



Ochsner Psychology Doctoral Internship

2026-2027 Program Handbook

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A.	Internship Admissions, Support, and Initial Placement Data	53

I. General Information and Setting

Ochsner Health is Louisiana's largest non-profit, academic, multi-specialty, healthcare delivery system with over 47 owned, managed, and affiliated hospitals and more than 300 health and urgent care centers across Louisiana, Mississippi, Alabama, and the Gulf Coast. Ochsner employs over 36,000 employees, and over 4,600 employed and affiliated physicians in over 90 medical specialties and subspecialties and performs over 700 clinical research studies. Ochsner Psychology Doctoral Internship (ODPI) takes place in both the Department of Pediatrics (Child Track) and the Department of Psychiatry (Adult Track).

Ochsner Health's rapidly growing Department of Pediatrics comprises over 150 physicians. Ochsner Hospital for Children operates a dedicated pediatric emergency department, a 45-bed pediatric unit, 14-bed level I PICU, 54-bed level IV regional referral NICU, and a 12-bed CVICU with in-house intensivists and full-time pediatric hospitalist medicine service. Our team serves a broad geographic area encompassing the entire Gulf South region by leveraging a system of satellite clinics and extensive telemedicine capabilities, as well as a dedicated, full-time, pediatric transport team providing ground, rotary and fixed-wing transports across the entire region. Ochsner was recently ranked the number one hospital in Louisiana by US News and World Report, and had three subspecialties ranked in the top 50 nationally including our Pediatric Cardiology & Heart Surgery, Pediatric Gastroenterology & GI Surgery, and Orthopedics Specialties.

The Section of Child Psychology is currently comprised of 17 staff psychologists and two post-doctoral fellows, with plans for further expansion of the child behavioral health workforce over the next several years. The Section of Child Psychology is comprised of providers who specialize in child clinical, developmental, educational, neuro, and pediatric health psychology. The section provides diverse inpatient and outpatient clinical services to children who are developmentally and/or medically complex. Our psychologists provide care at the Jefferson Highway location (Ochsner Hospital for Children pediatrics clinic, inpatient hospital, and Michael R. Boh Center for Child Development), as well as at Ochsner Westside Pediatrics Clinic, at Tchoupitoulas Clinic in New Orleans, at the Boh Center at River Chase in Covington, and at the Boh Center at The Grove in Baton Rouge). Child developmental services are provided at the John Ochsner Discovery School in Jefferson Parish. In addition, we are growing capacity for direct-to-consumer clinical services with the proliferation of telehealth services to Ochsner facilities in other geographical locations, as well as to affiliate and partner hospitals and clinics.

Ochsner Health's rapidly growing Behavioral Health Service Line comprises over 100 providers including psychiatrists, 16 psychologists, psychiatric nurse practitioners and physician assistants, licensed clinical social workers, and licensed professional counselors. Outpatient clinic services are offered at over 12 distinct locations in the Greater New Orleans Area, Northshore, Baton Rouge, and Bayou Region. Our team serves an even broader geographic area by leveraging extensive telemedicine capabilities throughout the Gulf Region. In response to the COVID-19 pandemic, the behavioral health providers led the entire organization in both percentage of and unique clinic visits conducted through a virtual platform. Ochsner Health also operates or manages through various partnerships five acute psychiatric units for adults comprising of 182 beds (including adults, geriatrics, and medical/psychiatry) and one 22-bed adolescent unit. Ochsner Health is also partnered with LSU-Shreveport and LSU-Monroe, both of which have acute psychiatric units and outpatient clinic services that are growing in size and scope.

The Section of Adult Psychology at Ochsner Health's flagship campus, OMC-Jefferson Highway, is comprised of 10 staff psychologists, one post-doctoral fellow, and 1 psychometrician with plans for

further expansion of the behavioral health workforce over the next several years. Psychologists in our section are integrated into various medical specialties throughout the Ochsner system and serve on a variety of multidisciplinary teams; our providers are well-respected and in high demand to assist with the treatment of a wide array of behavioral challenges and symptoms throughout the hospital. Psychologists working in this section primarily focus on working with adults through the lifespan (18 and over), although some work with children and adolescents as well. Psycho-diagnostic and presurgical assessments are conducted by several of our providers. Many of our psychologists place emphasis on utilizing Evidence Based Psychotherapies, such as Cognitive Behavioral Therapy.

II. Program Aims and Competencies

Program Aim: Our program aims to prepare early-career psychologists to provide competent, evidence-informed, innovative care focused on respect for individual differences, diversity, and inclusion. We do so within the context of a regional medical center and its affiliates.

Training Competencies: Interns receive training, are evaluated, and are expected to demonstrate competence by the end of the year in each of the following competencies.

- Research
- Ethical and Legal Standards
- Individual and Cultural Diversity
- Professional Values and Attitudes
- Communication and Interpersonal Skills
- Assessment
- Intervention
- Supervision
- Consultation and Interprofessional/Interdisciplinary Skills

III. Accreditation Status

At its October 25-28, 2023 meeting, the APA Commission on Accreditation (CoA) reviewed the internship program at Ochsner Health in New Orleans, LA, and awarded “**Accredited, on contingency**”. “Accredited, on contingency” status is granted if the program meets all standards except for the inclusion of all required outcome data on interns in the program and after program completion. To move from “accredited, on contingency” status to fully accredited, the program must provide the required data by the time two (2) cohorts have completed the program. As of September 2025, ODPI has submitted all required data to APA CoA.

Questions related to the program’s accredited status should be directed to the Commission on Accreditation:

Office of Program Consultation and Accreditation
American Psychological Association
750 1st Street, NE, Washington, DC 20002
Phone: (202) 336-5979 / E-mail: apaaccred@apa.org
Web: www.apa.org/ed/accreditation

IV. Admissions and Selection

A. Application Process

The Ochsner Psychology Doctoral Internship (OPDI) currently offers 6 full-time internship positions – 3 in the adult track and 3 in the child track. The child track has 3 different major rotation experiences (Child Development, Pediatric Health Psychology, and Pediatric Primary Care)—interns should apply to and rank all experiences that they are interested in. Students interested in applying for the internship program should submit an online application through the APPIC website (www.appic.org) using the APPIC Application for Psychology Internships (AAPI).

A complete application consists of the following materials:

1. A completed online AAPI
2. Cover letter (as part of AAPI) – In your cover letter, please clearly state in which track (Adult or Child) you are interested. If applying to the child track, please list all major rotation experiences that you are interested in.
3. A current Curriculum Vitae (as part of AAPI)
4. Three Standard Reference Forms, two of which must be from persons who have directly supervised your clinical work, and one of which must be a member of the intern's doctoral program faculty. **Please submit no more than three SRFs.**
5. Official transcripts of **all** graduate coursework

All application materials must be received by **December 1st** in order to be considered.

B. Application Screening and Interview Processes

OPDI bases its selection process on the entire application package noted above; however, certain *minimum qualifications* must be met:

1. Enrollment in a doctoral program in clinical, counseling, or school psychology (child track only) at a regionally-accredited institution; the doctoral program shall involve at least one continuous academic year of full-time residency on the campus of the institution at which the degree is granted.
2. Minimum of 500 hours of direct intervention hours;
3. Minimum of 50 hours of direct assessment hours;
4. At least 100 hours of scheduled individual supervision;
5. Successful completion of academic program's comprehensive examination or equivalent;
6. At least 4 years of graduate level training in psychology; and
7. Interns must be a U.S. citizen. In compliance with federal law, all persons hired will be required to verify identity and eligibility to work in the United States and to complete the required employment eligibility verification form upon hire.

Applicants who have met the following qualifications prior to beginning internship are *considered preferred*:

1. Some experience or special interest in working with diverse populations; and
2. Current enrollment in good standing in an APA- or CPA-accredited doctoral program.

All applications are reviewed by OPDI's Training Committee using a standard Applicant Rating Form and evaluated for potential goodness of fit with the internship program. The Training Committee meets to determine which applicants to invite for interviews based upon the results of this review process.

Applicants are notified whether they have received an interview by email on or before **December 15**.

Interviews are scheduled on a first come, first served basis in January and occur via teleconference. Each intern should expect a half-day of interviews with members of the Training Committee, program staff, and current interns. Interviews are conducted using a standard set of interview questions, although members of the Training Committee may ask additional interview questions of applicants as appropriate.

C. Participation in the APPIC Match

The Training Committee holds a meeting within two weeks of the final interviews being completed and before the Rank Order Deadline to determine applicant rankings. The full application package and information gleaned from the interview process are utilized to determine applicant rankings. As a member of APPIC, OPDI participates in the national internship matching process by submitting its applicant rankings to the National Matching Service. OPDI abides by the APPIC policy that no person at this training facility will solicit, accept, or use any ranking-related information from any intern applicant.

Questions regarding any part of the selection process or OPDI's academic preparation requirements may be directed to the Co-Training Directors.

D. Requirements of Employment at Ochsner

All interns who match to OPDI must provide proof of citizenship or legal residency and must successfully pass a fingerprint-based background check before beginning the internship. The sexual offender registry in Louisiana and the county/state of the intern's residence may be checked to ensure the intern is not listed. The history of a felony or misdemeanor may result in failing this review process and prevent the intern from placement with OPDI. Additionally, Ochsner is a drug, alcohol, and tobacco-free workplace. All interns must pass a drug screen prior to being employed by OPDI and must commit to not smoking on campus. If a prospective intern tests positive for drugs, alcohol, or a controlled substance for which a valid prescription is not provided, he/she/they will not be eligible for placement in the internship program. Ochsner Health will verify the individual's eligibility to participate in federal programs by checking the exclusion lists which will include the Office of Inspector General (OIG) List of Excluded Individuals/Entities and the General Service Administration (GSA) List of Parties Excluded from Federal Procurement and Non-procurement Programs (OIG/GSA).

Prior to the intern starting at Ochsner, he/she/they must provide satisfactory evidence that they are free from contagious disease and do not otherwise present a health hazard to Ochsner patients, employees, volunteers, or guests. Such evidence may include without limitation the following: the completion of a tuberculin test (within the last year) or evidence that they are free of symptoms of pulmonary disease if the TB test is positive, a statement from the treating physician following a positive TB test result that the intern has no current signs of active TB, and physical examination and titers for rubella, measles, mumps and chicken pox, Hepatitis B Vaccine completed or declination form signed, and proof of influenza vaccination. Interns on the Child Track must also provide evidence of TDAP vaccine. Instructions for completing these steps and providing this information will be sent out to all who match after the match process is complete. As of October 29th, 2021, COVID-19 vaccination is required for all Ochsner Health employees and interns. Those with an approved medical or religious exemption may be asked to submit to weekly COVID-19 testing and to wear an KN95 mask at all times on any Ochsner campus and at any Ochsner-affiliated event.

V. Program Tracks/Rotations

A. ADULT TRACK

The OPDI Adult Track consists of a variety of experiences to promote the development of both breadth and depth of clinical skills for psychologists in training. As outlined below, interns on the Adult Track choose 3 rotations during the year (4 months each) where they work with specific populations and within specialized settings to gain exposure to a variety of clinical settings within a medical center. Throughout the internship year, interns also work within the general outpatient setting in several different roles, as described below.

YEAR-LONG EXPERIENCES:

1) Individual Psychotherapy

Interns carry 4-6 individual therapy cases at any given time, with cases assigned from the general outpatient psychiatry clinic. Cases can be tailored to the intern's particular interests and will be supervised by staff psychologists with the goal of exposing interns to an array of therapeutic modalities. Interns have the opportunity to participate in the department's Brief Evidence-Based Psychotherapy (BEBP) Clinic through several rotations and long-term cases.

2) Group Therapy

Interns will facilitate or co-facilitate a minimum of 1 group during their training year. Depending on the intern's level of experience with group therapy, they will have opportunities to observe groups or co-facilitate with experienced psychologists at the start of the year. There are a variety of group therapy possibilities available to interns, including time-limited CBT groups, support groups for specific populations, or process groups.

3) Assessment

Interns are expected to complete 4-6 integrated testing reports throughout the year. The types of reports available include presurgical assessments (bariatric, pain, donor), diagnostic clarity, and adult ADHD assessments. Interns will each participate in a 4-month long assessment rotation which will begin with intern observation of staff psychologist conducting assessments and self-study items, transition to psychologist observation of interns' assessment administration and report writing, and end with independent intern assessment administration.

