

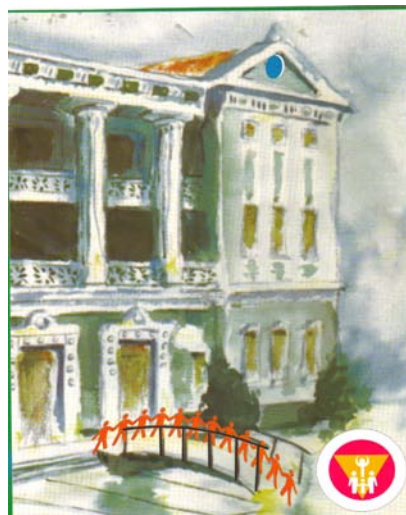
THE COMMUNITY MENTAL HEALTH CLINIC, INC.

CARLOS ALBIZU UNIVERSITY

SAN JUAN CAMPUS



PSYCHOLOGY INTERNSHIP PROGRAM BROCHURE



2009-2010 Training Year

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INTRODUCTION

The Community Mental Health Clinic, Inc. (CMCH) is a private non-profit outpatient organization affiliated with the Carlos Albizu University (CAU), located in San Juan, Puerto Rico. The CAU is a professional school of psychology which has both Ph.D. and Psy.D. Clinical Psychology Programs accredited by the American Psychological Association (APA). The CMHC considers students eligible to begin their clinical internship, after they have fulfilled the following requirements upon admission to the program:

1. Candidates have completed all pre-internship clinical practice and academic requirements of his/her doctoral program.
2. Candidates have obtained approval from their Academic Program Director to begin their internship.

Notes:

-“The CMHC follows the guidelines set forth by the APA and Postdoctoral Internship Centers regarding internship programs. Doctoral candidates must complete an internship of 2,000 hours. This pre-doctoral Internship should be completed during one calendar year, but arrangements can be made to complete it on a part-time basis, during the time span of two years.”

-“This internship site agrees to abide by the Association of Psychology Postdoctoral and Internship Centers (APPIC) policy that no person at this training facility will solicit, accept, or use any ranking-related information from any intern applicant.”

-The CMHC encourages individuals of diverse background with regard to age, color, disabilities, gender, nation, origin, religion, ethnicity, race, sexual orientation, and other diverse personal or demographic characteristics to apply.

SETTING

The Community Mental Health Clinic, Inc. (CMHC) is a private, non-profit outpatient community mental health treatment facility founded in 1966. The CMHC is affiliated to the Carlos Albizu University (CAU), a professional school of psychology. (See the Clinic Organizational Chart and Professional Directory in Appendix 1 and 2). The CAU is a private non-profit university level institution offering upper division Bachelor's, Master's, and Doctoral degrees in psychology. CAU is accredited by the Middle States Association of Colleges and Schools and is licensed by the Puerto Rico Council of Higher Education. Its Ph.D. and Psy.D. programs are accredited by the American Psychological Association (APA).

The CMHC serves the needs of low-income and minority clients in a broad spectrum of clinical areas. The site provides culturally-sensitive services to the greater San Juan community area and adjacent municipalities. In its affiliation with the CAU, the CMHC serves both as a practicum site for master and doctoral level students, as well as an internship program.

PHYSICAL FACILITIES

- Fifteen therapy rooms
- Two “in vivo” supervision rooms prepared with one way mirrors, video and audio equipment
- Two play therapy rooms
- Two family therapy rooms
- Six supervision rooms
- One waiting room

LOCATION

San Juan (from the Spanish *San Juan Bautista*, "Saint John the Baptist") is the capital and largest municipality in Puerto Rico. As of the 2000 census, it has a population of 433,733, making it the 42nd-largest city under the jurisdiction of the United States. San Juan was founded by Spanish colonists in 1521, who called it *Ciudad de Puerto Rico* ("City of Puerto Rico"). It is the oldest city in Puerto Rico as well as in the United States, and the second oldest European-established city in the Americas. Several historical buildings are located in San Juan, among the most notable are the city's former defensive forts, Fort San Felipe del Morro and Fort San Cristobál. These sites are visited annually by thousands of tourists, students, historians and archeologists. Today, San Juan serves as one of Puerto Rico's most important seaports, and is the island's manufacturing, financial, cultural, and tourism center. The city has been the host of numerous important events within the sports community, including the 1979 Pan-American Games, 1966 Central American and Caribbean Games, the 2006 World Baseball Classic, and the Caribbean Series.





The Morro



Old San Juan



San Juan Seaports



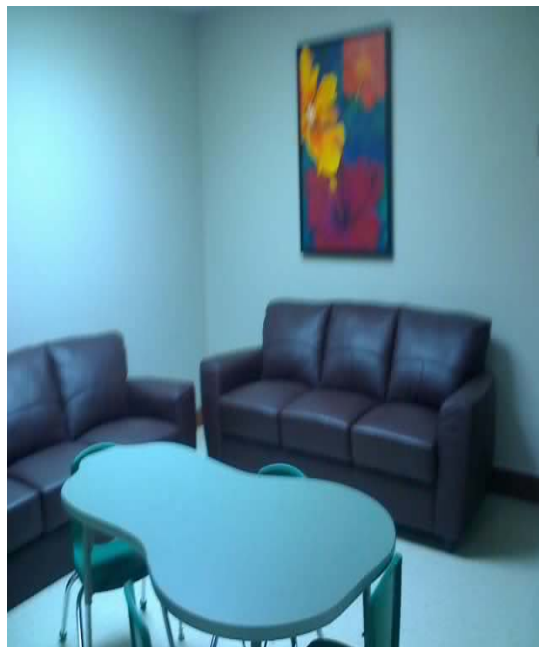
Play Therapy Rooms



Play Therapy Rooms



Student's Area



Waiting Room



Individual Therapy Rooms



Family Therapy Rooms



Family Therapy Room



Group Therapy Room

MISSION

- To serve as a training center for psychology graduate students where they can engage in supervised clinical work for the development of their professional skills and competencies.
- To provide mental and behavioral health services to the community under the principles and guidelines of ethical and professional standards.
- To foster research in clinical areas of interest for students and faculty.

VISION

- The **CMHC**, Inc. is committed to excellence in its contribution and development of a higher level of knowledge, skills, and competence of the students in the mental and behavioral health services.
- Through clinical experiences the students are trained to provide clinical services of optimal quality, with different empirically validated theoretical and practical models.
- The **CMHC** serves as focal point for the interaction of the theoretical and clinical practicum aspects for the professional development of the students
- The **CMHC** promotes respect for diversity and individual differences with a profound commitment for improvement of the quality of life in our communities.
- The **CMHC** provides behavioral and mental health services with the collaboration of a multidisciplinary professional team. (Social Workers, Psychiatrists, Psychologists, Speech Therapists, and Substance Abuse Advisors).

