

University of Arkansas for
Medical Sciences
Doctoral Internship
in Clinical Psychology

2021-2022
Training Year

UAMS[®]

| Psychiatric
| Research Institute

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Little Rock

Little Rock is a scenic city sitting on the south bank of the Arkansas River in Central Arkansas. It is the capital and most populous city in Arkansas with a 2019 population estimate of 197,000, though the Little Rock metropolitan area is ranked 78th in terms of population with approximately 740,000 residents. The size of Little Rock and surrounding area not only gives its residents a feeling of living in a large city with many amenities accessible to them but also provides a small town feel with quiet shops and family-friendly neighborhoods. In fact, in 2014 Little Rock was ranked #1 in “America’s 10 Great Places to Live” by *Kiplinger Personal Finance* magazine.



University of Arkansas for Medical Sciences

The University of Arkansas for Medical Sciences (UAMS) is Arkansas’ only comprehensive academic health center. It is the largest public employer in the state with more than 10,000 employees in 73 of Arkansas’ 75 counties and a regional campus in Northwest Arkansas. UAMS offers 64 baccalaureate, master’s, doctoral, professional, and specialist degree programs and certificates through their Colleges of Medicine, Nursing, Pharmacy, Health Professions, Public Health, and graduate school. UAMS also is home to seven institutes where specialized clinical care and research are conducted, including the Winthrop P. Rockefeller Cancer Institute, Harvey &



Bernice Jones Eye Institute, Myeloma Institute, Donald W. Reynolds Institute on Aging, Jackson T. Stephens Spine & Neurosciences Institute, Translational Research Institute, and the Psychiatric Research Institute. UAMS and its clinical affiliates, Arkansas Children’s Hospital and the VA Medical Center, are an economic engine for the state with an annual economic impact of \$3.92 billion. Due to its wide ranging influence, UAMS is impacting the health care of Arkansans now and in the future.



The Psychiatric Research Institute (PRI) is a state-of-the-art facility that is dedicated to improving the mental health and well-being of residents in Little Rock, the state of Arkansas, and the country through evidence-based treatment, innovative research, and quality training and education. Clinical programs are dedicated to treating children, adolescents, and adults through a variety of outpatient clinics and inpatient programs, including the Walker Family Clinic, Child Study Center, Center for Addiction Services and Treatment, Women's Mental Health Program, and STRIVE, a school-based community outreach program.

In addition to clinical care of psychiatric disorders, research and education are integral to the overall approach of PRI. The institute's focus on evidence-based care takes into consideration the education of future medical personnel while relying on the work of research scientists to provide innovative forms of treatment. The PRI has three research divisions: Center for Addiction Research, Center for Health Services Research, and Brain Imaging Research Center. Educational programs include an APA-accredited doctoral clinical psychology internship, child and adolescent psychology and neuropsychology fellowships, general psychiatry residency, and fellowships in child and adolescent, forensic, addiction, and geriatric psychiatry.

Doctoral Internship in Clinical Psychology

Overview

The UAMS Department of Psychiatry Internship Training Program in Clinical Psychology is accredited by the American Psychological Association (APA) and offers training through a Child-Focused Track (Program Code # 110611), Adult-Focused Track (Program Code # 110612) and Neuropsychology Track (Program Code # 110613).

Our 2080-hour clinical psychology internship is designed to provide interns with a broad and general training experience in basic principles and techniques of professional psychology. Interns work with caring and conscientious supervisors who carefully consider the intern's training experiences, career goals, strengths, and needs in order to develop the most appropriate and effective training experience.

The internship is one of the training programs of the Department of Psychiatry in the UAMS College of Medicine and has multiple training sites:

- UAMS Child Study Center (general outpatient clinic for children)
- UAMS Child Diagnostic Unit (psychiatric inpatient unit for children)
- UAMS Walker Family Clinic (general outpatient clinic for adults)
- UAMS Student Wellness Program (general outpatient clinic for UAMS students)
- UAMS Women's Mental Health Clinic (outpatient clinic for pregnant or postpartum women)
- Pulaski County Regional Crisis Stabilization Unit (short-stay residential unit for adults)
- ACH Burn Unit and Clinic for Adults (integrated specialty care team)
- Hawkins Unit at Wrightsville Prison (women's prison)

The internship training year is July 1 through June 30 of each year.

History

The UAMS clinical psychology internship program was first established in 1961 and was given full accreditation by APA in 1967. The internship developed a child and adolescent focus in 1979 following a site visit. The internship added an adult-focused track beginning with the 2009-2010 training year and a neuropsychology track beginning with the 2017-2018 training year. Most recently, in 2018 APA approved continued accreditation of the internship for the next 10 years.

Mission

The mission of our psychology training program is to provide quality training and practice experience in an environment centered on cultural humility, providing our community with

equitable access to evidence-based behavioral health services. Therefore, we seek to recruit and train doctoral interns and fellows who reflect the community in which we serve and share our values of diversity, equity, and inclusion. We strive to prepare culturally responsive trainees for competent, ethical, and socially relevant practice as early career psychologists.

Training Philosophy

Our training philosophy is based on a set of core values that inform our training and service-related activities. These include the following guiding principles:

Nurturance. Training occurs in a nurturing, supportive atmosphere in which it is viewed as a valued priority which is not compromised by financial, political, or other considerations. Training staff are accessible to interns, serve as good role models and mentors, and promote the professional growth of trainees.

Increasing Autonomy. Training facilitates interns' acquisition of gradually increasing competence and confidence in the independent provision of professional psychological services.

Individualization. Training methods and activities are tailored to address specific training strengths, weaknesses, needs, and goals of interns.

Respect for Diversity. Training is sensitive and responsive to the individual and cultural diversity of human experience, both of psychology trainees and of the patients they serve.

Collaboration. Training prepares interns to work cooperatively with other health care professionals and other interested parties (e.g., family members, school personnel) in serving their patients. Training is enhanced by collegial partnerships with affiliated institutions and programs in the community.

Evidence-Based Practice. Training prepares interns to apply scientific principles and knowledge to the provision of professional psychological services.

Accountability. Training prepares interns to meet quality of care standards of the profession of psychology. Training satisfies program accreditation requirements and provides evidence of continuous improvement in training processes and outcomes incorporating the needs and concerns of psychology trainees, patients, their families, and the community.

Training Goals

We value a scientist practitioner training model in which our emphasis is on developing professional psychologists who provide culturally attuned clinical services to children, adolescents, adults, and families, while working within the community context of each person. Our goal is to foster the professional and personal development and growth of interns from trainee to early career professional through a junior colleague model. As such, at the completion of the program, interns will be able to demonstrate competency in formal and informal assessment procedures, a variety of treatment approaches, and a strong experience base in consultation and

multidisciplinary teamwork. They will be able to provide these services to a diverse population that varies by age, gender, gender identity, race, ethnicity, national origin, socioeconomic status, religion, sexual orientation, disability, and language.

To meet these goals, we support interns in developing skills to obtain competency in the following domains:

Domain 1: Research and Evaluation: Interns will conduct research that contributes to the professional knowledge base and/or evaluation that assesses the effectiveness of professional activities:

Competency Domain 2: Standards and Policies. Interns will understand, apply, and adhere to ethical, legal, professional, and organizational standards, guidelines, regulations, and policies regarding professional activities.

Competency Domain 3: Individual and Cultural Diversity. Interns will work effectively with diverse individuals, groups, organizations, and communities representing various cultural backgrounds, including those based on age, gender, gender identity, race, ethnicity, national origin, socioeconomic status, religion, sexual orientation, disability, and language.

Competency Domain 4: Professionalism. Interns will behave in a manner consistent with professional values, ethics, and norms.

Competency Domain 5: Relationships. Interns will interact effectively, collaboratively, and productively with individuals, groups, organizations, and communities.

Competency Domain 6: Assessment. Interns will conduct psychological assessment, diagnosis, case conceptualization, and communication of findings and recommendations.

Competency Domain 7: Intervention. Interns will select, plan, implement, and evaluate interventions to improve psychosocial functioning of individuals, groups, and/or organizations.

Competency Domain 8: Supervision. Interns will receive and provide supervision of professional activities through direct or simulated practice.

Competency Domain 9: Consultation and Interdisciplinary Systems. Interns will work effectively, collaboratively, and systematically toward shared goals with professionals from other disciplines.

Training Methods

Orientation. During the first several weeks of the training year, interns participate in a period of orientation in which clinical supervisors provide overviews of their rotations so interns have the general knowledge essential to their rotation activities. Our program takes a scaffolding approach to training in which interns frequently observe their clinical supervisors during the provision of clinical services at the beginning of the rotation. They then subsequently are observed by the

supervisor during clinical encounters and provided with constructive feedback with the goal of interns providing clinical service as a relatively independent clinician, with continued supervision.

Clinical Supervision. Depending on the rotation, either group or individual supervision is provided weekly by the rotation supervisors. Interns have at least 2 hours of individual, face-to-face supervision each week with supervisors, but frequently have 5-6 total hours of supervision per week across rotations. Our program also encourages continuous informal supervision by means of an “open door” arrangement whereby interns can request and receive immediate consultation or supervision when significant clinical or training issues arise. These drop-in interactions are welcomed by faculty and function to increase the intern’s comfort with consulting with peers and colleagues.

Primary Supervision. Each intern is matched with a primary supervisor for the training year and meets at least monthly with this person. The supervisor acts as the intern’s advocate and personal advisor. During primary supervision, interns and supervisors often discuss the intern’s experiences across rotations, life after internship, professional development interests and goals, work-life balance, etc.

Specialty Trainings. Depending on the internship track and rotation, interns have the opportunity to attend trainings on specialized treatment intervention and assessment practices from state, regional, and nationally certified trainers.

Didactic Seminar Series. Weekly seminars designed to meet the training needs of the interns in the program feature presentations by training faculty and other professionals from UAMS and the local community. Didactics are scheduled from 4:00pm to 5:30pm weekly on Wednesday afternoon and are divided into several series of training topics and activities.

Profession-Wide Competency Series. This series of presentations cover competences developed by APA to help doctoral interns prepare for the practice of health service psychology.

Cultural Humility Curriculum. The overall goal of this curriculum is to help each psychology intern make progress toward being a psychologist who exhibits cultural humility in clinical practice, teaching and mentoring, and/or research. The baseline knowledge, attitudes, and skills for each intern will vary, and thus, the growth and end-of-internship progress will be different for each intern. This course provides a variety of teaching modalities to enhance cross-cutting knowledge, attitudes, and skills related to cultural humility. The format involves in-person lectures, process-oriented group discussions, journaling activities, assigned readings, and experiential activities. Although the overall goal of the course is not explicitly to enhance social justice—that is, the social advocacy of a psychologist to create equity in our society—it is possible that certain interns, instructors, or experiences may gravitate toward social justice. This is welcomed and encouraged.

