DOCTORAL PSYCHOLOGY INTERNSHIP 2017-2018

FEDERAL MEDICAL CENTER Rochester, Minnesota



Accredited by the American Psychological Association

Member, Association of Psychology Postdoctoral and Internship Centers 03-01-2016

WELCOME

The Psychology Services department at the Federal Medical Center (FMC) in Rochester, Minnesota, appreciates your interest in a pre-doctoral psychology internship with the Federal Bureau of Prisons (BOP). It is our hope this informational booklet will serve to answer questions about our internship. We feel we have a unique program that will challenge you both personally and professionally.

A general overview will be provided about the Bureau of Prisons, the role of psychology in the Bureau of Prisons, and a brief history of FMC Rochester. Next, we will give you a synopsis of the internship at FMC Rochester, including information about our accreditation, philosophy, training activities, rotations, supervision, backgrounds of psychology staff, benefits, and frequently asked questions. Lastly, a brief description of the community and surrounding area, as well as application procedures, will be given.

We realize choosing the right internship is a difficult task; our goal is to supply you with all the necessary information to make this important decision. We encourage you to read through this material. Please do not hesitate to call or e-mail me if you have any questions.



John McKenzie, Psy.D. Director of Clinical Training Federal Medical Center Rochester, Minnesota E-Mail: JMcKenzie@bop.gov Phone: (507) 424-7123

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SYNOPSIS OF THE FEDERAL BUREAU OF PRISONS

The Federal Bureau of Prisons 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 Bureau consists of over 100 institutions, 6 regional offices, a central office (headquarters), 2 staff training centers, and 29 community corrections offices. The regional offices and the central office provide administrative oversight and support to the institutions and community corrections offices. Community corrections offices oversee Residential Reentry Centers (RRC) and home confinement programs.

The Bureau is responsible for the custody and care of over 200,000 federal offenders. The majority of these inmates are confined in Bureau-operated correctional institutions and detention centers. The rest are confined in privately-operated prisons, detention centers, residential reentry centers, and juvenile facilities, as well as some facilities operated by state and local governments.

The federal prison system is a nationwide system of prisons and detention facilities for the incarceration of inmates who have been sentenced to imprisonment for federal crimes and the detention of individuals awaiting trial or sentencing in federal court. In the United States, there are also 50 state correctional systems. These systems are responsible for the imprisonment and detention of offenders who have been sentenced or are awaiting trial for crimes committed within their jurisdictions.



PSYCHOLOGY SERVICES IN THE BUREAU OF PRISONS

Psychologists function as the primary providers of mental health services to inmates in the BOP. The psychology departments range in size from a single individual to a larger department of ten or more psychologists. The roles of these psychologists vary depending on the mission of the institution or complex. The department may be operated in the same way as a standard outpatient facility (i.e., community mental health center). Most of the inmates are self-referred; however, some are staff-referred for treatment. In most cases, inmates have the right to accept or refuse mental health treatment.

Psychologists are involved in the Bureau of Prisons at every level of the organization. For example, one previous director of the BOP, Kathy Hawk-Sawyer, was formerly an institution psychologist. Psychologists are represented at the central office (e.g., Psychology Service Administrator, Chief of Sex Offender Programs, National EAP Coordinator, Mental Health Treatment Coordinator, Chief of Mental Health Services, and National Chief of Drug Treatment Programs), and at the institutional level (e.g., Wardens, Associate Wardens, Chief Psychologists, Program Directors, Forensic Psychologists, DAP (Drug Abuse Programs) Psychologists and Staff Psychologists).

Approximately 60 percent of federal inmates have been convicted of drug-related crimes, and the majority of these individuals have substance abuse histories. As a result, Psychology Services has developed the Residential Drug Abuse Program (RDAP), a residential program that offers both education and therapy to help inmates break free from the addiction/crime/prison cycle. Other examples of Bureau of Prisons programs include Challenge, a residential drug program for high security inmates; Change Program, a residential program for borderline personality disorders; BRAVE, a residential program for first-time incarcerated inmates; SOTP, a residential Sex Offender Treatment Program for inmates convicted of sex crimes; SOMP, a Sex Offender Management Program; a program for inmates with severe personality disorders; the Skills Program to assist "special needs" inmates to build skills and reach developmental goals; and transitional step-down units for the chronic mentally ill.



