

FEDERAL MEDICAL CENTER
ROCHESTER, MINNESOTA



PRE-DOCTORAL PSYCHOLOGY INTERNSHIP
2019-2020

Accredited by the American Psychological Association

Association of Psychology Postdoctoral and Internship Centers (APPIC),
Member #1385

Program Code #138511

Note 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.

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U.S. Department of Justice
Federal Bureau of Prisons
Federal Medical Center

*2110 East Center St.
Rochester, MN 55904*

Welcome,

Thank you for considering a pre-doctoral psychology internship at the Federal Medical Center (FMC) in Rochester, Minnesota, one of seven medical centers across the Bureau of Prisons (BOP). This brochure will provide you with general information about the BOP, psychology services offered throughout the BOP, and the mission of FMC Rochester. In addition, specific information is provided about the training components of our internship program. Psychology services at FMC Rochester provides a wide-array of inmate services and can offer unique training for doctoral level psychology interns.

Our internship program is APA-accredited. There are three full-time intern positions available for the upcoming training year. Both the BOP as an agency and FMC Rochester are dedicated to providing high standard training to pre-doctoral interns in preparation for future careers as independent clinical and correctional psychologists. The BOP provides a variety of career opportunities for future psychologists and often hires BOP interns into the agency following completion of their internship year.

We believe the training program here at FMC Rochester is of the highest quality and will challenge you both personally and professionally. Our overall goal is to support our interns throughout their year-long training and beyond as they grow into confident and skilled psychologists. Our specialty areas include treatment of those with severe and persistent mental illnesses, within a cognitive-behavioral and recovery-oriented framework, and violence risk assessment using a structured professional judgment approach.

You will find information about applying for our internship program at the end of this brochure. Please review these materials carefully as you make a decision about applying to our program. If you have any questions that are not answered in the information provided, please feel free to contact the Internship Program Coordinator. We look forward to receiving your application.

Sincerely,

Kasey Odell, PsyD, HSPP
Internship Program Coordinator/Advanced Care Level Psychologist
(507)-287-0674 ext. 7148
KOdell@bop.gov

The Federal Bureau of Prisons

The Federal Bureau of Prisons (BOP) was established in 1930 to provide more progressive and humane care for federal inmates, to professionalize the prison service, and to ensure consistent and centralized administration of the 11 federal prisons in operation at that time. Today, the BOP consists of 122 institutions, 6 regional offices, a central office (headquarters), 2 staff training centers, and 27 residential reentry management offices. The BOP is responsible for the custody and care of over 183,000 federal inmates. Inmates convicted of the most serious offenses are housed in maximum security institutions or penitentiaries. However, the majority of inmates live in medium, low, or minimum security institutions which provide greater degrees of personal freedom.

With the core values of Respect, Integrity, and Correctional Excellence, the BOP is recognized as one of the most elite correctional agencies in the world. Our agency's mission statement reads: *The Federal Bureau of Prisons protects society by confining offenders in the controlled environments of prisons and community-based facilities that are safe, humane, cost-efficient, and appropriately secure, and that provide work and other self-improvement opportunities to assist offenders in becoming law-abiding citizens.*

All facilities have in-house support services including psychology departments. There are seven medical centers within the BOP, including FMC Rochester, which provide specialized medical and mental health care for inmates whose needs cannot be adequately addressed in general population prisons. Many federal inmates suffer from serious mental illnesses and behavioral disorders that impact their functioning. Therefore, psychology services play a crucial role in the care and custody of inmates within the federal system, as well as those working toward reintegrating into society.



Psychology Services in the Bureau of Prisons

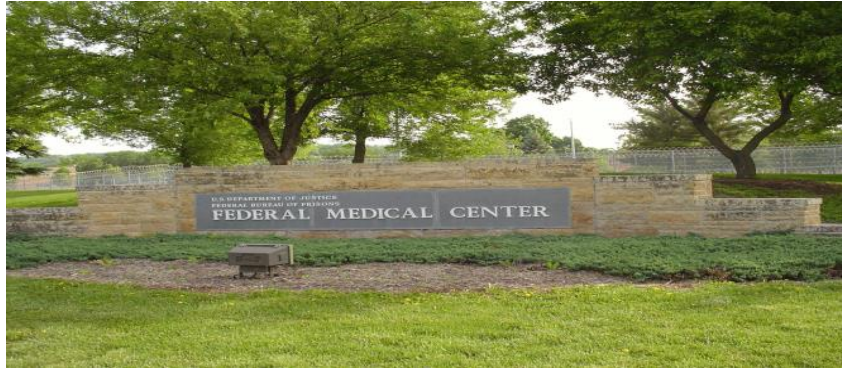
The Federal Bureau of Prisons (BOP) is one of the largest employers of mental health professionals in the United States, with more than 400 psychologists and 650 clinical service providers. Psychologists are involved in the BOP at every level of the organization including in Central Office (e.g., Competency Assessment Psychologist, Mental Health Treatment Coordinator, National Chief of Drug Treatment Programs, etc.), and at each institution (e.g., Warden, Associate Warden, Chief Psychologist, Advanced Care Level Psychologist, Specialty Program Coordinators, Staff Psychologists, etc.). Within each BOP institution, psychologists function as the main providers of mental health services for inmates. Departments range in size across the Bureau from one to as many as 20 psychologists.

All inmates entering the BOP are seen by psychology services and screened for potential psychological needs. There are a variety of programs BOP-wide that offer specialty treatment for offenders including:

- Residential Drug Abuse Program (RDAP), a modified therapeutic community that focuses on abstinence from drug use as well as overall lifestyle changes
- CHALLENGE, a modified therapeutic community offered in penitentiaries and designed for men interested in making positive lifestyle changes
- BRAVE, a residential program for first-time incarcerated inmates designed to facilitate favorable institutional adjustment and reduce incidents of misconduct
- SOMP/SOTP, residential and non-residential treatment programs for offenders convicted of sexual offenses
- STAGES (Steps Toward Awareness, Growth, and Emotional Strength), a residential program that provides treatment to CARE3-MH male inmates with a diagnosis of Borderline Personality Disorder
- RESOLVE, a non-residential treatment program for inmates who have experienced traumatic life events
- Mental Health Treatment Programs including Habilitation, Skills, Step-Down Units, CARE3-MH programs and Inpatient Mental Health Units

In addition, psychologists are responsible for providing a variety of other services throughout the BOP including crisis intervention for suicidal and psychotic inmates, individual and group psychotherapy, forensic evaluations, general psychological assessment, and training and employee assistance services for staff. Other opportunities for BOP psychologists involve participating on the Crisis Support Team or the Crisis Negotiation Team.

