



CALIFORNIA DEPARTMENT OF

Mental Health

**Patton State Hospital**

**Postdoctoral Fellowship**

**2011-2012**

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# Postdoctoral Fellowship Program

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## Patton State Hospital

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## MISSION AND VALUES

The Postdoctoral Fellowship at Patton State Hospital consists of three separate tracks, and is intended to train clinical psychologists in the specialized areas of forensic psychology, neuropsychology, or advanced clinical psychology for psychologists working in forensic settings. Our goal is to provide the highest quality training experiences with supervisors who are themselves trained in the respective practice areas. Upon completion of the program, forensic fellows will be prepared to work in forensic settings and to engage in the independent practice of forensic psychology, subject to the statutory limitations of their jurisdiction. Advanced clinical fellows will be prepared to work independently in a variety of clinical settings, with superior skills in case conceptualization, diagnostics, theory, and advanced clinical skills in group and individual therapy. Neuropsychology fellows will be able to provide neuropsychological services to a psychiatric population and understand the interface of neuropsychology and forensic psychology. It is our hope that trainees will go on to become leaders in their respective fields of practice.

There are three distinct program tracks in the fellowship program - the forensic track, the neuropsychology track, and the advanced clinical track. While there is some overlap between the tracks, the primary training, goals and tasks of the tracks are distinct.

All programs emphasize the following:

- the ethical and practical differences between clinical and forensic work
- the necessity to develop and maintain competence in psychological research impacting clinical, neuropsychological, or forensic practice
- awareness of current controversies in the field
- facility with the selection and use of specialized clinical, neuropsychological, and forensic test instruments
- landmark case law, including the standards for admissibility of expert testimony in federal and state courts

The fellowship program is dedicated to the highest standards of practice. At minimum, trainees and supervisors commit themselves to complying with the ethical standards articulated by the relevant professional groups, including the Ethical Principles of Psychologists and Code of Conduct of the American Psychological Association (APA), the Specialty Guidelines for Forensic Psychologists, and the Standards for Educational and Psychological Testing.

The fellowship is a member program of the Association of Psychology Postgraduate and Internship Centers (APPIC) and adheres to all APPIC policies.

# THE HOSPITAL

Patton State Hospital has been accredited as a forensic mental health facility by the Joint Commission on Accreditation of Healthcare Organizations (JCAHO) since 1987 and is the largest maximum-security forensic hospital in the nation that houses male and female criminally insane patients. Patton has a long and interesting history that dates back to 1893 when the hospital was first opened as the “Highland Insane Asylum.” From the turn of the century through World War II, the hospital maintained a moderate census of less than 1,000 patients. Increases in Patton’s population paralleled a post-World War II nationwide hospital expansion so that by 1950 the hospital contained 4,000 severely mentally ill and substance abusing patients. By then, Patton was a self-contained community of 670 acres where the patients raised livestock, grew vegetables, and ran a hog ranch, tailor shop, newspaper, furniture shop, mail room, sewing room, and laundry. The goal was to have an entirely self-sufficient community within the state hospital.

Patton’s history reflects mental health trends in the 20<sup>th</sup> century. Prior to the discovery of Thorazine’s neuroleptic properties in the 1950’s, Patton used the most advanced mental health technologies available, including insulin shock, metrazol shock, lobotomies, electric shock, industrial and occupational therapies, operant conditioning and medications (aspirin, tranquilizers and bromides). In 1955, Patton began giving Thorazine routinely and received a large grant from NIMH to study the efficacy of major tranquilizers on release rates.

The current population at Patton State Hospital is composed of approximately 1,500 judicially committed patients with a wide range of mental disorders including psychoses, mood disorders, personality disorders, substance abuse disorders, and neuropsychological impairment. Because Patton is a maximum-security institution, only those patients who cannot be safely housed in less secure hospitals are admitted. Patton houses most of the female Penal Code patients in California—currently about 300 persons. Some patients are remanded to the hospital because they became mentally ill prior to, or during, a trial and were unable to complete judicial proceedings. Others have been tried and found not guilty by reason of insanity. Some units house criminal offenders who became acutely symptomatic while imprisoned and required psychiatric treatment, and other units house inmates paroled to the Department of Mental Health prior to release to the community. Some patients who have not committed criminal offenses are admitted through civil commitment procedures because they present a substantial danger due to their mental illness. More recently, the Patton population has expanded to include male patients who are committed for mental health treatment following their prison sentences. The patients’ varied diagnoses and legal commitments make this a challenging and exciting setting for staff and fellows, requiring maturity and flexibility. This setting provides unique exposure to the complex interactions among severe mental illness, character disorders, substance abuse, criminality, and dangerousness.

## THE AREA

San Bernardino, California, is a city of approximately 190,000, within a county of over one million people. It is in a valley surrounded by mountains and foothills that are snow-covered in the winter. In the summer, one can fully appreciate the variety of trees planted on the hospital grounds by a former Medical Director, who had an interest in botany. Summers can be warm, as the climate is desert-like.

No matter in which direction one travels, there are opportunities for recreation, sports, shopping, and cultural events. Within a 30-mile radius there are six major universities. Not only do these institutions offer an opportunity for continuing education, they also host special events in art, music and drama. Sports fans will find, within a 1½ hour drive, two major league baseball teams, two professional basketball teams, two NHL teams and numerous racetracks (but unfortunately no football team). Soccer participants will appreciate the year-round availability of teams and playing fields. Snow skiing is within 45 minutes; boating, fishing, camping, and water skiing are within 30 minutes; and surf and sand are within 60 minutes. If one so chooses, the endless adventure of Los Angeles, Beverly Hills, and Hollywood are less than 2 hours away. San Diego also has numerous recreational and cultural activities and is little more than 2 hours away.

It is not necessary to travel far to find entertainment. In the area there are more than 20 movie theaters, two community concert associations, the well known Redlands Bowl Summer Music Festival, fairs, travelogues, museums and parks.

Though the San Bernardino Inland Empire is one of the fastest growing areas in California, housing is less expensive than most communities in southern California. Many staff members choose to live in the nearby university community of Redlands or in the mountain communities of Crestline, Running Springs or Forest Falls.

## FELLOW SELECTION REQUIREMENTS

***Patton State Hospital is an Equal Opportunity Employer and does not discriminate on the basis of race, gender, color, ethnicity, national origin, disability, age, or sexual orientation.***

Prospective fellows are recruited nationally from individuals who hold a doctoral degree in clinical psychology and have completed an internship in clinical psychology. Candidates from APA accredited institutions and APA accredited internships are strongly preferred; however, other candidates will be considered as required under state civil service regulations.<sup>1</sup> Prior to beginning the fellowship year, the doctorate must be completed.<sup>2</sup>

We expect that incoming fellows have completed their general clinical training. They should already possess facility in the selection, administration, and interpretation of traditional psychological tests; in writing concise yet thorough assessment reports that integrate the data from various sources; in addressing their findings to audiences of varying levels of psychological sophistication, and in conceptualizing appropriate treatment recommendations. The nature of the work requires exceptional skills in written and verbal communication.

This fellowship requires the capacity to work independently and yet adjust to the requirements of a large state institution. Forensic psychology in general, and this fellowship in particular, make strong demands on a professional's personal maturity. The ideal candidate will be skeptical yet open-minded, knowledgeable, and intellectually curious. The ability to maintain firm boundaries is essential in forensic practice, yet the ability to establish rapport is also necessary. Personal integrity is foundational.