ROTATIONS:

During the internship year, interns complete three 4-month rotations for approximately 16 hours per week. Matched interns will be asked to choose their first rotation in advance of starting internship, and will be given opportunities to speak to supervisors of different tracks of interest prior to choosing. Interns will choose their second and third rotations during orientation week. Every effort is made to give interns their top three choices. Rotations provide the interns with exposure to different specialties within a large medical center and the opportunity to develop a breadth of clinical skills in these specialties through observation, formal learning, supervision, and direct clinical work. It is expected that interns spend 4 half days per week on their rotations, although each rotation may have important aspects that require some flexibility with scheduling. Interns have a primary supervisor on each rotation who sets up a schedule of training and clinical activities with them. The Co-Training Director over the Adult Track oversees interns schedule to ensure that rotation requirements and required intern training experiences, such as didactics, do not conflict.

All rotations are located at Ochsner Main Campus unless otherwise noted. Available rotations are subject to change based on department staff, but are likely to include:

- **Psycho-oncology** (Supervisors: Michele Larzelere, PhD and Tracey Murry, PhD) – Located at the Benson Cancer Center, this rotation involves working with inpatients and outpatients with a variety of cancer diagnoses. Clinical opportunities include being on a multidisciplinary team, providing assessments, conducting individual therapy, and providing consultation. The psycho-oncology rotation also may include some research opportunities.
- **Perinatal Mood and Anxiety Disorders** (Supervisor: Jackie Ball, PhD) – This rotation includes training related to assessment/evaluation as well as evidence-based group and individual treatment to women diagnosed with perinatal mood and anxiety disorders, as well as pregnancy and infant loss and birth trauma.
- **Intensive Outpatient Program** (Supervisor: Ariana Mitchell, PhD) – Interns on this rotation work within Ochsner's Mental Wellness Program (OMW), a rolling admission 10-day intensive outpatient program for patients with a primary psychiatric diagnosis requiring stabilization. The intern's duties may include: facilitating or co-facilitating groups, providing individual therapy to patients, providing psychological assessment to patients, and being involved on multiple levels with an interdisciplinary team approach.
- **Posttraumatic Stress Disorder (PTSD) Treatment** (Supervisor: Taylor Parks, PhD) – On this rotation, interns learn to assess, diagnose, and treat PTSD using APA's Clinical Practice Guidelines. They have introductory training for evidence-based trauma treatment of these EBP's - Prolonged Exposure (PE), Written Exposure Therapy (WET), and/or Skills Training in Affective and Interpersonal Regulation (STAIR). Interns are supervised on individual therapy cases using these protocols and have the opportunity to be involved in the provision of CPT group therapy.
- **Dialectical Behavior Therapy (DBT) Skills Training** (Supervisor: Allison Smith, PhD) – Interns on this rotation learn the four modules of DBT skills in depth and are supervised in implementing DBT skills to treat a variety of presenting problems. Interns learn and teach these modules predominantly in the group setting with some possibility for individual treatment opportunities. This rotation does not teach comprehensive DBT and focuses on learning and teaching core skills.
- **Manualized Evidence-Based Psychotherapy** (Supervisor: Jacklyn Ruhl, PhD) – Interns on this rotation will see patients within the BEBP Clinic (Brief Evidence-Based Psychotherapy Clinic) to strengthen breadth and depth of time-limited manualized treatment protocols. Interns will choose two or more protocols from the following options: CBTi (CBT for Insomnia), CBT for Panic (CBT for Panic Attacks), CBT for Complicated/Prolonged Grief, Brief CBT, and CPT (Cognitive Processing Therapy – only if the intern has prior experience treating PTSD or using this protocol).

1. Adult Track Sample Weekly Schedule

Adult Track Sample Calendar						
	Monday	Tuesday	Wednesday	Thursday	Friday	
7:00						7:00
7:30						7:30
8:00	Rotation (Four months long)	Rotation (Four months long)	Rotation (Four months long)	Rotation (Four months long)	Didactics Seminar	8:00
8:30						8:30
9:00						9:00
9:30						9:30
10:00				Psychologist case conference (1 st Th of month)	Journal Club	10:00
10:30						10:30
11:00				Psychologist case conference (1 st Th of month)	Foundations of Wellness	11:00
11:30						11:30
12:00	Lunch	Lunch	Lunch	Lunch	Lunch	12:00
12:30						12:30
1:00	Individual therapy OR Group therapy OR Assessment	Individual therapy OR Group therapy OR Assessment	Individual therapy OR Group therapy OR Assessment	Individual therapy OR Group therapy OR Assessment	Individual therapy OR Group therapy OR Assessment	1:00
1:30						1:30
2:00	Individual therapy OR Group therapy OR Assessment	Individual therapy OR Group therapy OR Assessment	Individual therapy OR Group therapy OR Assessment	Individual therapy OR Group therapy OR Assessment	Individual therapy OR Group therapy OR Assessment	2:00
2:30						2:30
3:00	Group Supervision – Individual Cases	Individual supervision	Group Supervision – Group Cases	Individual supervision	Individual therapy OR Group therapy OR Assessment	3:00
3:30						3:30
4:00	Individual therapy OR Group therapy OR Assessment	Individual therapy OR Group therapy OR Assessment	Individual therapy OR Group therapy OR Assessment	Psychoeducation Group	Individual therapy OR Group therapy OR Assessment	4:00
4:30						4:30

B. CHILD TRACK

The OPDI Child Track focuses on breadth and depth of training in three major clinical areas: 1) child development; 2) integrated pediatric primary care; and 3) pediatric psychology (integrated tertiary/quaternary care). There are 3 positions available on the Child Track, one in each of the major clinical areas. Each intern will be matched to one clinical area for the major rotation, with the other clinical areas being minor clinical rotation experiences. Thus, all child track interns will have clinical rotation experiences in all of the three clinical areas during their training year with OPDI. The following approximate breakdown will occur for each position: 60% of time in activities related to the major clinical rotation; 20% of time in activities related to the two minor rotations; 10% of time in didactic activities; 5% of time in individual supervision; and 5% of time in group or other supervision activities.

INTERNSHIP SPECIALTY AREA 1: CHILD DEVELOPMENT Major Rotation (1 position)

Our clinical child behavioral psychologists serve children/adolescents and their families who are presenting with complex neurodevelopmental disorders and/or behavioral or cognitive deficits that interfere with their ability to complete their basic activities of daily living (e.g., feeding, toileting, socializing, following behavioral standards set by home or school, etc.). Behavioral and developmental psychological services are delivered through the Michael R. Boh Center for Child Development, which is dedicated to high-quality and evidence-based interdisciplinary care for children and adolescents with Autism Spectrum Disorders and other developmental differences. Through the Boh Center, our psychologists are co-located with our physicians and allied health professionals most involved in care of patients with developmental disorders and participate actively in interdisciplinary teams to conduct comprehensive evaluations, integrated treatment protocols, direction of special education services, and professional education and research.

Interns are provided with training in evidence-based practices and education regarding neurodevelopmental conditions, behavioral and psychological sequelae, and medical and social correlates of such conditions. Common presenting problems range from assessment for autism spectrum disorders (ASD), developmental delay, and intellectual disability; behavioral treatment of feeding and toileting challenges; evaluation of school-related problems; managing challenging to severe behavior; social skills training; and more. Interns receive mentoring in effective work with multidisciplinary teams comprised of developmental pediatricians, physical and occupational therapists, speech and language therapists, applied behavior analyst (ABA) therapists and board-certified behavioral analysts (BCBA), psychometricians, and medical subspecialists that are most involved in the care of developmental disorders including cardiology, physical medicine and rehabilitation, pulmonology, neurology, and genetics.

Primary clinical activities for the major rotation in child development include:

- Developmental/autism, learning, and/or neuropsychological evaluations;
- Assessment and intervention services for patients receiving care for pediatric feeding and swallowing disorders; and
- Outpatient psychotherapy and behavioral treatment for patients with co-occurring developmental and behavioral and/or emotional concerns, including parent training, group therapy, and individual therapy.

Primary Faculty Supervisors

For this major training area, supervision may be provided by Claire Burns, Ph.D., Christiane Creveling-Benefield, Ph.D., Ashleigh Eaves, Ph.D., Nicole Lasserre, Ph.D., BCBA-D, Virginia Hatch, Ph.D., Katherine Lantier, Ph.D., and/or Garret Edwards, Ph.D., BCBA-D.

Child Development Minor Rotation

The minor rotation in child development focuses on assessment services. Developmental/autism assessments, learning assessments, and assessments informed by neuro-developmental concerns through the Boh Center for Child Development are designed to assess and differentially diagnosis children with developmental or other delays. The clinic is staffed by developmental/behavioral pediatricians, psychologists, and psychometrists. Evaluations include a diagnostic intake, standardized assessment tools and rating scales, and preparation of a written report. The team collaborates to discuss the diagnosis, a treatment plan, and the need for any further evaluations or testing. Results are typically disseminated to the child's parent(s)/caregiver(s) through a feedback session.

Primary Service Location(s)

Services for the Child Development major and minor rotation occur at the Jefferson Highway campus. Specific service location includes the Michael R. Boh Center for Child Development.

INTERNSHIP SPECIALTY AREA 2: INTEGRATED PEDIATRIC PRIMARY CARE Major Rotation (1 position)

Clinical psychologists provide behavioral health integration within the pediatric primary care setting. They serve children/adolescents and their families who are referred for concerns by their primary care providers, with the most common referrals being for developmental and/or behavioral concerns, attention or learning concerns, and concerns about anxiety, depression, or mood. Integrated care psychologists see approximately 70% or more of their patients in a consultative fashion immediately following referral from their primary care provider, and approximately 30% of their patients for scheduled follow-up appointments, largely centered around brief, solutions-focused interventions.

Interns are provided with training in evidence-based practices and education regarding consultation; effective brief clinical interview and triage skills; interdisciplinary collaboration; brief assessment and progress monitoring for attention, anxiety, and depression; and brief, solutions-focused interventions. Behavioral health integration within pediatric primary care is a burgeoning area of interest and specialization for early career psychologists because of the access it affords to mental health services for otherwise underserved patient populations. In addition, it allows for interruption of the "traditional" model for behavioral health services of "refer and wait," and instead allows patients and their families to make progress toward behavioral health goals as soon as possible after initial pediatrician referral.

Primary clinical activities for the major rotation in integrated pediatric primary care include:

- Consulting on referrals from primary care providers for developmental, behavioral, emotional, and social concerns for child and adolescent patients;
- Utilizing clinical interview, triage, and screening skills to determine the best course of action for patients, which could include but is not limited to referral for comprehensive diagnostic or school-based evaluation, referral for behavioral or emotional therapy and/or parent management training, referral to the integrated care service for short-term intervention, etc.; and
- Assisting with development of clinic protocols, such as training for primary care providers on mental and behavioral health problems, standardized screening processes, crisis intervention protocols, and mandated reporting practices.

Primary Faculty Supervisors

For this major training area, supervision may be provided by Yelena Johnson, Ph.D., Jacqueline Philpott, Psy.D., Alyssa Scurria, Psy.D., Katherine Lantier, Ph.D., and/or Lee Purvis, Ph.D.

Integrated Pediatric Primary Care Minor Rotation

The minor rotation in integrated pediatric primary care focuses on consultation and brief, solutions-focused outpatient therapy. Interns assist with intake and triage for consultation requests from primary care providers to determine best course of action for each patient given their individual needs. When a short-term course of outpatient therapy is indicated, the intern may follow the patient for intervention. The minor rotation in integrated pediatric primary care may also afford opportunities for experiences in crisis intervention and mandated reporting.

Primary Service Location(s)

Services for the Integrated Pediatric Primary Care major and minor rotation occur at the Ochsner Children's - Westside Pediatrics Clinic in Marrero, Louisiana, at Ochsner Children's – Veterans Pediatrics Clinic in Metairie, LA, and Ochsner Children's Health-Jefferson Hwy Pediatrics Clinic in Jefferson, LA.

INTERNSHIP SPECIALTY AREA 3: PEDIATRIC PSYCHOLOGY Major Rotation (1 position)

Our pediatric psychologists serve children/adolescents and their families who are having difficulty managing physical symptoms, adapting to chronic/acute medical conditions, or adhering to medical regimens. Referrals are received from a wide array of subspecialties within Ochsner Health including: Cardiology, Diabetes/Endocrinology, Gastroenterology, Gender Medicine, General Pediatrics, Genetics, Hematology-Oncology, Neurology, Physical Medicine & Rehabilitation, Plastic Surgery, Pulmonology, Orthopedics, and Transplant Services, among others. Pediatric psychology clinical services are delivered in the Medical Subspecialty Clinics in the Department of Pediatrics and on the inpatient medical floors.