Psychology Services in the BOP employs doctoral-level clinical and counseling psychologists. Psychologists are required to be licensed or license eligible. However, due to working at a federal level, they may be licensed in a state in which they are not practicing. Maintaining professional competencies is a priority and annual continuing education is provided to every BOP psychologist.



FMC Rochester

The Federal Medical Center (FMC) was formerly a Minnesota state mental health facility known as the Rochester State Hospital (RSH). Patients were first treated at RSH in January 1879. Most of the current buildings were built in the 1950s. After a century of service, the hospital was closed by the Minnesota state legislature in 1982 because of a decline in the patient population in the state hospital system. In December 1982, the Olmsted County Board of Commissioners purchased RSH for one dollar. In April 1983, the Bureau of Prisons (BOP) initiated procedures to purchase the property. Some members of the Rochester community initially resisted the sale of the property to the BOP. Ultimately, in May 1984, Olmsted County agreed to sell a portion of the property to the BOP for 14 million dollars. This consisted of six buildings on 64 acres of land. The county retained ownership of the remainder of the campus, most of which is occupied by a number of human services organizations and a juvenile detention center. FMC Rochester began receiving inmates in late 1984 and was officially dedicated in September 1985.

FMC Rochester is one of seven medical centers in the BOP. Today, approximately 700 offenders are housed at FMC Rochester. The institution is classified as an administrative facility, in that inmates of all security levels (minimum, low, medium, high) are confined here; the majority, however, are low security offenders. Inmates are assigned to three different units. The Work Cadre Unit houses general population inmates who are usually from the Midwestern United States and are assigned to various jobs throughout the facility. The Mental Health Unit provides inpatient mental health evaluation and treatment to offenders with serious mental illnesses. The Medical/Surgical Unit provides care to inmates for chronic or severe health conditions such as liver disease, HIV/AIDS, and hepatitis. FMC Rochester is accredited by the American Correctional Association (ACA). Our Mental Health and Medical/Surgical Units are accredited under the Behavioral Health, Nursing Care Center, and Ambulatory Care standards of The Joint Commission.

The inmate population is very diverse at FMC Rochester. The institution houses male inmates, which can include transgender inmates. As a medical center, our main missions are to provide inpatient mental health treatment and medical care. Our mental health inmates may be designated to our institution directly from the federal court system or transferred from other BOP institutions. A large portion of our mental health patients were

adjudicated not competent to proceed with trial or Not Guilty by Reason of Insanity (NGRI) and were civilly committed as dangerous due to a mental illness. In addition, many inmates are referred to us for medical care and consultation with the internationally renowned Mayo Clinic.

Inmates at FMC Rochester experience a wide variety of mental disorders including but not limited to acute and chronic psychotic disorders, anxiety and mood disorders, personality disorders, substance use disorders, paraphilic disorders, intellectual disabilities, and neurocognitive disorders. Inmates may also seek psychology services for many other reasons, including family issues (e.g., divorce, maintenance of family relationships), release/discharge concerns (e.g., relapse prevention), grief, anger management, or chronic medical issues.

On a more philosophical note, FMC Rochester is known for placing a high priority on the humane treatment of patients. We have high standards of care and strive to place patients in the least restrictive environment for treatment purposes. As an institution we are dedicated and committed to the Bureau's guiding values of Selfless Service, Respect, Integrity, Courage, and Compassion. Our success at FMC Rochester is attributed to each staff member's outstanding efforts.



Accreditation

FMC Rochester's psychology internship program has been accredited by the American Psychological Association since 1995, and meets all APA criteria for a doctoral internship in health service psychology. At our last accreditation review in 2012, our program was granted full accreditation for seven years. Our next review is scheduled for 2019.

Any questions or concerns regarding the accreditation status of FMC Rochester's internship program should be addressed to:

Office of Program Consultation and Accreditation
American Psychological Association
750 First Street, NE
Washington, D.C. 20002-4242
Phone: (202) 336-5979
Email: apaaccred@apa.org
Web: www.apa.org/ed/accreditation

Any questions or concerns regarding the adherence of this program to the policies of the APPIC match process should be addressed to:

Chair, APPIC Standards and Review Committee
17225 El Camino Real
Onyx One-Suite #170
Houston, TX 77058-2748
Phone: (832) 284-4080
Email: appic@appic.org

Psychology Internship Program at FMC Rochester

FMC Rochester's internship is a full-time, 40-hour per week position. At the outset of the internship, interns participate in a two-week Introduction to Correctional Training (ICT). This training provides the necessary information to work in a correctional environment. In addition, interns receive a two-day department orientation that focuses on the interns' specific duties as a mental health provider within our setting.

Interns function as a member of a multidisciplinary treatment team within an inpatient mental health and correctional environment. Throughout the year, interns are exposed to the full spectrum of psychopathology, with the opportunity to follow patients in their journey of recovery from severe psychosis to stabilization, recovery, and release. By utilizing evidence-based practices and a collaborative team approach between disciplines, our staff strive to provide high quality treatment for an underserved population. We value diversity, and offer a safe and supportive learning environment that allows interns to enhance their clinical skills, ethical practice, and develop a well-defined professional identity through experiential training.

FMC Rochester adheres to the practitioner-scholar model in which our training program emphasizes the use of scholarly research to inform clinical practice. Interns bring with them a vast amount of knowledge pertaining to psychological theory and science-based practice from their training in graduate school. We value the interns' knowledge and perspective while also providing additional exposure to evidence-based practices through didactic seminars, mental health case law, assigned readings, and supervision of clinical work.

Program Aim and Competencies

The FMC Rochester Internship Program aims to *train entry-level psychologists who can also function competently in the correctional environment*. This aim is achieved through training and evaluation in the following profession-wide competency areas:

Competency 1: Research – The intern will demonstrate knowledge, skills, and competence sufficient to produce new knowledge, critically evaluate and use existing knowledge to solve problems, and disseminate research as it applies to the professional practice of psychology in general and more specifically within a correctional setting.

Competency 2: Ethics and Legal Standards – The intern will demonstrate proficiency practicing psychology within ethical and legal boundaries. They will be expected to respond professionally in increasingly complex situations with a greater degree of independence over time.

