



Genesis Doctoral Internship in Clinical Psychology

Program Manual

2022-2023

Primary Location:
Genesis Counseling Center
2202 Executive Drive
Hampton, VA 23666-6604

With locations in Chesapeake, Hampton, Norfolk, Suffolk, Williamsburg, and Yorktown, VA

www.genescounselingcenter.com

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Section I: Internship Program in Clinical Psychology

A. Overview

The Genesis Counseling Center Doctoral Internship in Clinical Psychology (referred to hence as “Genesis Internship Program”) offers training to two interns each year. This manual provides information regarding the internship for interns and their supervisors.

Genesis Counseling Center interns are subject to the general policies and procedures as outlined in this manual. Each intern is given access to this manual and a hard copy upon orientation.

B. Introduction, Training Aim, and Training Philosophy

Introduction

Genesis is an outpatient, multi-site group practice. Genesis has a long-standing history and reputation for providing excellent training experiences and preparing students and professionals in the Eastern Virginia area for successful practice as future Licensed Clinical Psychologists. The Genesis Internship Program is a full-time internship and structured for interns to take advantage of a large variety of training experiences that are available. The intern completes 2000 hours of clinical work across 12 months. The intern works 40 hours per week. The internship begins on August 5th and ends on August 5th of each calendar year. If those dates fall on the weekend, the intern begins on the weekday closest to August 5th and completes the internship on the weekday closest to August 5th of the following year. The intern receives vacation and holiday time, as described below.

The Genesis Internship Program provides trainees the opportunity to use and further develop clinical skills in a variety of settings and with different populations. Populations served include all ages, with diverse populations, and a diversity of DSM-5-TR diagnoses that is typical for outpatient settings. Our clients come from urban as well as rural areas. Two of the primary sites of Genesis Counseling Center, including our largest site and training center, are in urban areas with a focus on providing services to underserved youth and families. There is a diversity of backgrounds among our clients. We also provide services at a free clinic for those community members who do not have insurance. We accept many types of health insurance, including Medicaid and Medicare. The primary presenting issues treated include depression, anxiety, ADHD, neurodiversity, and relational challenges. The intern has opportunities to provide consultation, assessment, individual therapy, group therapy, family therapy,

and couples' therapy. Genesis has a strong commitment to meeting the needs of diverse people.

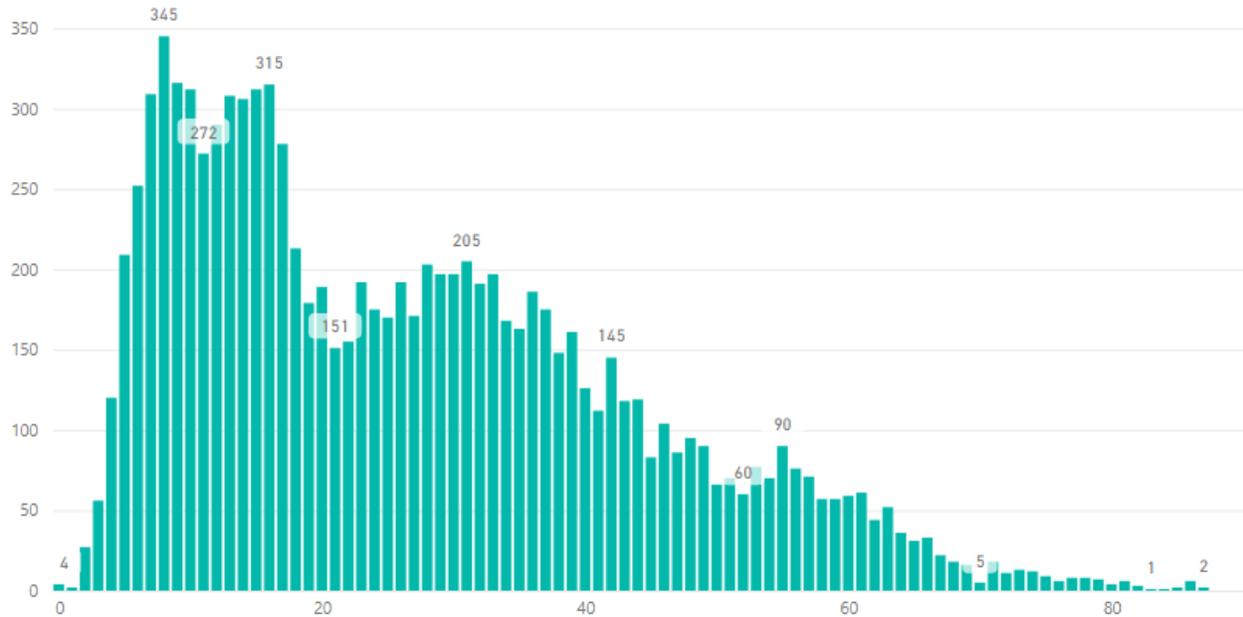
The Genesis Internship Program is an APPIC member (APPIC # 2497). The Genesis Internship Program is not an APA accredited internship. The program submitted its self-study application for accreditation in September 2022. Please be advised that there is no assurance that we will be able to successfully achieve accreditation