Specialty Seminar Series. Interns participate in discussions related to professional topics, such as careers in clinical psychology (e.g., research, clinical, administration), applying to

postdoctoral fellowships, preparing for the EPPP, and working alongside other clinical or medical specialties in the hospital (e.g., psychiatry, neurology, social work). Finally, interns each conduct a clinical case presentation or a research job talk, depending on their career interests.

Grand Rounds and Conferences. Interns also have the opportunity to attend the bimonthly Department of Psychiatry Grand Rounds and Case Conferences to stay current on clinical practices and research outcomes to increase and improve their knowledge, competence, performance, and patient outcomes. Interns also have access to the many grand rounds, symposia, and seminars that are offered within other UAMS departments (Pediatrics, Neurology) and colleges (College of Public Health).

Arkansas Psychological Association Fall Conference. Interns attend the annual 2-day fall conference held in Little Rock to learn from state and national experts on a variety of topics and network with other psychologists in the state. Interns also have the opportunity to conduct poster and oral presentations at the conference.

Overview

The goal of this track is to provide interns with specialized training in the evaluation and treatment of traumatic stress in children and adolescents using evidence-based assessment and intervention models. The track offers interns training opportunities in the following outpatient and inpatient settings, all of which offer significant opportunity to work with underserved populations:

- Child Study Center (general outpatient clinic for children)
- Child Diagnostic Unit (psychiatric inpatient unit for children)
- Walker Family Clinic (general outpatient clinic for adults)

Interns receive year-long training in the treatment of young children with behavior problems; infants, toddlers, preschoolers, school-age children, and adolescents with traumatic stress; and adults with a wide range of disorders. Interns also conduct psychological evaluations with children and adolescents with a broad range of difficulties in outpatient and inpatient settings for the entirety of the training year. In addition, interns are offered an elective 6-month research rotation. Theoretical orientations of faculty include behavioral, cognitive behavioral, social learning, and interpersonal.

Interns will have the opportunity to work with patients across a wide range of clinical settings serving diverse populations in regards age, gender, gender identity, race, ethnicity, national origin, socioeconomic status, religion, sexual orientation, disability, and language. As such, intern applicants who demonstrate experience and interest in working with diverse populations are desired.

Child Study Center

Overview of Setting: The Child Study Center has been offering mental health services to children and families since 1955. This center is a major program within the Division of Child and Adolescent Psychiatry and serves children and adolescents from birth through age 17 and their families. The clinic attracts patients from throughout the state for psychotherapy and psychological evaluation services, although the majority of patients are from the Central Arkansas region. The patient population for the clinic generally reflects the racial and ethnic breakdown of the Little Rock metropolitan area. Socioeconomic status also is diverse; however, the majority of clientele come from lower income homes. Staff at the Child Study Center includes psychologists, doctoral psychology interns and postdoctoral fellows, psychiatrists, psychiatry residents and fellows, licensed clinical social workers, licensed professional counselors, and nursing.

Patient Population: The Child Study Center serves infants, toddlers, preschoolers, school-age children, and adolescents representing the full range of problems normally presenting to an outpatient clinic. Typical referrals include traumatic stress, ADHD, disruptive behavior, depression, and anxiety. Due to our statewide referral base, rarer cases such as bipolar disorder, psychosis, and selective mutism are referred to the clinic as well. Although interns may gain

experience in working with youth of all ages, interns mostly commonly work with preschool or school-age youth. Similarly, although patient presenting concerns vary within the clinic, the interns typically will focus on treating posttraumatic stress and disruptive behaviors.

Core Training Opportunities: During the 12-month rotation, interns implement evidence-based specialty interventions for youth experiencing traumatic stress or young children exhibiting behavior problems. In addition, they conduct diagnostic (intake) assessment for new patients referred to the clinic and provide psychological evaluations for a wide range of presenting problems across the age range. Furthermore, interns may also gain experience in implementing treatment interventions via telepsychology.

Trauma-Focused Cognitive Behavioral Therapy (TF-CBT). Interns provide TF-CBT with youth ages 3 through 17 who are experiencing mood, anxiety, and/or behavioral problems as a result of traumatic stress. Children and adolescents seen during this rotation often have experienced maltreatment, witnessed domestic violence, resided in foster care, and/or experienced other traumatic events such as natural disasters, medical procedures, or death of loved ones. Interns often gain experience working with professionals who are a part of the Division of Child and Family Services (DCFS) and child dependency courts, including case workers, guardians ad litem, attorneys, court appointed special advocates, and judges. In addition, interns may have the opportunity to implement an evidence-based treatment for preschool and school-aged children who have developed problematic sexual behaviors as a result of trauma exposure. Dr. Vanderzee and Ms. Hamman have completed the Train-the-Consultant or Train-the-Supervisor programs offered by TF-CBT developers and supervise interns weekly in both individual and group supervision modalities. By the end of internship, interns typically will have made significant progress towards meeting the national certification requirements for TF-CBT.

Child-Parent Psychotherapy (CPP). Interns conduct CPP for children birth through age 5 who have experienced trauma and are currently exhibiting posttraumatic, behavior, emotional, or attachment-related difficulties. This evidence-based, dyadic treatment focuses on strengthening the parent-child relationship, enhancing safe parenting practices, and providing caregivers and children an opportunity to process trauma. One important aspect of CPP is the frequent work with multiple caregiver-child dyads for the same patient (e.g., work with both foster parent/child and biological parent/child dyads) as well as the inclusion of “offending caregivers” that are not routinely included within other trauma treatments. Interns often gain experience working with professionals who are a part of our state’s Safe Babies Court Teams (SBCT) or who are involved with the child welfare system, including case workers, guardians ad litem, attorneys, court appointed special advocates, and judges. Interns will gain hands-on experience with preparing documentation and participating in court teams. There may also be opportunities to testify within court proceedings. They also gain exposure and practice with a reflective supervision model in which they are able to process their own cases and contribute to the reflective growth of their colleagues. Dr. John is a certified CPP state trainer and provides weekly reflective supervision to the interns in group and individual formats. By the end of internship, interns are able to make significant progress towards meeting the national rostering criteria for CPP.

Parent-Child Interaction Therapy (PCIT). Interns are able to obtain training in PCIT, a treatment for children ages 2 through 6 who exhibit disruptive and oppositional behavior. PCIT is an evidence-based, dyadic treatment that results in a stronger relationship between caregivers and children and use of more effective and appropriate caregiver disciplinary strategies. Interns typically first observe supervising psychologists conduct PCIT with several patients before transitioning to being a co-therapist with the psychologist, though supervisors tailor the training for interns who have previous experience with the model. For example, interns who meet national therapist certification before internship have the option to complete Level 1 training during the training year. Dr. Pemberton (Level 2 trainer) and Dr. Mesman (Level 1 trainer) provide live supervision with the interns as they conduct the sessions. Dr. Pemberton meets the interns weekly for group supervision as well. By the end of internship, interns will have made significant progress towards meeting the national therapist/Level 1 certification requirements as set for by PCIT International.

Psychological Evaluations. In addition to psychotherapy experiences, interns also provide psychological evaluations to children and adolescents with a broad range of presenting issues, including ADHD, learning difficulties, traumatic stress, anxiety, mood problems, autism spectrum disorder, and disruptive behaviors. Referral questions often include diagnostic clarification, assessment of level of functioning, and treatment planning. Interns gain experience in clinical interviewing; administration, scoring, and interpretation of psychological tests and measures; formulation of diagnostic impressions and recommendations for intervention; and oral and written communication of assessment findings. Typical psychological testing instruments include tests of intelligence, achievement, adaptive functioning, executive functioning, attention, and memory, as well rating forms and diagnostic interviews assessing emotional and behavioral disorders. Dr. Mesman meets weekly with the interns for group supervision.

Other Training Opportunities.

Complex Trauma Assessment Program. Interns may also have the opportunity to conduct psychological evaluations through the Complex Trauma Assessment Program. The goal of the program is to provide comprehensive, trauma-informed assessments for children ages 3-18 in the foster care system who have a history of chronic interpersonal maltreatment and exhibit serious clinical symptoms. Additional complexities of psychiatric medication use, acute and residential hospitalizations, disrupted placements, and/or previous diagnoses of attachment-related concerns are frequently present. Evaluators conduct these evaluations to clarify diagnoses, assess level of functioning, and provide recommendations related to level of care needed and specific services indicated. Multiple domains of functioning are assessed through administration of psychological tests and measures; clinical and diagnostic interviews with patients, caregivers, and caseworkers; behavior observation; record review; and consultation with other pertinent parties (e.g., teachers, therapists). Results lead to recommendations for evidence-based treatments, assistance for other professionals in care coordination, and a framework to aid caregivers in making informed decisions about the care of the child. Dr. Mesman meets weekly with the interns for group supervision.

Walker Family Clinic

Overview of Setting. The Walker Family Clinic has been offering mental health services to young adults, adults, and geriatric populations since 2008. This outpatient clinic serves the referral needs for inpatient units and UAMS outpatient clinical programs. The patient population for the clinic generally reflects the racial and ethnic breakdown of the Little Rock metropolitan area. Socioeconomic status also is diverse; however, the majority of clientele come from lower income homes. Staff include psychologists, doctoral psychology interns, psychiatrists, psychiatry residents and fellows, licensed clinical social workers, social work interns, licensed professional counselors, and nurse practitioners.

Patient Population. The Walker Family Clinic services adults with a wide range of clinical diagnoses, including trauma and stress-related disorders, depression, bipolar disorder, anxiety disorders, somatization and conversion disorders, psychotic disorders, personality disorders, and substance use. Many of these individuals have co-occurring chronic health issues such as pain, migraines, diabetes, hypertension, gastrointestinal issues, sleep problems, and neurologic disorders.

Core Training Opportunities. Interns complete a 12-month rotation in which they conduct Dialectical Behavior Therapy (DBT) in a group format for adults with emotional dysregulation and interpersonal difficulties. They co-lead these 1.5 hour, weekly groups with the rotation's supervisor, who is present for the duration of the group. Interns have the opportunity to see individual DBT clients as well, depending on risk level. This is not a requirement of the rotation, and it may not be available depending on risk level, caseload capacity, or scheduling. There is no "on-call" facet of this rotation (i.e., coaching calls are not currently a part of the DBT rotation; however, this is subject to change). Interns participate in an intensive DBT training with national expert, Dr. Sara Landes, in the modality before beginning this rotation. This rotation is an excellent fit for interns who are unfamiliar with DBT but interested in gaining more experience, as well as interns who have provided DBT in individual or group formats previously.