Interns are provided with training in evidence-based practices and education regarding pediatric medical conditions, psychological sequelae, and correlates of such conditions. Common presenting problems range from adapting to acute and chronic illness, self-management/adherence to medical regimens, procedural anxiety, reactions to accidental injury/medical trauma, and conditions related to the interaction of physical and behavioral factors such as chronic pain and medically unexplained symptoms.

The structure of the internship allows interns to follow families through their medical treatment and in a variety of settings. Interns work with their supervisor(s) and the medical teams to coordinate psychological services with medical care. Interns provide continuity of care to patients throughout outpatient visits, medical subspecialty clinics, and inpatient stays.

Primary clinical activities for the major rotation in pediatric psychology include:

- Consultation-liaison (C/L) services to patients on the acute medical, pediatric intensive care unit (PICU), and/or pediatric cardiovascular intensive care unit (CVICU);
- Assessment and intervention services to patients through multidisciplinary outpatient clinics (e.g., diabetes clinic, colorectal clinic, inflammatory bowel disease clinic, adolescent and young adult clinic, gender clinic, etc.);
- Psychological Assessment for pediatric patients with co-occurring medical conditions (e.g., hematology/oncology, epilepsy, IBD). Evaluations may have a psychoeducational, developmental, and/or neuro-cognitive focus; and
- Outpatient psychotherapy for patients with chronic and/or significant medical conditions, referred for outpatient care from the C/L service or through multidisciplinary clinics.

Primary Faculty Supervisors

For this major training area, supervision may be provided by Justin Carreras, Ph.D., Emily Crochet, Psy.D., Alexis Liberto, Ph.D., Clifton Mixon, Ph.D. and/or Erin Reuther, Ph.D.

Pediatric Psychology Minor Rotation

The minor rotation in pediatric psychology focuses on consultation-liaison (C/L) services and participation in multi-disciplinary heart transplant outpatient clinic. C/L psychology services involve providers who consult to allied hospital personnel about the behavioral and mental health needs of pediatric patients during the course of their hospitalization. Consultations for hospitalized children typically follow a medical model whereby the consultant assesses the referred pediatric patient and advises the referring physician and medical team about the findings and management of psychosocial aspects of the patient's care. This is often a complex process involving multiple interviews of child, family, and staff, repeated behavioral observations, perhaps formal psychological assessment, communication of findings to the hospital staff via written, telephone, and face-to-face contacts, and implementation of intervention procedures often under tight time constraints of competing medical procedures and insurance limitations. Additionally, C/L services are often confronted with a wide array of referral questions, including differential diagnoses of organic versus psychogenic contributors to symptom presentation, adherence problems to medications and treatments, coping and adjustment to chronic illness and trauma, pain management, decision making for organ transplantation, and arranging for posthospitalization follow-up. Minor rotation experiences may also include working in interdisciplinary medical clinics.

Primary Service Location(s)

Services for the Pediatric Psychology major and minor rotation occur at the Jefferson Highway campus. Specific service locations include Ochsner Children's Health-Jefferson Hwy Pediatrics Clinics in Jefferson, LA, and inpatient C/L rotations occur at Ochsner Children's Hospital in the inpatient acute pediatric hospital unit, the pediatric intensive care unit, and the pediatric cardiovascular intensive care unit in Jefferson, LA.

1. Child Track Sample Weekly Schedules

SAMPLE Child Track Internship Schedule – Major: Child Development; Minor: IPPC									
	Monday	Tuesday	Wednesday	Thursday	Friday				
8:00	Child Development Testing Boh Center	Multi-disciplinary Feeding clinic	Individual Supervision	Multi-disciplinary Autism assessment clinic	Didactics seminar Brent House, 2 nd floor Classroom 1	8:00			
8:30						8:30			
9:00						9:00			
9:30						9:30			
10:00	Individual supervision (major rotation) OMC Boh Center, 1319 Jefferson Highway	OMC Boh Center, 1319 Jefferson Highway	Integrated Pediatric Primary Care	OMC Boh Center, 1319 Jefferson Highway	Journal Club Brent House 4 th floor, 461	10:00			
10:30			Metairie Pediatrics 4901 Veteran’s Memorial Blvd			10:30			
11:00					Foundations of Wellbeing, Brent House 4 th floor, 480	11:00			
11:30						11:30			
12:00	Group Supervision	Lunch	Lunch	Lunch	Lunch	12:00			
12:30		Optional: Psychiatry Dept grand rounds via Zoom	Third Wednesday each month from 12:00-1:00: Boh Providers Section meeting; join via Zoom	Pediatrics Grand Rounds via Zoom (12:15-1:15); required to attend ≥50% of presentations		12:30			
1:00	Outpatient visit Boh Center	Assessment Rotation Testing Sessions OMC Boh Center, 1319 Jefferson Highway	MINOR ROTATION Integrated Pediatric Primary Care Metairie Pediatrics 4901 Veteran’s Memorial Blvd	Multi-disciplinary Autism assessment clinic OMC Boh Center, 1319 Jefferson Highway	Flex child devel coverage (outpatients, reports/notes, parent training, groups, etc.) OMC Boh Center, 1319 Jefferson Highway	1:00			
1:30								1:30	
2:00	Outpatient visit Boh Center							2:00	
2:30								2:30	
3:00	Testing Feedback Visit								3:00
3:30									3:30
4:00	Group Treatment	Group Treatment	Outpatient follow-up			4:00			
4:30									4:30

SAMPLE Child Track Internship Schedule. Major: IPPC; Minor: Pediatric Health							
	Monday	Tuesday	Wednesday	Thursday	Friday		
8:00		MINOR ROTATION Pediatric Health Psychology Heart Transplant Clinic OMC Peds 1215 Jefferson Hwy.			Didactics seminar Brent House, 2 nd floor Classroom 1	8:00	
8:30						8:30	
9:00	Individual Supervision (major rotation)		Individual Supervision (major rotation)	IPPIC Clinic Consult Coverage Westside clinic – 4425 Lapalco Blvd, Marrero		9:00	
9:30						9:30	
10:00	IPPIC Clinic Consult Coverage Westside clinic – 4425 Lapalco Blvd, Marrero		IPPIC Clinic Consult Coverage Westside clinic – 4425 Lapalco Blvd, Marrero		Journal Club Brent House 4 th floor, 461	10:00	
10:30						10:30	
11:00				Foundations of Wellbeing, Brent House 4 th floor, 480	11:00		
11:30					11:30		
12:00	Group Supervision	Lunch <i>Optional: Psychiatry Dept grand rounds via Zoom</i>	Lunch <i>Third Wednesday each month from 12:00-1:00: Integrated Pediatric Behavioral Health Section meeting</i>	Lunch <i>Pediatrics Grand Rounds via Zoom (12:15-1:15); required to attend ≥50% of presentations</i>	Lunch	12:00	
12:30						12:30	
1:00	IPPIC Clinic Consult Coverage Westside clinic – 4425 Lapalco Blvd, Marrero	MINOR ROTATION	Outpatient Visit Westside Clinic	IPPIC Clinic Consult Coverage Westside clinic – 4425 Lapalco Blvd, Marrero	Flex IPPC coverage (virtual outpatient follow-up visit, notes, wrap-up tasks from the week, etc.) <i>Workspace location-- Boh Jefferson Highway campus</i>	1:00	
1:30		Individual Supervision (minor rotation)					1:30
2:00			Outpatient Visit Westside Clinic				2:00
2:30		MINOR ROTATION Pediatric Health Psyc Inpatient C/L				Clinic coverage/ documentation	
3:00			Group Treatment Westside Clinic				3:00
3:30							3:30
4:00			Outpatient Visit Westside Clinic				4:00
4:30						4:30	
5:00							

5:30						5:30			
SAMPLE Child Track Internship Schedule – Major: Pediatric Health; Minor: Child Development									
	Monday	Tuesday	Wednesday	Thursday	Friday				
8:00	1 st Monday - Diabetes Clinic	Inpatient Consultation-Liaison Pediatrics Hospital	Psychological evaluation with neuropsychological focus Pediatrics Building, 1315 Jefferson Hwy	MINOR ROTATION Autism assessment clinic OMC Boh Center, 1319 Jefferson Highway	Didactics seminar Brent House, 2 nd floor Classroom 1	8:00			
8:30						8:30			
9:00						9:00			
9:30						9:30			
10:00	2 nd & 4 th Monday - Outpatient Visits							Journal Club Brent House 4 th floor, 461	10:00
10:30	Pediatrics Building							Foundations of Wellbeing, Brent House 4 th floor, 480	10:30
11:00	Individual supervision (major rotation)								11:00
11:30									11:30
12:00	Group Supervision	Lunch <i>Optional: Psychiatry Dept grand rounds via Zoom</i>	Lunch	Lunch <i>Pediatrics Grand Rounds via Zoom (12:15-1:15); required to attend ≥50% of presentations</i>	Lunch	12:00			
12:30						12:30			
1:00	Individual Outpatient visits (1 st , 2 nd , 4 th , 5 th Mondays) Pediatrics Building 1315 Jefferson Hwy	Individual Outpatient Visits Pediatrics Building, 1315 Jefferson Hwy	Psychological evaluation with neuropsychological focus	Autism assessment clinic	Flex Peds psych coverage (reports, notes, etc.) <i>Workspace location-- Boh Jefferson Highway campus or office in peds building</i>	1:00			
1:30						1:30			
2:00				Individual Supervision (minor rotation)		2:00			
2:30						2:30			
3:00				Autism assessment clinic		3:00			
3:30						3:30			
4:00	4:00								
4:30	Functional Neurological Disorders clinic 3 rd Monday of month			Individual supervision (major rotation)				4:30	
5:00						5:00			
5:30						5:30			

VI. Training Experience

A. Overall Hours

The OPDI internship is a full-time, 1-year training experience. All interns complete a minimum of 2000 hours of supervised training to complete the internship year successfully. Interns spend a minimum of 25% of their time (500 hours total), or an average of 10 hours per week, in face-to-face psychological services to patients.

B. Supervision

All interns receive at least four hours of supervision weekly, including a minimum of two hours of individual face-to-face supervision with a licensed psychologist. Supervisors maintain clinical responsibility for intern cases, as indicated by co-signing all clinical documentation and other measures.

OPDI Adult Track: Interns receive 1 hour of individual supervision for outpatient cases and at least 1 hour of formal supervision on each rotation with their primary supervisor, as well as informal supervision throughout the hours designated for rotation. Interns also receive 1 hour of group supervision for group therapy, and 1 hour of group supervision for individual cases weekly.

OPDI Child Track: Interns receive a minimum of 2 hours of individual supervision weekly, which includes two hours from supervisor(s) associated with their major rotation, and 1 hour per week of individual or group supervision from a supervisor associated with the minor rotation(s). Additionally, Child Track interns participate in a weekly group supervision led by a psychologist with a breadth of training experiences aligned with all three child track rotations.

VII. Structured Learning and Professional Development Opportunities

All interns participate in at least four hours of didactic activities per week. Child and Adult Track interns meet together on Friday mornings from 8 AM – 12 PM for these activities, which include the following:

- Two hours of structured learning that covers a wide variety of topics, including the development of competencies important to the program and becoming a psychologist. A substantial amount of the structured learning is devoted to topics in the broad competency of Intervention, with the intention of exposing interns to an array of treatment theories and modalities. These didactics are taught by different providers every week. Please see separate OPDI Didactic Calendar for more specific information on the topics and the facilitators.
- One hour of Journal Club, during which interns take turns choosing a recent peer-reviewed journal article and leading a discussion about the article. The intention of this hour is to facilitate the development of research interests through a scientist-practitioner lens, to familiarize students with how to read and synthesize journal articles competently, and to allow interns to deepen their knowledge of concepts, populations, or treatments that they are learning about in their training. Although the interns rotate through leading this hour, a faculty member is present to participate in and facilitate discussion.
- One hour of open-ended discussion entitled Foundations of Wellbeing. This group is led by a mental health provider who is not an OPDI supervisor and unaffiliated with any evaluative or supervisory components of the program. The purpose is to provide a forum for interns to discuss their experiences on internship openly and their navigation of becoming a professional psychologist. While many of these groups will be open ended and support-oriented, some weeks may include structured content such as dealing with professional issues and work-life balance.

Additional didactic opportunities are available depending on rotations chosen and vary throughout the year.