Competency 3: Individual and Cultural Diversity – The intern will demonstrate awareness and sensitivity to human diversity. This will include awareness of their own

cultural identities, biases, and privilege, as well as developing knowledge and skills in working with patients from diverse cultural and personal backgrounds.

Competency 4: *Professional Values and Attitudes* – The intern will demonstrate a commitment to continued professional growth and development, openness and acceptance of feedback, and ongoing self-reflection.

Competency 5: *Communication and Interpersonal Skills* – The intern will demonstrate professional communication and appropriate interpersonal skills in both written and verbal communication with peers, supervisors, and other staff. Their communication will be timely, accurate, and jargon free.

Competency 6: *Assessment* – The intern will demonstrate competence in conducting screening, assessment, and diagnosis of a wide array of disorders and problems using a multi-modal approach. This competency includes formal psychological testing as well as triage and behavioral assessment.

Competency 7: *Intervention* – The intern will demonstrate competence in planning and implementing a variety of evidence-based practices both individually and in group treatment settings.

Competency 8: *Supervision* – The intern will demonstrate a basic understanding of the principles of clinical supervision as grounded in science and integral to the activities of health service psychologists. They will apply these principles through direct (with practicum students if available) or simulated practice (peer to peer).

Competency 9: *Consultation and Interprofessional/Interdisciplinary Skills* – The intern will demonstrate proficiency in fostering positive and collaborative relationships with individuals within psychology and other disciplines (e.g., correctional services, unit management, social work, psychiatry, etc.) in order to address problems, seek or share knowledge, and promote effectiveness in professional services.

Through the breadth of training we provide at FMC Rochester, interns who complete our program are well prepared for future careers in a variety of settings. Specifically, completion of a BOP internship is instrumental in preparation for a career in correctional psychology. In addition, our internship program exposes interns to the federal court system and the violence risk assessment process, which will provide valuable experience toward a career in forensic psychology. Finally, as a medical center that functions as an inpatient mental health hospital, interns will be prepared for careers in state hospitals, forensic psychiatric facilities, community mental health centers, and other non-correctional settings.



Year-Long Training Experiences

The internship year at FMC Rochester consists of a year-long, approximately half-time major training experience in Inpatient Mental Health, and a year-long minor training experience in General Population Outpatient Therapy, complemented by three, four-month minor training experiences in General Population, Medical/Surgical, and Assessment rotations.

Inpatient Mental Health: On the Inpatient Mental Health training experience, interns provide psychology services as part of a multidisciplinary treatment team that also consists of psychiatry, social work, recreation therapy, nursing, and pharmacy staff. Each treatment team provides mental health services to approximately 25 to 30 patients, who are diagnosed with severe and persistent mental disorders, for the treatment of which they are in need of inpatient hospitalization. Specifically, most patients have a diagnosis of schizophrenia, schizoaffective disorder, or bipolar disorder. Many patients also have other co-occurring mental, cognitive, or personality disorders and/or substance use disorders, which may be a focus of treatment.

The population of patients consists of sentenced inmates who have consented to participate in treatment through the Residential Service, or who are under evaluation in the Diagnostic and Observation Service to determine whether they have a mental illness and are in need of involuntary, court-ordered treatment pursuant to the provisions of 18 U.S.C. § 4245. Other patients are not serving a sentence but are civilly committed to the custody of the Attorney General for hospitalization pursuant to the provisions of 18 U.S.C. § 4243 and 4246 due to risk of dangerousness to others or property due to their mental illness. These patients were previously found incompetent to stand trial, not guilty by reason of insanity, or were committed at the end of their sentence, respectively.

Interns are assigned to work with an Inpatient Mental Health supervisor for the entirety of the year-long training experience. They participate as a member of their psychology supervisor's treatment team and are assigned a patient caseload of approximately 8 to 12 patients, for whom they have primary responsibility for providing psychology services including initial evaluation and psychological assessment, diagnostic formulations, treatment planning, individual and group therapy, suicide risk assessments and other crisis interventions, and behavior management plans. Interns regularly conduct rounds in the locked housing unit. They lead quarterly treatment team meetings for their patients and complete appropriate documentation of all services provided.

At least annually, a mental health evaluation or risk assessment report is submitted to the court for each patient committed under 18 U.S.C. § 4245, 4243, and 4246. Interns are responsible for preparing these reports for patients on their caseload, and additionally as assigned. In addition, patients committed under 18 U.S.C. § 4243 and 4246 are seen by the risk assessment panel in order to offer an opinion to the court regarding their continued need for commitment. The intern completes and summarizes an HCR-20^{V3} for all risk assessment reports written and presents this information to the risk assessment panel during the review process.

Intern training goals for the Inpatient Mental Health training experience include:

- Strengthening knowledge of DSM-5 criteria for severe and persistent mental disorders and improving skill in providing diagnostic formulations.
- Strengthening clinical interviewing, crisis intervention, and de-escalation skills.
- Increasing proficiency in the use of assessment to inform therapeutic goals and treatment interventions.
- Increasing knowledge and skill in providing cognitive-behavioral, evidence-based therapies in individual and group modalities.
- Developing increased awareness of and sensitivity to cultural factors impacting clinical services with diverse individuals, groups, and communities who represent various cultural and personal backgrounds and characteristics.
- Increasing understanding of violence risk assessment and the federal statutes related to civil commitment.
- Developing understanding of a psychologist's role as part of a multidisciplinary treatment team and within the correctional environment.
- Developing understanding of BOP treatment-related policies and federal statutes and a psychologist's corresponding role.
- Demonstrating proficiency to practice psychology within the boundaries of the ethical and legal principles governing professional behavior.

General Population Outpatient Therapy: In addition to their year-long inpatient mental health responsibilities, interns carry a year-long outpatient therapy caseload of general population inmates ranging from approximately two to five inmates, depending on the needs of the inmate population. For inmates on their caseload, the intern provides diagnostic clarification, formulates a treatment plan, and utilizes evidence-based interventions during monthly individual therapy sessions. Treatment may focus on a

variety of issues including, anxiety, depression, grief/loss, criminal thinking, and/or managing a transgender identity in a correctional setting.