The selection process begins when the applicant accesses application materials from the website for the fellowship. The first level of review confirms that all required materials have been received prior to the deadline date. The second level of review is a thorough examination of all documentation by the Director and members of the Fellowship Committee. Subsequent to this review, a decision is reached whether to interview the candidate. Personal interviews are required. Interviews are conducted by the Director and at least one other Fellowship Committee member and include a brief on-site written work sample. Final rankings are determined through the consensus of the Director and the committee members of the Fellowship.

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<sup>1</sup> APPIC policy requires that fellows have graduated from institutions, which are regionally accredited, at minimum, and from internships meeting APPIC standards.

<sup>2</sup> This is defined by APPIC "as having on the first day of the fellowship either the diploma in hand or a letter from the Director of graduate studies verifying the completion of all degree requirements pending institution graduation ceremony."

## STATE EMPLOYMENT INFORMATION

**Starting Date:** The fellowship begins on the first day of the State of California's September pay period, which is the first day of September this year.

***Although fellowship offers are made in February or March, actual employment in September is contingent on passing a physical examination (including drug-screening) and a security clearance including fingerprinting. These must be arranged with the Human Resources office to be completed before the start date. Additionally, proof that the candidate has completed all requirements of their graduate program (including dissertation) is required prior to beginning the fellowship.***

**Salary:** Funding is through a Civil Service appointment to the job classification, "Clinical Psychology Intern" [sic]. Fellows are Limited Term Employees, hired for one year (or two years for neuropsychology fellows). The current salary is \$3,717.00 per month (\$44,604 per year). Fellows are paid once per month, usually on the last day of the month on the state calendar. The first payday is the last day of September. There are **no** unpaid positions.

**Medical Benefits:** Medical, dental, and vision benefits are available. Several medical insurance plans are provided for employees to choose from, with set amounts paid by the state depending on marital status and number of children.

**Sick Leave:** Sick leave is earned at the rate of one day per month, but cannot be used until the month following the start date. The time is to be used for personal illness, medical or dental care, or to care for members of the immediate family. When more than two sick days are used at one time, employees are required to submit a physician's note to document care or illness.

**Holidays and Vacation time:** Fellows have the same holidays as other state employees. Vacation time is accrued at the rate of seven hours per month (about two weeks a year), but accrued vacation time may not be used until the seventh month of employment. Unused vacation time is paid to the fellow at the end of the year.

**Time Requirements:** The fellowship is a one-year full-time placement using the State of California calendar and workweek. Regular hours are 8:00 am to 4:30 pm, Monday through Friday. Although fellows are not expected to perform patient-related work after hours, there are times when reading/study may occur beyond the regular workweek.

**Outside Employment:** Because the fellowship program is demanding, outside employment is strongly discouraged. If a fellow must work outside of the program during off-duty hours, he or she must complete an "Incompatible Activities Statement" required by the State of California to ensure that there is no conflict of interest.

## **CORE REQUIREMENTS OF THE FELLOWSHIP: FORENSIC TRACK**

Forensic psychology encompasses a range of practice areas far broader than any single training program could address. The fellowship program at Patton State Hospital emphasizes certain core competencies, while also providing a limited number of opportunities for elective experiences, which are described later. It is our philosophy that a forensic psychologist can expand upon the core competencies in order to maintain a high standard of work in whatever areas are chosen for future forensic practice. For example, the ability to search for and apply case law regarding a clinical issue is broadly applicable across jurisdictions and practice areas.

### **Core Competencies**

By the end of the fellowship year, we expect our fellows to have mastered the following core competencies:

**General Psychology:** Fellows will build upon their earlier training to round out their competence in all the areas of general psychology assumed to be required for licensure in most states.

**Ethical Principles:** Fellows will be able to articulate and apply the APA Ethical Principles of Psychologists and Code of Conduct and the Specialty Guidelines for Forensic Psychologists. They will be able to meaningfully discuss the major areas of potential ethical conflicts and liability in forensic practice.

**Forensic Evaluations:** Fellows will be able to plan and perform forensic evaluations addressed to the specific referral questions and relevant legal standards and will be able to write comprehensive and clear reports outlining the relevant conclusions. They will be able to clarify legal issues with referral sources and apply appropriate legal standards to the available data. They will be familiar with the panoply of specialized forensic instruments in the core areas of practice, such as competence to stand trial and violence risk assessment.

**Communication and Consultation:** Fellows will be able to communicate clearly to a variety of audiences with different levels of psychological sophistication, from attorneys to physicians, from judges to direct care treatment staff. Written reports and verbal consultations will be understandable, well organized, and relevant. Fellows will be ready to provide expert testimony in both depositions and in court with clarity and professionalism.

**Fundamentals of Law:** Fellows are not required to be attorneys, but they must understand the structure of the legal system and the fundamentals of legal research, including the ability to find and interpret case and statutory law. Fellows will become familiar with the landmark cases in mental health law. The development of case law

regarding the admissibility of expert testimony in federal and state jurisdictions must be understood.

**Specific Practice Areas:** Regardless of the fellow's eventual area of sub-specialization, certain issues are so basic to forensic psychology that all postdoctoral trainees should master them. We include the following in that category:

- the insanity defense/criminal responsibility
- competence to stand trial
- the assessment of violence risk
- the assessment and risk management of psychopathy
- the detection of malingering
- the assessment and treatment of sex offenders
- civil and criminal commitment standards, including parole commitments
- provision of expert testimony

In these basic areas, we expect mastery of the relevant case and statutory law. We expect the fellow will be ready for significant independence in the performance of forensic evaluations from the selection of procedures to the integration of data into well-stated conclusions.

Other areas of forensic practice are included in the seminars and conferences and in the elective experiences covered later.

### **Core Experiences**

Toward the goal of achieving the core competencies listed above, the fellowship program provides a series of core experiences including didactic seminars, supervised practice, and teaching.

#### **Seminars**

- **Advanced Forensic Seminar:** This seminar meets weekly throughout the year. There are two required texts, *Psychological Evaluations for the Court: A Handbook for Mental Health Professionals and Lawyers*, 3rd ed., by Melton et al., and *Handbook of Psychology, Volume 11, Forensic Psychology* by Goldstein. These texts are supplemented by a variety of readings for greater depth on selected topics. Particularly in the latter part of the year, after the core areas have been covered, fellows may have input into the remaining topics.
- **Landmark Case Seminar:** This intensive seminar meets once per week throughout the year and covers more than 115 of the major landmark cases in mental health law.
- **Case Conference Seminar:** This seminar meets once a week throughout the year and provides an opportunity for fellows to present their own cases and also be exposed to other cases through invited faculty guests. In

general, the case conference seminar will dovetail with the Advanced Forensic Seminar, such that topics covered in the Advanced Seminar will be fleshed out by case examples.

- **Informal Meetings with Forensic Experts:** Several forensic psychologists, attorneys and other professionals from the community meet throughout the year for our fellows, often in an informal setting. Past topic areas have included juvenile forensic assessments, child custody evaluations, the use of psychological testing in forensic cases, the role of investigations in forensic work, civil forensic practice, personal injury and tort law.