Supervision: Interns meet weekly for a half-hour group supervision dedicated to the DBT group with fellow interns on the rotation. As part of the DBT rotation, interns also participate in a one-hour weekly DBT Consultation Team Meeting. This meeting is used to staff both individual and group DBT cases and follows the typical agenda of a DBT Consultation Team Meeting. Additionally, they meet for one-hour of group supervision with other interns weekly to discuss individual therapy patients in the clinic. All supervision and consultation experiences occur with Dr. Everett.

Child Diagnostic Unit

Overview of Setting. The Child Diagnostic Unit is a psychiatric inpatient unit that provides services for children ages 2 to 12 who are in need of diagnostic clarification due to the complexity, frequency, severity, and intensity of their symptoms, as well as the functional impact they have on the child and their family. Many of the children have been psychiatrically hospitalized multiple times and are poorly understood by outpatient providers, schools, and their families. The inpatient unit has 10 beds.

The mission of the unit is to provide child and family centered care in a collaborative, compassionate, and trauma sensitive manner to establish clarification of diagnoses and development of appropriate treatment planning for the child. An interdisciplinary approach is utilized relying on specialists in child psychiatry, psychology, social work, occupational therapy, speech and language, education, and nursing. The milieu model used on the unit is Collaborative Problem Solving (CPS). The basic premise of CPS is “Kids do well if they can” and it is the job of clinicians, including psychology interns, to assist in identifying the cognitive lagging skills that interfere with the child’s ability to meet expectations. (e.g., executive functioning deficits, emotion regulation). Other key components of CPS include identifying unsolved problems and working collaboratively with children to solve these problems.

Patient Population. Children present with a variety of symptoms, including verbal and physical aggression, disruptive behaviors, irritability, mood lability, extreme inflexibility, and significant noncompliance. Diagnoses frequently include ADHD and other disruptive behavior disorders, mood and anxiety disorders, autism spectrum disorder, and traumatic stress. Children also present with developmental delays and sensory difficulties.

Core Training Opportunities. During their 12-month rotation interns conduct comprehensive psychological evaluations for the children on the unit, which includes administering tests of intelligence, academic achievement, adaptive functioning, and behavior rating forms; conducting clinical interviews; engaging in behavioral observations; and reviewing clinical records.

Other Training Opportunities. Each intern has the opportunity to participate in the unit’s interdisciplinary treatment team meetings, which last 1 to 1 ½ hours on Mondays and Wednesdays. During these meetings, each discipline reports on the most recent observations and assessment findings for each child. In addition to psychology, disciplines present in these meetings include psychiatry, nursing, social work, speech therapy, and occupational therapy. Interns frequently contribute to these meetings by sharing behavioral observations and/or testing results.

Supervision. Supervision typically totals ½ to 1 hour per week and is conducted in segments at the beginning and end of the intern’s “shift.” At the beginning of the shift, the testing needed for that day is discussed, along with any recommendations to facilitate testing completion for each child. Following completion of testing for the day, the intern and supervisor discuss the day’s findings and behavioral observations. This frequently includes discussion of the intern’s thoughts and observations related to the child’s diagnoses, and may include other topics such as problem-solving for future testing interactions with a given child or children with similar presentations. Dr. Pemberton is the supervisor the rotation.

Optional Research Rotation

Interns may elect to complete a 6-month research rotation where they participate in on-going research under the supervision of a psychologist within the department. Many opportunities are available, depending on interests, the availability of faculty mentors, and funded projects, and the expectation is that work will result in a presentation and/or publication. Alternatively, the intern may elect to bring data from their home lab and use this time to further their own research through

the development of manuscripts, presentations, posters, or grant applications under the guidance of a research mentor assigned for the year.

The faculty section in this brochure offers information about their research interests. However, as faculty projects and availability varies from year-to-year, interns wishing to complete the research rotation should include a short paragraph addressing the following in their application cover letter:

1. A brief overview of their previous research
2. Their interest areas for research moving forward (consider content area(s), methodologies and populations of interest, and need for training in research processes)
3. The names of 1-3 program faculty who may be a good fit for interests identified in #2.

The information above will be used to match interns to possible preceptors, with knowledge of timely opportunities also considered.

Interns who do not elect to complete the research rotation may discuss opportunities to expand their involvement in one of the other internship rotations or additional clinical opportunities discussed with program faculty on interview day as time allows.

Sample Schedule

Time	Monday	Tuesday	Wednesday	Thursday	Friday		
8:00am	CSC Child Therapy	CSC Child Therapy	CDU/ Research	PCIT Supervision	CDU/Flex Time		
8:30am				CPP Reflective Supervision		CSC Child Psych Testing	
9:00am							
9:30am							
10:00am		TF-CBT Supervision		Biweekly CSC Meeting		Lunch	Lunch
10:30am							
11:00am	Lunch	Psych Testing Supervision	Lunch	Lunch	Adult Supervision		
11:30am							
12:00pm	CSC Child Therapy	CSC Child Therapy	DBT Supervision	CSC Child Psych Testing	WFC Adult Therapy		
12:30pm			CSC Child Therapy			DBT Group	
1:00pm						DBT Consult Team	
1:30pm							
2:00pm		Didactics					
2:30pm							
3:00pm							
3:30pm							
4:00pm							
4:30pm							
5:00pm							

CSC = Child Study Center, CDU = Child Diagnostic Unit, WFC = Walker Family Clinic

Overview

The goal of the adult-focused internship track is to provide interns with an array of general experiences to broaden their clinical training as well as offer more specialized training in areas of traumatic stress sequelae. The adult internship offers interns training opportunities in the following outpatient and inpatient settings, all of which offer significant opportunity to work with survivors of traumatic stress and underserved adult populations:

- UAMS Walker Family Clinic (general outpatient clinic)
- Pulaski County Regional Crisis Stabilization Unit (short-stay residential unit)
- ACH Burn Unit and Clinic for Adults (integrated specialty care team)
- Hawkins Unit at Wrightsville Prison (women's prison)

Interns receive year-long training in the assessment and treatment of individuals with a wide range of disorders, including trauma and stress-related disorders, depressive disorders, anxiety disorders, personality disorders, and serious mental illnesses. In addition, interns are offered an elective minor rotation in research. Rotations are designed as 12-month experiences, unless otherwise specified, to support both breadth and depth of clinical training while on internship. Faculty psychotherapy orientations include cognitive, cognitive behavioral, and interpersonal.

Interns will have the opportunity work with patients across a wide range of treatment settings each serving diverse populations in regards to age, racial and ethnic identity, sexual orientation, gender identity, religious affiliation, disability status, and more. As such, intern applicants who demonstrate experience and interest in working with diverse populations are desired. Further, interns may have the opportunity to participate in diversity-related program development projects. We are currently developing a rotation in clinical supervision, and hope to be able to offer this in the 2021-22 training year.

Walker Family Clinic

Overview of Setting. The Walker Family Clinic has been offering mental health services to young adults, adults, and geriatric populations since 2008. This outpatient mental health clinic serves the referral needs for UAMS' inpatient units and outpatient clinical programs. The patient population for the clinic generally reflects the racial and ethnic breakdown of the Little Rock metropolitan area. Socioeconomic status also is diverse; however, the majority of clientele come from lower income homes. Staff include psychologists, doctoral psychology interns, psychiatrists, psychiatry residents and fellows, psychiatric nurses, licensed clinical social workers, social work interns, and licensed professional counselors.

Patient Population. The Walker Family Clinic serves adults with a wide range of clinical diagnoses, including trauma and stress-related disorders, depression, bipolar disorder, anxiety disorders, somatization and conversion disorders, psychotic disorders, personality disorders, and

substance abuse. Many of these individuals have co-occurring chronic health issues such as pain, migraines, diabetes, hypertension, gastrointestinal issues, sleep problems, and neurologic disorders.

Core Training Opportunities. During the 12-month therapy rotation, interns will have an opportunity to emphasize client populations and treatment modalities of interest. Most interns chose to complete a mix of individual and group psychotherapy. Individual therapy cases can be selected based on the intern's training goals. Ongoing therapy groups include CBT-oriented PTSD, depression, and anxiety groups, Acceptance and Commitment Therapy group, and Dialectical Behavior Therapy service for adults with emotional dysregulation and unstable relationships.

Optional Training Opportunities.

Dialectical Behavior Therapy (DBT). Interns may complete a 12-month rotation in which they conduct Dialectical Behavior Therapy (DBT) in a group format for adults with emotional dysregulation and interpersonal difficulties. In this rotation, interns co-lead these 1.5 hour, weekly groups with the rotation's supervisor, who is present for the duration of the group. Interns have the opportunity to see individual DBT clients as well, depending on risk level. This is not a requirement of the rotation, and it may not be available depending on risk level, caseload capacity, or scheduling. There is no "on-call" facet of this rotation (i.e., coaching calls are not currently a part of the DBT rotation; however, this is subject to change). Interns participate in an intensive DBT training with a national expert, Dr. Sara Landes, in the modality before beginning this rotation. This rotation is an excellent fit for interns who are unfamiliar with DBT but interested in gaining more experience, as well as interns who have provided DBT in individual or group formats previously.

Center for Trauma Prevention, Recovery, and Innovation (TPRI). As a part of the Walker Family Clinic rotation, interns can provide services as part of the UAMS Center for Trauma Prevention, Recovery, and Innovation (TPRI). TPRI was established in 2019 to provide education, training, supervision, and trauma-related clinical services. TPRI is primarily housed within the Walker Family Clinic as a trauma-related disorders subspecialty clinic with clinical, research, and education services that extend into the Division of Trauma and Acute Care Surgery, the Psychiatry Consultation and Liaison Service, and UAMS psychiatric inpatient services.

Opportunities include provision of trauma-informed and trauma-focused individual and group psychotherapies including Cognitive Processing Therapy, Eye Movement Desensitization and Reprocessing, Prolonged Exposure, and Narrative Therapy as well as psychoeducation and skills groups for Acute Stress Disorder, PTSD, and Complex PTSD. Interns may also choose to contribute to trainings for masters-level clinicians, medical students and residents, and other service providers team related to traumatic stress. Finally, interns may have the opportunity to participate in program development and evaluation along with Drs. Everett and McBain.

Supervision. Interns have weekly individual supervision focused on their cases/groups within this rotation. Depending upon scheduling, they may also attend multidisciplinary staffing meetings and/or clinic trainings. Drs. Everett and McBain are primary supervisors for this rotation.

Burn Unit and Clinic for Adults

Overview of Setting. The Burn Center for Adults is located at Arkansas Children's Hospital. It is the only one of its kind in Arkansas, providing both inpatient and outpatient follow-up care for patients with varying degrees of burns. The patient population for the clinic generally reflects the racial and ethnic breakdown of the Little Rock metropolitan area; however, the specialty nature of this setting draws patients from across Arkansas and sometimes surrounding states. Interns are part of the multidisciplinary Burn Center team which includes surgeons, anesthesiologists, nurses, nurse practitioners, physician assistants, occupational therapists, physical therapists, speech therapists, nutritionists, respiratory therapists, social workers, and child psychologists.