Psychologists are responsible for providing a variety of services in the institutions, ranging from crisis intervention for suicidal and psychotic inmates to individual psychotherapy for inmates desiring positive emotional and behavioral change. In addition, psychologists lead psycho-educational groups, coordinate the treatment and management of mentally ill offenders, provide training and employee assistance services to staff, and participate in pre-employment screening and selection of BOP applicants. Other opportunities for BOP psychologists include participating on the Crisis Negotiation Team or Crisis

Support Team, providing treatment and consultation in Behavioral Medicine, and conducting forensic assessments for the U.S. District Courts, U.S. Parole Commission, and Cuban Detainee Review Panel.

The Bureau of Prisons employs only doctoral-level clinical and counseling psychologists. For some positions (e.g., forensic evaluators, training director), staff are required to be licensed. Psychologists are encouraged to seek further credentialing (e.g., ABPP, APA Division Fellowship). Also, funding is provided by the Bureau for maintaining continued professional competency.

FEDERAL MEDICAL CENTER, ROCHESTER MN

The Federal Medical Center 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 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. The portion consisted of 6 major 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. The Federal Medical Center began receiving inmates in late 1984 and was officially dedicated in September 1985.

Today, approximately 700 offenders are confined at the Federal Medical Center. The FMC 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 general population inmates are assigned to the Work Cadre Unit. These inmates are usually from the Midwestern U.S. and are assigned to various jobs throughout the The Mental Health Unit is facility. designed for the evaluation and treatment of offenders with mental illnesses. Inmates assigned to this unit may be sent to the FMC directly from the U.S. District Courts or from other Bureau of Prisons facilities. The Medical/Surgical Unit of the FMC occupies 5 floors in 2 different buildings. These inmates are treated for cancer, liver disease, HIV/AIDS. Hepatitis, and other illnesses.



On a more philosophical note, FMC Rochester is known for placing a high priority on the humane treatment of patients. We are a JCAHO-accredited hospital with high standards of care. We strive to place patients in the least restrictive environment for treatment purposes. Because the prison used to be a state hospital, and due to our horticulture program, FMC Rochester has a beautiful campus-like setting unique in the prison system.



PSYCHOLOGY INTERNSHIP AT FMC ROCHESTER

Accreditation

The FMC Rochester Psychology Internship Program has been accredited by the American Psychological Association (APA) since 1995 and meets all APA criteria for doctoral internships in professional psychology. At our last review in 2012, we received a full seven year accreditation with APA. The contact information for APA is as follows: American Psychological Association, 750 1st St., Washington, D.C. 20002-4242, (202) 336-5979.

The internship is a full-time, 40-hour-per-week position. Administrative leave is offered for professional conferences as arranged through the Director of Clinical Training and the Chief Psychologist.

Philosophy and Goal

The pre-doctoral professional psychology internship program at FMC Rochester trains entrylevel professional psychologists who can also function competently in the correctional environment. We adhere to a practitioner/scholar model. A strong emphasis is placed on quality mental health treatment offered to patients and we endeavor to provide the intern with diverse and rich clinical experiences. Additionally, we offer a multidisciplinary approach to treatment, as the intern interfaces with activity therapists, social workers, nurses, psychiatrists, physicians, case managers, unit managers, and administrators. To meet this goal, we offer a safe and supportive learning environment that allows interns to develop and enhance skills related to professional psychology; programming that provides opportunities to learn new information in the context of the ethical practice of psychology, as well as the trainees' specific career goals; provision of a variety of skill-building experiences to ensure development of trainees into well-rounded, competent psychologists; and emphasis on the integration of cultural diversity into didactic learning and provision of clinical services.

A core curriculum (detailed under training activities) will provide training in assessment, intervention, consultation, scholarly activities, and professional development. In addition to this core curriculum, the intern will have opportunities to specialize in specific areas of interest such as violence risk assessment, neuropsychology or substance abuse treatment while moving through the training rotations. The interns will be offered varied training opportunities, some of which are unique to FMC Rochester. Our training program allows interns exposure to a year-long mental health rotation with two different minor rotations on a four-month schedule: General Population and Drug Abuse Treatment, and Assessment. As the internship training is based within a correctional medical referral center setting, we are able to offer a forensic and correctional orientation to applicants with interests in such areas.