### **Supervised Practice: Patton State Hospital Cases**

The following types of cases are considered core experiences and are mandatory for all fellows:

- **Incompetent to Stand Trial:** Fellows will be asked to assess patients who have been found incompetent to stand trial and committed under California Penal Code (PC) Section 1370. These patients are particularly appropriate for training not only in the evaluation of trial competence, but also in the detection of malingering.
- **Not Guilty by Reason of Insanity:** Through a relationship with the San Bernardino County Public Defender's Office, forensic fellows have access to a referral source to perform criminal responsibility (insanity) evaluations with defendants housed in the county jail awaiting trial. Fellows are expected to perform the evaluations, write the forensic reports addressing sanity issues, and possibly testify at the sanity phase of the criminal trial.
- Fellows are frequently asked to consult on patients who are committed under California's PC 1026. Referral questions may include readiness for placement into the Conditional Release program, appropriateness for extension of commitment under PC 1026.5, or recommendations to the court regarding a "sanity writ" under PC 1026.2. Each of these questions involves a thorough assessment of the risk of violent recidivism.
- **Mentally Disordered Offenders:** Patton houses an increasing number of patients who are hospitalized here as a condition of parole, under PC 2962. These patients have a right to several procedural hearings regarding their placement, all of which require expert evaluations and potential testimony. The evaluations provide an excellent opportunity for fellows to address very specific statutory requirements in forensic reports and to provide sworn testimony at Board of Prison Terms hearings.
- **Forensic Consultations:** Other cases may be referred to the fellows by

treatment staff or by administration, sometimes in “high profile” cases involving significant press attention.

- **Violence Risk Assessment:** A salient forensic issue is determining when a patient is ready for release and what existing risk factors are present. Fellows will be asked to perform assessments for a variety of patient types (Mentally Disordered Offenders, sex offenders, NGRI acquittees) to assist in making decisions about risk and readiness for release.
- **Treatment of Forensic Patients:** The fellowship emphasizes forensic assessment, but each fellow also participates in providing some form of treatment to forensic patients. At minimum, a fellow will be expected to provide two hours of therapy per week, which may include individual and/or group therapy cases. A variety of experiences are available depending on the fellow’s background and interests, including sex offender treatment and conditional release preparation groups.

### **Supervised Practice: Outside Referrals**

The fellowship experience would not be complete without exposure to populations and forensic opportunities not available to the fellow at the hospital itself. Forensic Fellows may have the opportunity to conduct initial MDO (mentally disordered offender) evaluations, traveling to local prisons. Other cases include confidential consultations to defense attorneys and evaluations of sex offenders. Our contacts with local attorneys continue to expand and may include various forms of assessments and trial consultation. Additionally, there may be opportunities to conduct various juvenile forensic assessments and other specialized assessments.

### **Training and Teaching**

One of the missions of the fellowship program is to raise the standard of forensic practice within the hospital by providing training to staff of various backgrounds. Because all psychologists, social workers, and psychiatrists on staff must write reports for the court, all need training beyond their clinical backgrounds in the forensic issues relevant to various commitment types. The forensic fellows will be strongly encouraged, but not required, to prepare a presentation on a forensic topic of their interest, suitable to be presented to other staff in a format such as our Clinical and Professional Issues Forum.

## ELECTIVE OPPORTUNITIES

Patton State Hospital provides an environment of rich clinical opportunities and a wide variety of qualified psychologists and psychiatrists, each with areas of interest and expertise. Elective experiences may be drawn from this variety and are arranged in consultation with the Director according to the fellow's previous experience, goals, and time demands. It should be noted that all elective experiences are subject to the requirement that the fellow be "on track" with acquiring the core competencies described above.

- **Licensing Seminar:** For many years, Patton has provided a seminar for "pre-licensed" staff members preparing for the California licensure examinations. This seminar meets weekly for 1½ hour and covers both the written national exam and the California oral exam. Fellows may participate in this seminar upon special arrangement with the Director and the seminar leader, Dr. Robert Welsh.
- **Advanced Psychotherapy Seminar:** Dr. Dennis Wallstrom coordinates the Advanced Psychotherapy Seminar, which is a mandatory seminar for the advanced clinical fellows. With permission from the Director, a forensic fellow may also attend this seminar.
- **Juvenile Forensic Assessment:** Juvenile forensics is becoming a more widely developed and needed specialty sub-area, especially with the criminalization of the juvenile court system and the increased waiver of juveniles into adult courts. Fellows with appropriate child and adolescent experience and interest in this area may be permitted to conduct assessment on juveniles when available. Potential areas could include juvenile sex offenders, risk assessments, school-violence assessments, and "fit and proper" assessments (transfers to adult court).
- **Specialized Treatment Programs:** Many treatment units at the hospital offer targeted groups such as anger management, relapse prevention, and community release readiness. The hospital has a sex offender treatment program that has provided supervision for fellows to co-lead their groups.
- **Research:** The ability to be good consumers of research in order to use current results in testimony, assessment and treatment is a vital component of the Fellowship. In addition, the Fellows are required to direct some research of their own interest. At a minimum, this would involve writing a paper or conducting a literature review on a selected forensic topic. Fellows are also encouraged to become involved in on-going research projects throughout the hospital.

## **In-service Training**

One of Patton's strengths has been the quality and relevance of in-service presentations available to psychology staff and trainees, including the fellows. You will be notified of all available opportunities during the fellowship year. These always include:

- The Forensic Mental Health Conference held each September at Patton
- The annual Schizophrenia Conference at Loma Linda University
- Monthly "CPIF" meetings arranged within the Psychology Department

## **Outside Conventions and Workshops**

Fellowship faculty keep the fellows apprised of conventions and workshops held in California. (Out-of-state travel is not reimbursed by the state). Where budget and time constraints allow travel or time off to attend relevant conventions and workshops, this will be allowed. The Fellowship training budget is administered by Dr. Wadsworth Murad, Chief of Professional Education at Patton. Per Diem expenses are limited by state regulations, so some out-of-pocket expense can be expected. We will work with you on the necessary approvals and reimbursement paperwork.

## **CORE REQUIREMENTS OF THE FELLOWSHIP: ADVANCED CLINICAL TRACK**

Clinical psychology encompasses a range of practice areas far broader than any single training program could address. The fellowship program at Patton State Hospital emphasizes certain core competencies, while also providing a limited number of opportunities for elective experiences, which are described later. It is our philosophy that a clinical psychologist can expand upon the core competencies in order to maintain a high standard of work in whatever areas are chosen for future practice.

### **Core Competencies**

By the end of the fellowship year, we expect our fellows to have mastered the following core competencies:

**General Psychology:** Fellows will build upon their earlier training to complement their competence in all the areas of general psychology assumed to be required for licensure in most states.

**Ethical Principles:** Fellows will be able to articulate and apply the APA Ethical Principles of Psychologists and Code of Conduct and the Specialty Guidelines for Forensic Psychologists. They will be able to meaningfully discuss the major areas of potential ethical conflicts and liability in forensic practice.

**Forensic Knowledge:** Although the advanced clinical fellowship is not intended as an advanced training program in forensic psychology, certain core areas of expertise and knowledge are necessary in order to work in this facility, a state forensic hospital. The advanced clinical fellows need to have foundational knowledge of the legal commitments, reasons for hospitalization, relationship between forensic and clinical needs, and potential areas of conflict for clinicians in a forensic setting. Therefore, the clinical fellows will be expected to gain core competence with relevant forensic issues.

**Communication and Consultation:** Fellows will be able to communicate clearly to a variety of audiences with different levels of psychological sophistication, from nursing staff to program directors, from judges to psychiatrists and direct care treatment staff. Written reports and verbal consultations will be understandable, well organized, and relevant. Fellows will be prepared to provide expert testimony in depositions and in court with clarity and professionalism, as needed.