Other department meetings are required that are professional development opportunities for interns. Such opportunities include:

- Grand Rounds (GR) – Pediatrics GR is weekly and required for Child Track interns; Psychiatry GR is biweekly and required for Adult Track interns. Pediatrics GR is optional for Adult Track interns and Psychiatry GR is optional for Child Track interns.
- Professional presentations -- Each intern is required to provide at least one professional presentation during the internship year. Adult track interns will present a topic of interest at one psychiatry Grand Rounds during the year. Child track interns will present a topic of interest at a community meeting associated with Ochsner's Healthy Schools program or a local pediatrics clinic meeting with pediatricians and medical residents.
- Section Meetings – These are monthly meetings for the Section of Child Psychology and the Section of Psychology, respectively, which serve to discuss topics relevant to the field as well as specific to practicing at Ochsner Health.
- For Adult Track interns: Case Conference – This is a monthly meeting where psychologists working with adults bring challenging cases and ethical dilemmas to get feedback, ideas, and support from each other.

VIII. OPDI Faculty

A. Program Faculty

Child Track	Adult Track
Burns, Claire PhD	Ball, Jacqueline PhD
Carreras, Justin PhD, MP	Israel, Jared PhD
Creveling-Benefield, Christiane PhD	Larzelere, Michele PhD
Crochet, Emily PsyD	Lieberman, Joshua PsyD
Eaves, Ashleigh PhD	Mitchell, Ariana PhD
Hatch, Virginia PhD	Murry, Tracey PhD
Johnson, Yelena PhD	Parks, Taylor PhD
Lantier, Katherine PhD	Primeaux, Sunni PhD, MP
Lasserre, Nicole PhD	Ray, Michael PsyD
Liberto, Alexis PhD	Ruhl, Jacklyn PhD
Mixon, Clifton PhD	Smith, Allison PhD
Purvis, Lee PhD	
Reuther, Erin PhD, MP, ABPP	

B. Training Committee

The Training Committee is comprised of the Training Directors, 2 supervising psychologists representing the adult track, 2 supervising psychologists representing the child track, and 1 representative from Ochsner's division of academics, totaling 7 members. The Training Directors serve as the heads of this committee and are responsible for scheduling meetings of the committee and setting agendas. The committee meets at least monthly for 1 hour to discuss administrative issues that arise related to the internship program and to make changes to the program policies when necessary. The committee is also charged with enforcing program policies. Formal program evaluations are reviewed at the 4-month time

point, 8-month time point, and at the end of each training year. The Training Committee members participate in the intern selection process each year, including reviewing applications, interviewing candidates, and determining rankings of candidates in the APPIC Match process. The Training Committee also oversees the Due Process procedure when it becomes aware of concerns about an intern's performance and manages any intern grievances that arise.

IX. OPDI Policies

A. Diversity, Inclusion, and Non-Discrimination Policy

At OPDI, we believe that diversity involves acknowledging, maximizing and showing compassion for individual differences. Individual differences may exist in groups such as one's race, gender, sexual orientation, religious beliefs, and disabilities. Differences also exist in individual traits such as personalities, education, career experience, and socioeconomic status. Inclusion involves creating a sustainable environment where interns feel a sense of belonging, their ideas are valued and considered, and their backgrounds and talents are respected. The organizational approach to inclusion at Ochsner Health calls for employees across all levels to value one's unique contributions to the organization. Non-discrimination involves distinct opposition to policies or actions that classify individuals and/or provide differential treatment to individuals based on real or perceived categories associated with one's identity.

Ochsner Health and OPDI believe in acknowledging and celebrating differences and cultivating a training environment that is safe and inclusive. Furthermore, interns and supervisors are expected to treat others, including patients and colleagues, with dignity and respect regardless of their background. OPDI provides formal didactic training and informal opportunities, such as through modeling and organizational culture, to advance competence in diversity and inclusion. In addition to diversity being listed as one of nine discrete competencies required for doctoral interns, OPDI believes that the skills involved in championing diversity and personifying inclusion permeate all aspects and facets of doctoral internship training and the lifelong learning process that occurs throughout the profession as a psychologist. This perspective is rooted in the recognition that diversity and inclusion provide synergy that celebrates individual uniqueness among people, cultures, and structures that allows collaboration which empowers the Ochsner team to drive innovation and excellent outcomes through cultural awareness. These foundational beliefs are evident in each of the key areas that correlate back to Ochsner's core values of Patient First, Compassion, Integrity, Excellence, and Teamwork. Diversity and inclusion are about mission, strategies, and practices to support a diverse patient, employee, and provider population that leverages the effects of inclusion to achieve excellent outcomes.

Ochsner Health is an Equal Employment Opportunity employer. Discrimination on the basis of an intern's race, color, religion, national origin, sex, sexual orientation, gender identity/expression, transgender status, genetic information, age, disability, military status, veteran status, or any other unlawful factor is strictly prohibited. Ochsner Health interns and employees, including all OPDI faculty, will not intimidate, threaten, coerce, discriminate against, or take any retaliatory action against any patient, legally authorized representative, intern, employee, association, organization, or group that in good faith discloses or threatens to disclose information about a situation he/she/they feels is inappropriate or potentially illegal; objects to or refuses to participate in an activity he/she/they feels is in violation of federal or state law, Ochsner policy, or accreditation requirements; or files a valid or

legitimate report or complaint. All interns shall be allowed to freely discuss and raise questions to directors of clinical training, supervisors, or other leaders about situations they feel are unethical, immoral, or in violation of federal/state law, Ochsner policy, and/or regulatory or accreditation requirements. Applicants or interns requiring accommodations should contact one of the Co-Training Directors to initiate this process.

B. Policy on Identification and Remediation of Insufficient Competence

This policy is implemented in situations in which a supervisor or other faculty or staff member raises a concern about the performance of a doctoral intern. Ochsner Psychology Doctoral Internship's (OPDI) **Due Process procedures** are a protection of the rights of both the intern and the doctoral internship training program, and also carry responsibilities for both. Procedures occur in a step-wise fashion, involving greater levels of intervention as a problem increases in persistence, complexity, or level of disruption to the training program.

Rights and Responsibilities

Interns: The intern has the right to be afforded with reasonable opportunity to remediate problems. These procedures are not intended to be punitive; rather, they are meant as a structured opportunity for the intern to receive support and assistance in order to remediate concerns. The intern has the right to be treated in a manner that is respectful, professional, and ethical. The intern has the right to participate in the Due Process procedures by having his/her/their viewpoint heard at each step in the process. The intern has the right to appeal decisions with which he/she/they disagrees, within the limits of this policy. The responsibilities of the intern include engaging with the training program and the institution in a manner that is respectful, professional, and ethical, making every reasonable attempt to remediate behavioral and competency concerns, and striving to meet the aims and objectives of the program.

Ochsner Psychology Doctoral Internship: OPDI has the right to implement these Due Process procedures when they are called for as described below. The program and its faculty/staff have the right to be treated in a manner that is respectful, professional, and ethical. The program has a right to make decisions related to remediation for an intern, including, but not limited to, probation, suspension, and termination, within the limits of this policy. The responsibilities of the program include engaging with the intern in a manner that is respectful, professional, and ethical, making a reasonable attempt to support all interns in remediating behavioral and competency concerns, and supporting interns to the extent possible in successfully completing the training program.

Definition of a Problem

For purposes of this document, a problem is defined broadly as an interference in professional functioning which is reflected in one or more of the following ways: 1) an inability and/or unwillingness to acquire and integrate professional standards into one's repertoire of professional behavior; 2) an inability to acquire professional skills in order to reach an acceptable level of competency; and/or 3) an inability to control personal stress, psychological dysfunctions, and/or excessive emotional reactions which interfere with professional functioning.

A rating of "Level 1" on any element or competency by any of the intern's supervisors on the intern evaluation form at any rating period will automatically trigger the start of due process procedures. However, professional judgment of staff also may signal as to when an issue becomes a problem that

requires formal remediation. Issues typically become identified as problems that require remediation when they include one or more of the following characteristics:

- 1) the intern does not acknowledge, understand, or address the problem when it is identified;
- 2) the problem is not merely a reflection of a skill deficit which can be rectified by the scheduled sequence of clinical or didactic training;
- 3) the quality of services delivered by the intern is sufficiently negatively affected;
- 4) the problem is not restricted to one area of professional functioning;
- 5) a disproportionate amount of attention by training personnel is required;
- 6) the trainee's behavior does not change as a function of feedback, and/or time;
- 7) the problematic behavior has potential for ethical or legal ramifications if not addressed;
- 8) the intern's behavior negatively impacts the public view of Ochsner Health;
- 9) the problematic behavior negatively impacts other trainees;
- 10) the problematic behavior potentially causes harm to a patient;
- 11) the problematic behavior violates appropriate interpersonal communication with agency staff; and/or
- 12) specific inappropriate and/or unprofessional conduct is demonstrated by the intern, including but not limited to the following: excessive tardiness/absenteeism, missed deadlines, unethical/illegal conduct, job abandonment, and any behavior in violation of Ochsner policies.

The above is not an exhaustive list.

Informal Review

When a supervisor or other faculty/staff member believes that an intern's behavior is becoming problematic or that an intern is having difficulty consistently demonstrating an expected level of competence, the first step in addressing the issue should be to raise the issue with the intern directly and as soon as feasible in an attempt to resolve the problem informally. Resolutions to the problem may include increased supervision, didactic training, and/or structured readings. The supervisor or faculty/staff member who raises the concern will document the problem and resolution and monitor the outcome.

Formal Review

If an intern's problem behavior persists following an attempt to resolve the issue informally, if the training faculty determines the problem/behaviors are severe and urgent enough to skip informal review, or if an intern receives a rating of "Level 1" on any element or competency on a supervisory evaluation, the formal process outlined below is initiated.

The Formal Review process also may be initiated if an intern receives a rating of "Level 2" on any element or competency on a supervisory evaluation in trimester 1 and/or if an intern receives a rating of "Level 2" or "Level 3" on any element or competency in trimester 2; this decision will be at the discretion of the supervisors/training committee depending on the scope of the problem as well as other factors (i.e., failure of informal supervision plan to yield desired results). If an intern receives any of the ratings mentioned above (with the exception of a "Level 1"), a meeting with relevant members of the training faculty will occur within a reasonable amount of time to determine if the intern will enter Due Process procedures listed below or if an informal plan will be put in place. If an intern receives any of the aforementioned ratings at the time periods specified, the intern will be notified in writing of the decision (Formal or Informal review) within 5 Monday-Friday business days of the convening.

The Formal Review process consists of the following steps:

- A. Notice: When Formal Review is warranted, the intern will be notified in writing by at least one of the Training Directors that the issue has been raised to a formal level of review and that a Hearing will be held.
- B. Hearing: The supervisor or faculty/staff member will hold a Hearing with both Training Directors (TDs) and the intern within 15 Monday-Friday business days of issuing a Notice of Formal Review to discuss the problem and determine what action needs to be taken to address the issue. Other faculty/staff members may be present at the Hearing at the discretion of the Training Directors or at the request of the intern. The intern will have the opportunity to present his/her/their perspective at the Hearing and/or to provide a written statement related to his/her/their response to the problem.
- C. Outcome and Next Steps: The result of the Hearing will be determined by the Training Directors and other faculty/staff member(s) who were present at the Hearing. This outcome will be communicated to the intern in writing within 5 Monday-Friday business days of the Hearing. Potential outcomes include the following:
 - 1) Acknowledgement Notice: Issue an "Acknowledgement Notice" which formally acknowledges:
 - a) that the Training Committee and faculty present are aware of the problem;
 - b) that the problem has been brought to the attention of the intern;
 - c) that the faculty will work with the intern to specify the steps necessary to rectify the problem or skill deficits addressed by the inadequate evaluation rating; and/or
 - d) that the problem is not significant enough to warrant further remedial action at this time.

The Acknowledgement Notice will become part of the intern's permanent file and will be shared with the intern's home doctoral program.

2) Remediation Plan: Place the intern on a "Remediation Plan" which defines how an intern is expected to address, change, or otherwise improve the problematic behavior or skill deficit within a specified time period under the active monitoring of the faculty, through the supervisors and TD. The implementation of a Remediation Plan will represent a probationary status for the intern. The length of the probation period will depend upon the nature of the problem and will be determined by the intern's supervisor and the Co-TDs. A written Remediation Plan will be shared with the intern and the intern's home doctoral program and will include:

- a) the actual behaviors or skills associated with the problem;
- b) the specific actions to be taken for rectifying the problem;
- c) the time frame during which the problem is expected to be ameliorated; and,
- d) the procedures designed to ascertain whether the problem has been appropriately remediated.