*Questions related to the program's accredited status should be directed to the Commission on Accreditation:

Office of Program Consultation and Accreditation
American Psychological Association
750 1st Street, NE, Washington, DC 20002
Phone: (202) 336-5979 / E-mail: apaaccred@apa.org
Web: www.apa.org/ed/accreditation

Interns provide services to the same population of clients that are served by Genesis overall. Of the more than 10,000 clients served in 2019 thru 2020, ages of clients were distributed as shown in the chart below which represents: 45% (age 1 - 20), 34% (age 21 - 40), 17% (age 41 - 60), 4% age (61 - 80), and 0.2% (over 80). Genesis served 58% female and 42% male clients during this period. There were also 13% of clients with Medicaid or Medicare insurance while the remaining 87% had private insurance or paid privately (including sliding scale).

Client Count by Age



The Genesis Internship Program is rooted in Genesis' identity as a faith-based outpatient practice and operates from a position of respect for all people, commitment to understanding and celebrating human diversity, and adherence to prevailing ethical standards articulated by the American Psychological Association (APA). Genesis' interns receive supervised clinical experience in evidence-based treatment, including CBT, ACT, DBT, and long-term, psychodynamic psychotherapy from an integrative faith-based perspective.

In all clinical, assessment, training, consultation, program, and outreach services, Genesis strives to create an environment where all people feel welcome. As a staff, we attempt to facilitate mutual respect and understanding among people of diverse racial, ethnic, and national backgrounds; sexual/affectional orientations; mental and physical abilities; languages; ages; religion/spiritual beliefs; socioeconomic backgrounds; as well as other types of diversity.

The goal in diversity training is to ensure that interns develop the knowledge, skills, and awareness necessary to provide comprehensive psychological services to all members of the public. The Genesis Internship Program requires an expected competency in individual and cultural diversity. These competencies were developed to comply with the APA's statement on Preparing Professional Psychologists to Serve a Diverse Public: "... professional psychology training programs strive to ensure that psychology trainees demonstrate acceptable levels of knowledge, skills, and awareness

to work effectively with diverse individuals.” Diversity experiences and training are integrated throughout the Genesis Internship Program.

Aim

The aim of the Genesis Internship Program is to provide interns with a unique capstone training experience that will yield a diverse skill set, preparing the intern for professional practice, in diverse settings, with all outpatient populations. The internship develops proficiency across areas of clinical, health, and neuropsychology including assessment, therapy, consultation, and research. Generalized training is the focus in preparation for post-doctoral work and a career as a psychologist. In addition to individual therapy and assessment, interns lead and co-lead a variety of behavioral health groups such as Dialectic Behavior Therapy groups, addiction recovery groups, and youth social skills and emotional regulation groups. Interns also can observe and co-lead marital support groups, adult interpersonal skills building groups, and/or an eating disorder recovery group.

Training Philosophy

Consistent with the *practitioner-scholar model*, the Genesis intern’s training is informed by theory and research. Interns learn how to responsibly utilize evidence-based research as well as how to consult with patients and other health professionals. The Genesis Internship Program consists of a generalist training model, which includes traditional mental health services, health psychology, and best practice assessment procedures as the most salient areas of training.

Genesis provides training opportunities emphasizing clinical practice, informed by scholarly research and best practice models to assist trainees to transition from the student role to the role of skilled clinical psychologist, competent to provide care in diverse settings. Training takes place in several settings, with a culturally diverse group of interdisciplinary professionals. The model consists of didactic and experiential training, as well as the use of psychological theory/research. Experiential training includes, but is not limited to:

- Individual therapy
- Comprehensive Best-Practice Assessment (i.e., neuropsychological, personality, psycho-educational evaluations, court-ordered, bariatric screenings, parental capacity, immigration evaluations, and disability evaluations)
- Family therapy
- Group therapy
- Faith-Based Integrated Therapy (when the patient prefers this approach)

- Community Outreach
- Electronic Health Records usage (*Valant*)
- Consultation
- Private Practice Management
- Co-therapy

Intern training primarily focuses on meeting the profession-wide competencies for psychologists described by the APA Standards of Accreditation (SoA). These competencies generally include intern performance and eventual mastery in delivery of direct patient care, ethical practice, utilization of research, professional identity development, supervision, and interprofessional skills. This includes the ability to serve diverse populations with a variety of clinical presentations. The intern and supervisor meet to develop objectives for training based on individualized needs and opportunities in relation to the SoA competencies. The nine specific competencies consist of:

- Research
- Ethical and legal standards
- Assessment
- Intervention
- Individual and cultural diversity
- Professional values, attitudes, and behaviors
- Communication and interpersonal skills
- Supervision
- Consultation and interprofessional/interdisciplinary skills

Ethics:

All LCPs and doctoral interns are provided access to the APA Ethical Principles of Psychologist, Code and Conduct and agree to abide by the principles therewithin: <https://www.apa.org/ethics/code>.