Minor Training Rotations

General Population (GP): During this rotation, interns conduct clinical interviews as part of psychological intake screening assessments with every inmate newly admitted to the work cadre unit. Although the majority of inmates in this unit have minimal mental health histories and treatment needs, many have experienced psychosocial difficulties related to substance use, criminal thinking, and maladaptive personality traits. These screenings serve a vital role in identifying mental health and programming needs based upon the BOP's mental health care level system. Thus, to complete this responsibility, interns review available records, conduct thorough clinical interviews, and offer diagnostic impressions, as appropriate. In conjunction with the GP supervisor, interns also provide the inmate orientation to Psychology Services during the institution's Admission and Orientation (A&O) program, which occurs approximately twice per month. Both intakes and A&O serve as an opportunity to introduce inmates to the variety of specialized treatment options psychology services departments provide. Interns on the GP rotation will facilitate at least one therapeutic group using evidence-based practices identified by the BOP. They learn to assess and treat chemically dependent inmates by co-facilitating at least one Nonresidential Drug Abuse Program (NRDAP) group with the Drug Treatment Specialist (DTS). The NRDAP curriculum uses cognitive-behavioral techniques and motivational interviewing to promote rational thinking skills and healthy lifestyle behaviors. Every month interns conduct rounds in the Special Housing Unit (SHU), a locked unit housing inmates on disciplinary and administrative statuses. Interns interview the inmates and write mental health summaries to determine if the inmates are experiencing negative effects related to their confinement in SHU. Finally, in collaboration with their supervisor, interns on the GP rotation respond to inmate requests and address crises, including conducting suicide risk assessments. Interns conduct individual therapy and/or individual mental health contacts, as needed, to address various issues (e.g., death of a loved one). Overall, the responsibilities on this rotation prepare interns for an entry-level position as a staff psychologist.

Medical Unit: Similar to the GP rotation, interns conduct psychological intake screening assessments on inmates newly admitted to the inpatient and outpatient medical units. However, the majority of inmates in these units are diagnosed with serious medical conditions including, but not limited to, infectious diseases (e.g., HIV/AIDS, and hepatitis), assorted cancers, organ failures, brain injuries, and various forms of neurocognitive disorders. As such, interns develop specialized interviewing skills for working with medical populations. They may also develop behavioral management plans for inmates who are behaviorally disruptive secondary to a neurocognitive disorder. Interns facilitate at least one therapeutic group using evidence-based practices identified by the BOP, and conduct monthly mental health reviews for medical unit inmates housed in SHU or in the locked

cells within the medical unit. Interns also work with their supervisor to respond to inmate requests and address crises, including conducting suicide risk assessments.

Assessment: This rotation is designed to help interns strengthen their diagnostic formulations, case conceptualization, and report writing abilities. Interns on the assessment rotation conduct psychological testing with inmates and patients housed throughout the institution. Based upon referrals from treatment team members and staff members from different departments (e.g., psychiatry and unit team), interns collaborate with the assessment supervisor to develop an appropriate protocol to assess each referral question. The most common referrals are for cognitive, personality, and/or response style testing. Interns review appropriate records, develop testing protocols, administer and score psychological tests, and write thorough reports of the findings. Additionally, interns conduct assessments for CARE3-MH and CARE4-MH inmates and patients who receive incident reports to determine the inmates' competence to participate in the disciplinary process and responsibility for the misconduct. As part of this rotation, interns participate in at least one risk assessment panel meeting as a guest panel member. In this role, they facilitate the panel interview and write the panel opinion, which is submitted to the court. Interns also participate in a mock trial as part of this rotation. Interns and the assessment supervisor select an appropriate case for the mock trial, which is typically a risk assessment for a civilly committed patient. The intern writes an opinion and provides expert witness testimony during the mock trial. Generally, the majority of the psychology department attends the mock trials and offers feedback and constructive criticism to help interns improve their diagnostic formulations, case conceptualization, report writing, and testifying abilities. Finally, based upon the availability of these evaluations, interns may have the opportunity to write annual reports for inmates who are committed for hospitalization in lieu of sentencing, or participate in evaluations for initial civil commitment pursuant to 18 U.S.C. § 4245 and 4246.

Additional Training Components

Supervision

The psychology internship at FMC Rochester adheres to the APA guidelines for supervision, which require a minimum of four hours of scheduled supervision per week, two hours of which are individual supervision conducted by a licensed doctoral level psychologist. Interns are provided one hour weekly of supervision by their Inpatient Mental Health supervisor and a second hour of weekly supervision by their General Population, Medical Unit, or Assessment rotation supervisor. This supervision includes discussions regarding patient care, treatment modalities, professional development, ethical issues, multicultural considerations, and includes direct, in-person observation of the intern's clinical work. Two additional hours of weekly supervision are provided in a group format. One hour of group supervision is provided by the Internship Program Coordinator, during which interns will process topics related to their overall training experience and professional development, and discuss assigned readings. A second hour of group supervision is rotating among the psychologist supervisors in coordination

with their intern supervisee, during which interns prepare formal case or topic presentations with discussion questions, such that the supervision structure provides an opportunity for both professional supervision and peer consultation.

Interns are expected to prepare for supervision with questions and discussion points regarding patient care and other relevant topics. In addition to the scheduled supervision, interns are expected to seek additional supervision as needed to process immediate or pressing concerns. Psychologist supervisors will provide routine feedback on intern progress toward training goals during scheduled supervision and feedback on intern's progress toward profession-wide competencies in written evaluations three times during the year. Interns are expected to openly receive and actively process feedback from supervisors and other professional staff and incorporate feedback into their work product. Interns will also complete self-evaluations of their strengths and areas for improvement.

Interns are provided training experiences during the internship year to develop their knowledge and skills in providing clinical supervision. Didactic training is offered to increase knowledge of effective clinical supervision, supervision models and practices, and to engage in self-assessment that allows interns to develop a personal theory and model of supervision. Experiential training is provided in direct or simulated practice with peers, or with practicum students as available, to apply knowledge and build supervisory skill.

Didactics

Interns participate in a planned series of weekly lectures, discussions, and training seminars on a variety of topics including, but not limited to working in corrections, evidence-based practices, diversity, ethics, and professional development. We make ongoing efforts to improve our didactic training as the field of psychology evolves and to meet the needs of our unique intern cohorts. Didactic topics may include: Motivational Interviewing; Dialectical Behavior Therapy; Psychopharmacology; Transgender Inmates; Witness Security Program; EPPP and Licensure; and Female Offenders.