CLINICAL SERVICES

As a training center for interns in psychology the **CMHC** is designed to provide a diverse range of training experiences and activities for students. The Community Mental Health Clinic, Inc. offers the following services:

1. Initial assessment interviews.
2. Individual, couple, and group psychotherapy.
3. Family and conjoint therapy interventions.
4. Psychological and psychometric assessments for the purposes of school placement, diagnosis and/or treatment.
5. Psycho-educational workshops, consultation for schools and other community based organizations.
6. Individual and group orientation to parents and families.
7. Psychological consultation.
8. Specialized services to victims of sexual abuse, violent crimes, and domestic violence.
9. Services for children with violent and aggressive behavior.
10. Research projects with specific populations.
11. Crisis intervention.
12. Referral to psychiatric evaluation.
13. Consultation to private and public agencies.

PHILOSOPHY, OBJECTIVES, GOALS

The Internship experience aims to enhance the training of the intern as a clinical

psychologist. In general, interns are more autonomous and assume a greater level of responsibility than other students in lower levels of Practicum training. The interns in clinical psychology are expected to develop professional skills in four areas: psychotherapy, systemic family therapy, psycho diagnostic evaluation, and community consultation. They are encouraged to develop more specialized knowledge in an area, which addresses their own interests and abilities. Therefore, interns receive complete freedom to choose the professional experiences they wish to have during the internship year. An intern is expected to have enough discretion, ethical judgment, and sense of responsibility to work within a flexible structure. In fact, this is considered an important step towards preparing the intern to work independently as a professional psychologist. In conclusion, the Internship is considered the corner stone of the pre-doctoral training experience and a period of transition towards complete professional responsibility.

The Community Mental Health Community Clinic, Inc. Internship program seeks to achieve the following goals and objectives:

1. Provide training experiences that fosters the Intern's ability to integrate clinical theory and practice.
2. Recognize, use, and improve the skills and knowledge that interns brings with them to the clinical internship.
3. Facilitate the transition from graduate student to professional psychologist, fostering a sense of professional identity, consistent with the highest standards of clinical practice.
4. Increase the psycho-diagnostic skills through the systematic application of diagnostic criteria.

5. Increase the clinical competencies to administer, correct, interpret and write professional reports using normative tests in the areas of intelligence, learning, vocational interests, and personality.
6. Supervise the development of specific skills and professional judgment in accordance with the interns' interests and needs.
7. Establish and maintain a training program that fulfills the institution's mission of providing services to low income and at risk populations.
8. Refine the sense of professional judgment in the application of the code of ethics of the American Psychological Association, the Puerto Rico Association of Psychology, and the State Board of Licensing in the delivery of clinical services.
9. Instill an understanding of the dynamics of the therapeutic process in the relationship of interns to their clients through the supervision process.
10. Improve social commitment and responsibility with special emphasis to serve low income and high-risk clients.

THE COMMUNITY MENTAL HEALTH CLINIC PROGRAMS

Psychological Services for Victims of Crime Program

(This program will not be available for APPIC internship positions during 2009-2010)

The Program provides specialized psychological services to primary and secondary victims of crime. Its aim is to achieve the stabilization of the clients emotional, cognitive, and behavioral functioning after the trauma. Various psychological services are provided such as, crisis intervention, family, individual, and group psychotherapy, clinical consultation, psychological testing, primary preventive services, and psychological

preparation for the forensic experience. The interns provide direct psychological services to the victims at six different mental health clinics throughout Puerto Rico. The clinics are located in the municipalities of: Ponce, San Juan, Arecibo, Caguas, Humacao, and Mayagüez. Each intern receives two hours of direct clinical supervision weekly, as well as phone consultations, if deemed necessary. They also receive at least 24 hours of direct program training at the beginning of their internship, such as crisis intervention, program goals and objectives, and training in clinical protocols. In site training is provided by the Department of Justice in: victim's services, judicial, and forensic protocols. In this Program the intern will be exposed to children, adolescents, and adults who experience severe emotional problems due to: sexual abuse, domestic violence, alcoholism, substance abuse and/or dependence and compulsive behavior. Victims of other traumatic events such as family violence, assaults and homicide of family members, may also be seen as clinical cases by these interns. Four clinical supervisors provide leadership, mentorship, clinical guidance, and supervision. In order to be eligible to receive the services, which are free of charge, victims must be referred by prosecutors from the Puerto Rican Department of Justice and be willing to cooperate with the judicial system. The Program is sponsored by the Puerto Rican Department of Justice, specifically with Victims of Crime Acts (V.O.C.A) funds and with governmental funds. It is renewed annually.

Domestic Violence Program

The Domestic Violence Program provides specific psychological services to women victims of domestic violence and their children including: orientation and counseling, consultation, individual and group therapy, psychological assessment, and referrals. The purpose of the Project is to develop a program for women, victims of domestic violence and their children, providing them with the services essential to overcoming the trauma of the

experience and enabling them to acquire a sense of empowerment. The quality of the service is maximized by providing additional specialized resources. All services rendered are evaluated by our clients to determine their level of satisfaction.

The goal of our program is to assure that women, victims of domestic violence, have access to psychosocial care services. The mission is to provide the psychological and social support they need to cope with the abuse.

The objectives of the Program are as follows:

- Provide psychotherapeutic interventions and referrals to women victims of domestic violence and their children.
- Develop a network of services, with public and private agencies, to ensure that women, victims of domestic violence, receive the necessary support including psychological and social services essential to overcoming the trauma of their experience and enable them to acquire a sense of empowerment.
- Develop a support group for victims of domestic violence geared to the sharing of experiences, especially positive and healthy ones, and to strengthen the knowledge and skills acquired through the workshops.

The Program is sponsored by the Women's Advocate Office and receives referrals from government agencies, non-profit, and private organizations. Likewise, the Program enhances services through collaboration with pertinent public and private agencies. Each referral is screened through a telephone interview designed to evaluate the victim's situation and determine if the victim meets the program's criteria. All referrals are received through personal or telephone interviews. Each case is then discussed with the Program Director who determines the case assignment. All services are provided in a warm and safe environment considering the ethical standards of the profession.

The victim will then be contacted by the Intern to coordinate the sessions. The client initiates her therapeutic process by establishing the level of risk, developing an emergency or safety plan, working towards the reduction and elimination of the effects experienced by the violence exercised against her. In this way she will begin to acquire a sense of empowerment. The Program's main goal is to increase the number of women that overcome the traumatic experience and enter into a healing process so they may become survivors of domestic violence. Our evaluations have identified the lack of specific resources essential for women in the recovery process. It is also our goal then to provide psychological services so the victim can regain stability and optimum functioning. The clinical services are available only in the Clinic's main office in San Juan Monday through Thursday from 9:00am. to 9:00pm. and Friday and Saturday from 9:00am to 4:00pm.

Sexual Abuse Program

The SAP is a treatment Program for victims and survivors of sexual abuse and their families. It is funded by the Puerto Rico Department of Justice (V.O.C.A.) through a federal grant and strictly adheres to the policy of non-discrimination for reasons of race, gender, color, creed, handicap, lifestyle, or socioeconomic class. The goal of SAP is to offer psychological services in the modalities of: individual, family, group psychotherapy, as well as evaluations and counselling to children, adolescents, and adult survivors of sexual abuse and their families. An equally important component of this program is to provide clinical training in evidenced-based treatment modalities for sexually abused women. Specialized supervision to interns is also provided, in preparation for the provision of clinical services.