**Assessment Skills:** Fellows will be expected to build on already-developed core competency in clinical assessment. This will include taking an assessment from the initial referral question, to the development of an appropriate battery or approach to assist in discovering the answer to the referral question, to collecting the data and providing a succinct, useful and clear report. Most of the assessments will involve exceptionally challenging patients. The advanced clinical fellow, working at an

independent level, will be expected to develop mastery-level skills with assessment techniques, case conceptualization and treatment planning, and report-writing.

**Therapy Skills:** Fellows will be expected to build on already developed core competency in therapeutic work. The focus will be on developing greater breadth and depth in doing advanced clinical work with the most challenging patients in the facility. This may include seeing a patient multiple times a week, or working in-depth with a treatment team and assisting the whole team in intervening more effectively with a patient. The Advanced Clinical Fellow, working at an independent level, will be expected to develop mastery-level skills with therapeutic techniques and interventions, applying theory to practice, and developing treatment programs for other staff to use.

**Specific Practice Areas:** Regardless of the fellow's eventual area of sub specialization, certain areas are key to the program and we expect all postdoctoral trainees should master them. We include the following in that category:

- the insanity defense/criminal responsibility
- competence to stand trial
- the assessment and treatment of sex offenders
- case conceptualization and formulation
- multicultural aspects of assessment and treatment
- advanced diagnostic abilities
- proficiency in individual and group therapy modalities
- provision of expert testimony, if appropriate
- specialized treatment populations (Spanish-speaking, deaf patients, non Patton caseload)

Other areas of clinical practice are included in the seminars and conferences and in the elective experiences covered later.

### **Core Experiences**

Toward the goal of achieving the core competencies listed above, the fellowship program provides a series of core experiences including didactic seminars, supervised practice, and teaching. Schedules and syllabi for seminars will be distributed.

#### **Seminars**

- **Advanced Clinical Seminar:** This seminar meets weekly for the first half of the year, and is taught by Dennis Wallstrom, Ph.D. There are a variety of required readings that will accompany the lecture, including book chapters and related articles. Particularly in the latter part of the year, after the core areas have been covered, fellows may have input into the remaining topics.
- **Advanced Psychotherapy Seminar:** This seminar is taught in the second half of the year by Joseph Malancharuvil, Ph.D., ABPP, and is

open to a limited number of Patton staff, across disciplines. The Clinical Fellows may attend this seminar, where they will have the opportunity to converse with and discuss issues with seasoned professionals.

- **Introductory Forensic Seminar:** This seminar meets weekly for thirteen weeks and includes the clinical psychology interns and other new staff at Patton State Hospital. It covers basic topics in forensic psychology, presented by a variety of staff psychologists and forensic psychiatrists specializing in the areas covered. This seminar is not required for fellows who were already at Patton as interns, but is required for all other fellows.

### **Supervised Practice: Patton State Hospital Assessment Cases**

The following types of cases are considered core experiences and are mandatory for all clinical fellows:

- **Incompetent to Stand Trial:** Fellows will be asked to assess patients who have been found incompetent to stand trial and committed under California Penal Code (PC) Section 1370. These patients are particularly appropriate for training not only in the evaluation of trial competence, but also in the detection of malingering.
- **Not Guilty by Reason of Insanity:** Fellows are frequently asked to consult on patients who are committed under California's PC 1026. Referral questions may include treatment planning, barriers to release, readiness for placement into the Conditional Release program, appropriateness for extension of commitment under PC 1026.5, or recommendations to the court regarding a "sanity writ" under PC 1026.2. Each of these questions involves a thorough assessment of the risk of violent recidivism.
- **Mentally Disordered Offenders:** Patton houses an increasing number of patients who are hospitalized here as a condition of parole, under PC 2962. These patients have a right to several procedural hearings regarding their placement, all of which require assessment and treatment. The evaluations provide an excellent opportunity for fellows to address very specific statutory requirements in clinical and forensic reports.
- **Clinical Consultation:** Other cases will be referred to the fellows by treatment staff or by administration, in cases where the individual therapist or treatment team would like assistance in formulating a treatment plan, or discussing barriers or problems with a particular patient.
- **Behavioral Treatment Planning/Consultation:** A salient clinical issue is treating measurable and problematic behaviors that routinely occur in a forensic state hospital like Patton. The Fellows will have the opportunity to

conduct behavioral treatment plans and to work with our Positive Behavioral Support consultant teams.

### **Supervised Practice: Patton State Hospital Therapy Cases**

The primary supervisor will work closely with the fellow to develop a caseload of patients and other appropriate clinical experiences (group therapy, program evaluation) to assure diversity of therapy experiences. The Advanced Clinical Fellow can expect to spend between 10-15 hours a week providing therapy to patients. The following are the types of patients we have at Patton who require treatment:

- **Incompetent to Stand Trial:** Treatment of patients who have been found incompetent to stand trial and committed under California Penal Code (PC) Section 1370 focuses on the legal/forensic issue of restoring the person to competence. Treatment needs may include conducting psychoeducational groups, teaching court-related material, and addressing any underlying psychological issues that are impending competence.
- **Not Guilty by Reason of Insanity:** Fellows are frequently asked to provide treatment for patients who are committed under California's PC 1026. The treatment is focused on readiness for release back to the community, which must include addressing the legal/forensic issues of dangerousness, psychiatric stability and ability to function in the community. This is usually a long-term therapeutic endeavor, with the need for both long-term individual and group therapy services.
- **Mentally Disordered Offenders:** Patton houses an increasing number of patients who are hospitalized here as a condition of parole, under PC 2962. These patients need treatment to prepare them for release back to the community, under slightly less stringent legal standards than NGRI patients. The focus of treatment, however, similarly focuses on issues of dangerousness and functional abilities. The patient does not have to be completely stable psychiatrically, but does not need to acknowledge they have a mental illness, need medication, and are willing to accept supervision by the outside supervising agency (CONREP).
- **Prisoners with Mental Illnesses:** Some female patients come to Patton as prison transfers. These patients are typically manifesting psychiatric problems too severe to be treated in the prison setting, or are sometimes malingering in order to be transferred to a hospital setting. Often, short-term therapy opportunities are available for Fellows who desire to work with this population.

## **Training and Teaching**

One of the missions of the fellowship program is to assist the Fellow in learning how to teach and train others in clinical work. As such, the Clinical Fellows will be strongly encouraged, but not required, to prepare a presentation on a topic of their interest, suitable to be presented to other staff in a format such as CPIF.

## ELECTIVE OPPORTUNITIES

Patton State Hospital provides an environment of rich clinical opportunities and a wide variety of qualified psychologists and psychiatrists, each with areas of interest and expertise. Elective experiences may be drawn from this variety and are arranged in consultation with the Director according to the fellow's previous experience, goals, and time demands. It should be noted that all elective experiences are subject to the requirement that the fellow be "on track" with acquiring the core competencies described above.

- **Licensing Seminar:** For many years, Patton has provided a seminar for "pre-licensed" staff members preparing for the California licensure examinations. This seminar meets weekly for 1½ hour and covers both the written national exam and the California oral exam. Fellows may participate in this seminar upon special arrangement with the Director and the seminar leader, Dr. Robert Welsh.
- **Neuropsychology Assessment/Cognitive Rehabilitation:** By arrangement with the Director, the fellow may have the opportunity to conduct appropriate neuropsychological assessments and provide cognitive rehabilitative services to patients. In order to be able to participate in this elective opportunity, the fellow must have prior experience with neuropsychological assessment and/or cognitive rehabilitation.
- **Outcome Evaluations:** The clinical fellows will be strongly encouraged to participate in outcome research and empirically driven approaches to treatment. This may be conducted as part of the work with an individual patient, where the focus would be on assessing therapy outcomes, or by participating in clinical outcome research.
- **Program Development/Program Evaluation:** Opportunities exist for the fellows to participate in the development of clinical programs and the evaluation of existing programs here at the hospital.
- **Systems/Management Consultation:** The clinical fellows may have the opportunity to provide services to the administration and management within the hospital. This is a new opportunity we are in the process of developing, which would involve the fellow and supervisor meeting with a unit, treatment team, or specific manager/administrator to analyze systems-wide problems and provide appropriate interventions and training.
- **Specialized Treatment Programs:** Many treatment units at the hospital offer targeted groups such as anger management, relapse prevention, and community release readiness. The hospital has a specialized treatment unit for the treatment of sex offenders, that provides opportunities for assessment and treatment with this population. In the past, anger treatment groups have been

provided following the empirically validated model designed by Dr. Ray Novaco.