At the end of this remediation period as specified in 'c' above, the Co-TDs will provide a written statement indicating whether or not the problem has been remediated. This statement will become part of the intern's permanent file and will be shared with the intern's home doctoral program. If the problem has not been remediated, the Training Director may choose to move to Step D below (Termination) or may choose to extend the Remediation Plan. The extended Remediation Plan will include all of the information mentioned above and the extended time frame will be clearly specified.

3) Suspension of Clinical Activities: Place the intern on suspension, which would include removing the intern from all clinical service provision for a specified period of time, during which

the program may support the intern in obtaining additional didactic training, close mentorship, or engage in some other method of remediation. The length of the suspension period will depend upon the nature of the problem and will be determined by the intern's supervisor and the TDs. A written Suspension Plan will be shared with the intern and the intern's home doctoral program and will include:

- a) the actual behaviors or skills associated with the problem;
- b) the specific actions to be taken for rectifying the problem;
- c) the time frame during which the problem is expected to be ameliorated; and
- d) the procedures designed to ascertain whether the problem has been appropriately remediated.

At the end of this suspension period as specified in 'c' above, the Co-TDs will provide to the intern and the intern's home doctoral program a written statement indicating whether the problem has been remediated to a level that indicates that the suspension of clinical activities can be lifted. The statement may include a recommendation to place the intern on a probationary status with a Remediation Plan. In this case, the process in #2 above would be followed. If the problem has not been remediated, the Training Director may choose to move to Step D below (Termination) or may choose to extend the Suspension Plan. This statement will become part of the intern's permanent file.

- D. Termination: If the problem is not rectified through the above processes, or if the problem represents gross misconduct or ethical violations that have the potential to cause harm, the intern's placement within the internship program may be terminated. The decision to terminate an intern's position would be made by the Training Committee with consultation from one member of Ochsner's Division of Academics leadership, and would represent a discontinuation of participation by the intern within every aspect of the training program. The Training Committee would make this determination during a meeting convened within 10 Monday-Friday business days of the previous step completed in this process, or during the regularly-scheduled monthly Training Committee meeting. The Co-TDs may decide to suspend an intern's clinical activities during this period prior to a final decision being made, if warranted.

If the intern does not activate the Appeal Process within 5 Monday – Friday business days of decision notification, the internship program will notify APPIC, the intern's home doctoral program, and Ochsner Human Resources of the decision to terminate. If the intern activates the Appeal Process, the internship program will notify APPIC and the intern's home doctoral program of the ultimate decision.

All time limits mentioned above may be extended by mutual consent within a reasonable limit or for good cause.

Appeal Process

If the intern wishes to challenge a decision made at any step in the Due Process procedures, the intern may request an Appeals Hearing. This request must be made in writing within 5 Monday-Friday business days of notification regarding the decision with which the intern is dissatisfied. If requested, the Appeals Hearing will be conducted by a review panel consisting of 3 members of Ochsner's Division of Academics leadership, not including the leader who served in the formal review process. The intern may request a specific member of the training faculty to serve on the review panel. The Appeals Hearing will be held within 20 Monday-Friday business days of the intern's request for the hearing. The review panel will review all written materials and have an opportunity to interview the parties involved or any other

individuals with relevant information. The review panel may uphold the decisions made previously or may modify them. Decisions made by the review panel will be shared with the intern and the intern's home doctoral program. If the intern is dissatisfied with the decision of the Academics Committee, the intern may appeal the decision in writing within 5 Monday-Friday business days to the Chief Academic Officer, who has final discretion regarding outcome. Decisions made during these appeal processes will be shared with the intern and the intern's home doctoral program.

C. Grievance Procedures

Grievance Procedures are implemented in situations in which a psychology intern raises a concern about a supervisor or other faculty member, trainee, or any aspect of the internship training program. Interns who pursue grievances in good faith will not experience retaliation or any adverse professional consequences. For situations in which an intern raises a grievance about a supervisor, faculty/staff member, trainee, or the internship program, the following levels of review may be taken:

Informal Review

First, the intern should raise the issue as soon as feasible with the involved supervisor, faculty/staff member, other trainee, or at least one of the TDs in an effort to resolve the problem informally.

Formal Review

If the matter cannot be satisfactorily resolved using informal means, the intern may submit a formal grievance in writing to one of the Co-TDs. If one of the TDs is the object of the grievance, the grievance should be submitted to the other TD. The individual who is the object of the grievance will be asked to submit a response to the complaint in writing. The TD to whom the grievance was submitted will meet with the intern and the individual who is the object of the grievance within 10 Monday-Friday business days; reasonable extensions to this time frame may be made if necessary and will be communicated to all parties. In some cases, the TD may wish to meet with the intern and the individual who is the object of the grievance separately first and/or with potential witnesses if applicable. In cases where the intern is submitting a grievance related to some aspect of the training program rather than an individual (e.g., issues with policies, curriculum, etc.), at least one of the TDs and a representative from the Academics Committee (comprised of members of Ochsner's Division of Academics leadership) will meet with the intern jointly. The goal of the joint meeting is to develop a plan of action to resolve the matter. The plan of action will include the following:

- a) the behavior/issue associated with the grievance;
- b) confirmation that steps to rectify the problem have been taken; and
- c) procedures designed to ascertain whether the problem has been appropriately rectified.

The TD will document the process and outcome of the meeting. The intern will be asked to report back to the TD in writing within 10 Monday-Friday business days regarding whether the issue has been adequately resolved; the individual who is the object of the grievance may also be asked to report in writing regarding steps taken to resolve the issue(s).

If the plan of action fails, a review panel will be convened consisting of at least one of the Training Directors and at least two other members of the training faculty within 20 Monday-Friday business days. The intern may request a specific member of the training faculty to serve on the review panel. The review panel will review all written materials and have an opportunity to interview the parties involved

or any other individuals with relevant information. The review panel has final discretion regarding outcome.

If the review panel determines that a grievance against a staff member cannot be resolved internally or is not appropriate to be resolved internally, then the issue will be referred to the Academic Committee representative in order to initiate due process procedures regarding the individual being grieved.

D. Intern Evaluation, Retention, and Termination Policy

OPDI requires that interns demonstrate minimum levels of achievement across all competencies and training elements. Interns are formally evaluated by all of their individual supervisors 3 times annually, at the 4-month, 8-month, and 12-month mark of the training year. Evaluations are conducted using a standard rating form, which includes ratings from all of the interns' supervisors and comment spaces where supervisors include specific written feedback regarding the interns' performance and progress. The evaluation form includes information about the interns' performance regarding all of OPDI's expected training competencies and the related training elements. The interns' primary supervisors review these evaluations with the interns and provide an opportunity for discussion at each timepoint.

A minimal level of achievement on each evaluation is defined as follows: on the first evaluation (4 months into the internship), the expected level of achievement for all elements and competencies is "Level 3" or above. On the second evaluation (8 months into the internship), the expected level of achievement for all elements and competencies is "Level 4" or above. Successful completion of the program will require a minimum level of achievement of "Level 5" on all elements and competencies at the terminal evaluation, to be completed at the conclusion of the internship. The average of all the intern's supervisors' ratings rounded to the nearest whole number is calculated for each learning element. This number is then used to determine whether or not the intern has met the expected level of achievement at each evaluation period. The rating scale for each evaluation is a 6-point scale:

- Level 1: Significant skill development required or negligent behavior that has the potential to cause harm; remediation necessary.
- Level 2: Expected level of competence pre-internship; close supervision required and may need remediation/Due Process.
- Level 3: Expected level of competence for beginning/early internship; supervision is developmental in nature.
- Level 4: Expected level of competence for intern throughout the middle of internship; demonstrating continued progression and growth of skills.
- Level 5: Expected level of competence for intern at the end of internship and completion of training program; ready for post-doctoral experience or entry-level practice.
- Level 6: Able to function autonomously with a level of skill exceeding that expected at the completion of internship-level training program.

The minimal level of achievement is set to reflect all graduates achieving the following by the completion of internship:

1. The ability to independently function in a broad range of clinical and professional activities;
2. The ability to generalize skills and knowledge to new situations; and,
3. The ability to self-assess when to seek additional training, supervision, or consultation

If an intern receives a score of “Level 1” on any element or competency by any of their supervisors at any of the three evaluation points during the year, or if supervisors have reason to be concerned about the student’s performance or progress, the program’s Due Process procedures will be initiated. Due Process may also be initiated when interns receive ratings of “Level 2” on any element or competency in trimester 1 and/or if an intern receives a rating of “Level 2” or “Level 3” on any element or competency in trimester 2; this decision will be at the discretion of the supervisors/training committee and will take into account multiple factors, which are described in the Policy on Identification and Remediation of Insufficient Competence, which can be found in the OPDI Handbook. Interns must receive ratings of “Level 5” or above on all elements and competencies by the terminal evaluation (at the end of the internship) to successfully complete the program.

Additionally, all OPDI interns are expected to complete 2000 hours of training during the internship year. Meeting the hours requirement and obtaining sufficient ratings on all evaluations demonstrates that the intern has progressed satisfactorily through and completed the internship program. Intern evaluations and certificates of completion are maintained indefinitely by the OPDI Training Director(s) in a secure digital file. Intern evaluations and any other relevant feedback to the intern’s home doctoral program is provided at the 4- and 8-month marks and end of the internship year. Doctoral programs are contacted within one month following the end of the internship year and informed that the intern has successfully completed the program. If successful completion of the program comes into question at any point during the internship year, or if an intern enters into the Formal Review process of the Due Process procedures due to a concern by a faculty member or an inadequate rating on an evaluation, the home doctoral program is contacted. This contact is intended to ensure that the home doctoral program, which also has a vested interest in the interns’ progress, is kept engaged in order to support an intern who may be having difficulties during the internship year. The home doctoral program is notified of any further action that may be taken by OPDI as a result of the Due Process procedures, up to and including termination from the program.

In addition to the evaluations described above, interns complete an evaluation of their supervisor and a program evaluation at the same 3 points of evaluation in which the supervisors provide evaluations to the interns. Interns also are asked to complete ratings of each formal didactic training experience. Feedback from these evaluations is used to inform changes or improvements made to the training program. All evaluation forms are available in the OPDI Handbook and via the OPDI SharePoint server.

E. Medical and Family Leave Policy

Due to special characteristics of doctoral training and the impact of an intern’s absence on patient care and training requirements, notification to the Co-Training Directors of Family/Medical Leave should occur as early as possible. Special requirements of each training track may govern the amount of time permitted away from continuous training per year. Therefore, specific make up time may be required before the intern graduates and completes the internship program.

Our goals are to support the intern while maintaining patient care and ensuring consistency, breadth, and depth of training quality given the time-limited nature of the internship program.

1. MEDICAL LEAVE:

Medical leave will be leave-with-pay for a period of up to six weeks for medical leave with appropriate documentation. This time includes allotted vacation. All or a portion of the six

weeks may be requested. Requests must be made formally and in writing to the Co-Training Directors, including filling out the formal "Request for Medical Leave" document which will be provided to interns during their orientation week. Medical leave requires endorsement from the Co-Training Directors and approval by the Training Committee. Approval of Medical Leave requires the intern's personal physician to document their diagnosis requiring absence from the program, and interns would require the same physician to write a letter fully clearing them to return to work with no restrictions before they can come back to their position. The intern's personal physician makes the determination of disability. OPDI, however, reserves the right to request a second opinion. Extended Medical Leave may be paid or unpaid and will be assessed on an individual basis. Medical Benefit coverage will be continued during the extended leave if it is paid. However, if the leave is unpaid, the intern must contact the Benefits Department to arrange payment for continuation of coverage.

2. FAMILY LEAVE:

If an intern requests leave for the birth or adoption a child, they are entitled to paid leave similar to that of Medical Leave described above. The intern must discuss the impending leave with the Co-Training Directors in as much advance as possible. The same restrictions and procedure apply as defined above for Medical Leave. Interns are also permitted to request leave to care for a spouse, domestic partner, son, daughter, or parent with a serious health condition. OPDI extends Bereavement Leave of 3 days for the death of a family member; details of this leave type can be found on the Ochsner Human Resources website.

Interns are expected to make up all hours missed and complete all required internship activities once they return to work in order to complete the program. The intern must work closely with the Co-Training Directors and all of their relevant supervisors to make arrangements to meet requirements upon return from leave. At the discretion of the Training Committee, extending the internship training period may occur. The graduation date may be extended to accommodate fulfilling these requirements but by no more than two months to allow completion of program requirements. Extended training (past the intern's intended/original graduation date) will be unpaid. If the intern is unable to fulfill the obligations of their training year (as documented in the Intern Evaluation Retention and Termination policy), they may be dismissed from the program. If dismissal occurs, the intern is eligible to reapply for future readmission.