Patient Population. The Burn Center serves patients ranging from those with serious acute burn injuries to those seeking to manage and/or improve functioning from burns sustained many years prior. This population commonly has complicating behavioral health issues that impact the healing process. Presenting psychiatric problems in this population with which the intern would provide interventions include crisis management, depression, PTSD (both related and unrelated to the burn injury), generalized anxiety, sleep difficulties, pain management, nicotine cessation, and substance use disorders.

Core Training Opportunities. During the 12-month rotation, interns attend the Burn Center inpatient rounds and provide consultation services on both the inpatient unit and outpatient clinic. As part of the Burn Center team, interns provide interventions for adult patients along with their family members. Clinical services include brief assessment of mental health symptoms, psychoeducation about mental health symptoms, crisis intervention, and brief cognitive-behavioral interventions. Referrals to local therapy providers in the patients' communities will be made for ongoing psychological services as indicated. The intern also consults daily with other clinicians on the Burn Center team to provide consultation and feedback regarding patient care needs and recommendations for behavioral health care.

Optional Training Opportunities. Interns can participate in development and provision of training for the Burn Center team related to mental health topics that help the team to better utilize psychological services as well as to assess and treat burn patients.

Supervision. Interns work closely with the supervisor while providing services on the burn unit. The supervisor and interns see burn patients in tandem initially, allowing for live supervision, and then independently as the intern and supervisor are comfortable. Brief supervision occurs immediately after each patient is seen throughout the clinical day. Dr. Evans is the primary supervisor for this rotation.

Pulaski County Regional Crisis Stabilization Unit

Overview of Setting. The Pulaski County Regional Crisis Stabilization Unit (PCRCSU) is a 16-bed 24/7 psychiatric facility serving the Central Arkansas area for persons 18 and over who are experiencing a behavioral health crisis. The unit is located just a few miles away from the UAMS campus. PCRCSU is a short stay (4 days or less) program aimed at stabilizing the mental health crisis and connecting clients with needed resources in the community. The program aims to avoid costly and less-therapeutic environments for this population including the emergency room, jail, and expensive inpatient hospitalization. The multidisciplinary team consists of nurses, nurse practitioners, social work, psychology, psychiatry, and mental health techs.

Patient Population. Persons served at the PCRCSU have typically either been referred by law enforcement (deflection from the justice system) or by the local community mental health center. This patient population is typically facing challenges including unemployment, financial instability, legal involvement, and multiple psychiatric issues. The majority of patients served have experienced significant and multiple traumas. Patients commonly have substance use disorders, most commonly methamphetamine and opiate addictions. Common presenting diagnoses on the unit are Schizophrenia, Bipolar Disorder, Schizoaffective Disorder, severe depression, PTSD, and co-occurring substance use disorders.

Core Training Opportunities. Interns provide individual and group interventions targeting relapse prevention, provision of healthy coping skills, PTSD symptoms, and developing specific recovery-based goals for treatment. Interns also participate in crisis intervention and development of safety plans for those in acute crisis.

Optional Training Opportunities. Interns have the opportunity to implement a brief evidence-based intervention for PTSD for patients at the PCRCSU. Interns are also invited to assist with staff trainings in their area of expertise. As the PCRCSU is a relatively new program, interns can participate with Dr. Evans in ongoing program development and evaluation initiatives.

Supervision. Interns have weekly scheduled supervision and immediate access to a supervisor during the clinical day for adjunct supervision as needed. Dr. Evans is the primary supervisor for this rotation.

Hawkins Unit at Wrightsville Prison

Overview of Setting. The Hawkins Unit at Wrightsville Prison is a minimum/moderate security women's prison approximately 25 minutes outside of UAMS' main campus. The Hawkins Unit has a capacity of approximately 200 residents and is situated on a larger correctional complex with also houses men in separate facilities. Women reside in dormitory-style barracks; programming is held in group spaces across the unit including in a large visitation area, classrooms, and in tables outside of the barracks. No prior experience working in prisons is required. Experience and/or interest in posttraumatic stress and substance use co-morbidity is helpful.

Patient Population. Nearly all people who have become incarcerated have experienced chronic and severe trauma; incarcerated women have particularly high prevalence (~70%) of experiencing

sexual and domestic violence. Most also have co-morbid drug and/or alcohol use disorders and a non-substance use disorder such as PTSD, depression, bipolar disorder, and/or borderline personality disorder.

Core Training Opportunities. The Hawkins Unit rotation provides interns with a concentrated focus on providing group therapy. Groups vary with regard to size and content focus. Groups have varied depending upon facility requests and intern interests; however, the groups we generally offer include the following:

DBT Skills Group and Cognitive Processing Therapy Groups. During the 12-month rotation, interns provide standing groups to women in Hawkins' re-entry barracks ("Think Legacy"). Women in Think Legacy are generally returning to the community within 0-18 months and have applied to participate to receive more intensive programming opportunities. Ongoing groups currently include a large DBT Skills group, which is taught didactically, and a standard Cognitive Processing Therapy group. Interns co-facilitate these groups with Dr. Zielinski and/or other psychology trainees.

Growing Together program for pregnant and postpartum women. The Growing Together program is a multicomponent service set for women who are sentenced to time in Arkansas state prison while pregnant. Interns co-facilitate a mental health support group that integrates aspects of mindfulness and CBT with Dr. Zielinski and/or other psychology trainees.

Young Adult Therapy Group. The Young Adult group is for women 18-25 and teaches skills related to problem-solving, valued living, and acceptance. The group also covers special topics of interest generated by group members (e.g. establishing careers, developing a support system).

Interns may have opportunities to participate in other intervention activities/facilitate other groups of interest as time allows.

Optional/Intermittent Training Opportunities.

Advocacy. Interns participating in the Hawkins Unit rotation may have an opportunity to participate in advocacy opportunities as available during the year. Examples include assisting with local presentations/panels about justice-involved women and attending meetings with correctional system leadership focused on programming and policy.

Justice Health Research. Dr. Zielinski is available to serve as a research rotation preceptor for interns with an interest in the intersections between mental health, trauma and drug/alcohol use—which commonly intersect with individuals' involvement in the criminal justice system. Please reach out to Dr. Zielinski if you would like additional information on opportunities.

Supervision. Interns have both live supervision and weekly group supervision with other trainees providing groups at Hawkins. Individual supervision is available as-needed and is also scheduled

intermittently to develop an initial training plan for the rotation and review progress toward individual training goals. Dr. Zielinski is primary supervisor for this rotation.

Optional Clinical Training Opportunities

Overview. Additional training opportunities may be available to interns based on their training goals, experience, and supervisor availability. For those interested in these optional training opportunities, please reference your interest and any relevant experience in your application cover letter.

Psychological Assessment. Based on an intern's training goals and supervisor availability, interns also may be able to periodically conduct psychological assessments. Particular opportunities are for pre-surgical evaluations for individuals who are candidates for a spinal cord stimulator due to chronic pain. In addition, they may be able to participate in providing psychological assessments as part of the kidney transplant evaluation process.

Psychiatry Consultation and Liaison (CL) Service. Based on an intern's prior experience with CL, training goals and supervisor availability, interns may be able to rotate with the psychiatry consultation liaison service and provide brief behavioral health intervention on UAMS' inpatient medical services. Interns will have the opportunity to see consults throughout the hospital including the emergency department and general medical floors. In addition, they may be able to participate in providing brief training and consultation to the social work team, care management service, and psychiatry CL service team members. Dr. McBain is the primary supervisor for this rotation, and Dr. Amy Grooms will serve as the psychiatry supervisor for this rotation.

Trauma and Acute Care Surgery Service. Based on an intern's prior experience and training goals, interns may be able to rotate on the Trauma and Acute Care Surgery service. This rotation includes opportunity for brief behavioral health intervention and prevention/early intervention for PTSD among traumatically injured patients. Interns will have the opportunity to see consults on the medical-surgical and emergency general surgery services. In addition, they may be able to participate in brief training and consultation with the trauma surgery service and contribute to research or program development efforts. Dr. McBain is the primary supervisor for this rotation.

Sexual Assault Assessment Program. UAMS' TeleSANE program is a new initiative offering emergency departments statewide 24/7 access to sexual assault nurse examiners (SANEs) via telemedicine. The program is scheduled to launch in October 2020, and will also include components related to statewide training opportunities in sexual assault care, activities to promote sexual assault awareness, and coordination/networking with community groups to promote holistic care for sexual assault survivors across the state. Interns who are interested in educating and training providers on sexual assault mental health care and/or in treating sexual assault survivors should ask for more information about possible ways to be involved. Dr. Zielinski is the primary supervisor for this rotation.

Optional Research Rotation

Interns may elect to complete a 6-month research rotation where they participate in on-going research under the supervision of a psychologist within the department. Many opportunities are available, depending on interests, the availability of faculty mentors, and funded projects, and the expectation is that work will result in a presentation and/or publication. Alternatively, the intern may elect to bring data from their home lab and use this time to further their own research through the development of manuscripts, presentations, posters, or grant applications under the guidance of a research mentor assigned for the year.

The faculty section in this brochure offers information about their research interests. However, as faculty projects and availability varies from year-to-year, interns wishing to complete the research rotation should include a short paragraph addressing the following in their application cover letter:

1. A brief overview of their previous research
2. Their interest areas for research moving forward (consider content area(s), methodologies and populations of interest, and need for training in research processes)
3. The names of 1-3 program faculty who may be a good fit for interests identified in #2.

The information above will be used to match interns to possible preceptors, with knowledge of timely opportunities also considered.

Interns who do not elect to complete the research rotation may discuss opportunities to expand their involvement in one of the other internship rotations or additional clinical opportunities discussed with program faculty on interview day as time allows.