- **Research:** The ability to be good consumers of research in order to use current results in testimony, assessment and treatment is a vital component of the Fellowship. In addition, the Fellows are required to direct some research of their own interest. At a minimum, this would involve writing a paper or conducting a literature review on a selected clinical topic. Fellows are also encouraged to become involved in on going research projects throughout the hospital.

### **In-service Training**

One of Patton's strengths has been the quality and relevance of in-service presentations available to psychology staff and trainees, including the fellows. You will be notified of all available opportunities during the fellowship year. These always include:

- The Forensic Mental Health Conference held each fall at Patton
- The annual Schizophrenia & Bipolar Disorders conference at Loma Linda
- Monthly "CPIF" meetings arranged within the Psychology Department

### **Outside Conventions and Workshops**

Fellowship faculty keep the fellows apprised of conventions and workshops held in California. (Out-of-state travel is not reimbursed by the state). Where budget and time constraints allow travel or time off to attend relevant conventions and workshops, this will be allowed. The Fellowship training budget is administered by Dr. Wadsworth Murad, Chief of Professional Education at Patton. Per Diem expenses are limited by state regulations, so some out-of-pocket expense can be expected. We will work with you on the necessary approvals and reimbursement paperwork.

## CORE REQUIREMENTS OF THE FELLOWSHIP: NEUROPSYCHOLOGY TRACK

Clinical neuropsychology is an applied science concerned with the behavioral expression of brain function and dysfunction. The fellowship program at Patton State Hospital is one of the few programs nationally that has a focus in psychiatric neuropsychology. The program emphasizes certain core competencies, while also providing a limited number of opportunities for elective experiences, which are described later. It is our ambition that our fellowship will provide the opportunity to expand upon fundamental neuropsychological assessment skills in order to achieve a high standard of work in any chosen clinical setting.

The neuropsychology postdoctoral fellowship is a two-year fellowship training program that provides the foundations for later board certification in both major neuropsychology certifying entities (ABN and ABPP-CN). The requirements are designed to facilitate completion of the basic training requirements articulated at the Houston Conference by APA Division 40.

### Core Competencies

By the end of the fellowship program, we expect our fellows to have mastered the following core competencies:

**General Psychology:** Fellows will build upon their earlier training to round out their competencies in all areas of general psychology that are assumed to be required for licensure in most states.

**Ethical Principles:** Fellows will be able to articulate and apply the APA Ethical Principles of Psychologists and Code of Conduct and Standards for Testing. They will be able to meaningfully discuss the major areas of potential ethical conflicts and liability in the practice of neuropsychological assessment.

**Neuropsychological Assessments:** Fellows will be able to plan and perform neuropsychological evaluations addressed to the specific referral questions and will be able to write comprehensive reports, outlining the relevant conclusions and recommendations. They will be able to clarify the reason for assessment and deliver a helpful work product, appropriate for a forensic setting. They will be competent in the administration and interpretation of standard neuropsychological tests.

**Communication and Consultation:** Fellows will be able to communicate clearly with all members of the treatment team and relevant outside agencies. Written reports will clearly answer the referral questions and will provide meaningful recommendations. At times fellows also provide consultation and feedback in the context of ongoing clinical care of the patients.

**Fundamentals of Neurobehavioral Syndromes:** Fellows are expected to have a working knowledge of various clinical syndromes, with special emphasis on those of a psychiatric nature (e.g., psychotic spectrum illnesses). Fellows will also have a working knowledge of the neurological basis of common neurobehavioral syndromes (e.g., dementias, amnesic syndromes, etc.).

**Cognitive Remediation:** It is expected that fellows will become proficient in the delivery of effective cognitive remediation services. This will entail providing empirically based treatment modalities as well as evaluating their effectiveness. It is our philosophy that a competent neuropsychologist can not only provide assessment, but also be able to deliver useful follow-up services aimed at remediating cognitive weaknesses discovered through evaluation and testing.

**Specific Practice Areas:** Regardless of the fellow's eventual work setting, certain areas are key to the fellowship and we expect all postdoctoral neuropsychology trainees should master them. These include the following:

- advanced assessment skills
- advanced diagnostic abilities (e.g., differential diagnosis of neurobehavioral syndromes)
- integration of neuropsychological and personality testing
- advanced treatment and interventions
- multicultural aspects of assessment and treatment
- cognitive malingering
- specialized treatment populations (e.g., TBI, geriatric, HIV, deaf, etc.)
- program evaluation and empirical studies
- hospital-wide consultation
- in-depth case studies

Additional areas of neuropsychological importance will be included in the seminars and elective experiences that are described later. We expect the fellow to be ready for significant independence in the performance of neuropsychological evaluations by the conclusion of the training program.

**Approach to Neuropsychology:** The program emphasizes a "Process" model, which utilizes a flexible (rather than fixed) battery based on a hypothesis-testing method. To respond to referral questions in this setting, neuropsychologists integrate both qualitative and quantitative data (cognition, personality, and behavior) to help provide effective treatment recommendations to meet forensic and clinical goals.

### **Core Experiences**

Toward the goal of achieving the core competencies listed above, the fellowship program provides a series of core experiences including didactic seminars, supervised practice, and teaching. A list of seminars offered throughout the program is presented

below.

## Seminars

- **Advanced Neuropsychology Seminar:** This seminar meets weekly throughout the training year. Topics discussed will include neuroanatomy, neuropsychological assessment, and neurobehavioral syndromes, as well as other topics of interest. Reading assignments will be provided at the beginning of the training year (e.g., Lezak, Kolb & Wishaw, Heilman and Valenstein, Snyder & Nussbaum, etc.)
- **Neuropsychology: Research and Theory:** This seminar meets weekly throughout the year. Fellows will be required to research and present an informal talk on recent advances in the field of neuropsychology.
- **Case Conference Seminar:** This seminar meets weekly throughout the year and provides an opportunity for fellows to present their own cases and also be exposed to other cases from other practitioners.

## Supervised Practice: Patton State Hospital Cases

The following types of cases are considered core experiences and are mandatory for all neuropsychology fellows:

- **Chronic Mental Illness:** The majority of patients at PSH have longstanding mental illness, with the majority of our patients diagnosed with a psychotic spectrum illness. Therefore, it is important that fellows learn to identify the neuropsychological correlates of these conditions.
- **Dementia & other neurodegenerative conditions:** There is a wide age range of patients at PSH, including a significant geriatric population. All types of dementia are seen, including Alzheimer's Disease, Frontotemporal Dementia, Vascular Dementia, subcortical dementias, as well as other neurodegenerative conditions (e.g., Parkinson's Disease).
- **Traumatic Brain Injury:** Although acute cases are rarely seen, a large percentage of patients have a reported history of head trauma. Many of our patients have comorbid conditions that complicate the diagnostic picture (e.g., substance abuse, chronic mental illness, learning disorders).
- **Chronic viral infection:** There is the opportunity to provide ongoing and serial assessments of patients with chronic viral infections (HIV, Hepatitis C, etc.).
- **Cognitive Malingering:** A variety of commitment types are represented at

PSH, including those adjudicated to be incompetent to stand trial. In addition to other mediating factors, this creates the potential for exaggeration of cognitive deficits in patients who are assessed.