Forensic and Mental Health Case Law Seminar

This seminar provides a forum to present and discuss relevant case law pertaining to forensic assessment and mental health treatment issues. Interns prepare and present legal briefs on the selected mental health cases, and will develop a collection of legal briefs on many of the most significant legal decisions addressing a wide variety of mental health issues. Additionally, supervising psychologists will provide didactics about forensic topics as they pertain to forensic practice within the federal legal system. Topics may include: Competence to Stand Trial; Criminal Responsibility; Civil Commitment; Rights to Mental Health Treatment; Duty to Protect; Expert Witness Testimony; and Capital Punishment.

Multicultural Training

Our training program approaches diversity from a cultural humility perspective, which encourages clinicians to work with diverse clients while maintaining an attitude of

openness, acknowledging and owning one's limitations to understanding a client's cultural background and experience, and emphasizes continued growth and development over time rather than obtaining a level of multicultural competence. Given the diverse inmate population at FMC Rochester, conversations about diversity and culture are inter-woven into our daily practice, weekly supervision with interns, and didactic learning. In addition, interns and staff participate in a monthly multicultural group supervision, which focuses specifically on multicultural issues, including clinical interventions with culturally diverse patients, personal biases or stereotypes that may influence one's clinical work, and our own cultural identities and how they may affect our treatment of patients.

Diversity is valued at FMC Rochester. You will be respected without regard to sex, race, color, ethnicity, national origin, gender identity, sexual orientation, religion, age, social class or disability. Prejudice and bigotry are not respected and will be challenged. Harassment and discrimination are not tolerated.

Supplemental Readings

Interns are provided a year-long supplemental reading schedule and corresponding books or articles that are meant to supplement the experiential and didactic training provided throughout the year. These readings can be discussed in group supervision with the Internship Coordinator and/or with individual supervisors as it applies to the intern's clinical duties. These readings are expected to be completed outside of the interns' 40-hour workweek.

Additional Trainings

The BOP is a national organization, but it is not uncommon for psychologists across the country to have regular contact through training and consultation. This collaborative network extends to interns and internship programs in the BOP. Central Office Psychology Services Branch sponsors a four-part National Internship Video Conference to compliment, extend and broaden locally offered didactics. These have included: Suicide Risk Assessments (presented by the National Suicide Prevention Coordinator), Prison Rape Elimination Act Assessments (presented by the National PREA Coordinator), applying for BOP careers after internship (presented by members of the Workforce Development Section in the Central Office) and hearing career perspectives from senior psychologists in the BOP.

A North Central Regional Intern Training event is held annually in which interns from FMC Rochester, USMCFP Springfield, and FCC Terre Haute come together for a week of networking and didactic training. This unique opportunity fosters professional relationships with peers and staff at other institutions.

Interns are also encouraged to take advantage of TDY opportunities throughout their training year. TDYs allow interns to visit and work in psychology departments at other institutions across the country. This is an excellent opportunity for interns who are considering a career in the BOP to experience different security levels, populations, and regions of the country before applying for employment.

Evaluation of Interns and Program Feedback

Evaluation of interns is a continuous, systematic process. Interns receive frequent informal feedback from numerous psychology staff members throughout the year. In addition, they are provided a formal evaluation at the conclusion of each rotation (i.e., three times per year). Their performance on the year-long inpatient track is also evaluated at these intervals. The Internship Program Coordinator also provides formal feedback regarding professional development mid-year and at the conclusion of the internship year.

Throughout the training year, interns are encouraged to provide feedback about their training experiences to their direct supervisors, the Internship Program Coordinator, and the Chief of Psychology. Interns are asked to complete rating forms on didactic trainings and formal evaluations of each of their minor rotations and their year-long inpatient track. Interns are also contacted post-internship year to provide additional feedback about their training and readiness for practice in the field. This feedback is considered carefully when making changes and improvements to the internship program.

FMC Rochester Psychology Staff



Jason E. Gabel, Ph.D., L.P.

Chief Psychologist

Dr. Gabel graduated from the University of Wisconsin, Madison, in 2006 with his doctoral degree in Counseling Psychology. He completed his pre-doctoral internship at USMCFP Springfield and his postdoctoral fellowship at FMC Rochester. Following completion of

his fellowship, Dr. Gabel remained at FMC Rochester as the primary psychologist for patients civilly committed as not guilty by reason of insanity and dangerous due to mental illness. In December 2014, he was promoted to Chief of Psychology. In this role, Dr. Gabel performs numerous clinical and administrative responsibilities throughout the institution, including serving as the Chair of the Risk Assessment Panel. He provides training to the interns via didactics and the weekly forensic and mental health case law seminar. Dr. Gabel's research interests include malingering detection, civil commitment, and risk assessment. Dr. Gabel is licensed in the state of Minnesota.

Kasey Odell, Psy.D., H.S.P.P.

Internship Program Coordinator/Advanced Care Level Psychologist

Dr. Odell received both her M.A. in Forensic Psychology (2011) and doctoral degree in Clinical Psychology, with a specialty focus in couple and family therapy (2015) from the University of Denver. She completed her pre-doctoral internship at the Federal Medical Center (FMC) in Rochester, Minnesota. Following internship, she was hired as a staff psychologist with the Bureau of Prisons and remained at FMC Rochester. She has since promoted to an Advanced Care Level Psychologist and taken on the role of Internship Program Coordinator. Dr. Odell's clinical caseload consists primarily of patients found incompetent to stand trial or Not Guilty by Reason of Insanity who have been civilly committed as dangerous due to their mental illness. Her professional interests include correctional psychology, SPMI, group therapy, preparation for offender reentry, substance use treatment, violence risk assessment, and multiculturalism. Dr. Odell is licensed in the state of Indiana.

Melissa J. Klein, Ph.D., L.P.

Advanced Care Level Psychologist

Dr. Klein earned her doctoral degree in Clinical Psychology from the University of Toledo, Ohio, in 2005, with specialty emphases in mental health recovery and jail diversion for persons with severe mental illness. She completed her pre-doctoral internship and postdoctoral fellowship at FMC Rochester. She was afterwards employed as a Clinical Psychologist at the Minnesota State Operated Forensic Services, Transition Services, where she worked with patients committed as mentally ill and dangerous. She resumed a position with the BOP at FCI Waseca, Minnesota, in 2008, as Drug Abuse Program Coordinator, overseeing residential and non-residential programming for female inmates. She returned to FMC Rochester in 2012, where she works with sentenced inmates and committed patients who are in need of inpatient hospitalization. Her caseload includes inmates who speak Spanish as their first or only language. She is a member of the risk assessment panel and provides training to inmate suicide watch companions. She has a collateral duty as Mental Health Consultant on the Crisis Negotiation Team. Her professional interests include recovery from severe mental illness, psychotherapy process and outcomes, and forensic assessment. Dr. Klein is licensed in Minnesota.