3. EXCEPTIONS:

Exceptions to this policy require the approval of the Chief Academic Officer prior to any action taking place.

F. Stipend, Benefits, and Resources Policy

The annual stipend for all interns at Ochsner Psychology Doctoral Internship (OPDI) is \$35,000. This stipend is offered for participation in OPDI. As employees of Ochsner Health, interns are eligible to participate in comprehensive employee health benefits, including dental and vision plans. Benefit package also includes access to retirement plan, Flexible Spending Account, and other options. Questions regarding specific benefits packages can be directed to Ochsner's Human Resources department (504-842-4748 or myhr@ochsner.org). Interns also receive complimentary membership to the Louisiana Psychological Association (LPA), as well as paid entry to the annual LPA conference in the

Spring. Interns are eligible for 10 days of Vacation (VAC), 10 days of Sick Leave; and 8 paid holidays; specific information will be provided at intern orientation. Interns should submit requests for time off to their training director and notify rotation supervisor(s) at least four weeks in advance of the anticipated leave date. Interns are responsible for communicating anticipated absences to all supervisors for whom work will be missed. Interns may not miss more than three (3) Fridays during the internship year to be in compliance with didactic attendance requirements. Training directors and supervisors are available for any questions related to time off or release time.

OPDI interns have access to numerous resources. For the duration of their internship year, all interns are provided with individual workspace, a desk, laptop computer, office phone, voicemail, printer, software, ID badges, and basic office supplies. Intervention manuals, assessment materials, other training materials, and access to the DSM-5 are provided by OPDI. Each intern additionally has access to administrative and IT support, as well as client scheduling support. OPDI interns are eligible for discounts for gym membership and numerous other health and wellness benefits.

G. Telesupervision Policy

Ochsner Psychology Doctoral Internship (OPDI) recognizes the importance of supervisory relationships. Supervision is conducted in person, when possible, with special effort made for weekly individual supervision to be in person. However, videoconferencing may be utilized to provide weekly group supervision when interns are physically located in separate campuses or areas for their rotations. When videoconferencing is used, interns and a faculty facilitator meet in a virtual conference room and interact via high-quality real-time transmission of simultaneous video and audio. Additionally, telesupervision is utilized in place of in-person supervision for emergencies (such as the COVID-19 pandemic) or at instruction of Ochsner administration. Telesupervision shall not account for more than 50% of the required supervisory contact.

The OPDI program aim is to prepare early-career psychologists to provide competent, evidence-informed, innovative care focused on respect for individual differences, diversity, and inclusion. While we strive to conduct supervision in person, when possible, the use of video technology to ensure continuous quality supervision in a secure fashion is consistent with the OPDI program aim and intended outcomes. OPDI places high value on cohesion and socialization of intern cohorts, and virtual meetings via videoconferencing are an effective way to foster connection in lieu of in-person meetings if necessary.

Interns are introduced to all supervisors at an orientation at the beginning of the year to establish the foundation of a trusting supervisory relationship and to discuss the details of possible video/virtual components to the supervision process. If video technology is utilized in the supervisory experience, all efforts will be made to periodically meet in person as well, and to determine the comfort level of the interns with the experience of telesupervision. Adjustments to telesupervision will be made, when possible, based on any concerns brought up by the interns or supervisors.

For all clinical cases discussed during group supervision, full professional responsibility remains with the intern's primary supervisor, and any crises or other time-sensitive issues are reported to that supervisor immediately. Interns are provided contact information for all OPDI supervisors including email and phone numbers, so crises and time-sensitive information can be reported as necessary.

All OPDI videoconferencing occurs over a secure network using site-administered videoconferencing technology. Supervision sessions using this technology are never recorded, thus protecting the privacy and confidentiality of all trainees. All interns are provided with instruction regarding the use of the videoconferencing equipment at the outset of the training year. Technical difficulties that cannot be resolved on site are directed to the Office of Information Technology (OIT) Help Desk.

H. Severe Weather & Emergency Preparedness Policy

If severe weather threatens Southeast Louisiana, Leadership at the Ochsner Health System may call a Code Grey. Before a severe weather event, Ochsner will provide updates and refinement of data related to the weather event and storm track for tropical systems. Prior to landfall, in conjunction with State and Local authorities, the Ochsner Executive Team and Safety Director will determine closure of Ochsner facilities and activate the severe weather closure plan. At this time, only designated Essential “Team A” Personnel will be allowed on campus.

Ochsner has specific emergency preparedness protocols that must be followed in cases of emergency, which are included in the Emergency Operations Plan. Comprehensive resources regarding Ochsner’s Emergency Operations Plan can be found on OchWeb’s Emergency Management Page. This can be found at Ochweb/Clinical Resources/Emergency Management.

For any threat of emergency, Ochsner employees are divided into 4 EMERGENCY TEAMS:

- Team A: employees who are on duty and on site during an event
- Team A Remote: employees who are on duty and working remotely during an event
- Team B: Employees who will relieve Team A—must report within 24 hours of notification
- **Team C: All other employees who return when normal operations resume**

OPDI interns and staff are categorized as **TEAM C**. This means that interns not expected to work during a Code Grey weather event. Once normal clinic operations resume, you are expected to report back to work within 24 hours. During an event, OPDI interns are expected to be responsive, stay informed, have their Ochsner laptops available, and monitor information regarding campus closures and re-openings.

Procedures/Standards and Roles & Responsibilities

Training Co-Directors Expectations

- Internship directors will notify interns if an emergency code is called or may be called. This notification will be made via email and text message.
- Internship directors will notify interns of contact information and best forms of communication during the emergency, including both Ochsner contact information and outside email/cell phone number.
- Throughout the event, internship training directors will provide updates to interns regarding clinic/hospital closures and expected times for return to normal operations.

Intern Expectations

- A. Developing a Plan in Advance:
 - 1. Our primary concern is the safety of interns, and we are committed to providing information in a timely manner in the event of an emergency so that all interns can seek safe shelter and, following the event, return to their program as quickly as possible.

- 2. We will require interns to develop their own personal emergency plans in the event there is a severe weather threat to New Orleans and discuss this plan with family well ahead of a weather emergency. These plans must include transportation and destination arrangements for safe evacuation from the city.
- Please see the following links for Hurricane Preparation and Evacuation Information:
 - <http://www.getagameplan.org/>
 - National Hurricane Center – Hurricane Preparedness -
 - http://www.nhc.noaa.gov/HAW2/english/disaster_prevention.shtml
- B. Prior to an event:
 - Interns are responsible for maintaining up-to-date contact information. This should be updated in the Ochsner WorkDay system.
 - Interns should sign up for Ochsner Health ALERT Emergency Messaging System. This can be done by updating and providing cell phone number in workday.
 - Additional emergency management information can be found on Ochweb under OchWeb/Emergency Preparedness.
- C. During a Declared emergency:
 - As Team C, OPDI interns are allowed to evacuate if they see this as a need for safety. Prior to evacuation, interns update their internship training director of where they will be and best ways of contacting them for updated information throughout the emergency event. This should include a cell phone capable of text messaging, Ochsner email address, and an outside email address.
 - Interns are expected to bring their Ochsner laptops and remain responsive to communication during a severe weather event.
 - Job duties will be designated as appropriate for each event. These could include phone calls, meeting, or didactic activities. In the event of an extended hospital closure, interns may be allowed to see patients remotely. However, this will be at the discretion of their supervisor for each case. **Interns are not allowed to meet remotely with patients until after they have discussed a plan with their supervisor and the supervisor has agreed.**
 - Interns will not be allowed back on Ochsner campus until the Code Grey is lifted.
 - During the event, Interns should routinely monitor the Ochsner website for information regarding clinic and hospital operations and closures/reopenings.

Definitions

A. Severe Weather Emergency - Within the context of this plan, a severe weather emergency is any meteorological condition that can detrimentally affect the physical facility or operation of Ochsner.

B. Tropical Weather Events - Hurricane season extends from June 1-November 30. That is the period when climactic conditions are optimum for the formation and sustained movement of hurricane events in Southeast Louisiana and the Gulf of Mexico. The National Weather Service issues warnings when hurricanes are approaching the United States mainland.

The stages of hurricane announcements given by the National Hurricane Center are as follows:

1. **Tropical Storm** - Use of modular buildings may be suspended at the Tropical Storm level (Sustained winds in excess of 39 mph)

2. Hurricane Watch means a hurricane may threaten an area within 24 hours - a first alert for emergency preparations to begin. When a hurricane watch is issued, normal activities shall be continued but weather advisories shall be monitored periodically by the Department of Emergency Preparedness & Response. Winds of at least 74 mph may affect the area within 24-36 hours.

3. Hurricane Warning means a hurricane is expected to strike our area within 24 hours. Advisories containing a hurricane warning include assessment of flood danger in our area, gale warnings for the storm's periphery and estimated storm effects. Winds of at least 74 mph are expected in the area within 24 hours.

C. Tornado – The National Weather Service issues tornado warnings.

1. Tornado Watch means that tornadoes are expected to develop. A tornado watch usually covers a very large area, including many cities and parishes.

2. Tornado Warning means that a tornado has actually been sighted or indicated by radar.

D. Flood - The National Oceanic and Atmospheric Administration, NOAA, issues flood forecasts and warnings when rainfall is enough to cause rivers/lakes to overflow their banks.

1. Flood Watch is an alert that our area may experience a flood disaster.

2. Flood Warning is a forecast of impending floods and is distributed to the public via the broadcasting media.

3. Flash Flood Warning is the most urgent type of flood warning.

E. Hard Freeze/Extreme Cold Temperatures - Extreme temperatures can cause adverse conditions and create travel restrictions, hard freezes, power outages, and or any other identified extreme weather conditions, these conditions may affect the hospital's ability treat patients or sustain normal operations

X.Evaluation Forms

A. Intern Evaluation

<u>Intern Evaluation</u> : To be completed independently by each supervisor; final rating determined by average of ratings if multiple supervisors			
Intern: _____ Supervisor: _____			
Dates of Evaluation: _____ to _____ Training track: _____			
Methods used in evaluating competency:			
____ Direct Observation ____ Review of Audio/Video ____ Case Presentation			
____ Documentation Review ____ Supervision ____ Comments from other staff/faculty			
NOTE: As described in the Intern Evaluation Policy, on the first evaluation (4 months into the internship), the expected level of achievement for all elements and competencies is "Level 3" or above. On the second evaluation (8 months into the internship), the expected level of achievement for all elements and competencies is "Level 4" or above. Successful completion of the program will require a minimum level of achievement of "Level 5" on all elements and competencies at the terminal evaluation, to be completed at the conclusion of the internship. A score of "Level 1" on any element or competency at any evaluation point will require formal remediation and will require initiation of the program's Due Process procedures. A score on any element or competency at any evaluation point above "Level 1" and below the expected level of competence will result in close monitoring by program supervision, may require formal remediation, and/or may prompt initiation of Due Process procedures.			
Scoring Criteria:			
Level 1 -- Significant skill development required or negligent behavior that has the potential to cause harm; remediation necessary and will require initiation of Due Process Procedures			
Level 2 -- Expected level of competence pre-internship; close supervision required and may need remediation/Due Process depending on when during the training trajectory the rating of "2" occurs			
Level 3 -- Expected level of competence for beginning/early internship; supervision is developmental in nature			
Level 4 -- Expected level of competence for intern throughout the middle of internship; demonstrating continued progression and growth of skills			
Level 5 -- Expected level of competence for intern at the end of internship and completion of training program; ready for post-doctoral experience or entry-level practice			
Level 6 -- Able to function autonomously with a level of skill exceeding that expected at the completion of internship-level training program			
	Supervisor A:	Supervisor B:	Supervisor C:

	Rotation/Experience:	Rotation/Experience:	Rotation/Experience:	
Competency 1 - Intern will achieve competence in the area of: Research				Element Total:
Demonstrates the substantially independent ability to critically evaluate research or other scholarly activities (e.g., case conference, presentation, publications)				#DIV/0!
Disseminates research or other scholarly activities (e.g., case conference, presentation, publications) at the local (including the host institution), regional, or national level				#DIV/0!
AVERAGE SCORE FOR BROAD AREA OF COMPETENCE	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!
Comments:				
Competency 2 - Intern will achieve competence in the area of: Ethical and Legal Standards				
Demonstrates knowledge of and acts in accordance with each of the following:				
The current version of the APA Ethical Principles of Psychologists and Code of Conduct				#DIV/0!
Relevant laws, regulations, rules, and policies governing health service psychology at the organizational, local, state, regional and federal levels				#DIV/0!
Relevant professional standards and guidelines				#DIV/0!
Recognizes ethical dilemmas as they arise and applies ethical decision-making processes in order to resolve them.				#DIV/0!
Conducts self in an ethical manner in all professional activities.				#DIV/0!
AVERAGE SCORE FOR BROAD AREA OF COMPETENCE	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!