Sample Schedule

	Monday	Tuesday	Wednesday	Thursday	Friday
7:00am					
8:00am	CSU	CSU	WFC	ACH Burn Center	Hawkins
9:00am					
10:00am					
11:00am					
12:00pm	Lunch	Lunch	Lunch	Lunch	Lunch
1:00pm	CSU	Research	WFC	ACH Burn Center	Hawkins
2:00pm					

3:00pm					
4:00pm			Didactics until 5:30pm		

ACH = Arkansas Children's Hospital, CSU = Crisis Stabilization Unit, WFC = Walker Family Clinic

Neuropsychology Track

Overview

The neuropsychology track is designed for trainees who intend to pursue a career in academic neuropsychology with a focus in clinical service, research, and education. The primary objective of the neuropsychology track is to fulfill the requirements of the APA guidelines for internship training in psychology as well as to fulfill the requirements set forth by APA Division 40, the Houston Conference guidelines, and the Association of the Internship Training Centers in Clinical Neuropsychology. The neuropsychology track provides clinical, didactic, and research training to develop a high level of competence in clinical neuropsychology. 12 months of neuropsychological clinical training allows for exposure to a wide range of patient populations, including classic neurologic disorders and rarer syndromes, using flexible battery to more qualitative approaches for assessing and understanding the neurocognitive profiles of these patients. Successful completion of this internship program will meet criteria for future Board Certification in Clinical Neuropsychology with 50% of the training focused specifically on neuropsychology. The remaining 50% of the training is focused on clinical psychology with 12-month rotations in psychotherapy or cognitive rehabilitation with general and specialty adult populations. An elective 6-month minor research rotation also is offered. Training occurs at the UAMS Department of Psychiatry Walker Family Clinic and Women's Mental Health Clinic, as well as the UAMS Student Wellness Clinic. The primary patient population for this track is adults and geriatric populations with a variety of neurological, neurosurgical, medical, and psychiatric presentations with more limited exposure to late adolescents. Faculty psychotherapy orientations include cognitive, cognitive behavioral, interpersonal, and mindfulness.

Neuropsychology Service

For 12 months interns train within the neuropsychology service that was developed in 2006. The service has developed a strong regional reputation, and patients are referred from across the state and from bordering regions of adjacent states. At present the neuropsychology service is a referral-based program that provides neurocognitive assessment for a variety of patient populations with referrals primarily coming from the Departments of Neurology and Neurosurgery, as well as from Family Medicine, Psychiatry, and community and hospital-based clinicians throughout the state. Although the majority of the service is outpatient based, inpatient consults are also conducted, primarily involving normal pressure hydrocephalus evaluations. Common referral questions focus on diagnostic clarification, neurocognitive and functional abilities within existing conditions, and evaluation for surgical planning with the neuropsychologists playing important roles on multiple interdisciplinary treatment teams including Epilepsy Surgery and Functional Neurosurgery teams. The service includes two board certified neuropsychologists, two neuropsychology fellows, and a dedicated neuropsychology technician. Interns have the opportunity to conduct testing independently and to train with the neuropsychology technician to fully experience the range of testing modalities. Our goal is to help interns develop proficiency and self-assurance with increasing levels of independence throughout the training year so that they matriculate to postdoctoral fellowship with a strong sense of confidence and professional identity.

Clinical Populations.

Neurology. The Neurology Clinics are a primary referral source to the neuropsychology service. Primary patient populations from the Neurology Clinics include multiple sclerosis, autoimmune disorders, epilepsy (pre-surgical and general epilepsy-related cognitive disorders), movement disorders (including pre-surgical Parkinson's Disease as well as other movement disorder types), and stroke. Typical consults are conducted to evaluate the extent to which an individual's illness impacts cognition, emotion, and functionality to 1) assist in differential diagnosis; 2) track disease progression over time, which often informs treatment decisions; and 3) provide recommendations to patients to improve daily functioning.

Neurosurgery. The Neurosurgery Clinic is staffed by specialized Neurosurgeon faculty who specialize in functional neurosurgery, skull-based and vascular neurosurgery, oncology, and spine. The Neurosurgery Department houses the only gamma knife service within the state of Arkansas, and is one of the few hospitals in the country that offers skull-based surgery. Common referrals include pre-and post-surgical evaluations for epilepsy, movement disorders, brain tumors, aneurysm, and trauma. In addition, all patients being considered for placement of spinal cord stimulators to control chronic pain are required to undergo a cognitive and emotional screening evaluation with Neuropsychology.

Physical Medicine and Rehabilitation (PM&R). The PM&R program provides comprehensive physician services to individuals with a variety of chronic injuries and disorders including central nervous system injury, neuromuscular and musculoskeletal disorders, and chronic pain. Typical referrals from PM&R often include the assessment of cognitive and emotional functioning in individuals with acute injuries such as TBI or stroke, or more chronic illness such as multiple sclerosis to determine functional abilities and make recommendations regarding ability to return to work, driving, and other daily activities.

Psychiatry. The neuropsychology service receives referrals for a variety of presenting problems from within the Psychiatry Department including differential diagnosis of cognitive decline (pseudodementia versus dementia) as well as dual diagnosis (cognitive decline, mood disorder and medical comorbidities).

Primary Care and Trauma. As the only level one trauma center for adults and academic medical center Arkansas, the neuropsychology service receives referrals across the state from primary care providers and other medical clinics for a wide variety of referral questions including dementia, general memory loss, concussion, and questions of differential diagnosis.

Specialty Areas of Focus – Multidisciplinary Teams.

Deep Brain Stimulation (DBS). The Neuromodulation Program at UAMS was formulated in 2010 under the direction of Dr. Erika Petersen, functional neurosurgeon in the Department of Neurosurgery. Over the course of the past decade, the program has grown

exponentially and developed a strong regional and national reputation; indeed, in 2012 UAMS was identified as the most rapidly-growing center for DBS. We currently rank in the top 50 most active sites nationally. UAMS is one of only 38 centers in the country with an active program for implementing DBS in severe, treatment refractory obsessive-compulsive disorder. This multidisciplinary team has led to active research collaborations with a mission to improve pre-surgical evaluation procedures and post-surgical outcomes. Neuropsychology is an integral component to the Neuromodulation Program. As compromised pre-surgical cognitive functioning is a risk factor for poor postsurgical outcomes, neuropsychological assessment is a critical component of identifying appropriateness for surgery.

Epilepsy. The Clinical Epilepsy Division of the Department of Neurology is comprised of a multidisciplinary team of clinicians, including neurology, neurosurgery, radiology, and neuropsychology, who work together to find the most appropriate epilepsy treatment for each patient. Neuropsychology serves an integral role within this team by providing neurocognitive evaluations for individuals with epilepsy. Neuropsychology is consulted to assist with diagnosis, cognitive and functional impact, treatment recommendations, and as part of the epilepsy surgical team. All individuals being considered for surgical intervention undergo presurgical evaluations with neuropsychology for the purposes of identifying areas of dysfunction that may support the seizure focus, and for determining identifying cognitive or other risks of surgery in the individual. These results are discussed during the monthly epilepsy surgical team meetings, and if the patient is approved for surgery, a follow-up postsurgical evaluation is conducted 12 months post-surgery.

Tumor. Neurosurgery regularly treats benign and malignant brain tumors through medication, surgery, radiation therapy, and chemotherapy. UAMS is also the only facility in Arkansas offering non-invasive gamma knife treatment for brain tumors. Neuropsychology is regularly present at brain tumor surgical planning meetings and is consulted for a variety of reasons including pre-treatment baseline evaluations, post-treatment evaluations for functional assessment, and ongoing monitoring of cognitive abilities and emotional functioning for individuals with chronic or recurrent tumors.

Walker Family Clinic

Overview of Setting. The Walker Family Clinic has been offering mental health services to young adults, adults, and geriatric populations since 2008. This outpatient clinic serves the referral needs for inpatient units and UAMS outpatient clinical programs. The patient population for the clinic generally reflects the racial and ethnic breakdown of the Little Rock metropolitan area. Socio-economic status also is diverse; however, the majority of clientele come from lower income homes. Staff include psychologists, doctoral psychology interns, psychiatrists, psychiatry residents and fellows, licensed clinical social workers, social work interns, licensed professional counselors, and nurse practitioners.

Patient Population. The Walker Family Clinic services adults with a wide range of clinical diagnoses, including trauma and stress-related disorders, depression, bipolar disorder, anxiety disorders, somatization and conversion disorders, psychotic disorders, personality disorders, and

substance use. Many of these individuals have co-occurring chronic health issues such as pain, migraines, diabetes, hypertension, gastrointestinal issues, sleep problems, and neurologic disorders.

Core Training Opportunities. Interns complete a 12-month rotation in which they conduct Dialectical Behavior Therapy (DBT) in a group format for adults with emotional dysregulation and interpersonal difficulties. They co-lead these 1.5 hour, weekly groups with the rotation's supervisor, who is present for the duration of the group. Interns have the opportunity to see individual DBT clients as well, depending on risk level. This is not a requirement of the rotation, and it may not be available depending on risk level, caseload capacity, or scheduling. There is no "on-call" facet of this rotation (i.e., coaching calls are not currently a part of the DBT rotation; however, this is subject to change). Interns participate in an intensive DBT training with national expert, Dr. Sara Landes, in the modality before beginning this rotation. This is an excellent fit for interns who are unfamiliar with DBT but interested in gaining more experience, as well as interns who have provided DBT in individual or group formats previously.

Optional Training Opportunities. In addition to the DBT service, interns provide individual therapy to adults with a wide range of clinical problems and diagnoses typically seen in a general psychiatric outpatient clinic. Due to their expertise, interns are frequently referred patients with underlying neurologic conditions.

Supervision: Interns meet weekly for a half-hour group supervision dedicated to the DBT group with fellow interns on the rotation. As part of the DBT rotation, interns also participate in a one-hour weekly DBT Consultation Team Meeting. This meeting is used to staff both individual and group DBT cases and follows the typical agenda of a DBT Consultation Team Meeting. Additionally, they meet for one-hour of group supervision with other interns weekly to discuss individual therapy patients in the clinic. All supervision and consultation experiences occur with Dr. Everett.

Cognitive Rehabilitation

Overview of Setting. In 2019 a multi-tiered Cognitive Rehabilitation Program was initiated within the Walker Family Clinic to provide individual and group therapy services to restore cognitive functioning for adults with neurologic conditions.

Patient Population. The program includes individual cognitive rehabilitation for patients with acquired brain injury, individual cognitive rehabilitation for patients with epilepsy, group cognitive rehabilitation for patients with mild cognitive impairment secondary to Multiple Sclerosis (MS), and finally group Cognitive Stimulation Therapy (CST) for patients diagnosed with mild to moderate forms of dementia.

Core Training Opportunities. Interns have the opportunity to provide direct individual cognitive rehabilitation focused on empirically-supported manualized interventions as well as incorporated recommended techniques for acquired brain injury. For interns interested in providing intervention to patients with epilepsy, training opportunities are available. In group settings, interns may either facilitate or co-facilitate cognitive rehabilitation targeted at mild cognitive impairment in the

movement disorder clinic (MDC) for patients diagnosed with MS depending on their level of prior experience. Lastly, interns have the unique opportunity to provide CST, an evidenced-based treatment for dementia in a group setting. Each of these tiers provide ample exposure to new training, direct patient care, multidisciplinary interaction, and the additional option of engaging in research throughout the rotation.

Supervision: Drs. Kleiner and Gess are supervisors for this rotation.

Women's Mental Health Clinic

Overview of Setting. The Women's Mental Health Clinic is focused on women's reproductive mental health. This clinic conducts extensive psychological and physical exams in an effort to identify women at risk for numerous medical issues including addiction.