The internship at FMC Rochester will be professionally challenging. Interns have opportunities to work with severe psychopathology within a secure environment. Our training model will provide the structure for interns to perform optimally with the necessary guidance and supervision. Prior to departmental orientation, interns participate in a two week Institutional Familiarization (IF) training. This training provides the necessary information to work in a correctional environment. Also, a 16-hour department orientation will focus on the intern's role as mental health provider within this setting.

In addition to psychology-specific duties, interns will be members of the FMC Rochester and BOP-wide community. Interns will participate in monthly mock drills, may be asked to help correctional staff in their duties, and will be involved in cultural events. The annual Correctional Workers Week, an event to commemorate correctional staff, will involve many fun events such as paint ball, bowling, a picnic and a 5K run. This provides a sense of community for the intern within the psychology department, the institution, and the BOP system.



Inmate Population at FMC Rochester

The inmate population is very diverse at FMC Rochester. Although the institution only houses male prisoners, these inmates come from all parts of the world (e.g., Africa, South America, Europe). As a medical center, we primarily provide inpatient mental health treatment. In addition, FMC Rochester houses inmates with acute and chronic medical needs. Many of them are referred for medical consultation with the internationally renowned Mayo Clinic.



Among the inmates at FMC Rochester, a wide variety of diagnoses can be found: acute and chronic psychotic disorders, anxiety and mood disorders, personality disorders, substance use disorders, and adjustment disorders. Inmates may seek help for a host of other reasons, including family issues (e.g., divorce, maintenance of family relationships), release/discharge concerns (e.g., relapse prevention), grief, anger management, and chronic medical issues.

Internship Training Activities



A core curriculum including a specific goal, objectives and competencies will be provided across the rotations including the following:

Institution Familiarization: Prior to the start of formal internship training, psychology interns participate in a 2-week orientation with other new staff members. Interns are introduced to the lingo of the federal prison system, learn about correctional policies, and practice correctional procedures. Other topics include basic first aid and CPR, maintaining patient confidentiality, computer services, the chain of command within the BOP, and inmate programming. During this 2-week period, the Director of Training will meet with the intern class to determine primary interests and assign the schedule of rotations.

Forensic Assessment: Psychology interns will be exposed to a variety of forensic opportunities. On the inpatient rotation, they may be involved with writing involuntary commitments, initial/annual risk assessments, and determining competency and responsibility pertaining to incident reports. Forensic reports may require risk of violence due to mental illness, need for hospitalization, and sentencing recommendations (Federal Statutes: 4243, 4244, 4245, 4246).

Neuropsychological Assessment: Psychology interns will be exposed to an assortment of cognitive and neuropsychological tests, as well as report writing on the assessment rotation. We currently have a separate wing (e.g., Martin Wing) which houses many individuals with significant brain impairments. Some of the referrals may include, but are not limited to, testing for dementia, head injury, stroke, and memory deficits.

<u>General Assessment</u>: Psychology interns receive supervised experience on a range of psychological assessment instruments and techniques, including mental status examination, clinical interview, intellectual assessment, and objective personality testing. Interns will learn to integrate test interpretations and behavioral observations in writing reports in response to clinical and forensic questions. The interns will be challenged in the art of differential diagnosis on each of the rotations.

<u>**Clinical Interventions:</u>** Interns have the opportunity to provide individual psychotherapy and supportive counseling addressing a wide variety of clinical concerns; need for treatment may be identified by the staff or the inmate. Current policy mandates that every MH Care 3/Care 4-inmate be offered an evidence-based psychology group. Therefore, all interns will be expected to facilitate evidence-based therapy groups, and are encouraged to develop and facilitate their own additional groups. Additional areas of experience include providing medical consultation/liaison, working with persons who are HIV positive or with other chronic illnesses, developing a working knowledge of psychopharmacology, and offering stress reduction/relaxation training.</u>

<u>**Crisis Intervention:</u>** Interns will have numerous experiences involving crisis intervention. Interns will be provided with supervision and training to make effective crisis interventions. The nature and type of intervention will vary depending on the intern's rotation. The intern will typically perform rounds with their supervisors in the morning to help determine different watch status's as well as justifying current clinical orders. The intern will also be involved in writing suicide risk assessments with supervision.</u>

<u>Consultation</u>: Interns will have opportunities to consult collaboratively with psychologists, psychiatrists, physicians, social workers, activity therapists, nurses, and other allied medical and correctional professionals.