SAP provides psychological services to approximately 200 children, adolescents and adults between the ages of three to 50 and over. In recent years the adult population exceeded the youth population. Approximately the same number of male and female children is served.

However, significantly more female adults seek services in the sexual abuse program than male adults. Very few request for services are received from the adolescent population. Referrals from all geographic areas of Puerto Rico are received. Staff in the SAP program also provides orientation to professionals and family members who request information and procedures for referring cases to The Department of Family or other support agencies.

SAP offers an excellent opportunity for an Internship. As well as providing initial screening by phone for potential clients, the intern will conduct face to face interviews to determine eligibility of participants into the program. The intern and the Service Coordinator will assign cases to students in clinical training and psychotherapists. The intern will assist in crisis intervention, provide individual and family psychotherapy, as well as psychological evaluations.

Doctoral students, who request admission into SAP are interviewed by staff members. Once selected, they are expected to meet all requirements stipulated by the Department of Justice in regards to documentation: Health Certificate, Conduct Record, and Birth Certificate. These doctoral students make a commitment to a full year of both professional training in the area of sexual abuse and clinical practice under supervision. This may be done concurrently or consecutively. The program's curriculum provides specific training in the area of sexual abuse.

A spirit of collaboration and dedication prevail among staff and students of SAP. The clinical services are available only in the Clinic's main office in San Juan Monday through Thursday from 9:00am. to 9:00pm. and Friday and Saturday from 9:00 to 4:00pm.

The Sexual Abuse Support Program for Children and their Families

The Sexual Abuse Support Program for Children and their Families (SASPCF) is sponsored by The Family and Children Administration (FCA), a public agency affiliated to

the Puerto Rico Department of Family. This is a specialized Program which provides individual and group psychotherapy to sexually abused children and adolescents. The Program also provides family therapy and clinical support in order to help the victim's family members cope with the psychological impact of the sexual abuse. These psychotherapeutic services are provided by doctoral licensed psychologists, doctoral students, and interns in clinical psychology. The doctoral students as well as the interns must complete a one year training in matters related to the psychological consequences of sexual abuse before being assigned a client. The Program also performs forensic evaluations of allegations of sexual abuse, but this service is only provided by doctoral licensed psychologists and licensed clinical social workers. The psychotherapists do not perform forensic evaluations.

The SASPCF receives client referrals from the FCA social workers, then after case discussion with the clinical staff, the Program Director assigns each referral to a licensed psychologist, intern or practicum student. Every week the Program clinical staff conducts case conference meetings to review the client's psychotherapeutic treatment plans, goals, or the forensic evaluation process, and/or results. When the psychotherapeutic treatment plan goals have been achieved or when the forensic evaluation report is completed, the therapist or the evaluators, respectively, are responsible for reviewing their intervention results with the FCA referral social workers and their attorneys in preparation for the court litigation.

The interns who complete their internship in this specialized program have the opportunity of participating in a forensic scenario, refining their individual, group, and family clinical skills, and perform a broad variety of case consultations with The Family and Children Administration social workers, attorneys, physicians, prosecutors, and other professionals related to the legal system. The Program has a multidisciplinary work team integrated by (13) psychologists, (4) social workers, (2) consultants, (1) psychiatrist, (1) attorney, (1) case manager, (3) interns, (9) practicum students, (3) clinical supervisors, and

(3) administrative officers. In the last four years the Program has performed 1, 650 forensic evaluations and approximately 1,000 minors have received psychotherapeutics services. The clinical services are available in the SASPCF offices in San Juan, Caguas, and Ponce Monday through Friday from 8:00am - 4:30 pm.

Psychological Services Program for Children, Youth, and Adults (PSPCYA)

The PSPCYA program provides psychological services for a broad population which, requests clinical interventions for a wide variety of mental disorders or bio psycho- social stressors. The Clinic receives clients referred from public and private agencies, pre-schools, kindergartens, and elementary, intermediate, and high schools, as well as direct referrals from parents and guardians. These minors may present clinical disorders such as ADHD, Major Depression, Anxiety, PTSD, Reactive Attachment Disorder, Conduct Disorder, Eating Disorders, Oppositional-Defiant Disorder, Gender Identity Disorder, Learning Disorders, among others. These clients require individual or family therapy as well as psychological testing. The PSPCYA treats self- referred adults presenting similar psychopathology and other conditions related to family problems, substance abuse, mood, personality, and adjustment disorders, trauma, partner relational problems, occupational problems, among others. Most of the time, these populations require individual, couple, and/or family therapy. To have access to the psychological services an adult guardian of the minor or adult client may telephone the Clinic. The interns carry-out a telephone screening interview, and after discussing with the Clinical Director they assign the case according to the schedule of the practicum students. The Clinical Director and the staff supervisor are also involved in case assignment. To assign a case the clinical staff takes into consideration its complexity, and the students or interns clinical and academic experience. The Clinic admits a diverse population, with the exception of persons involved in legal disputes, those suffering severe chronic

mental disorders, or clients with long or chronic histories of substance abuse or other serious related disorders. During 2006, the PSPCYA program attended 1,104 clients: for a total of 6,237 individual psychotherapy sessions, 84 family and/or couple psychotherapy sessions, and 610 clients were provided with psychological testing services.

In November of 2005, the PPSYCA program started a new project providing psychological services at two public vocational high schools. The proposal is sponsored by the Department of Education through Title I funds, provided by the Carl Perkins Law. Students, from the Ramón Power and Giralt Schools located in San Juan and the Francisco Urgel School in Fajardo, and their parents receive individual, group, family, and couple psychotherapy. Other clinical services available for this population are crisis intervention and psycho-educational workshops. The school faculty also participates in the services through psycho-educational workshops and educational seminars. Interns and higher levels practicum students provide these services under the supervision of the clinical staff.

The interns assigned to PPSYCA provide individual, couple, family, and group psychotherapy and psychological assessment services. They are involved in crisis intervention management, student's supervision, and case consultation with the practicum students, school directors and social workers, judicial system social workers, among others, as well as CSMC psychologists and the staff supervisor. Moreover, they also have the opportunity to develop administrative and management skills focused on the requirements of a psychological services outpatient clinic. The interns may have the opportunity to complete the internship on a full time basis, during one calendar year or a part-time basis, during the time span of two years.

PROFESSIONAL SKILLS AT THE INTERNSHIP LEVEL

Within a basic frame of reference and their formal duties, the interns are expected to develop the specific skills during their training. This entails developing special skills in a particular area or being exposed to new experiences throughout their clinical training. Internship experiences must be acquired within each of the following basic areas:

DIRECT SERVICES

1. **Psychotherapy:** The interns are expected to engage in individual psychotherapy with a variety of clients including children, adolescents, adults, and elders. In addition to their own case load per week, interns are also responsible for supervising first year other practicum students and their own peer-review process under the supervision and guidance of licensed clinical psychologists.
2. **Family Therapy and Conjoint Therapy Interventions:** The intern is expected to develop competence in family and conjoint therapy. The interns will regularly be assigned clinical cases for family and/or conjoint therapy.
3. **Psycho-diagnostic Evaluations:** The intern is expected to display a high-level of competence in psychological evaluations including intellectual functioning, personality dynamics, psychopathology, and learning disorders. The interns will regularly be assigned assessment cases and will complete at least two full-battery assessments during the course of their training.

