Rotation Title: Adult Track Mood Disorders Rotation

Location: Rhode Island Hospital

Rotation Supervisor(s):
- Abigail Mansfield Marcaccio, Ph.D. (primary supervisor)
- Tanya Tran, Ph.D., (Individual and group therapy supervisor)
- Rachel Ojserkis, Ph.D. (Individual & group therapy supervisor)
- Gabor L. Keitner, M.D.

1 Overview of the Rotation:

The Mood Disorders Program and the Inpatient Psychiatric Unit at Rhode Island Hospital provide intensive psychiatric treatment for outpatients and inpatients with a special emphasis on mood disorders, acute psychiatric crisis, family involvement in treatment, and a biopsychosocial approach. Each patient is treated by a multidisciplinary team, which formulates a treatment plan that is tailored to the specific needs and problems of the patient. Treatment is multidimensional and may involve combinations of individual psychotherapy, group therapy, family therapy, and psychopharmacological treatments.

One afternoon a week, clinical psychology residents also participate in the outpatient family therapy clinic in East Providence’s outpatient psychiatry clinic. Supervised by Abigail Mansfield, PhD, the clinic uses the McMaster approach to assess and treat families and couples using a cotherapy model. Residents sit in on sessions and become more active in cotherapy as the rotation progresses.

As part of clinical psychology residents’ experience on the inpatient unit, weekend coverage is included, which provides an opportunity to see a much broader range of patient problems. The frequency of the weekend coverage varies depending on how many medical students and clinical psychology residents there are (e.g. one in three weeks to one in six weeks).

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 conducting comprehensive assessments of patients in the Mood Disorders Program and Inpatient Psychiatric Unit at RI Hospital, and in the family therapy clinic. This may include differential diagnosis of subtypes of mood disorders as well as between mood disorders and other diagnoses, mental status evaluation, assessment of suicide risk and potential for violent behavior, and McMaster style family-based assessment.
Effective Intervention: Competencies in this area will be achieved through conducting individual and group therapy with patients in the Mood Disorders Program and family therapy with patients in the family therapy clinic. Treatment goals will be operationalized and evaluated over the course of individual and group-based treatments, and modifications to treatments made based on these results.

Consultation: Competencies in this area will be achieved through providing consultation to other treatment team members in areas of interest/expertise.

Supervision and Teaching: Opportunities may be available for residents to discuss supervision styles, strategies, and important factors in the supervisor/supervisee relationship. The resident typically does not have opportunities to provide direct supervision to others during this rotation.

Research and Scholarly Activities: Residents typically do not have opportunities to develop these skills during this rotation.

Cultural and Individual Diversity: Competencies in this area will be developed through exposure to diverse patients and families, supervision regarding assessment and treatment considerations relevant to work with diverse populations, and directed readings, when appropriate.

3 Time Commitment:
Rotations are 4 months in duration and the minimum hour requirement is 36 hours per week. Regarding weekend coverage responsibilities, duties will range from one in three weeks (Sat and Sunday) to one in six weeks. Dr. Tran will be available by pager in case the resident perceives there to be an urgent supervisory issue.

4 Duties & Responsibilities:
Regular duties and responsibilities include the following: (1) carry a case load of 3-5 inpatients on the inpatient psychiatric unit at Rhode Island Hospital, (2) conduct individual psychotherapy with inpatients as necessary, (3) participate in family assessment and therapy sessions, (4) help to conduct group therapy sessions, (5) attend treatment team meetings and staffings, (6) treat 1-2 outpatients with mood disorders using cognitive-behavioral psychotherapy, and (7) participate in family therapy clinic one afternoon per week and write up assessment reports for new cases.

5 Time Table:
Approximate weekly time table: patient caseload (12 – 14 hours), clinical rounds (2 hours), weekly attendance of clinical staff meetings (1 hour), group therapy (2 hours), Family Therapy Clinic (4 hours), supervision (3 hours), administrative duties (e.g., notes; 7-8 hours).

6 Methods of Teaching:
The primary modalities of teaching include role modeling, feedback, and one-to-one didactic instruction. Co-therapy is used in the family therapy clinic on Wednesday afternoons. Reading material is provided on a case-by-case basis, when indicated.

7 Treatment Units of Programs Involved:
Inpatient psychiatry unit (Jane Brown 4 and 5) at Rhode Island Hospital, Family Therapy Clinic at Rhode Island Hospital (Potter Building 3rd floor).

8 Supervision:
Supervision for this rotation will be coordinated by Abigail Mansfield-Marcaccio, PhD, Tanya Tran, PhD, Rachel Ojserkis, PhD, and Gabor L. Keitner, MD. Drs. Tran and Ojserkis
Alpert Medical School of Brown University  
Clinical Psychology Internship Training Program  
Rotation Description

will each provide a minimum of one hour a week supervision including direct monitoring progress of inpatient cases and psychotherapy interventions, as well as supervision of inpatient group therapy. Dr. Tran will provide supervision from a CBT orientation, and Dr. Ojserkis will provide supplementary supervision from an ACT perspective. Dr. Mansfield will provide a minimum of one hour a week of supervision of family therapy cases. Dr. Keitner will provide supervision of inpatient case management, team meetings, assessment and treatment sessions, and written documentation regarding inpatient contact.

<table>
<thead>
<tr>
<th>9 Relationships to Core Programs:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Training 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.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>10 Designation of Key Liaison Personnel:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Abigail K. Mansfield Marcaccio, Ph.D. is the primary supervisor for this rotation.</td>
</tr>
<tr>
<td>Lauren Weinstock, Ph.D., Adult Track Coordinator, Alpert Medical School of Brown University Clinical Psychology Internship Training Program</td>
</tr>
<tr>
<td>Elizabeth McQuaid, Ph.D., ABPP, Director of the Brown Clinical Psychology Internship Training Program.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>11 Criteria for Success:</th>
</tr>
</thead>
<tbody>
<tr>
<td>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 &quot;competence&quot; at the completion of the internship period.</td>
</tr>
</tbody>
</table>