Gina Masessa, Psy.D., L.P.

Advanced Care Level Psychologist

LT in the United States Public Health Service

Dr. Masessa graduated in 2012 from the Chicago School of Professional Psychology, in Chicago, Illinois and is licensed through the state of Alabama. She completed her pre-doctoral internship at the FMC in Lexington, Kentucky with a focus in Behavioral Medicine. Following the completion of her graduate degree, Dr. Masessa worked at the USP Hazelton in West Virginia (high security male and female inmates), FCC Pollock (high and medium security male inmates), in Louisiana, and the USMCFP Springfield in Missouri before transferring to FMC Rochester in 2017. Currently, she provides inpatient mental health treatment for civilly committed patients and provides annual risk assessments to the court on the majority of individuals on her caseload. Dr. Masessa has provided supervision to pre-doctoral interns on an inpatient treatment rotation, which has included forensic report writing, preparation for mock trial testimony, and finding treatments that work with a challenging population. Her interests include positive psychology, meditation, and the use of nature in therapy. Currently, Dr. Masessa also serves as the Alternate LGBT Program Manager for the Affirmative Employment Program.

Diana Poch, Psy.D., L.P.

Drug Abuse Program Coordinator

Dr. Poch graduated in 2014 from the Minnesota School of Professional Psychology. She was a previous doctoral level practicum student at FMC Rochester and with the Wisconsin Department of Corrections. She completed her internship at the Veterans Affairs Black Hills Health Care System in Fort Meade, SD with specializations in trauma and substance abuse. Following internship, she took a position with the BOP as a Staff Psychologist at FCI Sandstone. Dr. Poch transferred to FMC Rochester in 2018 as the Drug Abuse Program Coordinator. Her clinical interests are PTSD, addictions, finding meaning in a correctional setting, professional identity development, and inmate re-entry. Dr. Poch is currently licensed in the state of Minnesota.

Peter Thomasson, Psy.D., L.P.

Staff Psychologist

Dr. Thomasson graduated in 2013 from the Chicago School of Professional Psychology in Clinical Psychology with a specialization in forensic psychology. He completed his pre-doctoral internship at the Federal Medical Center in Lexington, Kentucky and is licensed in Alabama. After completing graduate school, Dr. Thomasson worked at the Federal Correctional Center in Pollock, Louisiana where he provided treatment and crisis management for high and medium security inmates. From 2015-2017, Dr. Thomasson worked as a forensic unit psychologist at USMCFP Springfield where he provided inpatient mental health treatment for voluntary and civilly committed patients, and he completed forensic reports for the court. His areas of interest include treatment of severe mental illness, assessment and management of risk for violence, civil commitment, and

report writing. Dr. Thomasson has experience supervising pre-doctoral interns for inpatient treatment, forensic report writing, and he currently supervises the general population rotation here at FMC Rochester.

Emily E. Wakeman, Ph.D., L.P.
Advanced Care Level Psychologist.

Dr. Wakeman earned her doctoral degree in Clinical Psychology, with a concentration in psychology and law, from The University of Alabama in 2010. She completed her pre-doctoral internship at the Federal Medical Center in Rochester, Minnesota. She completed her postdoctoral residency at Florida State Hospital in which she conducted forensic assessments pertaining to competency to stand trial and continuation of civil commitment for patients adjudicated as not guilty by reason of insanity. Dr. Wakeman was employed as a Forensic Psychologist at the Minnesota State Operated Forensic Services from November 2011 to February 2013. She joined FMC Rochester in February 2013. Currently, Dr. Wakeman works with civilly committed patients and sentenced inmates who have serious and persistent mental illnesses. She provides treatment, writes annual risk assessment reports to the courts, and serves as a member of the risk assessment panel. Her professional interests include criminal forensic assessment, violence risk assessment, response style assessment, treatment for individuals diagnosed with serious and persistent mental illnesses, and clinical supervision. Dr. Wakeman is licensed in Minnesota.

Lakisha Williams, M.A., L.P.C.
Drug Treatment Specialist

Ms. Williams started as a Drug Treatment Specialist in 2013. She is recognized by the Minnesota Board of Behavioral Health and Therapy as a Licensed Professional Counselor. She is also a Certified Alcohol and Drug Counselor Reciprocal - MN credentialed by the Minnesota Certification Board, which meets international standards.

Eligibility and Application Procedures

Intern positions are open to students enrolled at least part-time in APA-accredited Clinical or Counseling doctoral programs. In order to be internship eligible, students must have successfully completed all doctoral course work, and at least two years of practicum training by the beginning of internship. Preference will be given to applicants who have accrued a minimum of 500 hours of intervention experience and 100 hours of assessment experience at the time of application; these hours should be direct contact and do not include support hours. Prospective applicants need to have successfully proposed their dissertation by the time they submit their application. Applicants for the Bureau's internship positions should be aware that they are applying for a position in a federal law enforcement agency. Therefore, selection entails not only demonstration of exceptional qualifications as an advanced graduate student, but also suitability for work in a position of public trust. Bureau employees, including psychology interns, are held to a high

standard of personal conduct and responsibility and are expected to be law-abiding citizens who can serve as strong role models for the inmate population.

In accordance with Public Law 100-238, applicants must be under the age of 37 at the time of initial appointment (age waivers may be granted up to age 39). Applicants must be United States Citizens and have lived in the U.S. for three of the last five years. The Bureau of Prisons is an Equal Opportunity Employer and all applicants are considered without regard to race, religion, color, national origin, sex, parental status, political affiliation, or age (with authorized exceptions). The internship program at FMC Rochester is an APPIC Member and participates in the National Match. All applications must be submitted electronically in accordance with the online APPI procedures. Applications submitted online through APPI are due by **November 1st**.