Patient Population. This rotation focuses on women with complex health conditions with substance use who require evidence-based interventions for improving health outcomes.

Core Training Opportunities. For this 12-month rotation, responsibilities of the interns include delivery of clinical services to the patient both as part of the team in the clinic and outside the clinic, consultation with other disciplines (psychiatry, nursing, social work), education of staff and trainees, and the participation in the management of team dynamics. Interventions are delivered in individual and group formats.

Supervision: Dr. Cucciare is the supervisor for the rotation and meets with the intern weekly to review cases, prepare for group, and discuss consultation activities with other team members.

Student Wellness

Overview of Setting. The UAMS Student Wellness Program provides free and confidential counseling/therapy, psychiatric evaluation, and medication management services in a safe and nurturing environment to actively enrolled UAMS students and their spouses. The program also offers outreach and prevention activities on campus to increase awareness of our services and promote wellness among UAMS students. These activities include regular lectures and workshops on wellness topics across campus (e.g., mindfulness, relationship enrichment, stigma, stress management, and school-life balance). Staff include psychiatrists, psychiatry residents, licensed clinical social workers, and doctoral psychology interns.

Patient Population. The clinic provides services to UAMS students with a wide range of clinical concerns, including stress, depression, anxiety, relationship problems, substance use issues, burnout, and other emotional problems.

Core Training Opportunities. During this 12-month rotation interns carry individual therapy cases and work in a multi-disciplinary team setting with psychiatrists and social workers. In addition to clinical care, the interns participate in a weekly multidisciplinary didactic series with the other clinicians who staff the program.

Supervision: Dr. Thapa provides ongoing supervision in that he reviews and co-signs all notes, providing feedback as appropriate. He meets once a month and on an ad hoc basis with the intern. Supervision is focused primarily on case discussion, especially with mutual patients.

Option Research Rotation

A unique feature of the neuropsychology track is the availability of an elective research rotation. This rotation is designed to afford interns the opportunity to participate in neuropsychologically-focused research of their choosing from multiple ongoing research endeavors with the expectation that the work would result in a presentation and/or publication. Alternatively, the intern may elect to bring data from their home lab and use this time to further their own research through the development of manuscripts, presentations, posters, or grant applications under the guidance of a research mentor assigned for the year.

The faculty section in this brochure offers information about their research interests. However, as faculty projects and availability varies from year-to-year, interns wishing to complete the research rotation should include a short paragraph addressing the following in their application cover letter:

1. A brief overview of their previous research
2. Their interest areas for research moving forward (consider content area(s), methodologies and populations of interest, and need for training in research processes)
3. The names of 1-3 program faculty who may be a good fit for interests identified in #2.

The information above will be used to match interns to possible preceptors, with knowledge of timely opportunities also considered.

Current Research Opportunities.

Founded in 2010 as Arkansas's first research-dedicated human MRI center, the Helen L. Porter and James T. Dyke Brain Imaging Research Center (BIRC) is a neuroscience and neurotechnology resource for the PRI, College of Medicine, UAMS, and the state of Arkansas. The long-term goal of the BIRC is to conduct human neuroscientific research that has the greatest potential to improve the treatment of neuropsychiatric disorders and prevent illness in at-risk individuals. The BIRC's past and currently funded scientific initiatives focus on modeling the neural mechanisms underlying addiction, individual differences in cognition and behavior, emotion regulation and dysregulation, adaptive and maladaptive responses to early childhood trauma, and predicting treatment responses. In addition, the BIRC fosters collaborative research with external investigators spanning PRI research divisions, College of Medicine departments, UAMS Colleges, and other academic institutions. Additional details on the BIRC past and current research, as well as training opportunities, can be found at <https://birc.uams.edu/>. Dr. Any James supervises adult-track interns interested in conducting research on projects in the BIRC.

The Neuropsychology Service has several active areas of ongoing research. Drs. Gess and Kleiner are members of the Clinical Neuroscience Investigators Working Group, a collaborative meeting where research projects are developed and collaborated upon for individuals interested in various aspects of neuroscience. Current projects include the following:

Cognitive Connectome. The Cognitive Connectome project was established in 2012 as an initiative to enhance fMRI's translation into clinical care by mapping normative variance in the neural encoding of cognition. To date, 54 healthy participants have completed functional neuroimaging tasks and clinical neuropsychological assessment spanning eight cognitive domains: motor, visuospatial, language, learning, memory, attention, working memory, and executive function. The fMRI tasks include direct replications of neuropsychological instruments (such as the Judgment of Line Orientation task) as well as conceptual replications (such as the Tower of London and Tower of Hanoi tasks). To date, the Cognitive Connectome project has generated a whole brain atlas derived from task-based fMRI activity.

Clinical Databases. Interns will have access to two databases of neuropsychological test results for individual project development. One database includes individuals who are being evaluated for and who have undergone DBS for treatment of a movement disorder, and the other database includes neuropsychological test results for individuals who are being evaluated for and who have undergone surgical intervention for treatment of intractable seizures.

Interns who do not elect to complete the research rotation may discuss opportunities to expand their involvement in one of the other internship rotations or additional clinical opportunities discussed with program faculty on interview day as time allows.

Didactics

Didactic opportunities unique to the neuropsychology track are offered in addition the general didactics that are scheduled for interns across the three tracks. They include the following:

- DBS Surgical Conference (monthly)
- Epilepsy Surgical Conference (monthly)
- Neuro-Oncology/Gamma Knife Conference (weekly)
- Brain Cutting Conference (weekly to bi-weekly as scheduled)
- Neurology Grand Rounds (weekly)
- Movement Disorders Video Conference (as scheduled)
- UAMS/Central Arkansas Veteran's Health System (CAVHS) Neuropsychology Case Conference Seminar (monthly) and additional didactic opportunities with CAVHS Neuropsychology Track as available
- UAMS Neuropsychology Conference/Journal Club (weekly)
- UAMS Neuropsychology Neuroanatomy Lecture Series (monthly)
- Other Didactic Opportunities in conjunction with Neurology and Neurosurgery Residents as applicable
- Brain Imaging Research Center (BIRC) Journal Club and other lectures as available

Sample Schedule

	Monday	Tuesday	Wednesday	Thursday	Friday
8:00am	Neuropsych	Student Wellness	Neuropsych	Neuropsych	Neuropsych Didactics
9:00am					
10:00am					
11:00am					
12:00pm	Lunch	Lunch	Lunch	Lunch	Lunch
1:00pm	Neuropsych	Women's Mental Health Clinic	WFC	Neuropsych	Cognitive Rehab
2:00pm					
3:00pm					
4:00pm			Didactics until 5:30pm		

WFC = Walker Family Clinic

Training Faculty

Michael Cucciare, PhD

He/Him/His

Associate Professor

University of Nevada, Reno – 2006

Clinic/Rotation: Women's Mental Health Clinic

Clinical Interests: Substance use disorders

Research Interests: Substance use disorders among female veterans; health care transitions; computer-delivered mental health interventions

Lisa Evans, PhD

She/Her/Hers

Assistant Professor

Purdue University – 2002

Clinic/Rotation: Pulaski County Regional Crisis Stabilization Unit

Clinical Interests: Psychiatric rehabilitation; Dialectical Behavior Therapy; evidence-based practices for persons with serious mental illness

Research Interests: Program evaluation for research-based practices in community settings

Betty Everett, PhD

She/Her/Hers

Associate Professor

Oklahoma State University – 1990

Clinic/Rotation: Walker Family Clinic Adult Therapy; Psychiatry C/L Service

Clinical Interests: Psychological trauma and emotional processing; Dialectical Behavior Therapy

Research Interests: Psychological trauma and efficacy of treatment

Jennifer Gess, PhD, ABPP/CN

She/Her/Hers

Associate Professor

Training Director

Georgia State University – 2001

Clinic/Rotation: Walker Family Clinic Adult Neuropsychology

Clinical Interests: Epilepsy; brain injury; movement disorders; brain neoplasm; dementia

Research Interests: Post-surgical cognitive outcome; the development of fMRI as a clinical tool

Kelly Hamman, LCSW

She/Her/Hers

Mental Health Professional, Trauma Training Treatment Specialist

University of Arkansas Little Rock (Social Work) – 2008

Clinic/Rotation: Child Study Center Trauma-Focused Cognitive Behavioral Therapy

Clinical Interests: Child and adolescent trauma; early childhood mental health; Trauma-Focused Cognitive Behavioral Therapy; Child-Parent Psychotherapy

Research Interests: Dissemination and sustainability of evidence-based practice; predictors of adherence to EBT fidelity

Andrew James, PhD

He/Him/His

Associate Professor

University of Florida (Neuroscience) – 2005

Clinic/Rotation: Brain Imaging Research Center Neuropsychology Research

Research Interests: Functional neuroimaging; addiction; cognition; individual differences

Sufna John, PhD

She/Her/Hers

Assistant Professor

Co-Director, Arkansas Building Effective Services for Trauma (ARBEST)

Southern Illinois University, Carbondale – 2014

Clinic/Rotation: Child Study Center Child-Parent Psychotherapy; Cultural Humility Curriculum; Reflective Practice Curriculum (when available)

Clinical Interests: Early childhood trauma; complex trauma assessment; intergenerational and parent trauma; Child-Parent Psychotherapy;

Research Interests: Factors that impact the success and course of childhood trauma symptomology and treatment; development and dissemination of best practices in trauma-informed care

Advocacy Interests: Improving child welfare practices, building cultural humility in healthcare settings, building evidence-based approaches for understanding and addressing “attachment concerns” in traumatized youth

Jennifer Kleiner, PhD, ABPP/CN

She/Her/Hers

Associate Professor

Chief Psychologist

University of Buffalo – 2004

Clinic/Rotation: Walker Family Clinic Adult Neuropsychology

Clinical Interests: Movement disorders; multiple sclerosis; dementia; brain tumors; brain injuries

Research Interests: Pre-surgical evaluation for deep brain stimulation; normal variance in fMRI and neuropsychology

Sacha McBain, PhD

She/Her/Hers

Assistant Professor

Palo Alto University – 2018

Clinic/Rotation: Walker Family Clinic, Psychiatry C/L Service, Department of Surgery Division of Trauma and Acute Care Surgery

Clinical Interests: Adjustment after illness or injury; early intervention for PTSD

Research Interests: Implementation and evaluation of interventions for trauma-related sequelae in non-mental health settings; interdisciplinary care; access to care

Glenn Mesman, PhD

He/Him/His

Associate Professor

Assistant Training Director

Southern Illinois University, Carbondale – 2010

Clinic/Rotation: Child Study Center Psychological Evaluation; Parent-Child Interaction Therapy

Clinical Interests: Psychological evaluations; Parent-Child Interaction Therapy

Research Interests: Behavioral difficulties in early childhood; dissemination of evidence-based practices