Comments:				
Competency 3 - Intern will achieve competence in the area of: Individual and Cultural Diversity				
Demonstrates an understanding of how one's own personal/cultural history, attitudes, and biases may affect how one understands and interacts with people different from oneself				#DIV /0!
Demonstrates knowledge of the current theoretical and empirical knowledge base as it relates to addressing diversity in all professional activities				#DIV /0!
Integrates awareness and knowledge of individual and cultural differences in the conduct of professional roles				#DIV /0!
Applies a framework for working effectively with areas of individual and cultural diversity				#DIV /0!
Demonstrates the ability to independently apply their knowledge and approach in working effectively with the range of diverse individuals and groups encountered during internship.				#DIV /0!
AVERAGE SCORE FOR BROAD AREA OF COMPETENCE	#DIV/0!	#DIV/0!	#DIV/0!	#DIV /0!
Comments:				
Competency 4 - Intern will achieve competence in the area of: Professional Values and Attitudes				
Behaves in ways that reflect the values and attitudes of psychology				#DIV /0!
Engages in self-reflection regarding personal and professional functioning				#DIV /0!
Engages in activities to maintain and improve performance, well-being, and professional effectiveness				#DIV /0!

Actively seeks and demonstrates openness and responsiveness to feedback and supervision.				#DIV /0!
Responds professionally in increasingly complex situations with a greater degree of independence as progresses across levels of training.				#DIV /0!
AVERAGE SCORE FOR BROAD AREA OF COMPETENCE	#DIV/0!	#DIV/0!	#DIV/0!	#DIV /0!
Comments:				
Competency 5- Intern will achieve competence in the area of: Communication and Interpersonal Skills				
Develops and maintains effective relationships with a wide range of individuals				#DIV /0!
Demonstrates a thorough grasp of professional language and concepts				#DIV /0!
Produces, comprehends, and engages in oral, nonverbal, and written communications that are informative and well-integrated				#DIV /0!
Demonstrates effective interpersonal skills and the ability to manage difficult communication well				#DIV /0!
AVERAGE SCORE FOR BROAD AREA OF COMPETENCE	#DIV/0!	#DIV/0!	#DIV/0!	#DIV /0!
Comments:				
Competency 6 - Intern will achieve competence in the area of: Assessment				
Demonstrates current knowledge of diagnostic classification systems and functional and dysfunctional behaviors				#DIV /0!
Demonstrates understanding of human behavior within its context				#DIV /0!
Applies knowledge of functional and dysfunctional behaviors including context to the assessment and/or diagnostic process				#DIV /0!

Selects and applies assessment methods that draw from the best available empirical literature				#DIV /0!
Collects relevant data using multiple sources and methods appropriate to the identified goals and questions of the assessment as well as relevant diversity characteristics of the service recipient				#DIV /0!
Interprets assessment results to inform case conceptualization, classification, and recommendations while guarding against decision-making biases				#DIV /0!
Communicates orally and in written documents the findings and implications of assessment in an accurate and effective manner				#DIV /0!
AVERAGE SCORE FOR BROAD AREA OF COMPETENCE	#DIV/0!	#DIV/0!	#DIV/0!	#DIV /0!
Comments:				
Competency 7 - Intern will achieve competence in the area of: Intervention				
Establishes and maintains effective relationships with recipients of psychological services				#DIV /0!
Develops evidence-based intervention plans specific to the service delivery goals				#DIV /0!
Implements interventions informed by the current scientific literature, assessment findings, diversity characteristics, and contextual variables				#DIV /0!
Demonstrates the ability to apply the relevant research literature to clinical decision making				#DIV /0!
Modifies and adapts evidence-based approaches effectively				#DIV /0!
Evaluates intervention effectiveness and adapts intervention goals and methods consistent with ongoing evaluation.				#DIV /0!
AVERAGE SCORE FOR BROAD AREA OF COMPETENCE	#DIV/0!	#DIV/0!	#DIV/0!	#DIV /0!

Comments:				
Competency 8- Intern will achieve competence in the area of: Supervision				
Applies knowledge of supervision in direct or simulated practice with psychology trainees or other health professionals.				#DIV /0!
Applies supervisory skill of observing in direct or simulated practice				#DIV /0!
Applies supervisory skills of evaluating in direct or simulated practice				#DIV /0!
Applies supervisory skills of giving guidance and feedback in direct or simulated practice				#DIV /0!
AVERAGE SCORE FOR BROAD AREA OF COMPETENCE	#DIV/0!	#DIV/0!	#DIV/0!	#DIV /0!
Comments:				
Competency 9 - Intern will achieve competence in the area of: Consultation and Interprofessional/Interdisciplinary Skills				
Demonstrates knowledge and respect for the roles and perspectives of other professions				#DIV /0!
Applies knowledge about consultation in direct or simulated consultation				#DIV /0!
AVERAGE SCORE FOR BROAD AREA OF COMPETENCE	#DIV/0!	#DIV/0!	#DIV/0!	#DIV /0!
Comments:				
OVERALL RATING (average of broad competence area scores)	#DIV/0!	#DIV/0!	#DIV/0!	#DIV /0!
Supervisor A comments on Intern's overall performance:				

Supervisor B comments on Intern's overall performance:

Supervisor C comments on Intern's overall performance:

I acknowledge that at least one of my supervisors has formally reviewed this evaluation with me, and I have had the opportunity to ask questions about these ratings with all of my supervisors.

B. Supervisor Evaluation

OPDI Supervisor Evaluation: To be completed by intern

This Supervisor Evaluation is to be completed by intern at each evaluation period

Intern: _____ Supervisor: _____

Dates of Evaluation: _____ to _____

Scoring Criteria:

1 Significant Development Needed --Significant improvement is needed to meet intern needs	
2 Development Needed -- Improvement is needed to meet intern needs	
3 Meets Intern Needs and Expectations	
4 Exceeds Expectations --Above average experience	
5 Significantly Exceeds Expectations --Exceptional experience	
N/A --Not Applicable/Not Observed/Cannot Say	

NOTE: This Supervisor Evaluation is utilized by OPDI to continually improve and enhance the training program. These evaluations will NOT be viewed directly by your supervisor until after the completion of your internship year; they will be reviewed by the Training Director of the opposite track to yours. General comments about intern's experiences will be provided to each supervisor to give them feedback. However, any score below a 3 on any item will result in corrective action as deemed appropriate by the Training Committee in order to improve the intern's supervisory experience, so please include detailed explanatory comments wherever applicable in order to help us respond most effectively. It is at your discretion whether you would like to review some or all of this evaluation with your supervisor directly.

General Characteristics of Supervisor

Is accessible for discussion, questions, etc.

Treats intern with respect and courtesy

Supports the intern's successful completion of the internship program

Presents as a positive professional role model consistent with the program's aims

Schedules supervision meetings and is available at the scheduled time

Allots sufficient time for supervision

Keeps sufficiently informed of case(s)

Is interested in and committed to supervision

Sets clear objectives and responsibilities throughout supervised experience

Is up-to-date in understanding of clinical populations and issues

Maintains appropriate interpersonal boundaries with patients and supervisees

Provides constructive and timely feedback on supervisee's performance

Encourages appropriate degree of independence

Demonstrates concern for and interest in supervisee's progress, problems, and ideas

Communicates effectively with supervisee

Interacts respectfully with supervisee

Maintains clear and reasonable expectations for supervisee

Provides a level of case-based supervision appropriate to supervisee's training needs

Comments:

Development of Clinical Skills

Assists in coherent conceptualization of clinical work

Assists in translation of conceptualization into techniques and procedures

Is effective in providing training in behavioral health intervention

Is effective in providing training in assessment and diagnosis

Supports intern in navigating and responding to clients' cultural and individual differences

Is effective in helping to develop short-term and long-range goals for patients

Promotes clinical practices in accordance with ethical and legal standards

Promotes intern's general acquisition of knowledge, skills, and competencies

Comments:

Summary

Overall rating of supervision with this supervisor

#DIV/0!

Describe how the supervisor contributed to your learning:

Describe how supervision or the training experience could be enhanced:

Any other suggestions/feedback for your supervisor?

Supervisor's Signature

Date

C. Program Evaluation

OPDI Program Evaluation: To be completed by intern	
Intern: _____	Supervisor(s): _____
Evaluation Interval (Please Circle): First Trimester Second Trimester End of Year	
<p>This Program Evaluation is utilized by OPDI to continually improve and enhance the training program. All responses are reviewed by the Training Committee, and your feedback is carefully considered. Any ratings of "Poor" or "Fair" will result in action by the Training Committee to address the problematic item, so please include detailed explanatory comments wherever applicable in order to help us respond most effectively. Qualitative feedback for other ratings is also strongly encouraged.</p>	
Scoring Criteria: 1= Poor; 2= Fair; 3= Average; 4= Good; 5= Excellent	
OVERALL INTERNSHIP EXPERIENCE	
Overall quality of training	
Opportunities for professional socialization with intern cohort	
Breadth of assessment experience	
Breadth of clinical intervention experience	
Satisfaction with number of client contacts	
Clarity of expectations and responsibilities for intern	
Case load was appropriate to meet educational needs	
Please provide any additional comments/feedback about your experience and provide explanations for any "poor" or "very poor" ratings:	
WEEKLY TRAINING OPPORTUNITIES	
Group Supervision (including evidence-based practice seminar for adult track)	
Weekly formal didactic seminars	
Journal Club	

Foundations of Wellbeing	
Major rotation (child track)/Year-long experiences (adult track)	
Minor rotations (child track)/Elective rotations (adult track)	
Please provide any additional comments/feedback about your experience and provide explanations for any "poor" or "fair" ratings:	
<u>Overall Quality of Training Within Required Competency Areas</u> For the following items, please rate the quality of the training you have received in each. Please consider your experience with didactic seminars, professional development opportunities, and supervision , as well as direct clinical experiences and other experiential training .	
Research	
Quality of Training	
Comments:	
Ethical and Legal Standards	
Quality of Training	
Comments:	
Individual and Cultural Diversity	
Quality of Training	

Comments:	
Professional Values, Attitudes, and Behaviors	
Quality of Training	
Comments:	
Communication and Interpersonal Skills	
Quality of Training	
Comments:	
Assessment	
Quality of Training	
Comments:	
Intervention	
Quality of Training	

Comments:	
Supervision (recall that, for the purposes of this evaluation, you are rating the training you received in this required area of competence for provision of supervision, NOT the supervision you received)	
Quality of Training	
Comments:	
Consultation and Interprofessional/Interdisciplinary Skills	
Quality of Training	
Comments:	
Please provide additional comments/feedback about OPDI's overall training in the major areas of professional functioning:	
Please answer the following question regarding your experiences with receiving supervision.	
Helpfulness of supervision	
Availability of supervisors	
Frequency of supervision	
Supervisors as professional role models	

Effectiveness of teaching	
Please provide additional comments/feedback about your supervision experience and provide explanations for any "poor" or "fair" ratings above:	
Please provide any other feedback and recommendations that you believe might be helpful or might improve the internship:	
Please provide any feedback that you think would help improve this program evaluation survey:	
<u>Supervisor's Signature</u>	<u>Date:</u>
<u>Intern's Signature</u>	<u>Date:</u>

D. Didactic Evaluation

Name of Presentation:

Presenter:

Date:

Please assist in the evaluation of this presentation by circling the number beside each statement that best reflects the extent of your agreement.