Completed applications **must** include:

1. APPIC Application for Psychology Internship form (APPI)
2. Letter from your graduate program's Director of Clinical Training describing you as internship eligible
3. A current Curriculum Vitae
4. Cover letter describing your interest in our internship program
5. Personal essays
6. Three reference letters from graduate faculty or supervisors (at least one from a work site and/or supervised practicum)
7. Official transcripts of all graduate coursework
8. A redacted integrated psychological assessment report on an adult completed by the applicant

Once received, each application is reviewed individually by the Internship Program Coordinator and additional Psychology Staff. Invitations to complete a secondary application through USA Jobs (Pathways Program) are typically sent to applicants by the end of November. The Pathways Program is completely separate from the APPIC process and procedures. This application is to verify applicant's eligibility for temporary federal employment and is a requirement for placement with our internship program. Further details will be forthcoming to those candidates.

USAJOBS – DOJ Pathways Program:

1. Read the announcement on USAJOBS completely, especially "Qualifications Required" and "Required Documents." Apply online and submit ALL required supporting documentation. Required Documents include:
 - a. **Resumé:** Your employment history must be documented in month/year (MM/YYYY) format, reflecting starting date and ending date and include the number of hours worked per week. Failure to follow this format may result in disqualification.

- b. **Transcript:** a transcript which includes the School Name, Student Name, Degree and Date Awarded. You can use an unofficial or official copy from your school's registrar's office.
 - c. **Verification of Completion of the AAPI:** examples of verification of completion of the AAPI include 1) a statement from the Training Director of your doctoral program validating completion of the AAPI and matriculation at a clinical or counseling doctoral program or 2) a copy of confirmation of completion of the AAPI and registration for Match (i.e. proof of payment or APPIC Match ID number).
2. During the USAJOBS application process, applicants must respond to a series of assessment questions. Your responses determine category placement (i.e. Best Qualified, Highly Qualified, Qualified). Additionally, Veterans Preference is applicable during this application process.
 3. After closure of the USAJOBS vacancy announcement, applicants in the Best Qualified category will be notified of their status by the Consolidated Staffing Unit by December 15th, and results are also forwarded to the internship sites.

Applicants can contact the Bureau's Consolidated Staffing Unit (CSU) located in Grand Prairie, Texas, for questions regarding their documentation and inquire if ALL required documents were received.

Once an applicant has successfully completed this process, they will be contacted to schedule an on-site interview. On-site interviews are a requirement of this internship program. We typically offer half-day interviews to 25-30 applicants. Efforts will be made to contact applicants regarding an interview typically by December 15th. Interviews take place in January. As part of the interview process, applicants must satisfactorily pass a security clearance procedure that includes a computerized Core Values Assessment (CVA), a pre-employment interview, and an integrity interview which addresses issues of personal conduct, a panel interview in which you will be asked to respond to a number of scenarios that could arise in a correctional facility. If you are applying to more than one internship site, you may only have to complete this process once. Results of the security clearance procedures can be shared with other Bureau sites for your convenience. However, if you fail any portion of this security clearance at the site where your first interview occurs, you will no longer be considered at any of the other sites.

Following clearance from Human Resources, applicants will be provided a tour of FMC Rochester and the opportunity to interview with psychology staff and meet current interns. 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 prior to Uniform Notification Day. All offers for temporary employment are made in accordance with APPIC policy. Since all BOP positions are considered "sensitive," applicants must also successfully pass a security clearance process that includes personnel interviews, a background investigation, a physical examination, and urinalysis drug screen. These steps can take place at any BOP correctional facility, making it easier

on applicants who cannot visit the site in which they matched. Offers of internship positions resulting from the APPIC Match are strictly contingent upon satisfactory completion of the background investigation process. 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.

Internship Program Tables
Date Program Tables are updated: 07/02/2018

Internship Program Admissions			
We are looking for intern applicants who are passionate about working with severe and persistent mental illness and are motivated to provide treatment for this population. Applicants who have an interest in the intersect between psychology and law, or working within a correctional environment are excellent candidates for our training program. Overall, we are interested in working with interns who are dedicated to continuous learning, working with an underserved population, and willing to accept feedback and grow from their experiences. It is important for interns to be a proficient and clear writer, be flexible, good at time management, driven, open to feedback, and have strong interpersonal skills. We hope to find interns who are as excited about this work as we are as a psychology department.			
Does the program require that applicants have received a minimum number of hours of the following at time of application? If Yes, indicate how many:			
Total Direct Contact Intervention Hours	No	Yes	Amount: 500
Total Direct Contact Assessment Hours	No	Yes	Amount: 100
Any other required minimum criteria used to screen applicants:	No	Yes	
Describe any other required minimum criteria used to screen applicants: Please see Eligibility and Application Procedures outlined in the previous section.			

Financial and Other Benefit Support for Upcoming Training Year*	
Annual Stipend/Salary for Full-time Interns	\$52,285
Annual Stipend/Salary for Half-time Interns	N/A
Program provides access to medical insurance for intern?	YES
If access to medical insurance is provided	
Trainee contribution to cost required?	YES
Coverage of family member(s) available?	YES
Coverage of legally married partner available?	YES
Coverage of domestic partner available?	YES
Hours of Annual Paid Personal Time Off	4 hrs/ Pay Period
Hours of Annual Paid Sick Leave	4 hrs/ Pay Period
In the event of medical conditions and/or family needs that require extended leave, does the program allow reasonable unpaid leave to interns/residents in excess of personal time off and sick leave?	YES

Other Benefits: Annual and sick leave earned every pay period adds up to approximately 13 days of sick leave and 13 days of annual leave. The BOP also recognizes 10 Federal holidays. Interns receive liability coverage for on-site professional activities through the BOP.

*Note: Programs are not required by the Commission on Accreditation to provide all benefits listed in this table.

Initial Post-Internship Positions (2014-2017 cohorts)		
Total # of interns who were in the 3 cohorts	9	
Total # of interns who did not seek immediate employment because they returned to their doctoral program/are completing doctoral degree	1	
	PD*	EP*
Community mental health center	0	0
Federally qualified health center	0	0
Independent primary care facility/clinic	0	0
University counseling center	0	0
Veterans Affairs medical center	0	0
Military health center	0	0
Academic health center	0	0
Other medical center or hospital	0	0
Psychiatric hospital	4	0
Academic university/department	0	0
Community college or other teaching setting	0	0
Independent research institution	0	0
Correctional facility	0	3
School district/system	0	0
Independent practice setting	0	1
Not currently employed	0	0
Changed to another field	0	0
Other	1	0
Unknown	0	0

* PD = Post-doctoral residency position

EP = Employed Position

Employment Opportunities in the Bureau of Prisons

Psychologists in the Bureau of Prisons (BOP) are the main providers of mental health services and have the opportunity to be involved in Substance Abuse Treatment Programs, Suicide Prevention, Crisis Intervention, Trauma Treatment, Treatment and Management of Personality Disorders, Doctoral Internship Training Programs, Employee Assistance Programs, Inpatient Mental Health Treatment, Forensic Evaluations, Sex Offender Management and Treatment, Federal Witness Protection Program, Emergency Response Teams, and Staff Training.