Joy Pemberton, PhD

She/Her/Hers

Associate Professor

Texas Tech University – 2010

Clinic/Rotation: Child Study Center Parent-Child Interaction Therapy

Clinical Interests: Disruptive behavior disorders; child and adolescent trauma; Parent-Child Interaction Therapy; psychological evaluations

Research Interests: Dissemination of evidence-based practices; increasing availability and accessibility of empirically-based practices

Puru Thapa, MD

He/Him/His

Professor

Director of UAMS Student, Resident, and Faculty Wellness Programs

King George's Medical College, Lucknow University – 1979

Clinic/Rotation: Student Wellness

Clinical Interests: Stress-related mental health disorders; mindfulness

Research Interests: Depression, stress, burnout and anxiety in medical and pharmacy students

Karin Vanderzee, PhD

She/Her/Hers

Associate Professor

Miami University – 2013

Clinic/Rotation: Child Study Center Trauma-Focused CBT

Clinical Interests: Child and adolescent trauma; disruptive behavior disorders; Parent-Child Interaction Therapy; Trauma-Focused CBT; Child-Parent Psychotherapy

Research Interests: Infant mental health, trauma; improving child welfare system; dissemination of evidence-based practices

Eva Woodward, PhD

She/Her/Hers

Assistant Professor

Suffolk University – 2015

Rotation: Cultural Humility Curriculum

Clinical Interests: Health psychology; integrating mental health into primary care settings

Research Interests: implementation science to promote equitable and just delivery of health care

Melissa Zielinski, PhD

She/Her/Hers

Assistant Professor

University of Arkansas, Fayetteville – 2016

Clinic/Rotation: Hawkins Unit, Wrightsville Prison

Clinical Interests: Trauma recovery, particularly among survivors of sexual and domestic violence; Dialectical Behavior Therapy; Cognitive Processing Therapy; access to care among marginalized/underserved populations

Research Interests: Dr. Zielinski directs the Health and the Legal System (HEALS) Research Lab, which aims to generate knowledge that can contribute to improving emotional and behavioral health for those that are involved in the legal system. Particular topics of interest are trauma/PTSD, substance use, women's health, and applications of implementation science. You can learn more about HEALS Lab here: <https://psychiatry.uams.edu/research/division-of-health-services-research/heals-lab/>. Check the "projects" tab for an updated list of ongoing studies.

Training methods include a didactic component that consists of a formal seminar series and other educational opportunities. Weekly seminars designed to meet the training needs of the interns in the program feature presentations by training faculty and other professionals from UAMS and the local community. Didactics are scheduled from 4:00pm to 5:30pm weekly on Wednesday afternoon and are divided into several series of training topics and activities.

Profession-Wide Competency Series

This series of presentations cover competencies put forth by APA to help doctoral interns prepare for the practice of health service psychology. Competencies include research and evaluation, ethical and legal standards, individual and cultural diversity, professional values and attitudes, communication and interpersonal skills, assessment, intervention, supervision, and consultation and interprofessional/interdisciplinary skills. In addition, presentations related to our program-specific competencies also are periodically provided (e.g., advocacy; reflective action, self-assessment, and self-care; teaching).

Cultural Humility Curriculum

The overall goal of this curriculum is to help each psychology intern make progress toward being a psychologist who exhibits cultural humility in clinical practice, teaching and mentoring, and/or research. The baseline knowledge, attitudes, and skills for each intern will vary, and thus, the growth and end-of-internship progress will be different for each intern. This course provides a variety of teaching modalities to enhance cross-cutting knowledge, attitudes, and skills related to cultural humility. The format involves in-person lectures, process-oriented group discussions, journaling activities, assigned readings, and experiential activities. Although the overall goal of the course is not explicitly to enhance social justice—that is, the social advocacy of a psychologist to create equity in our society—it is possible that certain interns, instructors, or experiences may gravitate toward social justice. This is welcomed and encouraged.

Upon successful completion of this course, interns will complete the following objectives aligned with guidelines from the American Psychological Association’s (2017) Multicultural Guidelines (in parentheses).

- 1) Gain an understanding of how individual difference (e.g., gender identity, age, sexual orientation, race, religion), intersectionality (e.g., gender x race), and societal and institutional oppression (e.g., white supremacy, gerrymandering, poverty), influence knowledge, attitudes, and behaviors of patients, mentees, supervisors, and research participants. (Guidelines: 1, 2, 4, 5, 7, 8, 9)
- 2) Develop a command of technical vocabulary related to multicultural topics. (Guidelines: 3)

- 3) Build or enhance skills (e.g., critical thinking, interpersonal communication) in understanding and articulating thoughtful responses to topics or controversies involving multicultural issues in clinical practice (e.g., culturally adapting interventions), teaching and mentoring, and research. (Guidelines: 3, 6, 9, 10)

Recent topic-oriented seminars have covered various aspects of multiculturalism, such as immigration, able-bodiedness, LGBT health, religion and spirituality, military culture, and racial and ethnic health disparities. During process-oriented groups, interns and faculty leaders discuss and reflect upon the role of cultural humility in reducing health disparities, power and privilege, structural violence, microaggressions, institutional and systematic oppression, prejudice and stereotypes, and interpersonal communication about multicultural issues.

Specialty Seminar Series

A number of other topics are covered in the specialty seminar series. Interns participate in a 4-week Koru Mindfulness series, an evidence-based curriculum designed for teaching mindfulness, meditation, and resiliency to college students and other young adults. Interns learn several skills, including meditation, breathing exercises, guided imagery, and the body scan. Each of these skills is designed to help them manage stress and enrich their lives. Interns also participate in discussions related to professional topics, such as careers in clinical psychology (e.g., research, clinical, administration), applying to postdoctoral fellowships, EPPP, and working alongside other clinical or medical specialties in the hospital (e.g., psychiatry, neurology, social work). Finally, interns each conduct a clinical case presentation or a research job talk, depending on their career interests.

Grand Rounds and Conferences

Interns also have the opportunity to attend the bimonthly Department of Psychiatry Grand Rounds and Case Conferences to stay current on clinical practices and research outcomes to increase and improve their knowledge, competence, performance, and patient outcomes. Interns also have access to the many grand rounds, symposia, and seminars that are offered within other UAMS departments (Pediatrics, Neurology) and colleges (College of Public Health). Additionally, interns are required to attend the Arkansas Psychological Association annual 2-day fall conference.

Fellowships

Postdoctoral fellowships mentored by Department of Psychiatry faculty are available for those individuals interested in following their doctoral internship with additional clinical and/or research training. The department currently has the following fellowships:

- The 2-year fellowship in clinical neuropsychology is designed for residents who intend to pursue a career in academic neuropsychology with a focus in clinical service, research, and education. The primary objective of the neuropsychology training program is to fulfill the requirements set forth by APA Division 40, the Houston Conference guidelines, and the Association of Postdoctoral Programs in Clinical Neuropsychology. During fellowship there is exposure to a wide range of patient populations, including classic neurologic disorders and rarer syndromes, using flexible battery to more qualitative approaches for assessing and understanding the neurocognitive profiles of these patients. The primary patient population for this track is adults with a variety of neurological, neurosurgical, medical, and psychiatric presentations.
- The child and adolescent traumatic stress fellowship offers year-long specialized clinical and scholarly training. Fellows spend 50% of their time in clinical supervision and direct patient care at the UAMS Child Study Center conducting psychological evaluations and implementing evidenced-based trauma interventions. The other 50% of the fellowship is dedicated to administrative, training, and research activities through Arkansas Building Effective Services for Trauma (ARBEST), a state-funded program that aims to improve outcomes for traumatized children and families through excellence in clinical care, training, advocacy, and evaluation. The ARBEST program (housed within the UAMS PRI) is National Child Traumatic Stress Network (NCTSN) affiliate and is comprised of a multidisciplinary team of psychologists, social workers, and individuals with outreach, communication, and financial expertise. Project activities with ARBEST vary by year based on community expressed need, but always includes core activities related to evidence-based treatment dissemination and community/scholarly presentations on trauma content. Fellows work collaboratively with ARBEST leadership to develop a plan that includes a variety of projects that meet their professional development and ARBEST project needs.
- Funded by a grant from the National Institute on Drug Abuse, UAMS's T32 Addiction Research Training Program seeks to develop a next generation of addiction researchers who will generate new and innovative approaches to preventing and treating addiction, with the knowledge that addiction is a multifaceted problem that demands input from multiple scientific disciplines. To this goal, we have assembled a cohort of experienced researchers and mentors from UAMS who provide research training opportunities reflecting the full spectrum of basic, clinical, and translation addiction research. The training program network of 23 faculty spans three Colleges (Medicine, Pharmacy, and Public Health) and six departments (Psychiatry, Pharmacology and Toxicology, Pharmacy Evaluation and Practice, Pharmaceutical Science, Neurobiology and Developmental Neuroscience, and Health Behavior and Health Education). Research training opportunities span the molecular aspects of targeting novel addiction medications to the science of implementation of prevention and treatment strategies in real world settings. Our trainees are highly interactive, diverse, and fluent in the social and clinical

aspects of addiction. Fourteen of its past trainees are now academic faculty nationwide. Dr. Clint Kilts assumed the role of director of the program in 2012, with Dr. Cucciare serving as one of the associate co-directors. Two other psychology training faculty members, Dr. James and Dr. Zielinski, serve as mentors.

Our interns also have been successful in obtaining an impressive array of fellowships at prestigious institutions outside of UAMS following completion of internship. A recent sampling includes

Albany Medical Center
Brown University
Central Arkansas Veterans Healthcare System
Cherokee Health Systems
Harvard University/Judge Baker Children's Center
Kennedy Krieger Institute
Ohio State University
San Diego Center for Children
Stanford University
Texas A&M/Baylor Scott & White Health
University of California, Davis
University of California, San Diego
University of Indiana
University of Miami
University of Minnesota
University of Pittsburgh/Western Psychiatric Institute and Clinic
University of South Florida
VA St. Louis Health Care System
Yale University

Following fellowship training, our interns work in a variety of settings, including academic medicine, university-based departments of psychology, private practice, VA's, and community mental health centers. Approximately half of our current psychology faculty members were either doctoral interns or postdoctoral fellows at UAMS.

Applying to Internship

Eligibility Requirements

- Application from APA accredited doctoral program in clinical psychology (preferred) or counseling psychology
- Permanent US resident
- Comprehensive exams passed (if applicable)
- Admitted to doctoral candidacy in graduate program
- Successful defense of dissertation proposal
- Prefer significant progress or completion of dissertation by internship start
- Minimum of 800 hours of total practicum experiences (intervention, assessment, and supervision)
- Minimum of 3 years of pre-internship graduate training

Post-application Requirements

- Personal interview
Child Track: December 4 and 9, 2020; January 4 and 14, 2021
Adult Track: December 11, 2020; January 11, 2021
Neuropsychology Track: December 16, 2020; January 8 and 22, 2021
- Successful completion of the intern matching program

Post-match Requirements

- Pass criminal background checks by Arkansas State Police and FBI, including fingerprinting
- Pass pre-employment drug screen (Interns also subject per UAMS policy to random drug screens during internship.)