The presenter was free from bias.	Yes	No
The presentation was free from bias.	Yes	No

If answered no to either, please explain:

		Disagree			Agree	
Content						
1.	The content was interesting to me	1	2	3	4	5
2.	The content extended my knowledge of the topic	1	2	3	4	5
3.	The content was consistent with the objectives	1	2	3	4	5
4.	The content will be useful to my work as a psychologist	1	2	3	4	5
Effectiveness						
5.	The presentation was clear and to the point	1	2	3	4	5
6.	The presenter demonstrated mastery of the topic	1	2	3	4	5
7.	The method used to present the material held my	1	2	3	4	5
8.	The presenter was responsive to participant concerns	1	2	3	4	5
9.	This didactic should be presented again for future interns	1	2	3	4	5

10. Overall, I would rate this didactic as being: Very Poor Poor Neutral Good Excellent

What I liked about this presentation:

What I would like to see change in the future:

Additional Comments:

E. Alumni Survey

Oschner Psychology Doctoral Internship (OPDI) Alumni Survey

Please fill out the following survey about your professional experiences after the completion of your internship year with OPDI. Please either write your answers or choose from the drop-down menus provided in the gray boxes as indicated.

1. Please provide your full name
2. What year did you complete your OPDI internship?
3. If you have not responded to this alumni survey in the past, please complete the entire survey. If you have responded to this survey in the past, you will only need to complete the brief update section. If you are a recent graduate, you probably have NOT completed this survey yet. You can check with the OPDI Training Director if you are unsure.

Have you completed this survey in the past? Yes
(Please use drop down menu) No

If Yes, Please skip to question 12.

If No, Please continue to question 4.

4. OPDI has outlined 9 competencies which guide the program's curriculum and evaluations. Please rate the degree to which the program promoted mastery in each of the competencies below. Please consider all exposure to each area in your response. Your exposure may have been through didactic/other seminars, supervision, direct clinical service, or other experiences.

1 2 3 4 5
Did Not Promote Mastery Adequately Promoted Mastery Fully Promoted Mastery
(Please use drop down menus for your responses)

<u>GOAL</u>	<u>RATING</u>
Research	<input type="text"/>
Ethical and Legal Standards	<input type="text"/>
Individual and Cultural Diversity	<input type="text"/>
Professional Values, Attitudes, and Behaviors	<input type="text"/>
Communication and Interpersonal Skills	<input type="text"/>
Assessment	<input type="text"/>
Intervention	<input type="text"/>

Supervision

Consultation and Interprofessional/
Interdisciplinary Skills

5. The aim of OPDI is to prepare early-career psychologists to provide competent, evidence-informed, innovative care focused on respect for individual differences, diversity, and inclusion. How well does the curriculum you completed while on internship reflect the program's aim? (Please use drop down menu).

1 2 3 4 5
Not well at all Adequately Very well

6. Overall, how well did your internship with OPDI prepare you for your current professional role? (Please use drop down menu).

1 2 3 4 5
Not Well Prepared Adequately Prepared Well Prepared

7. Please think about your FIRST employment following internship. In what type of setting was the employment? (Choose all that apply. Use drop down menus to the left of items).

<input type="text"/>	Community Mental Health Center	<input type="text"/>	Veteran's Affairs Medical Center
<input type="text"/>	Consortium	<input type="text"/>	Military Medical Center
<input type="text"/>	Correctional Facility	<input type="text"/>	Private General Hospital
<input type="text"/>	Health Maintenance Organization	<input type="text"/>	General Hospital
<input type="text"/>	Independent Practice	<input type="text"/>	Other Medical Center
<input type="text"/>	Psychiatric Facility	<input type="text"/>	Private Psychiatric Hospital
<input type="text"/>	School District/System	<input type="text"/>	State/County/Other Public Hospital
<input type="text"/>	University Counseling Center	<input type="text"/>	University/Academic Teaching
<input type="text"/>	Academic Non-Teaching	<input type="text"/>	2 or 4 year Undergraduate Teaching
<input type="text"/>	Changed to other career field	<input type="text"/>	Medical School
<input type="text"/>	Other	<input type="text"/>	None- have not been employed
Please specify: <input type="text"/>		Please specify: <input type="text"/>	

8. What was your job title for your first employment after internship?

9. Was your first employment after internship within a formal postdoctoral training program? (Note: The postdoctoral program did not have to be accredited in order to select Yes.)

Yes

No

9a. If yes, please select the emphasis of the formal postdoctoral

<input type="checkbox"/>	Primarily Clinical
<input type="checkbox"/>	Primarily Research
<input type="checkbox"/>	Equally Clinical and Research
<input type="checkbox"/>	Other - Please Specify:
<input type="checkbox"/>	<input type="text"/>

10. Please select the activities that apply to your first employment after internship, whether a postdoctoral fellowship or otherwise. (Use drop down menus to the left of items).

<input type="checkbox"/>	Administration	<input type="checkbox"/>	Supervision
<input type="checkbox"/>	Assessment	<input type="checkbox"/>	Teaching
<input type="checkbox"/>	Consultation	<input type="checkbox"/>	Psychotherapy
<input type="checkbox"/>	Research	<input type="checkbox"/>	Other - Please Specify:
			<input type="text"/>

11. Are you currently working in the same job with the same job title? (Use drop down menu to the left of items).

<input type="checkbox"/>	Same setting and same job title
<input type="checkbox"/>	Same setting but different job title
<input type="checkbox"/>	New setting but same job title
<input type="checkbox"/>	New setting and new job title
<input type="checkbox"/>	Not currently employed

If your setting or job title has changed, please answer questions 12 - 14.

If there have been no changes to your setting or job title, please skip to question 15.

12. Select all setting types that apply to your current employment.

<input type="checkbox"/>	Community mental health center
<input type="checkbox"/>	Consortium Correctional Facility
<input type="checkbox"/>	Health Maintenance Organization Hospital/Medical Center
<input type="checkbox"/>	Independent Practice
<input type="checkbox"/>	Psychiatric Facility
<input type="checkbox"/>	School District/System
<input type="checkbox"/>	University Counseling Center Academic Teaching
<input type="checkbox"/>	Other - Please Specify:
	<input type="text"/>

13. What is your current job title?

14. Please select all activities that apply to this position. (Use drop down menus to the left of items).

<input type="checkbox"/>	Administration	<input type="checkbox"/>	Supervision
<input type="checkbox"/>	Assessment	<input type="checkbox"/>	Teaching
<input type="checkbox"/>	Consultation	<input type="checkbox"/>	Psychotherapy
<input type="checkbox"/>	Research	<input type="checkbox"/>	Other - Please Specify:
			<input type="text"/>

15. Have you obtained licensure as a psychologist?

- | | |
|--------------------------|--------------------------------------|
| <input type="checkbox"/> | Yes, Full Independent Licensure |
| <input type="checkbox"/> | Yes, Temporary/Provisional Licensure |
| <input type="checkbox"/> | No, Not currently licensed |

15a. If yes, in what state(s) are you licensed?

16. Please tell us about any other professional achievements you would like to share (e.g., fellow status, diplomate, publications, etc.).

XI. Internship Admissions, Support, and Initial Placement Data

A. Internship Admissions, Support, and Initial Placement Data

In compliance with APA Standard C-27 I, the following tables are updates annually by September 1 of each training year.

Date Program Tables last updated: 9/1/2025

INTERNSHIP PROGRAM TABLES

Program Disclosures

Does the program or institution require students, trainees, and/or staff (faculty) to comply with specific policies or practices related to the institution's affiliation or purpose? Such policies or practices may include, but are not limited to, admissions, hiring, retention policies, and/or requirements for completion that express mission and values.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
If yes, provide website link (or content from brochure) where this specific information is presented: N/A	

Internship Program Admissions

Briefly describe in narrative form important information to assist potential applicants in assessing their likely fit with your program. This description must be consistent with the program's policies on intern selection and practicum and academic preparation requirements:
<p>Ochsner Health is Louisiana's largest non-profit, academic, multi-specialty, healthcare delivery system with 47 owned, managed and affiliated hospitals and 300 healthcare centers. Ochsner employs over 36,000 employees, with more than 4,600 providers in over 90 medical specialties and subspecialties and performs over 700 clinical research studies. Ochsner Psychology Doctoral Internship (ODPI) takes place in both the Department of Pediatrics (Child Track) and the Department of Psychiatry (Adult Track).</p> <p>The OPDI Adult Track consists of a variety of experiences to promote the development of both breadth and depth of clinical skills for psychologists in training. Interns on the Adult Track choose three rotations during the year (four months each) where they work with specific populations and within specialized settings to gain exposure to a variety of clinical settings within a medical center. Rotation options include: 1) psycho-oncology; 2) manualized evidence-based psychotherapy; 3) perinatal mood and anxiety disorders; 4) intensive outpatient program; 5) posttraumatic stress disorder; and 6) dialectical behavior therapy skills. Throughout the internship year, interns also work within the general outpatient setting in several different roles, including individual and group therapy and psychological assessment. Training and supervision in evidence-based practices will be emphasized.</p> <p>The OPDI Child Track consists of a variety of experiences to promote the development of both breadth and depth of clinical skills for psychologists in training. The three primary clinical areas are: 1) child development, 2) integrated pediatric primary care; and 3) integrated pediatric tertiary/quaternary care. Interns on the child track match to one of these clinical areas as a year-long major rotation that aligns with their interests and career goals. Each child track intern also has rotation experiences in the other two clinical areas as minor rotations. The following approximate</p>

breakdown will occur for each position 60% of time in activities related to the major rotation; 20% of time in activities related to the two minor rotations; 10% of time in didactic activities; 5% of time in individual supervision; and 5% of time in group or other supervision activities.
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: <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes Amount: 500
Total Direct Contact Assessment Hours: <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes Amount: 50
Describe any other required minimum criteria used to screen applicants: Additional <i>minimum qualifications</i> must be met for applicants to be considered: <ol style="list-style-type: none"> 1. Enrollment in a doctoral program in clinical, counseling, or school psychology (child track only) at a regionally-accredited institution; ; the doctoral program shall involve at least one continuous academic year of full-time residency on the campus of the institution at which the degree is granted. 2. At least 100 hours of scheduled individual supervision; 3. Successful completion of academic program's comprehensive examination or equivalent; 4. At least 4 years of graduate level training in psychology; and 5. Interns must be a U.S. citizen. In compliance with federal law, all persons hired will be required to verify identity and eligibility to work in the United States and to complete the required employment eligibility verification form upon hire.
OPDI bases its selection process on the entire application package noted above; however, certain applicants who have met the following qualifications prior to beginning internship are <i>considered preferred</i> : <ol style="list-style-type: none"> 1. Some experience or special interest in working with diverse populations; and 2. Current enrollment in good standing in an APA- or CPA-accredited doctoral program.

Financial and Other Benefit Support for Upcoming Training Year

Annual Stipend/Salary for Full-time Interns	\$ 35,000.00	
Annual Stipend/Salary for Half-time Interns	N/A	
Program provides access to medical insurance for intern?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
If access to medical insurance is provided:		
Trainee contribution to cost required?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Coverage of family member(s) available?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Coverage of legally married partner available?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Coverage of domestic partner available?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Hours of Annual Paid Personal Time Off (PTO and/or Vacation)	80.0 hrs	
Hours of Annual Paid Sick Leave	80.0 hrs	
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?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Other benefits (please describe):		
- Internship allows for 80.0 annual vacation hours, 80.0 annual sick leave hours, and 64.0 hours of paid holidays.		

- Dental/vision insurance, Flexible Spending Account, Retirement plan, complimentary membership to Louisiana Psychological Association, and miscellaneous wellness benefits including discounted gym membership and access to Employee Assistance Plan

Initial Post-Internship Positions

	2022-25	
Total # of interns who were in the 3 cohorts	18	
Total # of interns who did not seek employment because they returned to their doctoral program/are completing doctoral degree	2	
	PD	EP
Academic teaching	1	0
Community mental health center	0	0
Consortium	0	0
University Counseling Center	0	0
Hospital/Medical Center	12	0
Veterans Affairs Health Care System	0	0
Psychiatric facility	0	0
Correctional facility	0	0
Health maintenance organization	0	0
School district/system	0	0
Independent practice setting	3	0
Other	0	0

Note: "PD" = Post-doctoral residency position; "EP" = Employed Position. Each individual represented in this table is counted only one time. For former trainees working in more than one setting, only the primary position is selected.



OCHSNER PSYCHOLOGY DOCTORAL INTERNSHIP

Handbook Attestation

Please sign this acknowledgement page and return to one of the OPDI Internship Co-Training Directors.

Acknowledgment

I acknowledge that I have received and reviewed the Handbook of the Ochsner Psychology Doctoral Internship (OPDI), including the Due Process and Grievance procedures. I understand and agree to abide by the procedures outlined in this document. I understand and agree that failure to abide by the terms set forth in the Handbook could result in disciplinary action, up to and including termination from the Ochsner Psychology Doctoral Internship. I have been provided with a copy of the document to keep in my files.

Print Name

Signature

Date