The BOP relies heavily on Psychology Internship Programs to provide a large number of entry-level psychologists to meet staffing needs. Approximately 60% of psychologists

currently employed by the BOP began their careers after completing BOP internships. While we cannot promise jobs for those who are accepted into our internship program, as an agency, we prefer to hire people who have already proven themselves as competent clinicians in correctional environments. Therefore, we often look to our intern classes when filling staff psychologist positions.

Entry-level Staff Psychologists start at a GS-11, Step 1 salary (\$61,218 in 2018). Upon successful completion of their first year, they are automatically promoted to a GS-12, Step 1 salary (\$73,375 in 2018). Following their second year, psychologists are eligible to promote to a variety of specialty positions, such as DAP Coordinator, Advanced Care Level Psychologist, or Forensic Psychologist, at the GS-13 level (\$87,252 - \$113,428 in 2018). There is also promotion potential beyond a GS-13 in select positions throughout the agency. Salaries can vary somewhat based on geographical area and cost of living. Some positions include the benefit of student loan repayment, which varies by facility.

As federal employees, all psychologists are covered by the Federal Employee Retirement System, a three-part retirement package that includes a Basic Benefit Plan, Social Security and the Thrifts Saving Plan (TSP). TSP is a contribution plan in which the BOP matches up to 5% of what you contribute during your working years. Following retirement, you receive annuity payments each month for the rest of your life. Bureau employees may retire after twenty years of service, provided they have reached age 50, or at age 45 with 25 years of service, and receive a full pension. It is mandatory that BOP employees retire at age 57. The BOP is an equal opportunity employer. However, in accordance with Public Law 100-238, applicants for entry-level staff psychologist positions must be U.S. Citizens under the age of 37 at the time of initial appointment. Psychologists may receive age waivers through age 40.

Looking for cultural activities? Rochester has something for everyone from musical experiences performed by the Rochester Symphony Orchestra & Chorale to more laid back vibes of the Thursdays on First and 3rd Summer Market and Music Festival which is a weekly summer series filled with music, food, and people. The Mayo Civic Center, Rochester Civic Theatre and Words Players Theatre also host live performances throughout the year. Love being outdoors? Explore more than 85 miles of hiking and biking trails that wind through the city including over 100 community parks. The nearby National Eagle Center and Whitewater State Park also take advantage of Mother Nature, with plenty of great spots for bald eagle watching, trout fishing, camping and hiking. Don't be worried about finding things to do in the winter, there are public skating rinks, outdoor hockey rinks, cross-country skiing and two sledding hills. Sports fanatic? Rochester has



the Honkers baseball team, Ice Hawks hockey team, and many golf courses and parks. History buff? The city lays claim to historic hotspots like Mayowood Mansion, built in 1911 by Dr. Charles H. Mayo, co-founder of the famous Mayo Clinic. There are also rotating exhibits at the History Center of Olmsted County, and the Heritage House Victorian Museum, built in 1875, which gives visitors the opportunity to step back in time

and learn more about Rochester's early days. Foodie? You have options ranging from fine dining, international fare to greasy spoon dinners as well as four local breweries and several small wineries.

If you're looking for a weekend get-away to a bigger city, Rochester is located approximately 85 miles south of the Twin Cities Metro Area – Minneapolis and St. Paul. The Twin Cities are a thriving metropolitan area known for world-class museums, endless entertainment options like cheering on professional sports teams - NFL, NBA, WNBA, NHL, MLB, MLS - or enjoying professional Broadway and other entertainment at the Guthrie Theatre and the Hennepin Theatre District. The Twin Cities is full of boundless activities, festivals, and entertainment no matter what season.



Frequently Asked Questions

Q: Is it safe to work in a prison?

A: The Bureau of Prisons places a high priority on the safety of both staff and inmates. Throughout the institution at FMC Rochester and other bureau facilities, many security procedures and equipment have been installed to keep staff safe. Although it would be impossible to guarantee safety in a correctional setting, staff and interns who conduct themselves professionally have little reason to fear for their safety. Although FMC Rochester is an administrative facility, the majority of the inmates at FMC Rochester are low security.

Q: Will my training and future job prospects be limited if I only work with inmates?

A: Absolutely not. Our past interns have taken positions in other settings beyond corrections, including in community mental health centers, private practice, academic centers, and state hospitals. Additionally, almost any mental health issues that exist in a community population can also be found in the inmate population, ranging from interpersonal difficulties, personality disorders to psychotic disorders. FMC Rochester affords the unique opportunity to work with a variety of multicultural populations, as the prison demographics encompass a wide breath of the general population, such as a variety of ages, individuals from various socioeconomic backgrounds, sexual orientation, race, and cultural upbringings. The expectation is interns will leave their internship year as competent generalist psychologists who are capable of working in a correctional, inpatient, medical, or outpatient setting.

Q: How many hours will I work? Will I be expected to take work home?

A: Interns typically work five, eight-hour days. Interns are expected to complete some outside reading in order to prepare themselves for their respective rotations and

supervision. Interns are not permitted to bring reports or other inmate specific work home with them.

Q: Will I be able to find adequate housing in the area with the stipend?

A: Yes. FMC Rochester provides a very generous internship stipend. Typical one-bedroom rentals range from \$1000-\$1300 in Rochester.

Q: Will a BOP internship guarantee a career in the BOP?

A: There is no guarantee of a staff position within the BOP after internship. However, the BOP has historically relied on the Psychology Internship Programs to fill entry-level (GS-11) staff psychologist positions. Interns are often notified about open positions early in the recruitment phase through job announcements sent to training directors and postings to BOP websites providing a competitive advantage. Many FMC Rochester interns have gone on to staff psychologist positions within the Bureau upon the completion of their internship. Nationally, within the BOP, over **50% of the interns** have successfully transitioned to full time employment with the Bureau of Prisons.

For additional questions, please contact:

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