- **Other forensic issues:** At PSH, the Neuropsychology Service is often called upon to help address how the cognitive functioning of patients might impact their legal status and readiness for community release.
- **Neuropsychology consultations:** The Neuropsychology Service provides consultation to all disciplines. Fellows acting as consultants may be asked to present at treatment conferences, the rehabilitation management committee, the HIV committee, and other teams.
- **Cognitive Remediation:** While the fellowship emphasizes neuropsychological assessment, each fellow will be required to provide some form of cognitive remediation, either on an individual or group basis (e.g., the Functional Rehabilitation Education Experience, or “FREE” program).

Furthermore, in the second year of training, the neuropsychology fellow will spend considerable time (at least one day per week) in different outside placements that will allow for training experiences in “traditional” medical neuropsychology. The fellowship has developed relationships with outside agencies that will allow the fellow to have experiences in assessment and therapy with non-psychiatrically involved patients.

### **Training and Supervision**

One of the missions of the fellowship program is to raise the awareness of neuropsychological issues in a psychiatric setting by providing training to staff. The neuropsychology fellow will be strongly encouraged but not required to prepare a presentation on a topic of their interest suitable to be delivered to other professional staff. Fellows will be expected to participate in the supervision of interns and practicum students.

## ELECTIVE OPPORTUNITIES

Patton State Hospital provides an environment of rich clinical opportunities and a wide variety of qualified psychologists and psychiatrists, each with areas of interest and expertise. Elective experiences may be drawn from this variety and are arranged in consultation with the Director according to the fellow's previous experience, goals, and time demands. It should be noted that all elective experiences are subject to the requirement that the fellow be "on track" with acquiring the core competencies described above.

- **Licensing Seminar:** For many years, Patton has provided a seminar for "pre-licensed" staff members preparing for the California licensure examinations. This seminar meets weekly for 1½ hour and covers both the written national exam and the jurisprudence examination. Fellows may participate in this seminar upon special arrangement with the Director and the seminar leader, Dr. Robert Welsh.
- **Cognitive Remediation:** By arrangement with the Director, the fellow may have the opportunity to participate in 3 different treatment modalities: 1) FREE program; 2) a 12-week manualized cognitive remediation group program; 3) cognitive remediation provided on a 1:1 basis.
- **Advanced Psychotherapy Seminar:** Dr. Joseph Malancharuvil, Chief of Psychology, coordinates the Advanced Psychotherapy seminar, which is a mandatory seminar for the clinical fellows. With permission from the Director, a neuropsychology fellow may also attend this seminar.
- **Program Evaluation:** Opportunities exist for fellows to participate in the evaluation of existing programs at PSH, such as the FREE program.
- **Hospital-wide Consultation:** A multitude of opportunities exist for working on diverse and interesting cases in conjunction with different consultation teams. For example, fellows may be asked to consult with the Positive Behavioral Support Team on a challenging case.

### In-Service Training

One of Patton's strengths has been the quality and relevance of in-service presentations available to psychology staff and trainees, including the fellows. You will be notified of all available opportunities during the fellowship year. These always include:

- The Forensic Mental Health Conference held each fall at Patton
- The annual Schizophrenia & Bipolar Disorders conference at Loma Linda University

- Monthly Continuing Professional Information Forums (“CPIF”) arranged within the Psychology Department

### **Outside Conventions and Workshops**

Fellowship faculty keep the fellows apprised of conventions and workshops held in California (Out-of-state travel is not reimbursed by the state). Where budget and time constraints allow travel or time off to attend relevant conventions and workshops, this will be allowed. The Fellowship training budget is administered by Dr. Wadsworth Murad, Chief of Professional Education at Patton. Per Diem expenses are limited by state regulations, so some out-of-pocket expense can be expected. We will work with you on the necessary approvals and reimbursement paperwork.

## SUPERVISION AND EVALUATION

The fellowship provides each trainee the required supervised experience to meet licensing regulations in most states. For instance, in California psychologists must acquire 1500 hours of supervised postdoctoral experience to qualify for licensure. Our trainees typically accrue about 1800 hours. The program is a one-year, full-time training experience.

In order to comply with APA, APPIC, and state standards for supervised experience, fellows are provided with at least the following core supervision hours:

- One hour per week of individual supervision with the primary supervisor
- At least one hour per week with another qualified supervisor
- At least two hours per week of group supervision with qualified supervisor(s)

Each supervisor formally evaluates fellows at least quarterly; supervisors are expected to review their evaluations in person with the fellow prior to submission. The evaluations of each supervisor are integrated and summarized by the Director and discussed in person with the fellow. A written summary of the feedback is prepared quarterly and signed by the Director and the fellow. The six-month evaluation is particularly detailed and takes stock of the accomplishments in the first half of the fellowship year and the goals for the second half.

Any evaluation that includes a negative rating, that is, a rating of the fellow's performance as below the standard in the field, is supported by concrete examples. In cases of disagreement between the supervisor and the fellow, all attempts will be made to resolve the issue informally, utilizing the intervention of the Director or other faculty as appropriate. However, the fellow always has the option of using the grievance procedures of the state civil service system. (See next section.)

The fellows formally evaluate supervisors at the end of the fellowship year. The evaluations are confidential as to specifics and fellows' identities, but may be summarized to the supervisor by the Director for the purpose of professional development and program planning. Fellows are encouraged to bring to their supervisors any conflicts or possible miscommunications and to inform the Director of the outcome.

Fellows are asked to participate in the formal evaluation of the fellowship at the end of the year, again one year later, and five years later. These evaluations form part of the program's ongoing self-study.

# GRIEVANCE PROCEDURES

Fellows have both the right and the responsibility to address any serious grievance they may have regarding their training, the Psychology Department, or the hospital. A trainee has a grievance if he/she believes that a serious wrong or injurious act has been committed and that a complaint is in order. Examples could include requests made of a trainee by any Patton State Hospital psychologist, employee, or consultant to engage in actions that conflict with the APA Ethical Principles of Psychologists, Patton State Hospital Administrative Directives, or the Laws and Regulations relating to the Practice of Psychology in the State of California. Acts of sexual harassment, racial bias, observance of serious professional misconduct, or the desire to appeal an unsatisfactory performance rating can result in a grievance.

In the state hospital system, a grievance is a serious formal action involving the civil service system, the employee's Bargaining Unit representative, and sometimes the Board of Psychology. For problems that do not rise to the level of a formal grievance, informal conflict resolution strategies are encouraged.

Most conflicts can be handled directly and without involvement of outside departments or agencies. For example, if there is a problematic "match" between a fellow and a supervisor, informing the Director can lead to a reassignment of supervision. This is in recognition that although every supervisor approved by the committee to provide supervision has the appropriate skills and talents to do the job well, preference should be given to a good match between supervisor and fellow.

