Psychology Internship Program
United States Medical Center for Federal Prisoners
2014-2015

Springfield, Missouri

Accredited by the
American Psychological Association

Member, Association of Psychology Postdoctoral
and Internship Centers (APPIC)

Notice to all applicants: This 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 intern applicant.

Updated: June 13, 2013

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Philosophy and Objectives

We are delighted that you are considering the U.S. Medical Center for Federal Prisoners as a potential internship for the upcoming internship year. Our internship program at the U.S. Medical Center seeks to foster the professional and personal growth of each intern. The program is structured to provide certain core experiences to each intern, yet is sufficiently flexible that the training experience is individualized to provide learning opportunities in areas of special interest. Although each intern completes all rotations, we request input from the intern in selecting training experiences designed for the intern's specific training needs.

U.S. Medical Center for Federal Prisoners

The internship year at the U.S. Medical Center permits each intern to practice previously learned skills and develop new clinical skills under the supervision of a variety of experienced psychologists representing a diversity of professional orientations. Our psychologists adhere to a scientist-practitioner model of supervision with our primary goal being the training of general adult practitioners. The internship experience fosters the improvement and acquisition of traditional skills in assessment and psychotherapy with a broad spectrum of patients. Interns collaborate with a variety of professional disciplines and develop increasing sensitivity to ethical and cultural issues.

Since the training experience is primarily within a hospital-correctional setting, it has a decidedly forensic orientation and would be of particular interest to predoctoral applicants with a burgeoning interest in forensic or correctional psychology. The internship program prepares each aspiring psychologist for a broad range of future employment opportunities, particularly those seeking future employment in a correctional setting. We are looking forward to receiving your application.

Please contact me if you have any questions, and good luck with your application process.

Elizabeth Tyner, Ph.D.
Internship Program Coordinator
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(417) 862-7041, ext. 1124

Overview of the Federal Bureau of Prisons

For over 80 years, the Federal Bureau of Prisons (the Bureau) has been housing federal inmates. In March 2011, Bureau institutions housed approximately 172,000 federal prisoners. Most of these individuals are serving sentences for offenses involving weapons, illegal drugs, or bank robbery, but a variety of other crimes against persons or property are represented among the prison population, including "white collar" crimes, such as embezzlement, bank and credit card fraud, and securities violations.

Inmates convicted of the most serious offenses, and those whose institutional adjustment is poor, are housed in maximum security settings, or penitentiaries. Most inmates live in medium or low security institutions affording greater degrees of personal freedom. Most facilities have in-house support services, including Medical and Psychology Departments. However, the Bureau maintains a series of "medical referral centers" to provide for prisoners whose needs cannot be adequately addressed in general population settings. The U.S. Medical Center is a medical referral center.

BOP Central Office in Washington, DC

Male and female inmates are diverse in their cultural orientations, educational levels, mental conditions, motivations, needs, and abilities. Some have made conscious decisions to engage in repeated criminal acts. Others are incarcerated for offenses which reflect uncharacteristic behavior, perhaps due to poor judgment and situational stress. Many inmates suffer from serious mental and behavioral disorders and require assistance in maintaining the degree of psychological stability necessary to function adequately in their environment. Most institutions offer psychology services to these inmates.

The prevailing philosophy regarding rehabilitation is that it is not something that can or should be forced upon an inmate. However, the Bureau provides ample resources to assist those who are motivated to change maladaptive thought and behavior patterns. These include academic and vocational programs, which have enabled thousands of prisoners to earn high school equivalency certificates and to gain proficiency in graphic arts, food services, diesel mechanics, engine repair, computer sciences, and a surprising variety of other marketable skills.

U.S. Penitentiary Alcatraz

Psychology Services in the Bureau of Prisons

Within most institutions of the Bureau, psychologists function as the main providers of mental health services to inmates. Departments range in size from a single individual to a large group of psychologists, and they typically operate in much the same way as community mental health centers. Most clients are self-referred, while some are sent by other staff members, or are advised by the federal courts or parole boards to seek treatment. In most cases, inmates have the right to accept or refuse psychological services.

A large proportion of federal inmates have been convicted of drug-related crimes, and the majority of these individuals have substance abuse histories. In response to this, Psychology Services has formulated DAP, the Drug Abuse Program, a treatment program which combines didactic and therapeutic approaches to offer clients a way out of the addiction-crime-prison cycle.

Psychologists are frequently called upon to respond to a range of other problems. They provide crisis intervention to acutely suicidal and psychotic individuals, as well as long-term psychotherapy to those seeking to resolve a variety of deeply entrenched, self-defeating habits.

Psychologists routinely provide assessments. Often, these are referrals from federal courts or parole boards. Sometimes other staff members, particularly teachers in the Education Department, will request evaluations. Some Bureau psychologists have been involved in conducting psychological assessments of candidates for the Federal Witness Protection Program.

The Bureau employs doctoral-level clinical and counseling psychologists. Staff psychologists are required to be licensed or license eligible, and are encouraged to seek further credentialing (e.g., ABPP, APA Division Fellowship). Maintaining professional competencies is a priority, and continuing education opportunities are occasionally offered by the Bureau.

Starting from a mere seven institutions housing 12,000 inmates, the Bureau has grown to its present size in the 75 years of its existence. Today the federal prison population continues to grow. In order to house and care for these inmates, new institutions will be built, and thousands of new staff members hired. Among these will be many psychologists, making the Bureau one of the largest employers of clinical and counseling psychologists in the United States.

The BOP Psychology Internship Program: An Overview

For years, the Bureau has been training psychology interns at its correctional institutions throughout the United States. Our primary purpose has been to prepare students to become general clinicians, and beyond this B since many interns join the Bureau as staff psychologists upon completion of their training B to teach a specialty in the provision of mental health services in correctional settings.

