

Postdoctoral Fellowship Program Emphasis Area: Child and Adolescent Psychiatry

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Within the Child and Adolescent emphasis area, there are three sub-areas of training. Fellows are enrolled in two of the three following areas: a) adolescent dialectical behavioral treatment for suicide and self-harm behaviors; b) cognitive-behavioral treatments; and c) foster-care adoption. Each year, one fellow is focused on adolescent suicidal and self-harm behaviors and cognitive-behavioral treatments, and the other fellow is trained in early intervention/ adoption and cognitive-behavioral treatments. The training in child and adolescent psychiatry involves core similarities in the demographics of the population served, adverse-event exposure, and multiple systems involvement (e.g., child protective services, education, or legal). However, fellows also have opportunities to receive training in two of the following three specialty areas within the child and adolescent training program:

Adolescent Suicidal and Self-Harm Behaviors (Adolescent DBT Clinic)

This sub-emphasis area provides training in evidence-based, dialectical behavioral treatment for adolescents (ages 12-19). Modalities include individual and group therapy. The clinic focuses on teenagers with suicidal and self-harm behaviors, and characteristics associated with Borderline Personality Disorder. Fellows will receive extensive training in outpatient crisis intervention. Additionally, fellows will provide DBT skills coaching to patients on their caseload. Adapting treatment approaches for use with community populations is also a focus of training, as the clinic serves a multi-ethnic patient population. Dr. Avina has previously been involved in NIMH-funded research on the effectiveness of DBT with adolescents, in collaboration with Dr. Michele Berk and Dr. Marsha Linehan. Postdoctoral fellows may have the opportunity to co-author publications on the topic of suicidal and self-injuring adolescents.

Child and Adolescent Cognitive-Behavioral Treatment Clinic

The Child and Adolescent Cognitive-Behavioral Treatments sub-area of emphasis provides didactic instruction and supervised training in evidence-based, cognitive-behavioral treatments for youth (ages 5-21). Fellows primarily receive training in treatments for depressive and anxiety disorders. Fellows also receive training in outpatient crisis intervention since many youth presenting with these psychological problems also experience significant crisis episodes. Depending on the youth's age, developmental level, and presenting problems, modalities may include individual, collateral, and family therapy. Postdoctoral fellows will supervise pre-doctoral trainees in the delivery of child and adolescent CBTs, as well as receive supervision and training in this area.

Foster Care/Adoption (TIES for Families-South Bay)

The Foster Care/Adoption sub-area of emphasis involves training at TIES for Families-South Bay, a county mental health clinic located within a mile of the Harbor-UCLA campus. In a private office suite setting, they will be provided with training and experience in the area of foster-care, adoption, family therapy, and infant

mental health. The program is affiliated with and based on the UCLA TIES for Adoption model that created community-defined intervention, the TIES Transition Model (TTM) that promotes the successful adoption of foster children ages birth to eighteen when return to their biological parents is not possible. The Foster Care-Adoption (TIES) Fellows interface with a variety of Systems of Care including social services (DCFS), pediatricians, schools, Regional Centers, and courts in the case management aspects of client care.

The population served at TIES-South Bay includes high-risk infants, children and adolescents with histories of prenatal substance exposure, neglect and abuse. A key feature of this program is that services are offered as children are transitioned from foster care into adoptive homes, a vulnerable period for families that presents opportunities to promote attachment and prevent problems from escalating. The model includes services prior to adoptive placement, during the transition from foster care to adoption and post adoptive services.

Multidisciplinary TIES staff includes psychologists, post-doctoral psychology fellow, clinical social workers, developmental pediatrician, and a child psychiatrist. Services available include: (1) medical consultation, (2) educational consultation and advocacy, (3) developmental, psychological, psychiatric, and temperament assessments, (4) individual/family/narrative therapy, (5) home visits, (6) support and treatment groups for parents and children, (7) infant mental health program that includes dyadic infant/toddler and parent groups, assessment (Bayley Scales of Infant Development), home visitation/consultation and therapy.

Prerequisites

- Experience working with children and adolescents.
- Exposure to evidence-based treatments.
- Ability to deliver assessments/interventions to diverse patient populations
- Knowledge of commonly used psychological tests to assess children's cognitive, emotional and behavioral functioning.

Required Clinical Experiences (fellows complete 2 of these 3 sub-areas)

Adolescent DBT Clinic

- Provide individual Dialectical Behavior therapy for 2-4 cases
- Co-lead the multifamily skills group
- Attend weekly consultation team meeting
- Provide skills coaching
- Attend one (1) day intensive training for Adolescent DBT

Child and Adolescent CBT Clinic

- Maintain a caseload of 5 to 8 individual psychotherapy cases, with both individual and caregiver collateral treatment (caseload dependent on requirements of the other sub-emphasis areas)
- Provide supervision of psychology practicum students who also carry caseloads of 4 or 5 patients.
- Attend didactics on evidence-based treatments
- Attend individual and group supervision
- Attend supervision of supervision
- Provide phone screenings and initial assessment interviews

Foster Care/Adoption

- Psychological testing with both infants/toddlers and school-aged children with 3-5 clients over course of the year.