The following is an outline of the sequential progression of steps that may be taken in attempting to resolve conflicts:

1. The Ethical Principles of Psychologists state that the first step is always informal. If the fellow has a conflict with a supervisor, the fellow should initially make an attempt to discuss the concern directly with the supervisor, unless this step is contraindicated because of the gravity of the concern or some particularity of the situation. If the conflict is with a supervisor other than the Director, the fellow may also discuss concerns with the Director. If the conflict involves supervision by the Director, the fellow may discuss these concerns with the Chief of Psychology Services. For most problems, these measures will suffice.

Note: In the case of a serious problem, for example, allegations of sexual harassment, the fellow may contact the Equal Employment Opportunity Counselor, Carole Gonzalez, directly at 425-7362. In this instance, the fellow would write a formal complaint. Once that occurs, the follow-up steps are represented below.

2. If the conflict cannot be resolved at this level, the next step involves the Fellowship Director. The Director may meet with the both fellow and the

supervisor to resolve the conflict or consider alternatives. One option is considering reassigning the fellow or providing additional supervisors as needed.

3. If, after meeting with the Director, the issue is not resolved, the conflict may be brought before a person outside of the fellowship program who serves in the capacity of consultant. The role of this person is to listen objectively to the stated concerns and suggest alternative ways of handling the dilemma in an ethical and professional manner. At present, the Director of Professional Education would be the identified person who could provide the type of specific, detailed consultation that may be required.

When situations arise in which ethical or legal violations have occurred, there are clear, unambiguous procedures, which must be followed. These procedures are a part of the hospital policy and are as follows:

1. The fellow reports the concern to the Fellowship Director.
2. The Director may seek consultation from the Chief of Psychology Services, the Chief of Professional Education, the Chair of the Psychology Department, and/or the Medical Director.
3. If the violation is of a clinical nature, the reported allegation will be moved to the Chair of the Medical Staff Credentials Committee or Psychology Credentials Committee for review.
4. If the allegation includes discrimination, or other inappropriate behaviors, a complaint will be submitted to the hospital's EEO officer.
5. The EEO officer reviews the formal complaint to determine whether it meets prima facie criteria for further investigation. At this point, the complainant and the supervisor/respondent may be separated.
6. If the complaint meets prima facie criteria, a formal investigation is initiated. The Executive Director will issue a Determination based on the findings of the investigation. Possible outcomes include:
  - a.) "No merit" concludes that the evidence did not support the allegation.
  - b.) "Merit" concludes that the evidence does support the allegation.
  - c.) If the complainant is not satisfied by the decision of the Executive Director, he or she has the right to appeal to the Chief, Office of Human Rights. If not satisfied with the decision of the Chief, OHR, the complainant may forward the complaint to the Appeals Section of the State Personnel Board.

The Discrimination Complaint Process does not preclude the complainant from filing simultaneously with the Equal Employment Opportunity Commission (EEOC), Department of Fair Employment and Housing (DFEH), the State Personnel Board (SPB) or any other agency charged with enforcing laws prohibiting discrimination.

7. Fellows may also make a formal report of the incident to the Board of Psychology, Medical Board of California. The Board will then proceed with its

own investigation.

8. A formal report may also be made to the APA Ethics Committee.
9. Any allegation concerning a fellowship supervisor that is severe enough to result in civil service sanctions will probably also make it necessary for the fellowship to report to the Board of Psychology and the APA.
10. Fellows may also independently initiate contact with the Board of Psychology or the APA to report problems.

The Fellowship Director maintains all information regarding formal complaints and grievances against the program (of which we are aware) or against individuals within the program, and will make them available as appropriate to APA or the Board of Psychology.

## REMEDIATION AND TERMINATION

Fellows are expected to abide by the Ethical Principles and state law. Questions of unethical or illegal behavior by a fellow will lead to an immediate suspension of clinical contact while the issues are investigated. Disciplinary or adverse actions up to termination from internship will follow a confirmatory finding.

Fellows are also expected to produce work of sufficient quality and quantity to complete the fellowship. If there are problems with productivity or quality of performance, the Director will verbally advise the fellow about needed changes in performance. Usually, this is sufficient to get the fellow back on course.

If the problem persists and remedial actions are required, the Fellowship Committee convenes to review the expectations and ways to meet them, making sure that they are reasonable and effective. The fellow would be informed verbally and in writing of what is expected, and deadlines would be set in a plan of correction. At this point, the fellow would be invited to respond in writing to the Fellowship Director and the Chief of Psychology Services. Those individuals would meet to determine the next steps. Depending on the outcome of this meeting, the fellow might receive, by certified mail, a letter documenting the problems and warning him or her of possible job termination.

If all attempts to improve the fellow's performance fail, then under Title 2, Article 11, of the State Personnel Board Regulations, Patton can separate the fellow for cause, informing the fellow, in writing, of the reason for termination on or before the date of separation. "Within 30 days after the date of separation for cause, a copy of the notice and report of separation are given to the executive officer. Employees who are separated for cause cannot be certified for the same position unless it is determined by the executive officer that the reason for the separation should not bar the person from such further employment."

Trainees who are going through this process can obtain consultation from the Equal Employment Opportunity Counselors and the Labor Relations Analyst. Trainees may obtain advocacy from their Union representative. The Employee Assistance Program is also available to help the intern resolve personal problems that may be interfering with work.

## FELLOWSHIP SUPERVISORS AND FACULTY

**William Britt III, Ph.D., ABN, Fellowship Faculty and Supervisor**, received his doctorate from Rosemead School of Psychology, Biola University. Dr. Britt provides neuropsychological assessment of patients with brain dysfunction and is part of the neuropsychology team that functions hospital-wide. He has also worked in the Department of Psychiatry, Loma Linda University School of Medicine since 1981. His interests are in neuropsychological assessment and cognitive rehabilitation. Disorders of interest include brain trauma, temporary and progressive dementias, vascular insults, seizure disorders, neurotoxin exposures, tumors, and brain abscesses/infections in children and adults. His current research includes co-investigation of a five year NIH funded study of Alzheimer's Disease at Loma Linda. Dr. Britt obtained his Diplomate from the American Board of Professional Neuropsychology in 2000 and has supervised and taught many psychology interns, fellows and psychiatric residents over the past twenty years, some of who are currently on staff at Patton.

**Robert Brodie, Ph.D., Fellowship Committee Member and Supervisor**, received his doctorate in clinical psychology from the University of California, Santa Barbara. He completed his predoctoral internship at Patton State Hospital, and then graduated from the Postdoctoral Fellowship in Forensic Psychology from Patton in 2004. Presently he is a Senior Psychologist Supervisor for the Department of Psychology. His clinical and research interests include ethnic minority mental health, treatment of the severely mentally ill, and forensic risk assessment. His theoretical orientation is cognitive-behavioral, with special interests in dialectical behavior therapy and interpersonal therapy.

**Michael Cummings, MD, Fellowship Faculty**, received his medical degree from the Loma Linda University School of Medicine in 1981 and subsequently completed postgraduate training in both psychiatry and research. He has published numerous articles and made professional presentations in psychopharmacology research and forensics. He is board-certified in psychiatry and neurology, and in the subspecialty of forensic psychiatry. He is the Psychopharmacology Consultant at Patton State Hospital and coordinates the Forensic Rotation for medical residents from Loma Linda. He currently presents in the Introductory Forensic Seminar.

**David Glassmire, Ph.D., ABPP, Internship Director**, received his Ph.D. from the Pacific Graduate School of Psychology, where he completed an emphasis in clinical neuropsychology. He completed the neuropsychology concentration at Patton's internship. Dr. Glassmire also completed Patton's fellowship in forensic psychology with an additional emphasis in neuropsychology, and is board-certified in forensic psychology through ABPP. He has interests in the neuropsychology of aging and malingering assessment.