Beginning in the late 1980s, the Bureau's psychology internship program was restructured to assure the quality of training and to accommodate the changing needs of today's predoctoral psychology interns. The program concentrates resources in several institutions, each of which was selected on the basis of the commitment of its staff to providing training, and in some cases, to its geographic proximity to other mental health agencies which could serve as adjuncts to the program.

The original sites chosen to host these programs were the Federal Correctional Institutions at Fort Worth, Texas; Lexington, Kentucky; Morgantown, West Virginia; Petersburg, Virginia; Tallahassee, Florida; Butner, North Carolina; and the U.S. Medical Center for Federal Prisoners at Springfield, Missouri. Presently, nine programs have been accredited by the American Psychological Association (Butner, Carswell, Devens, Fort Worth, Lexington, Los Angeles, Rochester, Springfield, and Tallahassee), and additional internship sites are being developed.

Bureau Psychology Internship Programs share several "core" elements, in order to facilitate quality assurance in training. Interns receive graduated exposure to the clinician role, practicing with greater independence as their skills and confidence increase, yet always with supervisors available. A sequence of seminars is designed to increase interns' general fund of clinical knowledge. An understanding of specialized issues and opportunities to engage in research are also key aspects of the experience.

Initially, all interns spent one day per week in an outplacement, such as a community mental health center or psychiatric hospital. More recently, internship sites which can offer a broad and general training experience have the option of offering full-time training. Because the U.S. Medical Center offers a wide variety of patient populations and training opportunities, interns do not participate in outplacement training.

We find that potential interns often ask the following questions:

Is it safe to work in a prison?

The Federal Prison system has implemented many security procedures and installed an array of equipment to optimize safety for staff and inmates. In this and many other respects, we consider ourselves second to no other prison system in the world. Although it would be impossible to guarantee unconditionally anyone's safety in a correctional setting (or any other work setting, for that matter), all incoming psychology interns receive extensive training on safety issues so they are comfortable when they begin working at the U.S. Medical Center.

Won't my training be too limited if I just work with inmates?

Prisoners are individuals, much more different than they are alike. There are many parallels that can be drawn between the presenting problems and client characteristics of prisons and community mental health centers. For example, there are those who use mental health services appropriately and those with hidden agendas, clients in crisis and those with less acute but more long-term concerns, and some with greater psychological resources than others.

While some inmates fit the popular stereotype of the hardcore criminal or repeat offender, others are first-time offenders who genuinely want to change the maladaptive behavior and thought patterns that led them to prison. Some are "white-collar" offenders. Others, reflecting what Dr. Linda Teplin has referred to as "the criminalization of the Mentally Ill," are victims of severe Axis I disorders, including schizophrenia and bipolar disorder.

Notably, the federal inmate population is rich in diversity with inmates from all U.S. states and territories, consisting of a broad variety of racial, ethnic, religious, socioeconomic, and cultural groups. While all have been charged or convicted of a federal crime, they present a degree of diversity rarely seen in traditional clinical settings.

How "marketable" will my internship be?

We seek interns who are interested in being trained as clinical generalists and who also would like to learn a specialty in substance abuse, forensic assessment, and/or correctional psychology. Upon completion of their training, many interns accept offers of employment with the Bureau. Others obtain postdoctoral fellowships or assume positions in community mental health centers, private practices, hospitals, academia, and other settings.

Would I have the chance to focus at length on specific sub-areas of psychology during my internship?

The Bureau has made it a point to provide enough flexibility in the internship program model to accommodate the interests of all interns, within limits. For example, some sites may provide training in a particular area on-site or provide leave to allow an intern to attend off-site training.

Is the Bureau of Prisons an Equal Opportunity Employer?

Absolutely. We highly encourage the applications of women and ethnic minorities.

The U.S. Medical Center for Federal Prisoners: Our Mission

Authorized by an act of Congress, the United States Medical Center for Federal Prisoners opened its doors in 1933 (as the "United States Hospital for Defective Delinquents") to provide medical, surgical, and mental health services for male inmates within the custody of the Federal Bureau of Prisons. The U.S. Medical Center was the first federal prison given responsibility for providing such services. The U.S. Medical Center is accredited by the Joint Commission for the Accreditation of Healthcare Organizations (JCAHO) in the areas of behavioral health, long-term care, and ambulatory care, and by the American Correctional Association (ACA).

As noted previously, institutions within the Bureau provide varying degrees of security from the least secure camps to the most secure penitentiaries. The U.S. Medical Center is designed to provide services to patients from all security levels. Inmates in need of medical or mental health services are transferred to the U.S. Medical Center from federal institutions throughout the country. Many patients are also transferred to the U.S. Medical Center pursuant to court orders from federal jurisdictions nationwide. The U.S. Medical Center has an inmate population of approximately 1,200. Approximately 400 inmates are medical or surgical patients, and about 300 are assigned to the Mental Health Services. The remaining 500 inmates constitute a lower security "work cadre" that assists in maintaining the facility. Inmates are involved with educational and vocational training, recreation facilities, and religious services.

The U.S. Medical Center has one of the largest staffs and budgets of any facility within the Federal Prison System. The two largest departments, Correctional Services and Nursing, employ approximately 230 and 110 staff members respectively. There are numerous physicians on the medical staff representing an assortment of medical specialties. Currently, the psychology staff is composed of 12 licensed psychologists, two treatment specialists, and four predoctoral interns. There are also six psychiatrists and seven social workers. The U.S. Medical Center is located in Springfield, Missouri, a city of approximately 200,000. Springfield, the third-largest city in Missouri, is located 170 miles south of Kansas City and 215 miles southwest of St. Louis.