SUPERVISION AND EVALUATION OF INTERNS

Licensed clinical psychologists supervise all clinical activities performed by the interns. A minimum of two hours of formal supervision are provided each week. Supervision covers test administration, interpretation, therapeutic goals and interventions, ethical issues, and related activities. In addition to providing supervision, supervisors are responsible for co-

signing the intern's progress notes, all external correspondence, activity logs and reports. Group supervision is also provided for interns on a weekly basis, to encourage interaction and exposure to a wider variety of clinical and supervision issues. On occasion, interns will be required to obtain client permission to audio-record or videotape sessions for supervisor review. Faculty members are also available to provide additional consultation within their areas of expertise. During the year the interns are expected to demonstrate the following:

1. Increased competence in the basic areas of professional psychology.
2. Development of skills in one or more areas of special interest to the intern.
3. Ability to function independently as a psychologist, demonstrating good judgment, competent clinical skills for client interventions, and manage appropriately crisis intervention situations.

The intern is expected to demonstrate maturity and professional responsibility. The intern's evaluation will be based on three criteria's as defined in the Intern Evaluation Form.

The interns are expected to work a minimum of 30 hours per week (full-time) or 15 hours per week (part-time). In either case, the intern's schedule must consist of at least 25% of their time in Direct Services (psychotherapy and diagnostic evaluations). Approximately 75% of their time will be spent in administrative duties which consists of: assigning clients to practicum students, telephone screenings, personal and/or group Supervision. Malpractice insurance coverage is provided by the CMHC for activities performed by interns during the scope of their training. In addition, interns are encouraged to acquire their own professional liability insurance and to maintain their membership in the American Psychological Association and the Puerto Rico Psychology Association.

DIDACTIC EXPERIENCES

The interns are expected to participate in and/or provide seminars, case conferences, etc. in areas of their interest. The Carlos Albizu University has historically presented lectures and conferences of interest to psychologists and a wide range of other professionals through its Continued Education Program.

CONSULTATION

Interns are expected to employ a portion of their time during the year as psychological consultants. The type of consultation depends of the Clinical Program to which the intern belongs. Most of the time the interns perform consultation duties with social workers, psychologists from public and private agencies, physicians, lawyers, school directors, shelter directors and counselors, and police officers among others. In addition, Psy. D. interns, under the direct supervision of a licensed psychologist, provide clinical supervision to clinical practicum students in order to develop their supervision skills.

RESEARCH

Interns are encouraged to work on their dissertations during their internship year. Interns are permitted access to the resources of the Carlos Albizu Library (PsychLit, Athenas, interlibrary loans, as well as texts and journals, etc.), computer resources and facilities (word processing, spreadsheets, databases, statistical analysis packages), and may, with permission, request for volunteer student research participants from the undergraduate program.

CRISIS INTERVENTION

1. The interns are expected to assist, manage, and appropriately address all crisis' occurring in the CMHC, while the Supervisor is contacted. If the Supervisor is not available, the Clinical Director must be contacted immediately. The CMHC has developed a protocol to manage crisis interventios
2. Crisis handled by telephone should be referred to a psychiatrist or a mental health

emergency facility.

DIDACTIC EXPERIENCE

Fridays are set aside as a training day for interns at the CMHS facilities. All interns, regardless of the program in which they participate, are required to meet each Friday and attend the scheduled sessions. These sessions include:

Ethics in Psychology

The Ethic in Psychology Seminar meets during the first three weeks of the internship. Guest experts discuss topics related to the ethical practices of the profession and legal issues regarding ethics, professional relationships, and multicultural issues.

Crisis Intervention

The Crisis Intervention Seminar meets weekly for two weeks to discuss the management of a crisis in populations at risk.

Law & Psychology

The Law and Psychology Seminar meets weekly for six weeks. Experts in this area will present interns with an in-depth review of Puerto Rico's state law for the prevention and intervention of domestic violence, protection of the mentally ill, child sexual abuse allegations, forensic evaluation interview process, expert interview and report requirements, and child sexual abuse reports in court.

Violence, Family, & Children at Risk

The Violence, Family, and Children at Risk Seminar meets weekly for eight weeks. Staff and guest speakers review with the interns sexual abuse concepts as applied to children, adolescents, and adults. Examples of these topics include the psychological consequences of

sexual abuse, sexual abuse theoretical conceptualizations and diagnosis, indicators of sexual abuse, posttraumatic stress disorders in children and adult survivors of sexual abuse, typical and atypical sexual behavior in children, and psychosocial aspects of domestic violence.

Systems & Tools in Psychotherapy

The Systems and Tools in Psychotherapy Seminar meets for fifteen weeks and is designed to assist interns in becoming more proficient in psychotherapeutic strategies and therapy to assist abused children, adolescents, and adults to overcome their traumatic experiences. Domestic violence and other trauma experiences are reviewed and discussed. Individual, family, and group therapeutic models are explored and reviewed. Cognitive behavioral therapy, child play therapy, survival therapy, memory and recovery, and critical incident stress management are an example of the themes discussed.

Supervision in Psychology

The Supervision in Psychology Seminar meets for two weeks. The purpose of this seminar is to provide the interns with an understanding of supervision and how it will apply to their work setting. A presentation of the theoretical and practical aspects of the most widely used models of clinical supervision is reviewed with the interns. In addition, the legal aspects of supervision are discussed and the ethical guidelines of the profession regarding the supervisors responsibility are analyzed.

Health

The Health Seminar meets for three weeks and is orientated at allowing the intern a broader understanding of sexually transmitted diseases, the neuropsychological aspects of the neurobehavioral interview and how this impacts the individual's mental status, and the use of pharmacology in the treatment of mental disorders.

Evaluation & Assessment

The Evaluation and Assessment Seminar meets weekly for two weeks. The goal is to provide the interns with a review of the Wechsler Intelligence Scales and review the interpretative guidelines for Puerto Rico. The interns will also learn how to interpret the Wechsler Intelligence Scales from a neuropsychological perspective. The seminar also provides the interns with a review of current literature related to assessment and a discussion of ethical dilemmas regarding testing.

Gender & Sexuality

The Gender and Sexuality Seminar meets once for a review of homophobia, stigmatization, and social exclusion in Puerto Rico. The goal is to increase awareness of the interns of Puerto Rico’s gender social construction and socially accepted prejudices.

Case Analysis & Presentation

The Case Analysis & Presentation Seminar meets for six weeks. The goal is to develop the intern’s skills in the process of case discussions. Through case discussions the program strives to assist the interns in becoming more proficient in relating symptoms and signs of pathology for diagnostic criteria. Case discussions also provide the opportunity to discuss different or difficult cases which the intern may have encountered. Key topics of discussion in these sessions are child and adolescent sexual abuse treatment models and clinical cases of adult sexual abuse survivors.