Application Procedure

The due date for all application material is November 2, 2020 at 11:59 pm and must be submitted online. Applications must include:

- Submission of the AAPI
- Program director's endorsement
- Three letters of recommendation
- Curriculum vita
- Official transcript of graduate work

Interviews

Due the global pandemic, applicants will not be scheduled for on-site interviews. Instead, applicants will be interviewed by supervising faculty and meet with current doctoral interns through a video conferencing platform (e.g., Zoom). Interviews are scheduled in December and January and will start at 8:30am. They will continue into the afternoon, though applicants will be provided with several breaks in the day between interviews. Notifications for interviews will be sent via email by December 1, 2020.

Stipend and Fringe Benefits

Current stipend is approximately \$36,216 plus the fringe benefit package. Stipends are determined each year in the University of Arkansas Medical College annual budget.

Doctoral psychology interns are considered Medical School House Staff and participate in all fringe benefits allotted to medical interns and residents as set forth by UAMS and Arkansas Children's Hospital. These include, but are not limited to, paid professional liability insurance coverage, paid hospitalization insurance policy for the intern, plus benefits at nominal cost for dependents.

Interns also receive the following:

- Paid attendance at 2-day Arkansas Psychological Association conference
- Free parking
- Fifteen (15) days of personal leave plus holidays

Please Note

The internship site 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 applicant. We participate in the APPIC Internship Matching Program.

No eligible person will be excluded from participation or be denied the benefits of this internship training program in clinical psychology on the grounds of gender, race, national origin, religion, or sexual orientation.

Questions related to the program's accreditation status should be directed to the commission on accreditation at the following address:

American Psychological Association
750 First Street N.E.
Washington, D.C. 20002-4242
Telephone: (202) 336-5979
Fax: (202) 336-5978
E-mail: apaaccred@apa.org
<http://www.apa.org/ed/accreditation>

Contact Information

Training Director

Jennifer L. Gess, PhD, ABPP/CN
UAMS Walker Family Clinic
4301 W. Markham St., Slot 568
Little Rock, AR 72205
gessjenniferl@uams.edu
Phone: (501) 526-8239
Fax: (501) 526-5296

Assistant Training Director

Glenn Mesman, PhD
UAMS Child Study Center
1210 Wolfe St., Slot 654
Little Rock AR, 72202
grmesman@uams.edu
Phone (501) 364-5150
Fax (501) 364-3966

Internship Assistant

David Miles
UAMS Psychiatric Research Institute
4301 W. Markham, Slot 554
Little Rock, AR 72205
damiles2@uams.edu
Phone (501) 320-7302

Life in Little Rock

Education

- The Little Rock School District, the largest in the state, contains approximately 50 public schools and provides educational services to over 25,000 students annually.
- Three other school districts service the children and adolescents of Pulaski County – Pulaski County Special School District, North Little Rock School District, and Jacksonville North Pulaski School District.
- Little Rock is home to both the Arkansas School for the Blind and the Arkansas School for the Deaf.
- Over 12,000 students receive their education at the University of Arkansas at Little Rock (UALR), and the university features over 100 undergraduate degree programs and over 60 graduate degree programs.
- Philander Smith College, a private historically black college founded in 1877, is affiliated with the United Methodist Church and is a founding member of the United Negro College Fund. The college was added to the US National Register of Historic Places in 1999.
- Arkansas Baptist College is a private historically black liberal arts college established in 1884. It is the only historically black Baptist school west of the Mississippi River. The Main Building on its campus, built in 1893, is one of the oldest surviving academic buildings in the state and was listed on the US National Register of Historic Places in 1976.
- Founded in 2004, the Clinton School of Public Service is a branch of the University of Arkansas System and offers students a Master in Public Service degree.

The Arts

- Arkansas Arts Center is the state's largest art museum and contains drawings, collections, children's theater productions, a museum school, gift shop, and a restaurant.
- Arkansas Repertory Theatre, founded in 1976, is the state's largest professional, not-for-profit theatre company and produces works such as contemporary comedies, dramas, world premieres, and dramatic literature.
- Arkansas Symphony Orchestra performs over 30 concerts a year.
- Ballet Arkansas is the state's only professional ballet company.
- Community Theatre of Little Rock, founded in 1956, is the area's oldest performance art company.
- Robinson Center Music Hall hosts the Arkansas Symphony Orchestra and several Broadway national touring shows each year.
- Wildwood Park for the Arts is the largest park dedicated to the performing arts in the South and features seasonal festivals and cultural events.

Museums

- The Mosaic Templars Cultural Center in 2020 achieved accreditation by the American Alliance of Museums, the highest national recognition a museum can receive. The accreditation is the ninth awarded to a black culture/history institution in the nation and only the third in the South.

- Little Rock has a proud history of being on the forefront of the civil rights movement. The Little Rock Central National Historic Site commemorates the desegregation of Central High School in 1957 and the persistence of nine African American students in attending a formally all-White school.
- The William J. Clinton Presidential Center, opened in 2004, includes the Clinton presidential library and the offices of the Clinton Foundation and the Clinton School of Public Service. The library facility cantilevers over the Arkansas River, echoing Clinton's campaign promise of "building a bridge to the 21st century."
- The Arkansas Arts Center, the state's largest cultural institution, is a museum of art and an active center for the visual and performing arts.
- The Museum of Discovery features hands-on exhibits in the fields of science, history, and technology.
- The Historic Arkansas Museum is a regional history museum focusing primarily on the frontier time period.
- The MacArthur Museum of Arkansas Military History, opened in 2001, is the last remaining structure of the original Little Rock Arsenal and one of the oldest buildings in central Arkansas. It was the birthplace of General Douglas MacArthur who went on to be the supreme commander of US forces in the South Pacific during World War II.
- The Old State House Museum is a former state capitol building now home to a history museum focusing on Arkansas' recent history.
- The ESSE Purse Museum illustrates the stories of American women's lives during the 1900s through their handbags and the day-to-day items carried in them.
- Heifer International is the headquarters of the global hunger and poverty relief organization, adjacent to the Clinton Presidential Center.

Food and Drink

- Arkansas's capital city offers an amazing selection of local restaurants, award-winning chefs, and unique dining experiences. The ever-expanding Little Rock foodscape is a mashup of Southern classics, soul food, barbecue, and adventurous ethnic dishes. In 2015 Forbes Travel Guide included Little Rock in their "Five Secret Foodie Cities."
- Check out Little Rock Food and Drink for the best locally-owned restaurants in the city (www.littlerock.com/food-drink).
- Coffee Shops – Blue Sail Coffee, Guillermo's Coffee, Mylo Coffee Co., Mugs Café, Nexus Coffee and Creative, Revival Coffee, River City Coffee, Zeteo Coffee
- Sweet Treats – A Little Crepsy, AR Donuts, Boulevard Bread, Community Bakery, Dempsy Bakery, Honey Pies, Kilwins, Le Pops, Loblolly Creamery, The Cupcake Factory
- Local Beverages – An Enchanting Evening Winery, Diamond Bear Brewing Co., East Sixth Brewing Co., Flyway Brewing Co., Lost Forty Brewing, River Bottom Winery, Rock Town Distillery, Stone's Throw Brewery, Vino's Brewpub
- Little Rock's food truck scene satisfies the appetites of locals and visitors alike. Approximately 70 food trucks converge in Little Rock on an annual basis in September for the Main Street Food Truck Festival.
- Numerous ethnic food festivals occur on an annual basis in Little Rock, including Greek, Jewish, Indian, Turkish, and Italian food celebrations.

Outdoors

- *Outdoor* magazine named Little Rock one of its 2019 Best Places to Live.
- The Arkansas River Trail offers over 17 miles of river view that runs along both the north and south banks of the Arkansas River. There are five pedestrian and bicycle bridges connected to the River Trail, making Little Rock the only city in the country with five pedestrian bridges that stretch over a navigable body of water. The trail is a must-see for visiting cyclists, hikers, and outdoor enthusiasts.
- The Big Dam Bridge is one of the longest pedestrian and bicycle bridges in North America and spans the Arkansas River.
- Little Rock has over 60 parks and recreational areas.
- Riverfront Park stretches 11 blocks on the south bank of the Arkansas River in downtown Little Rock. The park provides 33 acres of urban parkland for outdoor events, leisure activities, and a glimpse of the state's history.
- Two Rivers Park is a 1000 acre tract at the confluence of the Arkansas and Little Maumelle Rivers. The park has many amenities including bike trails, walking trails, gardens, and abundance of wildlife, as well as the new pedestrian bridge that connects to the Arkansas River Trail.
- Pinnacle Mountain State Park is adjacent to the western side of Little Rock. The most prominent feature of the park is Pinnacle Mountain, which towers over 1,000 feet above the Arkansas River Valley and includes several hiking trails. The park also includes the Arkansas Arboretum, an interpretive trail with flora and tree plantings.
- Rattlesnake Ridge Natural Area contains 5 miles of trails rated intermediate to expert.
- Toltec Mounds Archeological State Park, a national historic landmark, comprises one of the largest and most impressive archeological sites in the Lower Mississippi River Valley. Presented here are Arkansas's tallest Native American mounds.

Sports

- The Arkansas Travelers, the AA professional minor league baseball affiliate of the Seattle Mariners, play their home games at Dickey-Stephens Park in North Little Rock.
- The Little Rock Rangers soccer club of the National Premier Soccer League (NPSL) played their inaugural seasons in 2016. Home games are played at War Memorial Stadium in the heart of Little Rock and boast one of the highest fan attendances in the NPSL.
- War Memorial Stadium also is the second home of the University of Arkansas Razorbacks football team who play most of their home games at Donald W. Reynolds Razorback Stadium in Fayetteville.
- The city is also home to the Little Rock Trojans, the athletic program of the University of Arkansas at Little Rock. The majority of the school's athletic teams are housed in the Jack Stephens Center, which opened in 2005. The Trojans play in the NCAA Division II Sun Belt Conference, where the Arkansas State Red Wolves are their chief rival.
- The Little Rock Marathon, held on the first Sunday of March every year since 2003, features the world's largest medals given to marathon participants.

Links to Local Information

- Little Rock Visitors Bureau – www.littlerock.com
- Little Rock Calendar of Events – www.littlerock.com/calendar

- Little Rock Neighborhoods – www.littlerock.com/travel-tools/neighborhoods/