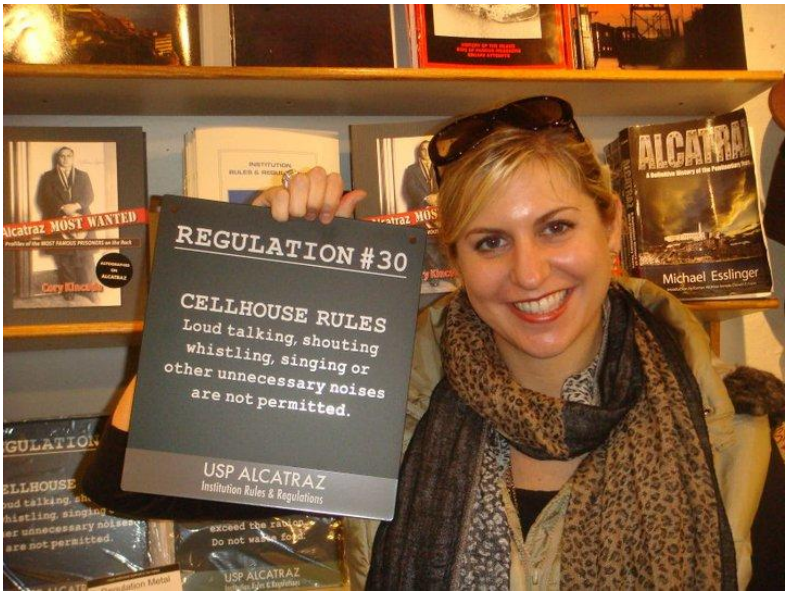
Psychology Services at the U.S. Medical Center

The Psychology Service is staffed by twelve doctoral level psychologists. Both clinical and counseling degrees are represented. All staff members are licensed, and four staff members are board certified in forensic psychology. All staff members actively participate in the supervision of interns. Clerical support is provided by one Psychology Department secretary, augmented by numerous secretaries assigned to other departments.

The Psychology Service is equipped with the traditional assessment tools of psychology. Psychologists and interns all have private offices with computers. A common computer is used to score a variety of psychological tests. Psychologists use a number of professional journals and have access to computerized literature searches through a local hospital and through the Bureau's library in Central Office. Many articles can be downloaded in full text from the BOP library website; those not available in full text can be quickly provided by library staff.

The psychology staff members are located in offices near the housing areas where their patients reside. Under the administrative direction of the Chief of Psychology, eight staff psychologists work in the Mental Health Service. Those staff members conduct evaluations of patients referred from other BOP facilities and federal courts, and they provide treatment in a hospital setting. One staff member provides services to our "work cadre" of lower security inmates who were not referred for mental health or medical care, one coordinates our drug treatment programs, and one works in the Medical/Surgical Unit. Additionally, the psychology department includes two treatment specialists who work in the drug treatment program.

In accordance with the by-laws of the medical staff, licensed psychologists are members of the medical staff and have privileges to admit and discharge patients from the Mental Health Treatment Service. The current psychologists are described in Appendix A.



Dr. Libby Tyner visiting USP Alcatraz

Description of the U.S. Medical Center Internship Program

Overview

The U.S. Medical Center for Federal Prisoners Internship Program is accredited by the American Psychological Association and meets all APA criteria for predoctoral internships in professional psychology. Any questions concerning accreditation procedures of this internship program can be directed to the Office of Program Consultation and Accreditation, American Psychological Association, 750 First St., NE, Washington, DC 20002-4242, (202) 336-5979.

The internship is considered a full-time position. It assures forty hours of services and supervision per week. Authorized leave time for attending professional conferences or defending a dissertation is often possible.

An objective of the internship is to provide each intern with training experiences under the supervision of experienced psychologists in a variety of patient care settings. To attain this objective, each intern has a sequence of rotations at the U.S. Medical Center, in addition to ongoing didactic activities. All interns at the U.S. Medical Center complete all rotations; there is no competing for desired opportunities. Interns complete three four-month primary rotations. Two rotations, which focus on evaluation and treatment, are offered on the Mental Health Service. The third rotation in offered on the Medical/Surgical Unit.

Interns also complete two six-month secondary rotations. These experiences are in the work cadre unit and the Residential Drug Abuse Treatment Program. These rotations require six to eight hours per week concurrent with the primary rotations.

Individual Supervision

The psychology internship program at the U.S. Medical Center adheres to APA guidelines for supervision. At a minimum, each intern will receive four hours of supervision (at least two of which are individual) each week. There are twelve licensed psychologists on staff available for supervision, with supervisory duties divided fairly equally among them. The Internship Program Coordinator is responsible for the development, implementation, and evaluation of the internship program. She works in conjunction with the Chief of Psychology in making training assignments, handling clinical and administrative problems, planning the sequence of formal training experiences, preventing duplication of experiences, and maintaining close contact with other supervisors.

Seminars and Case Presentations

During the internship year, each intern will attend a sequence of seminars. At the beginning of the internship year, each intern completes an eight-day orientation course to the Bureau and the U.S. Medical Center. Weekly general didactic seminars are held throughout the internship year. Such seminars are typically one hour long and are taught primarily by psychologists and psychiatrists on staff. Some weeks, interns prepare for seminars by completing assigned readings. A list of recent didactic seminar topics is presented in Appendix B.

U.S. Supreme Court

A second seminar series focuses on forensic psychology issues. That seminar combines didactic learning experiences with interactive discussions of landmark decisions in mental health case law. Interns participate in discussions of relevant case law associated with forensic issues and mental health treatment issues. In the forensic seminar, interns prepare legal briefs of significant mental health law cases. At the end of the year, each intern then has a collection of briefs on many of the most significant cases in mental health law. This seminar requires considerable reading.

Evaluation Procedures

Evaluation of interns is a continuous, systematic process. Interns receive frequent informal feedback during individual and group supervision sessions. At the conclusion of each rotation, a formal evaluation is completed, and the intern may meet with all the staff members involved in his or her training to discuss progress and future goals. Narrative evaluations are also provided to the training director of each intern's doctoral program following each primary rotation.

Interns also provide evaluations of their internship experiences in a variety of ways. Interns are always encouraged to provide informal feedback to the Internship Program Coordinator, Chief of Psychology, and intern supervisors. Formally, the interns complete regular evaluations of their supervisors. At the end of the internship, the interns are asked to complete an evaluation of their internship experience.