INTERNSHIP SCHEDULE

Full Time/I Year (40hours/Weekly)

DIRECT SERVICES	%	Annual	Weekly
Individual, group, and family/conjoint psychotherapy	4.2 %	884 hrs	17 hrs

Psycho-diagnostic Evaluation	5.2%	104 hrs	2 hrs
Supervision	5.2%	104 hrs	2 hrs
Didactic (training)	10.4%	208 hrs	4 hrs
Group supervision	5.2%	104 hrs	2 hrs
Case assignment (clinical work)	9.0%	180 hrs	5 hrs
Case Conferences/Presentations	5.2%	104 hrs	2 hrs
Research	10.4%	208 hrs	4 hrs
Consultation	5.2 %	104 hrs	2 hrs

ADMISSION POLICY

Selection and admission to the CMHC training program is the responsibility of the Clinical Director with the assistance of the Clinic Program Directors, the Administrative Director, and the Supervisors. The CMHC bases admission primarily on individual merit and does not discriminate on the grounds of age, sex gender, color, ethnic group, sexual orientation, race, religion, national origin, or disability. The CMHC seeks to include interns from diverse socioeconomic, geographic, ethnic, religious, and ideological sectors of society. The CMHC accepts interns from the Carlos Albizu University as a first choice and if there any remaining internship positions, students from other universities are considered. Therefore, graduate students from other universities are welcome to apply. The CMHC requires applicants to be bilingual in the Spanish and English languages, since the population we serve is primarily Spanish-speaking and all documentation is done in the Spanish language. We encourage students from other universities to apply to our internship program. This Internship site agrees to abide by the APPIC policy that no person at this training facility will solicit, accept,

or use any ranking-related information from any intern applicant.

ADMISSION CRITERIA

Applicants should reflect the following in their personal statements and letters of reference for admission:

PERSONAL TRAITS

1. Capacity for empathy, sensitivity and sincerity.
2. Enthusiasm, motivation for training, and demonstration of interest in their career.
3. Resilience and persistence in goal attainment.
4. Personal security, a high level of self-worth, confidence, and ability to perform efficiently in a clinical setting.
5. Personal stability and maturity – evidence of knowledge and awareness of clinical strengths and level of competency.
6. Openness and personal flexibility – ability to receive feedback and apply constructive criticism to improve performance.
7. Communication skills – ability to communicate effectively and sensitively with clients and coworkers.
8. Culturally sensitive – ability to interact with individuals, families, and groups from a diverse variety of cultural and intellectual backgrounds.

COGNITIVE ABILITIES

1. Analytic abilities — proficiency in quantitative, deductive, and inductive reasoning.
2. Ability to verbally communicate with others accurately and objectively without bias or prejudice.

3. Ability to write clearly at a professional level.

PROFESSIONAL QUALITIES AND EXPERIENCE

1. Definite interest in working with clients and a clear understanding of one's motivation for assisting others.
2. Demonstration of initiative, responsibility and reliability in applicant's vocational and academic field.

EDUCATIONAL BACKGROUND

1. Enrollment and good academic standing in a Psy.D. or Ph.D. program.
2. Prior practicum experience of at least 780 hours with diverse populations. The criteria are used in the formulation of an overall assessment of the applicant's readiness to undertake the Internship. The intern is expected to continue to meet these criteria throughout the internship. Intern progress is evaluated periodically (Intern Evaluation Form).
3. Be fully bilingual (Spanish and English).

Application Procedures and Documents

The CMHC is a member of the Association for Post-doctoral and Psychology Internships Centers (APPIC) and we are currently participating in their matching Program. In order to apply to each of the CMHC programs, the applicant must register in the APPIC Matching Program. You can obtain instructions and forms to register for the match, from the Matching Program web site at www.natmatch.com/psychint. You can obtain the CMHC

internship brochure at www.albizu.edu. (San Juan Campus>Clinica)

In the selection process the CMHC seeks Carlos Albizu University graduate students and will accommodate graduate students from other universities only to fill positions not filled by Carlos Albizu students.

The following documentation is required to complete the application process.

1. A complete standard APPIC application and corresponding documents. These documents can be downloaded from the APPIC web site (www.appic.org).
2. A minimum of two letters of recommendations from current faculty members.
3. Updated curriculum vitae. Please include dissertation title and advisors, professional publications, local and international presentations, fellowships, and awards.
4. An official transcript of graduate work. This must be sent directly to us from the applicant's University.
5. Examples of two psychological assessment reports and two theoretical case conceptualizations. Please be advised that the client's identity and confidentiality should be assured.
6. Interview - Applicants are encouraged to arrange a site visit by contacting the CMHC Clinical Director at: jrodriguezq@sju.albizu.edu or by phone at (787) 724-2222, ext. 1106. All documents must be sent to:

José Rodríguez Quiñones, Ph.D, Clinical Director

Community Mental Health Clinic, Inc.

PO Box 9023711

San Juan, PR 00902-3711

The applicants files will be reviewed by the selection committee and an interview will be scheduled for selected candidates. The applicant will be notified of acceptance on the

second Monday of February according to APPIC Guidelines. Applicants who are not accepted will be notified of this at the earliest possible date, after the second Monday of February.

STIPENDS

The current intern stipend is \$13,200 annually. This stipend is divided into 12 pay periods for the year.

GRIEVANCE PROCEDURES

DUE PROCESS FOR ADMINISTRATIVE CONCERNS

Interns, trainees, volunteers and staff are subject to the policies and procedures outlined in the CMHC Administrative and Clinical Manual Procedures. Training on these policies is made available to all interns, practicum students, volunteers, and staff members each summer prior to the beginning of the new Internship year.

UNACCEPTABLE BEHAVIOR AND DUE PROCESS FOR TRAINING CONCERNS

Who is covered?

This due process procedure covers all interns, practicum students, and volunteers providing services to the clinic.

DEFINITION OF UNACCEPTABLE BEHAVIOR

Unacceptable Behavior covers conduct, which interferes with the professional functioning of the individual observed in one or more of the following ways:

1. Failure and/or reluctance to attain and assimilate professional standards into one's

inventory of professional behavior.

2. Failure to acquire the professional skills required to meet an acceptable level of competency.
3. An inability to control personal stress, strong emotional reactions and/or psychological dysfunction, which interfere with professional functioning.

It is a professional judgment as to when an intern's behavior becomes problematic rather than of concern. Interns may exhibit behaviors, attitudes, or characteristics that are of concern and require remediation, but are not unexpected or excessive for professionals in training. Problems typically become identified as impairments when they include one or more of the following characteristics:

1. The intern does not acknowledge, understand, or address the problem when it is identified.
2. The problem is not merely a reflection of a skill deficit which can be rectified by academic or didactic training.
3. The quality of services delivered by the intern is sufficiently negatively affected.
4. The problem is not restricted to one area of professional functioning.
5. A disproportionate amount of attention by training personnel is required.
6. The trainee's behavior does not change as a result of feedback, remediation efforts, and/or time.

REMEDICATION AND SANCTION ALTERNATIVES

It is important to have meaningful ways to address unacceptable behavior once it has been identified. In implementing remediation or sanction interventions, the training staff must be mindful and balance the needs of the intern, the clients involved, members of the intern training group, the supervision staff, and other CMHC personnel.