Scholarly Activities: We strongly encourage interns to complete their dissertation during their internship year. Interns are permitted time to engage in planning, conducting, and evaluating research. The majority of our interns use this time to focus on finishing their dissertations. The allocation of time for this purpose is decided on a case-by-case basis by the intern's primary supervisor and the Director of Clinical Training,

Professional Development: Attendance at outside workshops is encouraged, and departmental funding and training leave can be requested. The Mayo Clinic serves as an important local training resource. A broad range of training opportunities are also available to interns in the Twin Cities of Minneapolis/St. Paul, a 90-minute drive from FMC. Internship classes have attended numerous BOP and non-BOP sponsored training seminars, as well as tours of other BOP facilities. We have toured several BOP facilities in MN.

<u>Didactic Training</u>: Ongoing didactic training is available both in-house and via an arrangement with the Mayo Clinic Department of Psychiatry and Psychology. A year-

long schedule of didactic training is offered for the interns. Specific examples of inhouse didactic training include suicide risk assessment, prison rape elimination act, illness management and recovery, cognitive processing therapy, dementia, expert testimony, and forensic testing.

The training is provided by a variety of disciplines, including psychology, psychiatry, and social work. Additionally, interns may participate in **monthly mock emergency exercises**, and are allowed the opportunity to observe and/or participate with emergency

response teams such as the Crisis Negotiation and Crisis Support Teams. Interns are encouraged to attend the weekly psychiatry/psychology grand rounds at the Mayo Clinic. These grand round discussions are led by both psychologists and psychiatrists. Of note, one of the highlights for the interns is an opportunity to participate **in a mock trial** during their year. Throughout the year, interns have the opportunity to witness expert testimony from FMC Rochester staff regarding involuntary commitments and risk assessment hearings.





<u>Case Law</u>: A unique development in our training program has been the addition of a weekly case law seminar. This seminar provides a forum for the presentation and discussion of relevant case law pertaining to forensic and mental health treatment issues. Interns are responsible for preparing and presenting legal briefs on mental health law cases. At the end of the training year, each intern will have a collection of legal briefs on many of the most

significant legal decisions addressing a wide variety of mental health issues. Topics include adjudicative competence, criminal responsibility, civil commitment, mental health treatment, duty to warn, confidentiality, scientific and psychological evidence, and other relevant professional issues. Dr. Wakeman oversees the supervision for this training.

Training Rotations

The internship is consists of one year-long major rotation, Inpatient Mental Health, along with two four-month minor rotations, Assessment and General Population/Substance Abuse Treatment. In summary, each intern will complete a year-long rotation in mental health (approximately 2 days a week). Concurrently, they will complete two four-month rotations (approximately 2 days a week). During one four month rotation, the intern will do exclusively inpatient mental health. Each of these opportunities is described below:

Inpatient Mental Health: Interns on this rotation become part of a multi-disciplinary

evaluation and treatment team that provides services to approximately 30-40 patients with serious and persistent mental illness. This team is comprised of case managers, social workers, activity therapists, nurses, psychiatrists and psychologists. The team meets formally on a weekly basis and works together to provide comprehensive mental health care for each patient.

Interns are considered members of the interdisciplinary team and expected to contribute to the team approach. Most of the patients have severe and chronic mental illnesses, such as schizophrenia and bipolar disorder. Symptoms often include hallucinations, delusional beliefs, severe disorganization of thought and behavior, and mood instability. Many patients also have a personality disorder and/or substance abuse issues. Under supervision, interns will be involved in the patient care process. Interns complete assessments of assigned patients and contribute to the development and implementation of the treatment plan. Interns provide individual therapy and facilitate group therapy sessions. Each morning, the intern, along with their supervisor, will conduct daily rounds in the locked housing unit. This rotation involves working closely with a psychiatrist and learning about psychopharmacology. The intern will develop skills in crisis intervention and in assessment of risk for violence. Interns will gain experience working with individuals that may pose a high risk for suicidal or self-injurious behavior. Interns will learn to conduct and write comprehensive suicide risk assessments and implement interventions to minimize risk of self-harm and suicide.