C. Administrative Structure: Design, Sites, Financial Considerations, Resources

Design

The internship training program is designed for the intern to spend less than 50% of the intern's overall activities in direct service, with the remaining hours dedicated primarily to didactic training, supervision, and other indirect hours suitable for a training program. The indirect service hours specifically include didactic training, consultation, research, observation of clinical and outpatient administrative practices, assessment scoring, case management, and documentation. The weekly structure for the intern's duties is as follows:

Direct Service Activities (totaling 16 - 20 hours per week):

- a. 4 to 7 hours of face-to-face psychotherapy (individual/family/group/couples)
- b. 11 to 14 hours of assessment/diagnostic interviewing

Supervision and Training (totaling 7 - 9 hours per week):

- a. 2 hours of individual supervision per week
- b. 2 hours of group supervision per week
- c. 3 to 5 hours of didactic training:
 1. 1 hour of group didactic training per week
 2. 1 hour of Journal Club per week
 3. 2 hours of didactic training assigned by the intern's primary supervisor a week
 4. 1-3 hours of didactic training in monthly Clinician Round Table meetings and HIPPA trainings a month.
 5. The internship year is structured such that the beginning of the year includes a heavier load of formal didactic training and transitions to more consultation and case conference type activities by the end of the year. The first 3 months of internship involve the most didactic training with an average of 6 hours per week of didactic training to learn policies and procedures, assessments, group therapy protocols (e.g., DBT), and applied treatment models. As the intern focuses more on practice, these training activities transition to more consultation and case conference activities. However, the intern always receives at least 3 hours of structured learning opportunities and 4 hours of supervision per week. The didactic training curriculum is described in Appendix C.

Clinical Support/Professional Development (14-17 hours)

- a. 9 hours of practice management/documentation/report writing/research
- b. 2 to 4 hours per week on research, shadowing, launching, leading, and documenting of a therapeutic group. Groups include DBT skills groups for adults and Children's DBT groups. Other previous groups offered include a group for disordered eating patterns, interpersonal boundary setting group, and Intensive Outpatient Therapy groups.
- c. 1 hour of peer consultation
- d. 1 hour of provision of supervision to practicum students (begins after 3 months of successful onboarding)

- e. 1-2 hours for consultation or observation of clinical and assessment practices

Genesis Doctoral Internship Program – Sample Schedule

	Monday	Tuesday	Wednesday	Thursday	Friday		
8:30	Case Management			Individual Supervision		8:30	
9:00	Outpatient Consultation/Supervision	Assessment	Professional Development	Conduct Assessment	Peer Consultation	9:00	
9:30						9:30	
10:00	Individual Supervision		Assessment Research, Scoring, Documentation, Case Management		Group Supervision	10:00	
10:30	10:30						
11:00	Assessment Research, Scoring, Documentation	Lunch	Lunch	Lunch	Lunch	11:00	
11:30						11:30	
12:00	Lunch	Supervised Didactic Seminar	Round Table Didactic Seminar	Supervised Didactic Seminar	Journal Club & Structured Didactics Seminar (See Appendix C)	12:00	
12:30						12:30	
1:00	Assessment Training	Group Supervision	Assessment	Program Development		1:00	
1:30						1:30	
2:00	Conduct Assessment	Assessment Research, Scoring, Documentation		Individual Therapy	Co-Lead Children’s DBT Group	Assessment	2:00
2:30							2:30
3:00		Individual Therapy	Assessment Research, Scoring, Documentation	3:00			
3:30					3:30		
4:00	Individual Therapy	Shadow/Co-Lead Adult DBT Therapy	Individual Therapy	Lead Children’s DBT Group	4:00		
4:30					4:30		

Training Curriculum (including content, duration, and frequency)

There are three primary modes of didactic training. They are as follows:

- All interns attend a required weekly group didactic training every Friday from 1 to 2 pm. See Appendix C for topics and presenters.
- All interns attend a required weekly group “Journal Club.” The research journal club is utilized to develop the practice of research-informed and evidenced based practice across professional responsibilities.
- There are several required trainings for assessment for the first 3 months of the internship, designed so that the intern practices/administers these assessments for the last 3 quarters of the internship. Some examples of assessments taught include:
 - Autism Diagnostic Observation Schedule-2 (ADOS-2): best practice training for this assessment consists of 5 hours of didactic training, then up to 10 hours of training/shadowing/practice with a certified ADOS-2 administrator/Licensed Clinical Psychologist
 - Wechsler assessments (WISC-V, WAIS-II, WMS)
 - Woodcock-Johnson Tests of Achievement
 - Millon Behavior Medicine Diagnostic: assessment for bariatric screening and chronic pain patients
 - Immigration assessments
 - Parental Capacity Assessments
- There are several specific trainings the interns attend throughout the year. Examples include:
 - Dialectic Behavioral Therapy training: 8 hours of training in DBT, directed by a Licensed Clinical Psychologist (2 hours per week for 4 consecutive weeks). 12 hours of shadowing a group facilitator and providing co-therapy in DBT for 6 of those hours (when approved by the intern’s supervisor and DBT training psychologist).
 - EMDR training: 8 hours of training in EMDR (2 hours per week for 4 consecutive weeks). The intern meets bi-weekly with the EMDR certified clinicians at Genesis in their peer supervision format for EMDR training consultations of one hour. After the initial 8 hours of training in EMDR, the intern meets for 2 hours of individual consultation/training with a Level 2 EMDR therapist.
 - Children’s DBT Groups: The intern has 4 hours of didactic training in DBT for Children by a Licensed Clinical Psychologist. The intern shadows a DBT trained group facilitator leading the Children’s DBT group weekly for 10 weeks. There is a didactic training debrief for 30 minutes directly after each group during the 10-week period. Genesis provides multiple DBT therapy groups for children on a weekly basis to help children increase positive social skills, increase behavioral regulation, build self-confidence, and more. These groups are part of wrap-around care for

children diagnosed with ADHD and Autism Spectrum Disorder, Level 1. After 4 hours of didactic training and 10 weeks of shadowing/didactic debriefs, the intern co-leads a DBT Children's group weekly until the end of internship.

Sites

The primary site for all interns is Genesis Counseling Center's Hampton location at 2202 Executive Drive, Hampton, VA. This is the primary site for orientation, training, weekly group supervision times, and assessment. Interns will practice at the Hampton site. At an intern's request and mutual agreement, in rare circumstances an intern's primary location may be Norfolk, VA. Interns may also provide services virtually.

In each site, interns will be provided an office for therapy and assessment. Interns have designated workspaces for indirect hours. Training, didactic, and supervision hours are typically held in larger meeting rooms.

Therapy rotation sites include:

- *Genesis Assessment Center*: best practice assessment services at our Hampton, Norfolk, and Williamsburg (VA) locations (interns do not need to go to all 3 sites throughout the year, but 1 to 2 sites are assigned to each intern based on the needs of the intern, referrals, and the Genesis Internship program).
- *Addiction and trauma recovery* rotation consisting of Intensive Outpatient group and individual counseling opportunities at Genesis Counseling Center in Hampton, Virginia.

Interns have the option of semi-flexible weeks. They may work four 10-hour days or five 8-hour days weekly.

Financial Considerations and Leave:

The annual stipend is \$25,000. Interns also have the option of receiving health benefits and a retirement plan. Each intern receives 10 days of paid vacation time, as well as 5 paid Federal Holidays (Memorial Day, July 4th, Labor Day, Thanksgiving, and Christmas).

Interns should submit requests for time off to their primary supervisor at least two weeks in advance of any anticipated leave date(s). Interns are responsible for communicating anticipated absences to all supervisors for whom work will be missed. Sick leave must be communicated to the intern's primary supervisor as soon as the intern is physically able to do so. Supervisors are available for any questions related to time off or release time.

Unpaid Leave:

Eligible Genesis Doctoral Interns may take up to 12 weeks of unpaid leave in a 12-month period. To be eligible, an intern must meet one of the following criteria:

1. For the birth of a child
2. For care of the intern's spouse, child, or parent who has a qualifying serious health condition
3. For the employee's own serious health condition that makes the employee unable to perform their job
4. For emergencies related to the foreign deployment of a military member who is the employee's spouse, child, or parent.

An employee does not need to use leave in one block. When it is medically necessary, or the supervisor otherwise approves, employees may take leave intermittently or on a reduced schedule. Interns must give 30 days advance notice of the need for family leave when possible. If it is not possible to give 30 days notice, an intern must notify their supervisor as soon as possible.

Upon return from family leave, the intern will be restored to the same position to it with equivalent pay, benefits, and other employment terms and conditions. The internship end date will be extended to accommodate for the amount of time on leave, to fulfill the total 2,000 hour requirement.