A. Informal Stage

This stage is flexible and pursues a quick resolution of the problem. It can be resolved by discussion among the involved parties. The intern's Clinical Supervisor will be the person responsible of notifying the intern promptly about the deficiency and the specific steps required to correct it. The notification may be oral or written depending on the magnitude of the deficiency, but should be specific and detailed.

1. **Verbal Warning** alerts the intern of the need to correct unacceptable behavior identified by the supervisor.
2. **Written Acknowledgment** to the intern formally notifies that:
 - a. The Clinical Director is aware of and concerned with the performance rating.
 - b. The concern has been brought to the attention of the intern.
 - c. The Clinical Director will work with the intern to rectify the problem or skill deficits.
 - d. The behaviors associated with the rating are not significant enough to warrant a more serious action.

The written acknowledgment will be removed from the intern's file when the intern responds to the concerns and successfully completes the internship.

B. Formal Stage

The grievance procedure may need to escalate to a formal stage when the informal stage fails to achieve the desired results.

1. **Written Warning** to the intern indicates the need to discontinue an inappropriate action or behavior. This letter will contain:
 - a. A description of the intern's unsatisfactory performance.
 - b. Actions needed by the intern to correct the unsatisfactory behavior.
 - c. The time line for correcting the problem.
 - d. What action will be taken if the problem is not corrected.

- e. Notification that the intern has the right to request a review of this action.

A copy of this letter will be kept in the intern's file. Consideration may be given to removing this letter at the end of the internship by the Clinical Director in consultation with the intern's supervisor. If the letter is to remain in the file, documentation should contain the position statements of the parties involved in the dispute.

2. **Schedule of Modification** is a time-limited, remediation-oriented, closely supervised period of training designed to return the intern to a more fully functioning state. Modifying an intern's schedule is an accommodation made to assist the intern in responding to personal reactions to environmental stress, with the full expectation that the intern will complete the internship. This period will include, more closely scrutinized supervision conducted by the regular supervisor in consultation with the Clinical Director. Several possible and perhaps concurrent courses of action may be included in modifying a schedule. These include:
 - a. Increasing the amount of supervision, either with the same or another supervisor.
 - b. Change in the format, emphasis, and/or focus of supervision.
 - c. Recommending personal therapy.
 - d. Reducing the intern's clinical or other workload.
 - e. Requiring specific academic coursework.

The length of a schedule modification period will be determined by the Clinical Director in consultation with the primary supervisor. The termination of the schedule modification period will be determined, after discussions with the intern, by the Clinical Director in consultation with the primary supervisor.

3. **Probation** is also a time-limited, remediation-oriented, more closely supervised training period. Its purpose is assessing the ability of the intern to complete the internship and to return the intern to a more fully functioning state. Probation

defines a relationship in which the Clinical Director systematically monitors for a specific length of time the degree to which the intern addresses, changes, and/or otherwise improves the behavior associated with the inadequate behavior. The intern is informed of the probation in a written statement that includes:

- a. The specific behaviors associated with the unacceptable conduct.
- b. The recommendations for rectifying the problem.
- c. The time frame for the probation, during which the problem is expected to be ameliorated.
- d. The procedures to ascertain whether the problem has been appropriately rectified.

If the Clinical Director determines that there has not been sufficient improvement in the intern's behavior to remove the Probation or Modified Schedule, then the Clinical Director will discuss with the primary supervisor the possible courses of action to be taken. The Clinical Director will communicate in writing to the intern that the conditions for revoking the probation or modified schedule have not been met. This notice will include the course of action, which the Clinical Director has decided to implement. These may include continuation of the remediation efforts for a specified time period or implementation of another alternative. The Clinical Director will communicate to the University Internship Director of the matter and if the intern's behavior does not change the intern will not successfully complete the internship.

4. **Suspension of Direct Service Activities** requires a determination that the welfare of the intern's client has been jeopardized. Such activity would require notification to the CMHC Ethical Committee, and would first subject the intern to any disciplinary action. Therefore, direct service activities will be suspended for a specified period as determined by the Clinical Director. At the end of the suspension period, the intern's supervisor in consultation with the Clinical Director

will assess the intern's capacity for effective functioning and determine when direct service can be resumed.

5. **Administrative Leave** involves the temporary withdrawal of all responsibilities and privileges as determined by the Clinical Director, in accordance with CMHC Policies and Procedures. If the probation period, suspension of direct service activities, and/or administrative leave interferes with the successful completion of the training hours needed for completion of the internship, this will be noted in the intern's file and the intern's Academic Program Director will be informed, as well the Internship Director . The Clinical Director will inform the intern of the effects the administrative leave will have on the intern's stipend, and successful completion of the internship.
6. **Dismissal** from the Internship involves the permanent withdrawal of the CMHC responsibilities and privileges, as determined by the Clinical Director, in accordance with CMHC Policies and Procedures. When specific interventions do not, after a reasonable time period, rectify the impairment and the intern seems unable or unwilling to alter his/her behavior, the Clinical Director will discuss with the intern's Academic Program Director the possibility of termination from the training program or dismissal from the CMHC. Either administrative leave or dismissal would be invoked in cases of severe violations of the APA and/or the Puerto Rico Psychologist Board Code of Ethics, or when imminent physical or psychological harm to a client is a major factor, or the intern is unable to complete the internship due to physical, mental or emotional illness. When an intern has been dismissed from the internship program, the Clinical Director will communicate to the intern's Academic Program Director that the intern has not successfully completed the internship.

C. Procedures for Responding to Inadequate Performance by an Intern

If an intern receives an "unacceptable rating" from any of the evaluation sources in any of the major categories of evaluation, or if a staff member has concerns about an intern's behavior (ethical or legal violations, professional incompetence) the following procedures will be initiated:

1. The staff member will consult with the Clinical Director to determine if there is reason to proceed and/or if the behavior in question is being rectified.
2. If the staff member who brings the concern to the Clinical Director is not the intern's primary supervisor, the Clinical Director will discuss the concern with the intern's primary supervisor.
3. If the Clinical Director and primary supervisor determine that the alleged behavior in the complaint, if proven, would constitute a serious violation, the Clinical Director and the staff member who initially brought the complaint along with the primary supervisor will document the concern.
4. The Clinical Director will discuss with the interns Academic Program Director the performance rating or the concern.
5. The Clinical Director, the primary supervisor, and the interns Academic Program Director may meet to discuss possible courses of actions.
6. Whenever the Clinical Director or the intern's Program Director has made a decision about an intern's training program or status in the CMHC, the Clinical Director will inform the intern in writing and will meet with the intern to review the decision. This meeting may include the primary supervisor. If the intern accepts the decision, any formal action taken may be communicated in writing to the intern's Academic Program Director. This notification indicates the nature of the concern and the specific alternatives implemented to address the concern.

7. The intern may choose to accept the conditions or may choose to challenge the action. The procedures for challenging actions are presented below.

