many years, he also maintained a private psychotherapy practice. He led the Towson University Suicide Prevention Program and obtained grant support from the Substance Abuse and Mental Health Administration Garret Lee Smith Suicide Prevention Grant. He is interested in the integration of mindfulness in psychotherapy, campus suicide prevention and mental health promotion, and interpersonal psychotherapy.

**Melissa Lean, Psy.D. Staff Psychologist.** Dr. Lean graduated from the George Washington University in Washington, DC where she earned her Psy.D. in Clinical Psychology. She completed her doctoral internship at the UMBC Counseling Center and has previous experience working in community mental health settings. Her clinical interests include the college adjustment process, interpersonal relationship concerns, identity development, and the impact of technology and media on psychological well-being and services. Dr. Lean is also passionate about mental health advocacy and outreach geared toward emerging adult populations. She is integrative in her therapeutic work, drawing primarily upon psychodynamic and attachment and humanistic theories.
Alexis Melville, Psy.D. Staff Psychologist/Multicultural Coordinator. Dr. Melville graduated from Nova Southeastern University in Ft. Lauderdale Florida and earned her doctoral degree in Clinical Psychology. She completed her internship at the University of Akron and her post-doctoral residency at Loyola University of Maryland. In addition, to her experiences at university counseling centers, Dr. Melville’s previous clinical experiences include working in community mental health settings and hospitals providing therapy and assessments. Dr. Melville uses an integrative approach in therapy which include mindfulness-based, cognitive-behavioral and multicultural perspectives. Her special interests include risk and protective factors within the college population, multicultural and identity concerns, family of origin concerns and substance use within college populations.

Bruce Regan, M.D., Consulting Psychiatrist. Dr. Regan graduated from Harvard University with a degree in Social Relations and the University of Maryland Medical School with a medical degree. Dr. Regan is Board Certified in Psychiatry and Neurology and is a Distinguished Fellow of the American Psychiatric Association. He has held positions as Assistant Professor at UMAB, staff psychiatrist at the Baltimore VA Hospital, Psychiatric Residency Training Director for the Maryland Mental Hygiene Administration, Acting Clinical Director of Springfield Hospital Center, Superintendent of Spring Grove Hospital Center, Medical Director of Queen Anne’s County Mental Health Center and Medical Director at Way Station, Inc. Throughout his career he has maintained a private practice.

Kristin Sagun, Ph.D., Clinical Services Coordinator. Dr. Sagun is a licensed psychologist who graduated from Temple University with a Ph.D. in counseling psychology. She completed her doctoral internship at the Johns Hopkins University Counseling Center and a post-doctoral fellowship at the Center for Eating Disorders at Sheppard Pratt Hospital in Baltimore. In addition to her training and professional experiences in college counseling at a variety of institutions, Dr. Sagun has experience working in other college student affairs settings such as residential life, disability services, and health promotion. Dr. Sagun maintains an integrative orientation towards therapy that utilizes a humanistic, cognitive-behavioral, and psychodynamic foundation. Her special interests include college adjustment, group counseling, anxiety issues, LGBT identity development, and working with student athletes.

Emilie Stuber-Lawson Psy.D., Group Coordinator. Dr. Stuber-Lawson earned her Bachelor’s degree from Loyola University Maryland and received her doctoral degree in Clinical Psychology from the George Washington University. She completed her doctoral internship at The Counseling Center at UMBC and became licensed as a Psychologist by the State of Maryland in 2013. In addition to previous clinical experience in university counseling centers, she has worked in private practice and community mental health settings. Dr. Stuber-Lawson works primarily from a psychodynamic foundation, and her special interests include identity development, relationship struggles, and mood disorders.

Patricia L. Wick, Ph.D., Assistant Director/Training Director. Dr. Wick graduated from the State University of New York, Stony Brook with a Bachelor’s Degree in Psychology, with a minor in Child and Family Studies. She received her doctorate in Clinical Psychology from the University of Miami (FL) after completing a doctoral internship at Taylor Manor Hospital. She completed a post-doctoral fellowship in Eating and Affective Disorders at the Sheppard and Enoch Pratt Hospital. She has been licensed in the state of Maryland since 1991 and has worked in out-patient, in-patient, clinic, government, and academic settings. She has maintained a private practice since 1992. Dr. Wick is integrative in her work, with specific emphases on psychodynamic, interpersonal, and family systems approaches. She has interests in training and supervision, mood and anxiety disorders, eating disorders, trauma (particularly sexual assault and relationship violence), and women’s issues.