Dr. McKenzie and Dr. Klein each supervise an intern on the inpatient rotation. Their patients are primarily voluntary admissions to treatment on the Residential Service, under evaluation on a Diagnostic and Observation Service to determine the presence of a mental illness and need for treatment, or court-committed to inpatient hospitalization under the provisions of 18 U.S.C. § 4245 as they were determined to suffer from a mental disease or defect for which they required treatment in a suitable facility. The primary responsibilities on this rotation include Inpatient Psychological Admission interviews, psychological assessment of psychopathology, group and individual treatment, and review of risk of dangerousness prior to release. Interns will also have the opportunity to author initial and annual Mental Health Evaluation reports for submission to federal courts to determine whether patients are in need of commitment.

Dr. Wakeman also supervises interns on the inpatient rotation. Her caseload consists of patients civilly committed as mentally ill and dangerous to the custody of the United Sates Attorney General pursuant to federal statues 18 U.S.C. § 4243 and 4246. For each patient, a federal court has determined his release to the community would create a substantial risk of danger to others or the property of others due to mental disease or defect, after the patient was adjudicated Not Guilty by Reason of Insanity, found incompetent to stand trial, or upon completing a federal criminal sentence. At least annually, each patient is reviewed by a risk assessment panel, and the intern will be learning to conduct and write comprehensive risk assessments for these patients. The assessments address whether a patient remains dangerous due to a mental illness, and whether he can be conditionally released to the community. Interns will present information to the risk assessment panel and author reports for submission to the federal

courts. Through this process, the intern will learn relevant federal civil commitment laws and have the opportunity to observe court proceedings regarding commitment. All of the interns will have opportunities to perform written assessments for these patients if interested.

Assessment: Interns on this rotation will conduct psychological assessments ranging from brief intake interviews to comprehensive evaluations that include neuropsychological testing. Interns participate in all aspects of the evaluation process, including interviewing inmates, communicating with collateral contacts, administering and interpreting tests, and writing reports.

Most of the psychological evaluations are completed on inmates who are patients in the medical unit. This allows interns to learn about the medical and psychological consequences of a variety of serious medical conditions, including HIV/AIDS, liver disease, stroke, paralysis, MS, brain injury, and various forms of dementia.

FMC Rochester does not currently have pre-trial inmates; therefore, pre-trial evaluations are not offered on this rotation. However, each intern on this rotation will have the opportunity to play the role of expert witness in a mock trial, in which other interns and staff play the roles of defense and prosecuting attorneys. Dr. Carlson provides supervision for this four-month rotation.

<u>General Population and Substance Abuse Treatment</u>: This rotation helps interns hone their diagnostic and interviewing skills while performing tasks typically assigned to psychologists working with a general correctional population. Interns conduct initial psychological intake interviews on inmates assigned to the Work Cadre and perform monthly Special Housing Unit reviews. In addition, interns on this rotation see a number of inmates for brief therapy and have the option to lead treatment groups. Interns will also consult with Unit Team members regarding various inmate concerns, including behavior management problems, programming and housing/security needs. Interns may

be asked to complete evaluations for the federal court or the U.S. Parole Commission. Interns may be called upon to perform suicide risk assessments with appropriate supervision.

Interns on this rotation will learn to assess and treat chemically dependent inmates using treatment models employed in every Bureau of Prisons institution. Along with the Drug Treatment Specialist, interns will facilitate



Nonresidential Drug Abuse Program groups using Breaking the Cycle, a curriculum that employs cognitive-behavioral techniques and motivational interviewing. Interns will teach inmate participants rational thinking skills and healthy lifestyle behaviors that will allow them to build a substance- and criminal-free lifestyle. As time permits, interns will also learn how to **screen** inmates for the 500-hour Residential Drug Abuse Program and may co-facilitate the psychoeducational Drug Education Program groups. Dr. Hamilton provides supervision for this four month rotation.

Supervision

The psychology internship at FMC Rochester adheres to the APA guidelines for supervision. The guidelines require a minimum of four hours of supervision, two of which are individual supervision. Individual supervision is provided by the direct supervisor of each of the major and minor rotations. In addition, the Director of Clinical Training is responsible for the development, implementation, and evaluation of the internship program. He will be responsible for overseeing intern progress during the rotations, planning didactic training, and dealing with administrative and procedural difficulties. He provides interns with the specific objectives and expected competencies for each rotation.