D. Due Process: General Guidelines

Due process ensures that decisions about interns are not arbitrary or personally biased. It requires that the CMHC identify specific evaluative procedures that are applied to all interns, and provide appropriate appeal procedures. All steps need to be appropriately documented and implemented. General due process guidelines include:

1. During the orientation period, communicating to the interns, in writing, the program's expectations related to professional functioning and discussing these expectations in both group and individual settings.
2. Stipulating the procedures for evaluation, including when and how evaluations will be conducted. Such evaluations should occur at meaningful intervals, at least twice during the academic semester.
3. Articulating the various procedures and actions involved in making decisions regarding impairment.
4. Communicating, often, with graduate programs about any suspected difficulties with interns and when necessary, seeking input from these academic programs about how to address such difficulties.
3. Instituting, when appropriate, a remediation plan for identified inadequacies, including a time frame for expected remediation and consequences of not rectifying the inadequacies.
5. Providing a written procedure to the intern that describes how the intern may appeal the program's action.
6. Ensuring that interns have sufficient time to respond to any action taken by the program.

7. Using input from multiple professional sources when making decisions or recommendations regarding the intern's performance.
8. Documenting, in writing and to all relevant parties, the actions taken by the program and its rationale.

DUE PROCESS: PROCEDURES

The basic meaning of due process is to inform and to provide a framework to respond, act, or dispute. When a matter cannot be resolved between the Clinical Director and the intern or CMHC staff, the steps to be taken are listed below.

A. Grievance Procedure

There are two situations in which grievance procedures can be initiated.

1. 1. It is the policy of CMHC to encourage fair, efficient, and equitable solutions for problems that arise out of the participation in the internship program. In the event that an intern encounters any difficulties or problems (e.g., poor supervision, unavailability of supervisor, evaluations perceived as unfair, workload issues, personal disagreements, other staff conflict) during his/her training experiences, an intern can:
 - a. Discuss the issue with the staff member(s) involved.
 - b. If the issue cannot be resolved informally, the intern should discuss the concern with the Clinical Director. The Clinical Director may meet with the intern and the staff member involved individually or with both the intern and the staff member to assist in mediation of the situation. Possible solutions may include, but are not limited to: reassessment of the intern's evaluation, reassessment of the intern's workload, providing additional supervision to the intern, consultation for the

supervisor, reassignment of the intern to another supervisor, etc. The intern's academic program will be informed of the concern and its resolution.

- c. If the issue cannot be resolved by the Clinical Director, the intern should discuss the concern with the intern's Academic Program Director. The Academic Program Director may meet with the intern, the staff member involved, and the Clinical Director individually or as a group to assist in mediation of the issue. Possible solutions may include, but are not limited to: reassessment of the intern's evaluation, reassessment of the intern's workload, providing additional supervision to the intern, consultation for the supervisor, reassignment of the intern to another supervisor, etc. The Academic Program Director will inform of the concern and its resolution.
- d. If the issue cannot be resolved with the Academic Program Director, the Academic Program Director will convene a Quality Assurance Committee, including at least three senior clinical supervisors. This committee will meet with the parties involved within five (5) working days of receiving notice to convene. The committee will notify their decision within ten (10) working days. The staff members will be selected minimizing conflicts of a dual relationship nature with the intern. In an event of a conflict based on dual relationship with the Academic Program Director, the formation of the Quality Assurance Committee will be the responsibility of the CMHC Administrative Director.
- e. If the Quality Assurance Committee cannot resolve the issue, the intern can request that a Review Panel be convened to hear the grievance:
 - The intern should file a formal complaint, in writing and provide all supporting documents, with the Clinical Director. If the intern is challenging a

formal evaluation, the intern must do so within ten (10) working days of receiving the evaluation.

- Within five (5) working days of filing a formal complaint, the Clinical Director must consult with the Academic Program Director and implement the Review Panel procedures as described below.
2. If a training staff member has a specific concern about an intern, the staff member should:
- a. Discuss the issue with the intern(s) involved.
 - b. If the issue cannot be resolved informally, the training staff member should discuss the concern with the Clinical Director. The Clinical Director may meet with the intern and the staff member involved individually or with both the intern and the staff member together, to assist in mediation of the issue. The Academic Program Director will be informed of the concern and its resolution.
 - c. If the issue cannot be resolved by the Clinical Director, the training staff member should discuss the concern with the Academic Program Director. The Academic Program Director may meet with the intern, the staff member involved, and the Clinical Director individually or as a group to assist in mediation of the issue. The Academic Program Director will be informed of the concern and its resolution.
 - d. If the Academic Program Director or Clinical Director cannot resolve the issue, the training staff member can request that a Quality Assurance Committee be convened to hear this grievance.
 - e. If the Quality Assurance Committee cannot resolve the issue, the training staff member can request that a Review Panel be convened to hear this grievance.
 - The training staff member should file a formal complaint, in writing and provide all supporting documents, with the Clinical Director.

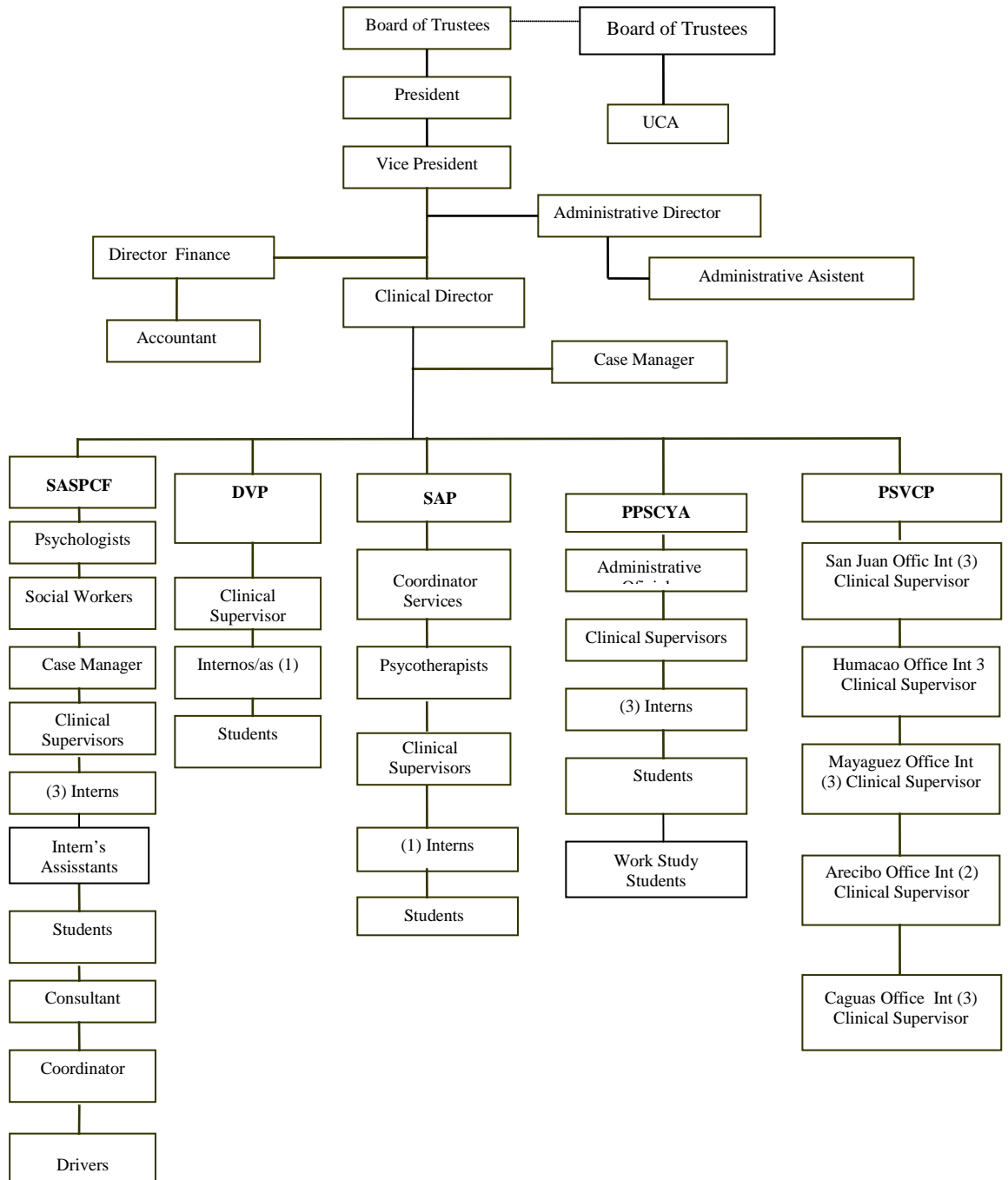
- Within five (5) working days of a formal complaint, the Clinical Director must consult with the Academic Program Director and implement a Review Panel procedure as described below.