Resources and Support Services

The program supplies PC computers for interns at stations in the Genesis office locations, individual supervisors, Valant Electronic Health Records (EHR) system with electronic scheduler, best practice assessment tools, Wi-Fi access at Genesis locations, the Director of Clinical Training, a Clinical Director, Testing Coordinator(s) and the Assessment Care Coordinators. Computers have Microsoft Office, Internet access, and access to Valant EHR. Additionally, there is a wi-fi enabled office printer at each location so that interns or program staff can print from their laptops. Each office has wireless internet access. Genesis provides clerical support for client scheduling and wrap-around client care.

Valant EHR and several major assessment trainings (e.g., ADOS-2 training videos) are utilized for onboarding interns. Most trainings are conducted live. In addition to the trainings outlined in the Didactic Schedule (Appendix C), Genesis has multiple optional trainings available on various therapeutic modalities, consultation, building a healthy private practice, and much more.

Genesis Assessment Center provides all tests, protocol forms, manuals, scoring programs, etc.

The offices used are appropriate for confidential interactions. Offices have additional insulation throughout all Genesis' locations. White noise machines are also available to protect confidentiality during assessment, individual, group, and family sessions. Client files are maintained electronically through Valant, a HIPPA compliant electronic behavioral health records system.

All physical facilities are compliant with the American Disabilities Act (ADA). Parking lots have reserved parking for individuals with disabilities, accessible passenger loading zones, accessible entrances, and accessible toilet facilities. Locations are all close to public transportation.

Records:

Internship records (internship certification of completion, evaluation forms, and a description of training experiences) are maintained indefinitely on a secure SharePoint accessible to the Executive Director, Director or HR, and Director of Clinical Training

D. Internship Application and Match Policies

Applicant Requirements

To be considered eligible for the Genesis Internship Program, the following is required:

- Completion of a formal program with requirements towards a Ph.D. or Psy.D. in Psychology
- Successful proposal of a dissertation
- Successful passing of a Comprehensive Examination
- Completion of a minimum of 500 intervention hours and 75 assessment hours
- Minimum of three years of graduate training
- Minimum of 5 integrated assessment reports
- Experience and/or interest in working with diverse populations, including ethnic and spiritual diversity
- Applicants from APA- or CPA-accredited programs are *preferred*, but that is not required, and applicants will be assessed on a case-by-case basis. Applicants from Clinical or Counseling psychology programs are preferred.
- Successful Background Check: Genesis will provide instructions for the background check after interviewing and match. Prior offenses which entail misconduct directly related to a candidate's clinical work will constitute an unsuccessful background check. A candidate may not be penalized for minor

offenses which are not directly related to his/her clinical work. Offenses from youth will be discussed on a case-by-case basis.

- Drug use, including recreational cannabis, is prohibited. Employees may not be under the influence of any illegal drugs, alcohol, or cannabis while at work or on duty. Drug testing may be required. Any violations could lead to corrective action, including immediate termination.

Application Nondiscrimination Policies

The Genesis Internship Program invites all applicants and does not discriminate based on age, race, or gender. The Genesis Internship Program abides by APPIC regulations and policies. No person at this site will solicit or use any ranking information from an applicant prior to Match Day.

Selection Process

Applicants are contacted for a video interview. Intern selection is based on a combination of the following factors:

1. Degree of fit between applicant's goals for training in the cover letter and application forms with the Genesis mission and training goals. We show preference in selection of applicants aligned with the ethos of the sponsoring institution.
2. Fulfillment of minimum qualifications for candidates (outlined above).
3. Internship readiness endorsement from the Genesis Clinical Training Director.
4. Three recommendation letters, with at least one from a former supervisor.
5. Previous clinical and psychological assessment experience.
6. General knowledge base of the research and best practice treatments for outpatient private practice.
7. Sensitivity to the unique needs of multicultural populations.

How to Apply

Applications must be submitted via the online APPIC Application for Psychology Internship (AAPI). Instructions for applying to the Genesis Internship Program are available at the APPIC website www.appic.org.

Applications will only be accepted through the AAPI and cannot be sent outside of the Match for Phases I or II in accordance with APPIC Match Policies.

One-Year Full Time Requirement: Supervision and Training

The internship is a full-time (40-hour per week), one year program. To successfully complete the program, interns are required to complete 2000 hours of work. Interns receive a minimum of two hours of individual supervision with a licensed psychologist on a weekly basis. Interns receive a minimum of two hours of group supervision. The program begins and ends on August 5th, or the closest weekday to these dates. The Genesis Minimal Level of Achievement (MLA) to successfully complete the program is completion of the minimum number of hours and achievement of an overall rating of 4 (Proficient Competence) on the internship evaluation indicating readiness for entry-level practice at the end of internship. The Genesis Due Process procedure covers the steps involved when an intern is not meeting the MLA.