- Leading and participating in multidisciplinary case consultations with prospective adoptive parents and children in placement
- Individual and/or family therapy with 4-to 6-child clients at a time
- Group therapy with adopting parents and/or adoptee children
- Supervision of psychology externs in the area of testing and/or treatment
- Attendance and participation in ongoing Clinical Issues and Topics seminar
- Attendance and participation in the Infant-Toddler Child Development, Assessment and Treatment Seminar, and at least one other seminar/training (e.g., Parent Child Interaction Therapy)

Required Supervision

All fellow receive at least 4 hours of supervision per week, as a combination of 2 of these 3 sub-areas

- DBT
 - 1 hour individual supervision per week with Dr. Avina
 - 1.5 hours per week of group supervision as part of the DBT Consultation Team
- Child and Adolescent CBT
 - 1 hour individual supervision
 - 1 hour supervision of supervision
 - 1 hour of group supervision
- Foster Care/Adoption
 - Dr. Litvinov: 1.5 hour individual supervision per week
 - Group supervision 1.5 hour provided in weekly Clinical Issues seminar

Required Courses

- DBT
 - One day intensive DBT training (8 hours)
 - DBT Consultation Team Meeting (1.5 hrs/week)
- Child and Adolescent CBT
 - Evidence-Based Treatments for Common Disorders of Childhood and Adolescent (90 minutes each week from September through May)
 - Online TF-CBT training (8 hours)
 - Online PCIT training (8 hours)
 - Psychology Case Conference (1.5 hour per week)
 - Supervision of supervision (1 hour per week)

Elective Courses/Clinical Experiences

- Psychiatry Department Grand Rounds
- Child and Adolescent Psychiatry Grand Rounds
- CAP Disposition Meeting
- Child Psychological Assessment

Evaluation of Satisfactory Progress and Outcome

Fellows in the Child and Adolescent Psychiatry area of emphasis will be assessed using a competencies-based evaluation tool both at mid- and end-year; fellows are expected to obtain a rating of satisfactory (score=3) or above across the following competencies (especially by the end of the fellowship):

- Interpersonal Skills
- Psychological Assessment
- Research/Scholarly Activity/Program Evaluation
- Teaching/Training
- Consultation/Interdisciplinary Collaborations
- Diversity
- Ethics
- Self-Management/Metacompetencies
- Leadership Skills
- Supervisory Skills

Additionally, fellows' progress and outcomes will be assessed on an ongoing basis utilizing a wide range of methods, including:

- Supervision (i.e., individual and group), including review of charting/documentation practices, review of session recordings and/or in vivo supervision, observation of clinical care/consultation of patients, fidelity and adherence checklists, standardized, norm-based measures of patient symptoms,
- Participation and contributions to case conferences, meetings, rounds, etc.
- Consultation to medical and other treatment teams
- Feedback from other attending and supervisory faculty
- Review of mid- and year-end evaluations by supervised psychology externs
- Review of fellows' evaluations of the training program
- Pre-, mid-, and post-tests of knowledge acquisition

Goals and Objectives

Fellows in the Child and Adolescent Psychiatry emphasis area will be assessed using a competencies-based evaluation tool both at mid-year and end-year; fellows are expected to obtain a rating of satisfactory (score=3) or above across the following competencies (especially by the end of the fellowship):

- **Interpersonal Skills**
 - Ability to take respectful, compassionate and professional approach with diverse others and all levels of contact (patients, supervisors/attendings, staff, students)
 - Competence in functioning as the psychology representative on inter-and multi-disciplinary teams
- **Psychotherapy**
 - Ability to deliver a range of evidence-based and evidence-informed treatments (dependent on the fellow's selection of sub-area), including: Dialectical Behavior Therapy, Cognitive Behavioral Therapy for Depression and Anxiety Disorders (i.e., Coping Cat), Trauma Focused-CBT, Parent-Child Interaction Therapy, Alternatives For Families CBT, Psychological First Aid, Cognitive Behavioral Play Therapy, TIES Transition Model for Adoptive Families, ADAPT: Adoption Specific Psychotherapy, Child-Parent Psychotherapy, Parent-Child Interaction Therapy, Reflective Parenting, Mindful Parenting.
 - Ability to deliver services in the modalities (i.e., individual, collateral, family, and group) required by the aforementioned treatment manuals.

- **Psychological Assessment**
- **Research/Scholarly Activity/Program Evaluation**
 - Competent in understanding clinical research and incorporating findings into clinical practice.
 - Completion of a program evaluation project in an area of Child and Adolescent Psychiatry chosen by fellow.
- **Teaching/Training**
 - Assist faculty in teaching and training in child and adolescent evidence-based treatment models to clinic staff, other DMH staff, and externs.
- **Consultation/Inter- and Multi-disciplinary Collaborations**
- **Diversity**
 - Awareness, integration, monitoring of stimulus value including areas related to diversity
 - Assessment and integration of diversity in consultation, assessment, psychotherapy, supervision, teaching, research
 - Application of culturally competent practice of Child and Adolescent Psychiatry.
- **Ethics**
 - Ethical practice of psychology across consultation, psychotherapy, assessment, supervision, teaching, research, etc.
- **Self-Management/Metacompetencies**
 - Knowledge of one's scope of practice and professional limits
 - Development and refinement of metacompetency skills
 - Practice of timely and thorough charting, adherence to work hours and workplace regulations/policies, etc.
 - Implementation of self-care practices
- **Leadership Skills**
 - Effective participation and contribution to inter- and multi-disciplinary teams
- **Supervisory Skills**
 - Knowledge of supervision theory and supervisory skills limit
 - Development of evaluating supervisees and providing formative and constructive feedback
 - Competence in diagnostic evaluation and **assessment** of children and adolescents.
 - Competence in consulting with the multiple systems the child is embedded in (e.g., school, family, the legal system, Child Protective Services, the foster care system, social services).
 - Competence in the managing the daily activities associated with the practice of Child and Adolescent Psychiatry.