Rotation Title: Child Track Supplemental PARC (Anxiety Clinic) Rotation

Location: Bradley Hospital

Rotation Supervisor(s): Jennifer Herren, Ph.D. (Primary Supervisor)
Michael Walther, Ph.D.

1 Overview of the Rotation:
The purpose of the PARC Anxiety Clinic rotation is to allow trainees to gain more specialized and long-term experience in the assessment and treatment of children and adolescents with anxiety disorders, with an emphasis on pediatric Obsessive Compulsive Disorder (OCD). The patient population includes primarily outpatient child and adolescent cases with diagnoses including OCD, Generalized Anxiety Disorder, Separation Anxiety Disorder, Social Phobia, Panic Disorder, and school avoidance. Children with Selective Mutism, Trichotillomania, and Tic Disorders may be seen as well. Many of the patients have co-morbid medical problems and/or physical complaints. The focus of the training is on the delivery of principle based CBT. While specific CBT intervention is case and diagnosis dependent, use of exposure therapy is emphasized. Opportunities to use standardized diagnostic instruments for child anxiety disorders will be offered, as appropriate.

2 Achievement of Competencies:

Ethical and Legal Standards: Competencies in this area will be achieved through the demonstration of ethical practice within all clinical, research, and administrative/professional activities, as well as discussion of ethical/legal issues during supervision.

Professionalism and Self-Awareness: Competencies in this area will be developed by participating as a professional member of the multidisciplinary team, participating in ongoing educational activities, and reflecting on professional roles and responsibilities within the context of supervision.

Interpersonal and Communication Skills: Residents will demonstrate competencies in this area through their participation as a professional member of the multidisciplinary team, including opportunities to communicate data, ideas, recommendations, and feedback to others.

Assessment and Diagnosis: Competencies in this area will be developed through the completion of an initial diagnostic assessment and functional analysis of the patient’s presenting concerns. The initial diagnostic assessment is typically conducted using unstructured clinical interviewing. Residents may also have the opportunity to gain experience with the use of more structured diagnostic interviews.

Effective Intervention: Competencies in this area will be developed primarily through delivering flexible manual-based CBT protocols to anxious youth. Residents will also develop their intervention skills through videotape review, case presentations, and manual review. Treatment goals will be operationalized and evaluated over the course of treatment, and modifications to treatment made based on these results.

Consultation: Residents may have opportunities to consult with psychiatrists, primary care clinicians, and school personnel on issues relevant to their clients’ mental health.

Supervision and Teaching: Residents will have opportunities to participate in peer supervision and to provide feedback on other trainees’ case conceptualizations and intervention delivery.
### Research and Scholarly Activities
Residents will periodically have opportunities to review empirical articles relevant to the treatment of anxious youth and to comment on the clinical implications of these articles in peer supervision.

### Cultural and Individual Diversity
Residents will develop skills in this area through exposure to working with diverse patients and families. Patients may present with cultural and individual diversity across, but not limited to, the following areas: race and ethnicity, sexual orientation, co-occurring diagnoses, family risk factors, and parental psychopathology.

### Time Commitment
This rotation may be available for 4, 6, 8, or 12 months in duration. Supervision meetings are held Tuesdays from 1-3pm to supervise ongoing treatment cases and plan for cases that are being assigned. Clients are typically scheduled immediately after supervision. Clients may be scheduled at alternate times if that is preferred by the resident and approved by the primary supervisor.

### Duties & Responsibilities
Regular duties and responsibilities include the following: (1) participating in weekly peer supervision; (2) maintaining a caseload of 2 patients who are seen on a weekly or bi-weekly (every other week) basis; (3) videotaping therapy sessions for discussion in peer supervision; (4) reviewing the manuals to prepare for supervision and therapy sessions; (5) consulting with other relevant providers (e.g., pediatricians, psychiatrists, prior therapists) and people (e.g., teachers, guidance counselors) as needed; and (6) completing intake assessments and progress notes within 48 hours of patient contact.

### Time Table
Approximate weekly time table: peer supervision (2 hours), therapy sessions (2 hours), coordination of care, completion of necessary documentation, and preparation (as needed). Oversight of the resident’s time will be the responsibility of the primary supervisor, Dr. Herren.

### Methods of Teaching
The primary modalities of teaching include active role plays, video tape review, direct feedback, group discussion, manual review, article review, and didactic instruction. Didactics on the assessment and treatment of pediatric anxiety will also be provided, as needed.

### Treatment Units of Programs Involved
All treatment is delivered at Bradley Hospital, located at 1011 Veterans Memorial Hospital, East Providence, RI

### Supervision
Dr. Herren is the primary supervisor for the rotation. As such, she will oversee the resident’s time and experiences on the rotation, assuring that the caseload is adequate, the workload is reasonable, and that a minimum of 2 hours of group peer supervision is provided weekly. Individual supervision can be arranged, as needed. All rotation supervisors will be involved in leading peer supervision. They will provide oral feedback on a weekly basis in the context of supervision and will provide formal written feedback at the middle and end of the rotation. Supervisors are available for impromptu supervision and consultation between regularly scheduled supervision meetings, if needed. Residents are encouraged to solicit
additional supervision and/or feedback if they feel that it would be helpful in their clinical work or professional development.

9 **Relationship to Core Program:**

Training in the Anxiety Clinic rotation reflects the overall philosophy of the Brown Internship Program, which is based on the clinical science model. In addition to the outlined duties and responsibilities specific to the rotation, release time allows for attendance at various seminars, educational opportunities, additional clinical rotations, and a research placement.

10 **Designation of Key Liaison Personnel:**

Drs. Herren and Walther are responsible for the training and supervision of the clinical psychology residents on this rotation.

Jennifer Freeman, Ph.D. – Track Coordinator, Child Track

Elizabeth McQuaid, Ph.D., ABPP – Director, Brown Clinical Psychology Internship Training Program

11 **Criteria for Success:**

Successful residents will achieve ratings of “Satisfactory Progress” on all competencies that are available within this rotation. Plans will be made for residents to obtain further training, supervision, and/or remediation to address competencies that are rated as “Needs Improvement” or are otherwise identified as areas that require additional emphasis in training. This rotation will be one of several that is considered in an overall determination of resident "competence" at the completion of the internship period.