B. Review Panel and Process

1. When needed, a review panel will be convened by the Clinical Director. The panel will consist of three staff members selected by the Clinical Director with recommendations from the Academic Program Director and the intern involved in the dispute. The intern has the right to hear all facts with the opportunity to dispute or explain the behavior of concern. Interns will be strongly encouraged to consult with their academic training program for advice and guidance should the intern meet with the Review Panel.
2. Within five (5) working days, a hearing will be conducted in which the challenge is heard and relevant material presented. Within three (3) working days of the completion of the review, the Review Panel submits a written report to the Clinical Director, including any recommendations for further action. Recommendations made by the Review Panel will be made by majority vote.
3. Within three (3) working days of receiving the recommendation, the Clinical Director will either accept or reject the Review Panel's recommendations. If the Clinical Director rejects the panel's recommendations, due to an incomplete or inadequate evaluation of the dispute, the Clinical Director may refer the matter back to the Review Panel for further deliberation and revised recommendations or may make a final decision.
4. If referred back to the panel, they will report back to the Clinical Director within five (5) working days of the receiving the request of further deliberation. The Clinical Director then makes a decision regarding what action is to be taken.

5. The Clinical Director informs the intern, staff members involved, and if necessary members of the training staff, of the decision and any action taken or to be taken.
6. If the intern disputes the Clinical Director's final decision, the intern has the right to appeal to the President of the CAU. The President has 30 working days to make a final decision about the dispute. His/her decision will be informed in writing to the intern. This is the last internal resource available to the intern.

Community Mental Health Clinic, Inc Organization Chart



Appendix 2

Community Mental Health Clinic Professional Directory			
Office Telephone			
(787) 724-2222 / (787) 724-2272			
(787) 724-2253 / (787) 724-2976			
Fax Number (787) 977-4833			
Position	Name	e-mail	Telephones & Ext.
Administrative Director	Rafael Ortíz	rortiz@sju.albizu.edu	1114
Clinical Director	José Rodríguez, Dr.	jrodriguezq@sju.albizu.edu	1106
Administrative Assistance	Asha Arnold	aarnold@sju.albizu.edu	1582
Case Manager	Mariam Cruz Nieves	mcruz@sju.albizu.edu	1140
Administrative Officer and Record Room	Edgardo Rivera	erivera@sju.albizu.edu	1205
Administrative Officer and Record Room	Manuel Marquez	mmarquez@sju.albizu.edu	1205
Administrative Officer and Record Room	Jesús Carrión	jcarrión@sju.albizu.edu	1205
Receptionist	Betzaida Cordero	bcordero@sju.albizu.edu	1566
Receptionist	Virgen Santiago	vsantiago@sju.albizu.edu	1575
Intern			1201
Intern			1202
Intern			1203
Psychological Services for Victims of Crime Program			
Program Director	Sonia Santiago, Dr.	ssantiago@sju.albizu.edu	1422
Program Coordinator	Emma Lizardi, Dr.	elizardi@sju.albizu.edu	1415
Interns			1420
Caguas Clinic			787-703-1288 787-438-5667
Humacao Clinic			787-285-4630 787-475-6568
Arecibo Clinic			787-815-3872 787-738-5668 787-438-5673
Mayagüez Clinic			787-805-5280 787-438-5676 787-438-5674
Domestic Violence Program (DVP)			
Program Director	Victoria Ruiz, Dr.	cgonzalez@sju.albizu.edu	1107
Psychotherapist	Sonia Huertas, Dr.	shuertas@sju.albizu.edu	1107
Intern			1117
Sexual Abuse Program (SAP)			
Program Director	Noel Quintero, Dr.	nquintero@sju.albizu.edu	1581
Coordinator	Johanna Ortíz	jortiz@sju.albizu.edu	1516 / 1204
Psychotherapist	Candyce Rekart, MS	crekart@sju.albizu.edu	1516 / 1204
Sexual Abuse Program for Children and their Families (SAPCF)			

Program Director	Larry E. Alicea, MSW	lalicea@sju.albizu.edu	1416
Program Coordinator	Ricardo Ferrer	rferrer@sju.albizu.edu	1522
Consultant	Delia P. González, Dr.	dgonzalez@sju.albizu.edu	1413
Case Manager	Sylvia Hilerio, MRC	shilerio@sju.albizu.edu	1518
Forensic Evaluator	Estela López, Dr.	elopez@aju.albizu.edu	1404
Forensic Evaluator	Veronica Díaz, Dr	mortiz@sju.albizu.edu	1423
Forensic Evaluator	Eunice Vázquez, MSW	rramirez@sju.albizu.edu	1414
Forensic Evaluator	Mariglory Rosa, Dr.	mrosa@sju.albizu.edu	1404
Psychotherapists	Michelle López, Dr	mlopez@sju.albizu.edu	1423
Psychotherapists	Gretza Piñeiro, Dr.	gpineiro@sju.albizu.edu	1112
Psychotherapist	Daisy Marzán, Dr.		1423
Supervisor	María M. Ramos, Dr.		1203
Supervisor	Estela López, Dr.	elopez@aju.albizu.edu	1404
Supervisor	Emma Lizard, Dr.	elizardi@sju.albizu.edu	1415
Interns			1403
Caguas Clinic			787-703-1288 787-438-5667
Service Coordinator			
Psychotherapist	Vilmania Mambrú, Dr.		
Forensic Evaluator (2)	Frances Fernández, Dr.		
Ponce Clinic			787-813-5734 787-438-5669 787-438-5672
Service Coordinator	Keila Cruz		
Forensic Evaluator	Sarai Irizarry, MSW		
Forensic Evaluator	Yeida E. Cruz, MSW		