Psychology Staff

FMC Rochester has a complement of seven full-time psychologists, a drug treatment specialist, three psychology interns, and one mental health services secretary, who are assigned to specific staff and interns.

Jason Gabel, Ph.D.

Chief of Psychology. Dr. Gabel graduated in 2006 from the University of Wisconsin, Madison, in Counseling Psychology. He completed his pre-doctoral internship at USMCFP Springfield and his postdoctoral fellowship at FMC Rochester. He is licensed in Minnesota. Dr. Gabel's research interests include malingering detection, civil commitment, and risk assessment. He manages and treats the majority of inmates committed for dangerousness and those found not guilty by reason of insanity. Dr. Gabel supervises interns in the weekly mental health case law seminar as well as the inpatient rotation.

Daniel Carlson, Psy.D.

Staff Psychologist. Dr. Carlson graduated in 1991 from the Wisconsin School of Professional Psychology in Clinical Psychology. FMC Rochester is his first BOP institution, which he joined in 1998 after spending several years in private practice. Dr. Carlson maintains a part-time private practice in Rochester. His primary areas of interest include mental abilities, dementia, detection of malingering, and severe mental illness. He is currently licensed in Minnesota. Dr. Carlson supervises interns on the Assessment rotation.

Amy Hamilton, Ph.D.

Drug Abuse Program Coordinator. Dr. Hamilton obtained her Ph.D. in Psychology from Miami University in 1992. Prior to joining the BOP, she worked for the Ohio Department of Corrections. She has also done private practice and has served as forensic consultant to a community mental health center. Dr. Hamilton's primary areas of interest include working with violent offenders - particularly sexual offenders - and survivors of sexual abuse. She is frequently invited to provide training to United States Probation Officers who supervise sexual offenders. She maintains an Ohio license. She supervises interns on the General Population rotation.

John McKenzie, Psy.D.,LP

Director of Training. Dr. McKenzie graduated in 1997 from the University of Northern

Colorado in Counseling Psychology. He completed his pre-doctoral internship at the Federal Medical Center in Lexington, Kentucky. His primary rotations at Lexington included the Drug Abuse Program and General Population. He was employed by LSCI Butner as a Staff Psychologist from 1997 to 2002. He transferred to FMC Rochester as the Director of Clinical Training in 2002. Dr. McKenzie also maintains a small private practice in Rochester. His primary interests include psychopharmacology and personality disorders. He is currently licensed in Minnesota. Dr. McKenzie is the primary administrator of the training program and supervises the mental health long-term treatment rotation.

Melissa J. Klein, Ph.D., LP

Mental Health Psychologist. Dr. Klein earned her doctoral degree in Clinical Psychology from the University of Toledo, Ohio, in 2005. She completed her pre-doctoral internship and postdoctoral fellowship at FMC Rochester, and has worked as a Clinical Psychologist with patients committed as mentally ill and dangerous at the Minnesota State Operated Forensic Services, Transition Services, and as the Drug Abuse Program coordinator of a residential treatment program for female inmates at FCI Waseca, Minnesota. She returned to FMC Rochester in 2012, where she manages and treats inmates who are in need of inpatient hospitalization due to severe mental illness. Her professional interests include recovery from severe mental illness, psychotherapy process and outcomes, and forensic assessment. Dr. Klein is licensed in Minnesota. She supervises the mental health long-term treatment rotation.

Emily E. Wakeman, Ph.D., LP

Staff 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 in which she received specialized training in forensic assessment. Additionally, 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 and is a licensed psychologist in Minnesota. Her professional interests include criminal forensic assessment, violence risk assessment, response style assessment, and psychopathy. Dr. Wakeman will supervise the mental health long-term treatment rotation.

Kasey Odell, Psy.D.

Staff 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. Dr. Odell's caseload consists primarily of patients found incompetent to stand trial or not guilty by reason of insanity who are civilly committed as mentally ill and dangerous. Her professional interests include correctional psychology, SPMI, preparation for reentry, substance use treatment, group therapy, and violence risk assessment. Dr. Odell participates in our didactics.