Description of Internship Rotations

Mental Health Treatment

The interns on this primary four-month rotation provide psychological services to male inmates troubled by a broad spectrum of psychological difficulties. Most of the patients engaged in inpatient treatment have severe and chronic mental illnesses, such as schizophrenia and bipolar disorder. Symptoms may include hallucinations, delusional beliefs, or severe disorganization of thought and behavior. Individuals with mood disorders may pose a high risk for self-injurious or suicidal behavior. An organic component is sometimes present in these patients. Many patients also have an underlying character disorder which frequently complicates treatment.

Interns are members of an interdisciplinary team. Each team is represented by an array of disciplines including psychiatry, psychology, social work, nursing, case management, and corrections. The team meets on a weekly basis and team members work together to provide optimum care for their assigned patients. In this context, the intern is expected to grow as a contributing team member as their confidence develops. Under the guidance of a supervising psychologist, each intern will be involved in the patient care process from admission to discharge.

Interns complete assessments of assigned patients and participate in the formulation of patient treatment plans. Interns provide individual therapy and facilitate group therapy sessions with their supervisors. Depending on an intern's skill and comfort levels, he or she may lead a group independently. Guidance and instruction is provided on hospital charting procedures, including the Bureau's electronic medical record. Interns become acquainted with the treatment regulations of the Joint Commission on the Accreditation of Healthcare Organizations and the Bureau of Prisons. The intern is exposed to ongoing quality improvement programs. This rotation also allows the intern to observe the effects of psychiatric medication. Collegial dialogues with unit psychiatrists further each intern's understanding of psychopharmacology. The intern will develop skills in crisis intervention and in assessment of risk for violence.

Finally, the treatment rotation generally offers the opportunity to be involved in risk assessments for civilly committed patients or patients nearing the end of a prison sentence. The purpose of these assessments is to determine whether patients are dangerous due to a mental illness, and whether they meet the criteria for civil commitment.

Mental Health Evaluation

On this primary, four-month rotation, the intern will complete evaluations of pretrial defendants referred to the U.S. Medical Center from federal jurisdictions across the country. Most such referrals request opinions on the issues of competency to stand trial, criminal responsibility, or both. The intern will gain experience in the process of completing such psychological evaluations and applying the various federal legal standards to the referral issues. Great emphasis is placed on the preparation of written reports which are thorough, yet relevant and understandable when read by judges and attorneys. The intern may have an opportunity to accompany staff members to court hearings and/or trials to observe the drama (or sometimes, the tedium) of the adversarial process. Since interns complete evaluations of forensic patients with

their supervisors, they are also subject to being subpoenaed to provide testimony in Federal Court. Most years, one or two interns testify in federal court.

Dr. DeMier

Additionally, interns on this rotation gain experience in evaluating sentenced inmates transferred from other prison facilities to determine whether inpatient treatment is needed. The intern is involved in the process of assessing whether involuntary civil commitment should be pursued for individuals who are opposed to hospitalization. In this process, the intern will learn relevant federal civil commitment laws and observe court proceedings regarding commitment, which may include testimony about patient treatment needs and justifications for involuntary treatment and commitment.

Medical/Surgical Unit

During this primary, four-month rotation, each intern is exposed to the psychological services provided to inmates receiving medical care. Interns on this rotation will work in the medical hospital, consulting with medical and unit staff regarding treatment. They will develop skills in consulting with physicians on the mental health issues related to a wide variety of physical diagnoses. They will have an opportunity to lead or co-lead special needs groups, such as medical support groups for dialysis and immune-compromised patients. Interns will participate in interdisciplinary team meetings with professionals from medical specialties. Additionally, interns will provide brief interventions for patients in a clinic setting, although some of those cases become long-term therapy cases. Interns will have an opportunity to work with a variety of behavioral medicine issues which may include pain management, stress reduction, AIDS and HIV status counseling, dialysis, and pulmonary management. The rotation includes developing skill in organ transplant evaluations. Additionally, interns gain experience in evaluating patient readiness for interferon treatment for treatment of Hepatitis C. Interns on this rotation participate in neuropsychological assessments for a wide range of presenting problems, including dementia, traumatic brain injuries, and various other types of neuropathology encountered in a hospital setting, as well as neurological consultation for forensic evaluations.

Work Cadre Unit

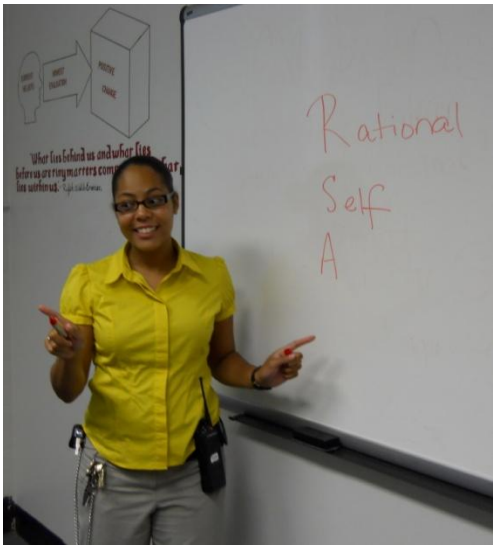
The U.S. Medical Center houses approximately 500 low security inmates who are assigned to the Work Cadre Unit. These inmates have no acute medical or mental health problems. Their needs and concerns are similar to other low security inmates in other federal institutions and range from adjustment reactions to substance abuse to schizophrenia. In many ways, this part of the internship resembles an outpatient clinic. This work, with non-hospital patients, is a secondary, six-month rotation. Each intern works six to eight hours per week for half the year in this area.