Section II: Therapy and Psychological Services

A. Genesis Services

Genesis Assessment Services

Genesis Assessment Center offers the following psychological testing services:

Personality Testing
Neuropsychological Testing
Educational Testing
Psycho-Educational Assessment
Bariatric Surgery Psychological Screenings
Forensic Assessments
Adoption Assessments
Parental Capacity Evaluations
Mental/Psychological Disability Assessments
Couples Inventories
Immigration Psychological Screenings

Genesis Counseling Services

Genesis Counseling Center offers outpatient therapy services to all ages. Genesis Counseling Center clinicians serve at 6 sites throughout Hampton Roads, Virginia. Genesis offers individual, couples, family, and group therapy. All outpatient behavioral, emotional, and psychological issues are addressed, to include specialists in treating depression, addiction, anger, ADHD, personality disorders, relational issues, anxiety, Autism Spectrum Disorders, OCD, mood disorders, spiritual issues, eating disorders, gender dysphoria, trauma/PTSD, youth behavioral issues, and emotionally healthy living. See www.genescounselingcenter.com for more information on Genesis Counseling Center.

Genesis Tele-Health Services

Genesis Online offers tele-health counseling services within the regulation of licensing bodies. Genesis Online includes HIPAA compliant web-platform counseling and phone counseling options.

Genesis Telesupervision Policy

The Genesis Internship Program provides weekly group supervision and didactics in person and via a video conferencing platform doxy.me. This hybrid format allows interns to interact with students, residents, and staff members across various locations at Genesis Counseling Center. Group supervision is led by Genesis Counseling Center

licensed staff members, on a rotating basis, to provide interns with the opportunity to experience a breadth of supervisory relationships and supervision modalities. For all clinical cases discussed during group supervision, full professional responsibility remains with the intern's primary supervisor, and any crises or other time-sensitive issues are reported to that supervisor immediately. During orientation, interns are provided contact information for their supervisors, including email and phone numbers, so crises and time-sensitive information can be reported as necessary. Additionally, telesupervision is utilized in place of in-person supervision for emergencies, such as during the COVID-19 pandemic. When individual supervision is conducted via telehealth, the videoconferencing occurs over doxy.me, a secure, HIPAA-compliant platform. Interns are provided a doxy.me account at no cost. Telesupervision sessions are never recorded, thus protecting the privacy and confidentiality of all clients and trainees. All interns are provided with instructions regarding the use of doxy.me during the first week of orientation.

The majority of all supervision (75%) is required to be face to face supervision. Rapport is established between supervisors and supervisees before any telesupervision can occur and interns are required to complete a training on doxy.me prior to using for telesupervision. Telesupervision is not intended to take the place of face to face supervision. Instead, it is meant to be alternative form for supervision in the rare cases that supervision cannot occur face to face. Being able to provide an alternative form of supervision on rare occasions instead of having to postpone supervision provides consistent support and oversight to interns; therefore, telesupervision is consistent with the overall aim and goals for training outcomes for internship: is to provide interns with training experience that will prepare them for professional practice, in diverse settings, with all outpatient population.

Genesis Consultation and Coaching

Genesis' clinical staff often speak and provide workshops and training for schools, churches, community events, and professional organizations such as the American Psychological Association (APA) and the American Association of Christian Counselors (AACC). Among the clinical team, Genesis can offer expert speakers across a broad range of behavioral health and leadership topics. Genesis is passionate about growth and learning and have gifted presenters.

A Genesis coach partners with the client in a thought-provoking and creative process that inspires the client to maximize personal and professional potential. Our professional coaches can help the client discover the client's core values and life purpose, to live more intentionally, aligned with gifts and calling. Coaching is about equipping the client to move from where this client is now to where the client would like to be. Genesis coaches will listen to understand, focus on desired outcomes, and ask powerful questions that help create action steps toward goals. In summary,

coaching is all about helping the client play big in life. Genesis coaches follow guidelines of the International Coach Federation (ICF).

Genesis consulting services help individuals and organizations build a strong and healthy organization by leveraging the Genesis organizational leadership and behavioral health expertise. Genesis Consulting can provide speakers, workshops, training, and individual consulting to assist teams in accelerating toward organizational health. Genesis Assist serves behavioral health therapists across the US in managing their private practices, to include providing billing services. See www.genesisassist.com

B. Professional Faculty Biographies and Staff Interest Areas

Faculty

CANDACE LASSITER, PSY.D., LCP
Clinical Training Director

Dr. Candace Lassiter is a Licensed Clinical Psychologist in the Commonwealth of Virginia. She provides assessment and evaluations for a wide range of concerns including ADHD, Autism Spectrum Disorder (ADOS-2 certified), developmental delays, and Learning Disability evaluations (e.g., dyslexia, dysgraphia). She also provides couples therapy, including pre-marital therapy as well as adult individual psychotherapy for depression, anxiety, mood, relational concerns, and stress. Dr. Lassiter's approach to therapy is based on the foundations of Interpersonal/Relational Psychodynamic Therapy and includes cognitive behavioral, dialectical behavioral, and acceptance commitment therapy techniques. Her professional interests also include a passion for training and supervising students. She is also an Adjunct Professor at Regent University. She is currently the Director of Clinical Training at Genesis Counseling Center.