Benefits and Employment Opportunities

Interns accepted for the 2017-2018 training year will receive the following compensation and benefits: a generous stipend of \$50,600, vacation and sick leave earned every pay period: 13 days of sick leave, 13 days of annual leave, 10 Federal holidays, liability coverage for onsite professional activities, time for research activities, and limited authorized leave time for training.

The BOP places an emphasis on quality training of psychologists in the correctional setting in part because of the growing need for psychologists with the skills and commitment to work in corrections. Staff psychology positions may be available due to the current expansion of correctional facilities. New psychology staff have a variety of choices in terms of geographic location and type of correctional facility (security levels from minimum to administrative maximum) when considering job possibilities. Additional information on the Bureau of Prisons and psychology training within the Bureau can be found at the web site: www.bop.gov

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 unconditionally anyone's safety in a correctional (or any other work) 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. If an intern feels unsafe, he or she may elect to wear a radio with a personal body alarm.

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

A: Almost any mental health issue that exists among the general population can also be found among our patients (e.g., depression, anxiety, interpersonal problems, psychotic disorders). Like our clientele, there are many who use outside mental health services who present with hidden agendas. If you are interested in correctional work, your future job prospects may be enhanced; however, we have many interns who choose to enter community mental health centers, private practice, academic centers, or state hospitals and other settings after their internships.

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

A: The BOP requires strict adherence to a 40 hour work week. Interns work five, eight-hour days. Interns are not required, or expected, to bring reports or other work home with them. Though time is allotted to work on dissertations, students typically work additional hours on their project at home.

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, especially considering the price of living in Rochester and the surrounding environs. Typical one bedroom rentals range from \$700-\$1000 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, BOP facilities may take your year of experience within the Bureau into consideration when making staff selections. In addition, interns are often notified about open positions early in the recruitment phase through job announcements sent to training directors, and postings to BOP websites. Many FMC Rochester interns have gone on to postdoctoral fellowships and staff positions within the Bureau at the completion of their internship.

Q: What kind of resources will I have access to as an intern at FMC Rochester?

A: FMC Rochester offers a wide array of resources for interns to utilize. Interns have their own office and computer. Interns have access to the extensive psychology and psychiatry library, the FMC Rochester medical library, training video library, and the BOP online library. Students have access to both PsychInfo and Psych ARTICLES. Additional training videos, books, and psychological testing may be ordered with departmental approval.



Q: What type of work settings will I be prepared for when I complete the internship program?

A: The training model at FMC Rochester has been developed such that interns gain exposure to a variety of clinical tasks and will be prepared to work in diverse work settings. The internship affords experience in general clinical work, as well as correctional psychology, inpatient mental health, and forensic assessment. Due to the nature of the inmate population, you will develop competency in working with severely mentally ill patients, personality disordered offenders, and those coping with acute stressors. Interns interested in a career in forensic assessment are encouraged to seek additional post-doctoral training in forensics.

Q: Where have past interns gone after completion of their training?

A: FMC Rochester's doctoral internship program has an excellent reputation for training clinicians of exceptional quality. Past interns have successfully found employment in a variety of domains. Nationally, within the BOP, 50% of the interns have successfully transitioned to full time employment with the bureau. Others have gone on to postdoctoral fellowships in the BOP, specialized forensic postdoctoral fellowships, academia, state correctional systems, and psychiatric hospitals across the country.

COMMUNITY AND SURROUNDING AREA

In the past, Rochester has been ranked #1, #2, or #3 of the Most Livable Cities in America by Money Magazine. Rochester has been named the "Best Small City in America." Some of the reasons for this include the reasonable cost of living, low crime rate, excellent educational system, quality medical care, and numerous employment opportunities.

Rochester is the home of the world renowned Mayo Medical Center, as well as the largest IBM complex under one roof. Rochester is only 1 ½ hours from the Twin Cities of Minneapolis/St. Paul, which is a hub of cultural and sports activities.

Rochester is a unique small city of approximately 102,000 people nestled in the rolling farmlands and wooded hills of the Zumbro River Valley. Its cosmopolitan quality comes from a rare combination of ethnic diversity, modern glass skyscrapers, shopping, fine dining and accommodations, and vast cultural offerings. Rich in history, Rochester is teeming with such notable historic attractions as the Mayowood Mansion, Plummer House of the Arts, Plummer Building and Carillon, and Assisi Heights. Rochester plays host to a symphony orchestra, art center,





repertory, civic and children's

theaters, free river-side concerts in the summer, a minor league baseball team, and year-round performances by topname entertainers at the Mayo Civic Center.