The Work Cadre Unit offers several training opportunities for interns. This enables the intern to optimize training opportunities by focusing their involvement in areas of specific interests or needs. General areas in which all interns will become familiar include intake screenings, brief therapy, segregation reviews, and the Psychology Services and BOP data bases (PDS and Sentry,

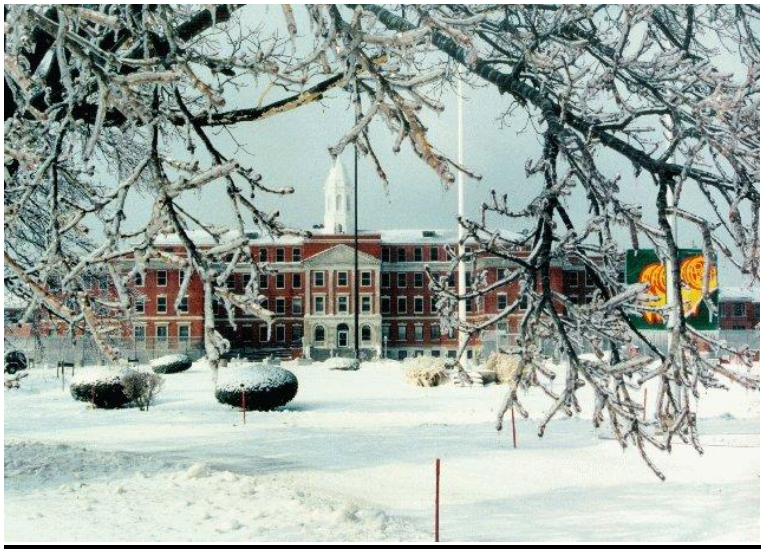
respectively). Specific areas where interns may elect to focus their training may include, but are not limited to, individual and group therapy (including group therapy with dually diagnosed inmates); development, implementation and evaluation of inmate programs; individual assessment; and presentations in established programs such as the Parenting Program or Pre-release Program. Involvement in substance abuse treatments that are less intensive than the RDAP may also be available. Time invested in the Work Cadre Unit will enable the intern to become familiar with the workings of a typical prison and the role of Psychology Services in the federal prison system.

Residential Drug Abuse Treatment

In late 2007, the U.S. Medical Center launched a Residential Drug Abuse Treatment program (RDAP) for medical patients. RDAP is a standardized drug abuse treatment program offered at over 50 federal prisons. A total of over 6,000 inmates are participating at any given time. Inmates participate in 500 hours of treatment over a nine-month period using a modified therapeutic community approach. Interns complete a secondary, six-month rotation in this program, spending six to eight hours a week participating in the delivery of substance abuse treatment and monitoring patient progress. Interns will also become familiar with other aspects of the BOP's substance abuse treatment initiative including motivational interviewing, non-residential treatment services, and the eligibility interview process. Skills acquired in this rotation are easily transferable to any BOP facility.



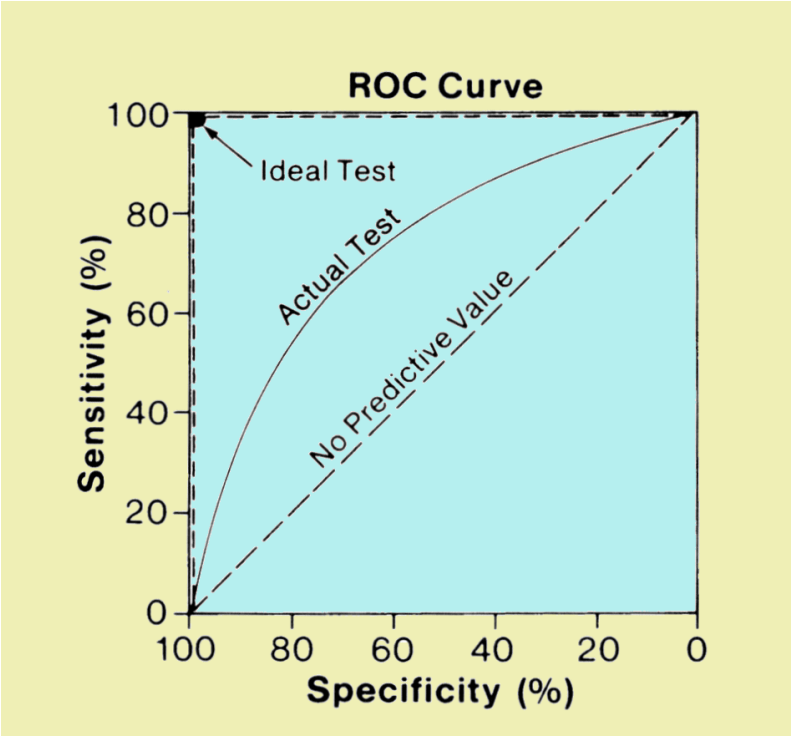
Intern Andrea Watson leads an RDAP Group



U.S. Medical Center for Federal Prisoners

Research

The U.S. Medical Center employs a scientist/practitioner model of training, and the staff value research by psychologists. Participation in research is encouraged but not required. Interns are urged to complete their dissertations during the internship year. Psychology interns lacking dissertation topics may receive guidance from the psychology staff (although most interns with whom the internship is matched have a dissertation progress well underway prior to the beginning of internship). Interns can be provided up to four hours during each week to concentrate on their dissertation projects once the dissertation proposal has been approved by their university dissertation committee. The allocation of time for this purpose is decided on a case-by-case basis by the intern's primary supervisor and the Internship Program Coordinator. Psychology interns are also encouraged to collaborate with psychologists in conducting other research projects. Past research studies have investigated various aspects of psychological assessment, malingering, issues of diversity, and internship training in a correctional setting.



Eligibility and Application Procedures

Eligibility

Positions offered for the coming internship year are open to students enrolled in doctoral programs in Clinical or Counseling Psychology. Preference will be given to applicants from APA accredited programs in either Clinical or Counseling Psychology; however, others are also eligible to apply. Similarly, preference will be given to those who have accrued at least 1000 hours of intervention, assessment, and support hours. Additionally, applicants must have accrued a minimum of 500 hours of intervention experience and 150 hours of assessment experience; these figures do not include support hours.