Dr. Lassiter completed her Master's (M.A) and Doctorate in Clinical Psychology (Psy.D) from Regent University.

Specialties: Assessment: ASD/LD/ADHD, PTSD, anxiety, depression, general issues.
Therapy: couple/marital/pre-marital therapy, relational difficulties, personality disorders, trauma, anxiety, depression, adjustment.

TRINA YOUNG GREER, PSY.D., LCP, LPC, LMFT
Executive Director

Dr. Trina Young Greer has worked in the mental health field since 1990. She holds licensures in Virginia as a Licensed Clinical Psychologist, Licensed Marriage and Family Therapist, and Licensed Professional Counselor. Her higher education degrees were

earned at The College of William and Mary and Regent University. She is recognized for her work with individuals struggling to recover from trauma, grief and loss issues, assessment of children and adolescents, and anxiety disorders. She has worked as an adjunct instructor at Regent University, and regularly provides supervision to psychotherapists in training. Dr. Young Greer believes that all healing has a spiritual foundation, and she is committed to assisting others to find meaning and true peace in their lives. Dr. Young Greer is also the co-founder for Genesis Autism, and has a passion for advocating for individuals with neurodiversity.

Dr. Young Greer is the founder and executive director of Genesis Counseling Center. She is a native of Hampton, Virginia and is committed to serving the Hampton Roads community. As the daughter of missionaries to Africa, she has served as a consultant to missionaries and in ministry to African refugees. She authored a manual for church leaders in West Africa ministering to victims of trauma. She is a member of both the American Psychological Association (APA) and the American Association of Christian Counselors (AACC). She is the co-founder of [Genesis Assist](#), which provides valuable services for psychologists interested in launching or maintaining excellent private practices.

Specialties: Personality assessment, Attention Deficit/Hyperactivity Disorder Testing, Autism Spectrum Disorder Testing, Psychoeducational Testing, depression, anxiety, grief and loss issues, family therapy, trauma recovery, sexual abuse recovery, children and adolescents, women's issues, military and missionary families, group therapy for children, Attention Deficit/Hyperactivity Disorder, and attachment disorders (foster care and adoption)

CYNTHIA KOKORIS, PSY.D., LCP, ABPP

Dr. Kokoris is a Licensed Clinical Psychologist, Board Certified in Clinical Psychology by the American Board of Professional Psychology (ABPP). Dr. Kokoris provides assessment and evaluations for both children and adults. She uses an individual approach to psychological testing to identify the assessment needs and to choose best-practice testing to provide clarification on diagnoses and recommendations for treatment.

Dr. Kokoris has been with Genesis since 2014. Prior to coming to Genesis, she trained and worked at an inpatient hospital with long-term mental health patients and provided forensic evaluations. She holds a Master's (M.A.) and Doctoral degree (Psy.D.) in Clinical Psychology from Regent University. Dr. Kokoris has a range of experience working with children as well as adults. Her approach to therapy is a combination of person-centered and cognitive behavioral techniques (CBT) that address client needs holistically. Dr. Kokoris believes it is important to meet clients where they are in their life and faith. In addition, Dr. Kokoris' professional interests include multiculturalism,

community mental health awareness, and providing supervision to psychology students and interns.

Dr. Kokoris is a member of the American Psychological Association (APA). She is also a member of the National Register of Health Service Psychologists, which independently verifies education and experience for ethical psychological practice.

Specialties: Anxiety, Depression, Autism Spectrum Disorder, ADHD, learning disabilities, developmental delays, cognitive behavior therapy, psychological testing, psychotic disorders, and minority issues.

NOELLE LOWRY, PH.D., LCP, LPC

Dr. Lowry is familiar with psychotherapeutic treatment of many personal difficulties. She will see any population, ages 7 and up, especially adults. While she is experienced with integrating faith in therapy sessions, she is respectful of individuals who hold different views and of individuals who do not wish to incorporate faith within their therapy time. In addition to psychotherapeutic intervention with children, adolescent, and adult populations, Dr. Lowry performs psychological evaluations.

Dr. Lowry received a Bachelors in Psychology from Taylor University, a Masters in Counseling from Regent University, a Masters in Psychology from Walden University, and a Doctorate in Psychology with a clinical emphasis from Walden University. In addition to a private practice setting, Dr. Lowry's professional experience includes work within inpatient and in-home treatment centers. Also, she trains master's level counseling students in practicum and internship programs and is a Virginia Board approved Supervisor for Resident LPC's. Dr. Lowry has published several articles, enjoys teaching and has worked part-time as an Adjunct Psychology Instructor at a local community college.