**David Haimson, Ph.D., Chief of Psychology, Fellowship Committee Member and Supervisor**, received his doctorate from Brigham Young University in 1987, after completing his internship at Napa State Hospital. After working as a psychology assistant in Northern California for two years, he came to Patton State Hospital in 1989. In his position as a unit psychologist, Dr. Haimson was and remains active in the psychology department. He has served as acting Internship Director and was Chair of the department for two years. He also taught the Assessment Seminar for many years, and continues to teach the Licensing Seminar. In the past, Dr. Haimson taught assessment courses at Loma Linda University, and also maintained a private clinical practice, working in both in-patient and outpatient settings. He continues to provide assessment consultation in his practice. Currently, Dr. Haimson is the Chief of Psychology.

**Allen Kilian, Ph.D., Fellowship Committee Member and Supervisor**, earned his doctorate in 2003 from Fuller Theological Seminary Graduate School of Psychology and completed his internship in the Forensic Track at Patton State Hospital. Dr. Kilian's work has emphasized assessment with a particular emphasis on the forensic questions of trial competence, malingering, and the intersection between the law and mental health. Dr. Kilian also maintains a private practice that includes serving on a court panel and conducting Competence to Stand Trial and Insanity evaluations for the courts. Also, in addition to working at Patton, Dr. Kilian serves as an adjunct professor at Loma Linda University, where he teaches classes in the area of objective personality assessment. Dr. Kilian's research interests have included assessment, neuropsychological sequelae of psychotic spectrum illnesses, and community based treatment for those with severe and chronic mental illness.

**Dominique Kinney, Ph.D., Fellowship Committee Member and Supervisor**, received her Ph.D. from the Pacific Graduate School of Psychology, where she completed an emphasis in clinical neuropsychology. She completed the neuropsychology concentration at Patton's internship and also completed the postdoctoral fellowship in neuropsychology at Patton. She has interests in neuropsychological assessment, cognitive remediation, the interface between culture and psychology, and positive psychology.

**Craig Lareau, J.D., Ph.D., ABPP, Fellowship Director**, earned his J.D. with honors in 1998 from Villanova University School of Law, where he served on the *Villanova Law Review*, and his Ph.D. in 1999 from MCP Hahnemann University through the Villanova/MHP Hahnemann Joint J.D./Ph.D. Program in Law and Psychology. He is licensed as both an attorney and psychologist, and is board-certified in forensic psychology through ABPP. He completed his predoctoral internship at Patton State Hospital in 1999 and the following year completed the Postdoctoral Fellowship in Forensic Psychology. He maintains a private practice in forensic psychology and litigation consulting. He has both published and made numerous professional presentations on forensic topics to both attorneys and psychologists. Dr. Lareau chairs

the Forensic Psychology Section of the California Psychological Association and is the chair of the Department of Psychology at Patton State Hospital.

**Joseph Malancharuvil, Ph.D., ABPP, Hospital Clinical Administrator**, graduated from Loyola University of Chicago in 1982 and did an advanced internship at Patton State Hospital. He has been a member of the Medical Commission for the Superior Courts of San Bernardino and Riverside counties for over 15 years. He is a Medical Advisor to Office of Hearings and Appeals. Besides conducting numerous psychological evaluations in criminal and civil matters, he has given sworn testimony in various legal proceedings on over 3000 occasions. He is a Diplomate of the American Board of Professional Psychology (Clinical). He has extensive training experience, especially in the area of teaching clinicians at State Hospitals and at aftercare programs.

**Stephen Nitch, Ph.D., Fellowship Committee Member and Supervisor**, earned his doctorate in 2002 from Loma Linda University with a minor in Neuropsychology. He subsequently completed a two-year neuropsychology fellowship at Harbor-UCLA Medical Center. He has additional training in rehabilitation psychology. His clinical interests include assessment of cognitive malingering, cognitive remediation, and psychopharmacology.

**Andrew Tamanaha, Ph.D., Fellowship Committee Member and Supervisor**, obtained his Ph.D. in Clinical Psychology from the Pacific Graduate School of Psychology and completed the Clinical-Forensic Track internship at Patton State Hospital. Dr. Tamanaha is currently involved with the assessment, treatment, and hospital wide consultation of individuals who benefit from specialized sex offender treatment. He regularly supervises trainees in sex-offender treatment groups, risk assessments, and clinical assessments. He has given professional presentations on sex offender risk assessment and the treatment of sex offenders. Additionally, Dr. Tamanaha regularly attends conferences in the area of sex offender assessment and treatment and continues to obtain advanced training in the most current sex offender assessment measures and treatment protocols. Additionally, he is an adjunct faculty member at Loma Linda University, where he teaches classes on forensic assessment.

**Dennis Wallstrom, Ph.D., Fellowship Committee Member and Supervisor**, received his Ph.D. in clinical psychology from the Graduate School of Psychology, Fuller Theological Seminary, in 1990. He also completed the M.Div. in seminary studies from Andrews University in 1978, and was a full-time pastor until 1985. His research interests have been in the psychology of religion and the special issues of religious professionals, and he has also been interested in the integration of Christian faith and psychology. He has served for over 10 years as a forensic evaluator for San Bernardino and Riverside Counties, and is an adjunct faculty member for the Department of Psychology at Loma Linda University, where he teaches in the forensic specialty track. He also maintains an active clinical private practice.

**Jette Warka, Ph.D., Fellowship Committee Member and Supervisor** received her Ph.D. in Clinical Psychology in 2001 from Loma Linda University. She completed her internship at Patton State Hospital and began working as a staff psychologist at Patton State Hospital in September 2001. Dr. Warka worked as a staff psychologist on a long-term treatment unit for 5 years. In September 2006, she joined the hospital's Positive Behavior Support Consultation Service where she is currently working as the chair of one of Patton State Hospital's Positive Behavior Support Teams. Additionally, Dr. Warka also works part-time in the community with mentally ill parolees and sex offenders. Dr. Warka is originally from Denmark and she was a pre-school teacher before she came to this country. Her clinical and research interests include development of personality, factors contributing to vulnerability for psychopathology, and factors contributing to resilience. Dr. Warka is a supervisor in Patton State Hospital's Internship Program and Fellowship Program and she facilitates a weekly psychotherapy seminar for psychology interns. Dr. Warka completed a one-year certificate program in psychoanalytic psychotherapy from the Psychoanalytic Center of California in 2006.

**April Wursten, Ph.D., ABPP, Fellowship Supervisor**, earned her doctorate from the University of Arizona in 1986 and served her internship at McLean Hospital in the McLean/Bridgewater Program. She has been on staff at Patton State Hospital since 1986 and Director of the Internship Program since 1994. She holds the diplomate in Forensic Psychology from the American Board of Professional Psychology. She serves on the faculties of Fuller Theological Seminary's Graduate School of Psychology and the Loma Linda University School of Medicine. She has also served as a site visitor in the APA accreditation process for internship programs. She has presented widely on issues in clinical and forensic psychology and has taught Forensic Psychology at Loma Linda University. She teaches in the Introductory Forensic Seminar, supervises fellowship cases, and provides consultation to the fellows and the Fellowship Director.

**Albert G. Yee, Psy.D., Fellowship Committee Member and Supervisor**, received his doctorate from George Fox University in 2004. He completed his internship at the Salt Lake VA Medical Center, followed by a two-year fellowship in Neuropsychology and Rehabilitation Psychology at the University of Missouri-Columbia. His clinical and research interests include neuropsychological and functional outcomes among neurologically impaired populations.