The Bureau of Prisons is an Equal Opportunity Employer and encourages the application of women and ethnic minorities. Positions will be filled strictly in accordance with APPIC policy.

Application Procedures

This internship is an APPIC Member and participates in the National Match. All applications must be submitted electronically in accordance with the Online AAPI procedures established by APPIC.

All applications are evaluated, and promising candidates are invited for an interview. Interviews will be scheduled in December and held during January. **All efforts will be made to notify applicants of their interview status by December 15**. An on-site interview at the U.S. Medical Center has obvious advantages for both parties. When this is not feasible, a telephone interview can be arranged. However, the applicant must complete a pre-employment interview at a Bureau of Prisons correctional facility before rank order lists are submitted.

Since all Bureau of Prisons positions are designated as "sensitive," applicants must successfully complete a security clearance procedure before the offer of an internship position can be considered final. This procedure includes a personnel interview as well as a background investigation and drug screening. This interview must take place before a tentative offer can be made. Such interviews may take place at any Bureau of Prisons correctional facility, making it easier on applicants who cannot visit the site to which they are applying due to time or financial constraints.

Additionally, any question you may have regarding eligibility should be resolved prior to submitting your list for matching. **Offers of internship positions resulting from the APPIC Match are strictly contingent upon satisfactory completion of the background investigation process. For individuals selected through the matching process, a field investigation will follow to verify that the information provided in interviews and on required forms is accurate. Failure to complete this process or a finding that an applicant is outside the guidelines for employment in a sensitive position would preclude participation in the program.** Once hired, interns must comply with the Bureau's Program Statement on Standards of Employee Conduct and Responsibility.

The deadline for completed applications is November 1. All application materials must be submitted electronically to the APPIC application portal, in accordance with APPIC policy. You may apply to one or more of the Bureau of Prison's internship programs, but you will need to apply separately to each program where you wish to be considered. Your credentials will be evaluated independently at each site.

A computer matching program employed by APPIC is used to match intern applicants with internship sites. All positions will be filled strictly in accordance with APPIC policy. Rank Order List Submission Day, the deadline by which all programs and applicants must submit their preference lists to APPIC, and Notification of Results Day are determined by APPIC. The current APPIC Match Policies can be viewed on their website: http://www.appic.org/ (Click on "Match Policies" in the right-side menu).

After applications are submitted electronically via the APPIC portal, they are evaluated and the most suitable candidates are contacted to arrange an interview. Applicants visiting the U.S. Medical Center tour the institution and meet with staff and the current interns. Applicants thus have the opportunity to learn more about the program, information that will be beneficial when rank-ordering preferences for internship programs. The interview process also provides our staff an opportunity to assess the candidate's clinical and interpersonal skills.

Completed applications must include:

(1) APPIC Application for Psychology Internship form, (AAPI),
(2) a current vita which lists academic and professional experience, and research,
(3) official transcripts of all graduate coursework, and
(4) reference letters from three graduate faculty or supervisors who are familiar with your work in psychology as well as your personal qualifications.

Most Bureau of Prisons internship sites request a work sample and work samples are listed as a requirement on the BOP webpage. **However, the U.S. Medical Center does not require a work sample**.

Feel free to visit our web page at the Bureau of Prisons website (www.bop.gov or http://www.bop.gov/jobs/students/psychology.jsp). If you have any questions, please do not hesitate to contact the Internship Program Coordinator. Dr. Tyner can be contacted by e-mail to etyner@bop.gov , or by phone at (417) 862-7041 ext. 1124.

This 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 intern applicant.

Compensation and Benefits

Psychology interns during the 2014-2015 training year will receive the following benefits:

(1) a stipend of approximately $49,000,
(2) annual (vacation) leave and sick leave earned at the rate of 4 hours per 80 hours worked, equivalent to 13 days of each for the year,
(3) liability coverage for professional activities performed within the scope of employment at the U.S. Medical Center for Federal Prisoners,
(4) support for research activities, including dissertations, (one half-day per week is allowed for completing research) upon approval by the Internship Program Coordinator and primary supervisor, and
(5) authorized leave to attend off-site training, upon approval by the Internship Program Coordinator and Chief of Psychology.

Please note that because psychology interns are not permanent employees, health insurance is not offered as part of the compensation package. Interns are nevertheless encouraged to maintain health insurance. Many interns find that they can obtain coverage from their universities.

Following the internship year, the Bureau of offers many promising interns positions as staff psychologists. New psychologists are given a degree of choice in terms of geographic area and type of prison setting (minimum, medium, or maximum). Some positions include the added benefit of student loan repayment; this varies by facility.

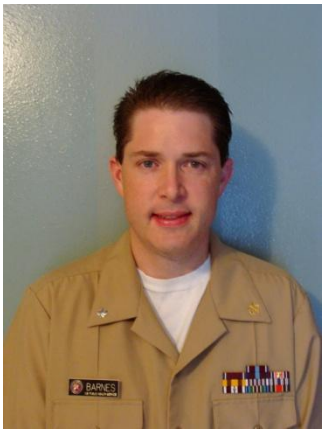
Because the stipend is so generous, interns are discouraged from engaging in paid work outside the Bureau of Prisons during the internship year. Moreover, by BOP policy, outside employment may require approval by the agency before it begins B **this varies based on the type of employment. Certain types of employment (such as other work in law enforcement) are specifically precluded.**

Appendix A
Psychologists on Staff

Randy Brandt, Ph.D.
Chief of Psychology
Florida State University, 1995
Interests: Substance abuse, psychopathy, risk assessment, internship training.

Elizabeth Tyner, Ph.D.
Internship Program Coordinator
Mental Health Evaluation Unit
West Virginia University, 2008
Interests: Forensic psychology, ethics and legal issues, and short-term cognitive behavioral therapy.