Rochester is at the gateway to the splendidly scenic Historic Bluff Country. The dramatic limestone bluffs and densely wooded river valleys of the Mississippi, Zumbro, Root, and Whitewater Rivers provide wonderful day trips. In the heart

of Rochester lies Silver Lake Park, famous for its 30,000 giant Canada geese. Silver Lake Park is one of the 74 city parks along with 8 golf courses, 29 miles of bike trails, 12 miles of Douglas State Trail, 9 miles of hiking trails, and the Quarry Hill Nature Center.



APPLICATION PROCEDURES

The psychology internship positions are open to all students enrolled in doctoral programs in clinical and counseling psychology. Preference will be given to applicants from APA-approved programs. To be considered internship eligible, students must have successfully completed all doctoral course work prior to beginning the internship. Applicants must have completed practicum hours and have a letter from their director of training describing them as internship eligible. An in-person interview is an important part of the selection process for both the intern and the site, and is required.

The Bureau of Prisons is an equal opportunity employer. All applicants are considered without regard to race, religion, color, national origin, sex, status as a parent, political affiliation, age (with authorized exceptions) or any other non-merit factor. All BOP positions are considered "sensitive." Applicants must be U.S. citizens (and lived in the U.S. for three of the last five years) and must successfully complete a security clearance procedure that includes personnel interviews, a background investigation, a physical examination, and urinalysis drug screen. Offers are contingent on security clearance, and prospective candidates may be asked to complete this portion of the interview process prior to the Association of Psychology Postdoctoral and Internship Centers (APPIC) match date. Personnel interviews may occur at any BOP facility to make it easier on those applicants who cannot travel long distances due to time or financial constraints. In accordance with PL100-238, applicants for regular staff positions must be under the age of 37 (with waiver to 39 possible) at the time of initial appointment. While this age requirement does not apply to interns, anyone who pursues a regular BOP staff appointment must meet the age requirements. Successful completion of the internship does not guarantee employment by the BOP.

As applications are reviewed, they are evaluated and ranked by psychology staff. Prospective candidates will be invited for a personal interview. Interviews will generally be held in January. When applicants arrive, a credit check will be completed, a general background interview by personnel will be conducted, and the applicant will be asked correctional-specific questions. If the applicant successfully completes this portion of the interview, he/she will be asked psychology-specific questions by psychology staff. Applicants will also receive a tour and meet with the current interns. All offers will be made in accordance with APPIC policy. 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.

Internship Online Application Includes:

- ► APPIC Internship Form(s)
- A current curriculum vitae that lists relevant clinical and academic experience
- Official transcripts of all graduate work
- ► Three letters of recommendation from **different sources** (e.g., at least one from a work site and/or supervised practicum) who are familiar with the applicant's work as a psychologist trainee and personal qualifications

- A copy of an integrated psychological assessment report on an **adult** completed by the applicant
- Verification of Internship Eligibility and Readiness (APPIC) form

For questions, please contact:

John S. McKenzie, Psy.D. JMckenzie@bop.gov Director of Psychology Training Federal Medical Center 2110 East Center Street P.O. Box 4600 Rochester, MN 55903

HELPFUL LINKS:

Federal Bureau of Prisons	www.bop.gov	
USAJobs	www.usajobs.gov	
Rochester Community	http://www.ci.rochester.mn.us/ http://www.rochestermn.com/ http://www.rochesterchamber.com http://www.rochestercvb.org/	
Mayo Clinic	www.mayo.org	
Twin Cities (Minneapolis/St. Paul)	http://twincities.citysearch.com/ http://www.twincities.com/	
Minnesota	www.exploreminnesota.com	
Rochester Airport	http://www.rochesterintlairport.com/	
Minneapolis/St. Paul Airport	http://www.mspairport.com/msp/default.aspx	
MSP Airport shuttle to Rochester	http://www.rochesterdirect.com/	
Housing	<u>www.rent.com</u> <u>www.rentnet.com</u> <u>www.apartments.com</u>	