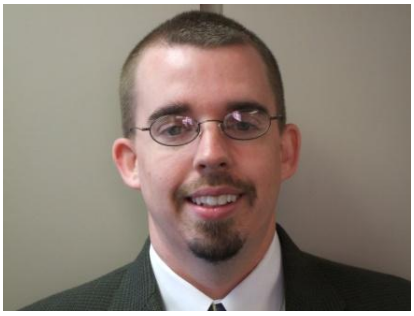
Georgina Ashlock, Ph.D.
Mental Health Treatment Unit
Ohio University, 1993
Interests: Group and individual therapy, dialectical behavior therapy, acceptance and commitment therapy, treatment of anxiety disorders, and the use of competitive team activities with the chronically mentally ill.



Vincen Barnes, Psy.D.
Mental Health Treatment Unit
Forest Institute of Professional Psychology, 2001
Interests: Individual psychotherapy,
Group psychotherapy,
Posttraumatic stress disorder.

Chad Brinkley, Ph.D., ABPP (Forensic)
Mental Health Treatment Unit
University of Wisconsin - Madison, 2002
Interests: Psychopathy, risk assessment,
forensic assessment, treatment in segregation.

Richart L. DeMier, Ph.D., ABPP (Forensic)
Mental Health Evaluation Unit
University of Wisconsin – Milwaukee, 1994
Interests: Psychological assessment, pretrial evaluations,
expert witness testimony, risk assessment,
and internship training.



Jason Engel, Psy.D
Residential Drug Abuse Program Coordinator
Forest Institute of Professional Psychology, 2001
Interests: Individual and group psychotherapy, substance abuse
treatment, internship and practicum training, risk assessment,
psychological assessment, and hypnosis.

Christina A. Pietz, Ph.D., ABPP (Forensic)
Mental Health Evaluation Unit
Texas A & M University, 1989
Interests: Treatment of sex offenders, Rorschach,
MMPI-2, forensic issues, and court testimony.

Lea Ann Preston Baecht, Ph.D., ABPP (Forensic)
Mental Health Evaluation Unit
Southern Illinois University, 1998
Interests: Forensic issues, court testimony, psychological assessment, and risk assessment.

Medical and Surgical Unit
University of Florida, 2011
Interests: Medical/Health Psychology, Forensic Assessments, Neuropsychology, Malingering.
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Angela van der Walt, Psy.D.
Work Cadre Unit
University of Denver, 2007
Interests: Forensic evaluations, trauma treatment, sex offender risk assessments, and internship/practicum training.

Elizabeth Weiner, Ph.D.
Mental Health Evaluation Unit
University of Toledo, 1997
Interests: Individual and group therapy, intervention with self-injurious and suicidal patients, dialectical behavior therapy, behavioral health, and end of life issues.

Appendix B
Recent Didactic Seminar Topics

Introduction to Correctional Techniques (Bureau of Prisons orientation)
Clinical Work in a Correctional Setting
Risk Assessment Training (Three sessions)
Dialectical Behavior Therapy I - Theory and Structure
Dialectical Behavior Therapy II - DBT Skills
Psychology Services in the BOP
Differentiating Organic Mental Illness (Two sessions)
Federal Mental Health Statutes
Psychological Testing B Theory and Practice (Four Sessions)
Malingering Assessment
Psychopathy
Assessing Competencies
BOP Job Opportunities
Factitious and Somatoform Disorders
Cultural Diversity (Three sessions)
Clinical Evaluation of Juveniles
Psychopharmacology (Three sessions)
Water Intoxication
Panic Disorders
Autism, Asperger's, and Related Disorders
Expert Witness Issues
Mock Trial
Exculpatory & Mitigating Defenses
Theories of Substance Abuse
Treating Chronic Mental Illness
Clinical Hypnosis
Evaluating Criminal Responsibility
Child and Family Psychotherapy
Overview of Psychoneuroimmunology
Treatment of Self-Mutilation
Death and Dying
Motivational Interviewing
Electroconvulsive Therapy
Diagnosis and Management of Acute Psychosis and Delirium
Rorschach: A Psychoanalytic Perspective
Attention Deficit Hyperactivity Disorder
Psychological Autopsy

Appendix C
Employment Opportunities Within the Federal Bureau of Prisons

For over twenty years, the Bureau has relied upon the psychology internship program to provide a large portion of the number of entry level clinical and counseling psychologists required to meet staffing needs. Many of the psychologists currently employed by the Bureau began their careers after completing internships with us.

Over the past ten years the federal prison population has grown dramatically, and projections for the next ten years suggest no decrease in the number of prisoners in the Bureau. It is estimated that numerous additional psychologist positions will be created in the next several years. While we do not promise jobs automatically for those who are accepted into the internship programs, we prefer to hire people who have already proven themselves to be competent practitioners in correctional environments. Therefore, we often look to our intern classes first when making employment offers.

Newly selected staff psychologists typically start at the GS-11 salary level (approximately $57,400). Upon successful completion of the first year, psychologists are routinely upgraded to the GS-12 level (approximately $68,800). Subsequently, the GS-13 and GS-14 levels may be available. The beginning of the pay scale for a GS-13 is approximately $81,800; the top end of the GS-14 pay scale is approximately $125,700.) Some positions include the added benefit of student loan repayment; this varies by facility. Some staff psychologists become Chiefs of Psychology at institutions within a few years of joining the Bureau. Other career tracks include leading specialized treatment programs, substance abuse programs, or internship programs. Psychologists can also become administrators; a former Director of the Bureau, Dr. Kathleen Hawk Sawyer, began her Bureau career as a psychology intern.

Psychologists enjoy a great deal of professional autonomy in the Bureau. We are the main providers of mental health services, and our departments are for the most part successful in maintaining complementary, collegial relationships with psychiatrists. Psychologists in the Bureau are routinely involved in forensic evaluations for the Federal Courts, psychological evaluation of candidates for the Federal Witness Protection Program, hostage negotiation teams, substance abuse treatment programs, suicide prevention programs, crisis intervention response teams for trauma victims, predoctoral internship training programs, employee assistance programs, inpatient mental health programs, staff training, and research.

The BOP values continuing educations of psychologists. Many psychologists attend seminars, workshops, or the national conventions. Funding for outside training may be available, and varies from year to year based on the vagaries of the federal budget.

Psychologists also have the opportunity to choose the part of the country (given the availability of positions) and the type of facility (maximum, medium, or minimum security) in which they wish to work.

As federal employees, all new psychologists are covered by the Federal Employee Retirement System, a pension plan which includes several attractive options for sheltering extra income, similar to a 401K plan. Bureau employees may retire after twenty years, provided they have

reached the age of 50, or at age 45 with 25 years of service, and receive a full pension. The Bureau is an Equal Opportunity Employer. However, in accordance with Public Law 39-350, applicants for entry level staff positions must be under the age of 37 at the time of appointment, with waivers possible through age 39. (This age limit does not apply to internship applicants, but individuals outside the age range could not be considered for full-time employment following internship.)

Appendix D
Past and Current Interns

Italicized names indicate employment with the BOP following internship

1996-1997

Wess Baugh	University of Arkansas
Victoria Buzzanga	University of Missouri - Kansas City
Gregg Gambone	Rutgers University
Elizabeth Weiner	University of Toledo

1997-1998

Mike Fogel	Illinois School of Professional Psychology
Patricia Hyatt	University of South Dakota
Joe McEllistrem	California School of Professional Psychology - San Diego
Lea Ann Preston	Southern Illinois University

1998-1999

Robert Cochrane	Wright State University
Sharon Mockenhaupt	Forest Institute of Professional Psychology
Karin Towers	Allegheny Univ. of the Health Sciences/Villanova Univ. School of Law
Paul Zohn	University of Montana

1999-2000

Kelly Ball	Minnesota School of Professional Psychology
Russell Cherry	Minnesota School of Professional Psychology
Sharon Ishikawa	UCLA
Marie Roman	California School of Professional Psychology-Alameda

2000-2001

Gary Bolz	University of Denver
Tanya Cunic	Central Michigan University
Lisa Levinson	Nova Southeastern University
George Schreiner	University of Southern Mississippi

2001-2002

Stacy Gathman	Forest Institute of Professional Psychology
Darryl Johnson	Sam Houston State University
Cristie Sealey	University of Alabama
Tom Spencer	Forest Institute of Professional Psychology

2002-2003

Amy Boyd	University of Louisville
James Hayden	Argosy University-Seattle
Alix McLearen	University of Alabama
Oliver Stone	Northwestern University School of Medicine

2003-2004

Erik Nabors	Drexel University
Leah Osborn	University of Nebraska
Lori Russell	Sam Houston State University
Jennifer Tenant	University of West Virginia

2004-2005

Jennifer Caperton	Sam Houston State University
Kwesi Dunston	University of Iowa
Tracey Fintel	University of Louisville
Mary Martin	University of North Texas

2005-2006

Sharelle Baldwin	Nova Southeastern University
Kimberly Bulava	Illinois School of Professional Psychology
Jason Gabel	University of Wisconsin
Jamie Hersant	University of Southern Illinois

2006-2007

Dia Brannen	University of Alabama
Scott Forbes	University of Louisville
Martin Lloyd	University of Minnesota
Wendy McCoy	Sam Houston State University

2007-2008

Chris Finello	Drexel University
Laura Howe-Martin	University of North Texas
Martha Smith	Indiana State University
Libby Tyner	West Virginia University

2008-2009

Michelle Gaines	Texas Tech University
Samantha Horsley	Sam Houston State University
Jon Mandracchia	Texas Tech University
Allison Tome	Nova Southeastern University

2009-2010

Aleha Buffaloe	Sam Houston State University
Doug Cacialli	University of Nebraska
Leah Glass	Sam Houston State University
Tracy Thomas	West Virginia University

2010-2011

Eric Gaughan	University of Georgia
Shannon Maney	Massachusetts School of Professional Psychology
Laurie Ragatz	West Virginia University
	University of Florida

2011-2012

Rachel Fazio	Forest Institute of Professional Psychology
Ashley Kirk	University of Georgia
Natalie Roweiheb	University of La Verne
Andrea Watson	University of Memphis

2012-2013

Charles Darrow	University of Nebraska
Meredith Meeks	Sam Houston State University
Tasha Phillips	Wright State University
Jill Rogstad	North Texas State University

2013-2014

Jacob Chavez	Forest Institute of Professional Psychology
Debra Chen	University of Alabama
Allison Schenk	West Virginia University

Appendix E
Springfield and the Surrounding Community

Springfield, "The Queen City of the Ozarks," is one of the lowest overall cost-of-living communities in the nation. The city has a broad economic and industrial base. Since Springfield adjoins major recreational and vacation attractions to the south, tourism services are extensive. The community has five colleges and a major university (Missouri State University, with a current enrollment of approximately 20,000 students). Springfield, as the third-largest city in Missouri, has shown consistent economic growth. It provides many of the conveniences of much larger cities, without the various common aggravations associated with living in larger communities. The city truly provides opportunities for a comfortable lifestyle.

A variety of recreational opportunities exist for enthusiasts of outdoor activities such as canoeing, fishing, and hiking. Numerous lakes are within easy driving distance of the city. The community offers plentiful shopping. In 2005, the city became home to the Springfield Cardinals, the Double-A affiliate of the St. Louis Cardinals Baseball Club. The area also provides cultural attractions such as the Springfield Symphony, Springfield Regional Opera, Springfield Little Theater, and Springfield Ballet. Performing arts venues attract national tours of musical acts and Broadway shows. For the history buff, there is a National Civil War Battlefield just outside the city. Numerous other activities are available in St. Louis, Kansas City, and Tulsa, larger cities within easy driving distance.

Springfield Cardinals

Bennett Springs State Park

Wilson's Creek National Battlefield

Juanita K Hammons Hall for the Performing Arts, Missouri State University