Specialties: Psychotherapy treatment for issues of: anxiety disorders (to include panic and OCD), depressive disorders (to include bipolar), trauma, schizophrenia and associated disorders, ADHD, learning disabilities, oppositional, conduct, gender, women's issues, men's issues, substance abuse, adoption (including foreign adoption, adjustment, attachment) parenting, military and family, marital issues, faith-based issues, self-esteem, forgiveness, crisis, grief/loss, chronic illness/pain, separation, divorce, and primary caretaker issues (e.g., familiar with chronic illnesses, ID, ASD, dementia).

BRENNA GRANT SQUIRES, PSY.D., LCP

Dr. Brenna Grant Squires is a Licensed Clinical Psychologist who works with children, adolescents, and adults. Dr. Squires has experience providing individual and group

therapy, conducting psychological assessments and consulting with educational personnel. Dr. Squires has also facilitated individual and group trainings on behavioral modification, effective communication, cognitive training, anger management, attention and focus, relaxation, and management of extreme behaviors (e.g., suicidal, and self-harm behaviors). She has worked in a variety of settings including community mental health, university clinics, and private practice.

Dr. Brenna Grant Squires graduated with her Doctor of Psychology in Clinical Psychology from Nova Southeastern University. Dr. Squires completed her post-doctoral residency at Families Forward in Augusta, Georgia, and her internship at South Florida Consortium Internship Program with Nova Southeastern University. She has specialized experience working with anxiety, depression, psychological assessment, and suicidality. Dr. Squires also currently serves as an Adjunct Professor in the Criminal Justice Department at Nova Southeastern University.

She also participates in several volunteer activities throughout the year that assist with helping the homeless and encouraging positive family interactions.

Specialties: Psychological testing: Assessment- learning disorders, ADHD, depression, anxiety, Autism Spectrum Disorders, and general issues. Therapy: anxiety, depression, adjustment, parenting, behavior management/conduct and stress management.

SHERRI SPAIN, PH.D., LCP
Licensed Clinical Psychologist & Neurofeedback Specialist

Dr. Spain has been working within the mental health field since 2006 with children, adolescents, and adults. She currently provides therapy and psychological assessment. Her primary therapy style involves Cognitive Behavioral Therapy and Dialectical Behavioral Therapy with a person-centered approach. In addition to therapy and psychological assessment, Dr. Spain is certified in Neurofeedback.

Dr. Spain received her Ph.D. in Clinical Psychology from Walden University. She has her Master of Arts in Community/Clinical Psychology from Norfolk State University and Master of Science in Psychology from Walden University. She received her Bachelor of Science in Psychology and Minor in Religious Studies from Radford University.

CAROLYN BRIDGES, PSY.D., LCP

Dr. Carolyn Bridges is a Licensed Clinical Psychologist in the state of Virginia. Dr. Bridges provides assessment and evaluations for concerns such as ADHD, developmental delays, Learning Disabilities as well as mood and personality disorders. She provides individual therapies for adolescents and adults to address a wide range of

concerns, including depression, anxiety, mood, relational concerns, and stress. She provides couples therapy, including premarital therapy. Dr. Bridges works from an Interpersonal/Psychodynamic Therapy perspective, while also including beneficial aspects of Cognitive Behavioral Therapy, Acceptance and Commitment Therapy, Sensorimotor Psychotherapies, and mindfulness. Her experience includes working with persons diagnosed with severe mental illness in both inpatient and outpatient settings.

One of Dr. Bridge's areas of specialization is Women's Reproductive Mental Health. This emerging field addresses the unique impact that women's reproductive health may have on mental, emotional, relational, and spiritual wellbeing due to experiences such as changes in hormones (e.g., Premenstrual Dysphoric Disorder), infertility, pregnancy, high-risk pregnancy, miscarriage, abortion, birth, postpartum (e.g., Postpartum Depression and Anxiety), breastfeeding, and menopause.

Dr. Bridges attained her Masters (M.A.) and Doctorate in Clinical Psychology (Psy.D.) from Regent University. She is passionate about bolstering her local church's understanding of mental health issues and enjoys consulting with church leadership teams to enhance their understanding of mental health disorders, equip them to better serve their congregations, and avoid burnout.

Carolyn has experience moving across the country throughout her life, including during the time her spouse served in the US Air Force. She enjoyed being a stay-at-home parent during her three children's early years. Drinking tea and reading books are a few of Carolyn's favorite things.

Specialties: consultation, depression, anxiety, trauma recovery, women's reproductive mental health, military families

RAMONA WATSON, PH.D., LCP

Dr. Ramona Watson has worked in behavioral health since 2000. She currently holds a license as a Clinical Psychologist in the state of VA and has enjoyed a work history that includes a variety of settings with diverse populations, including an inpatient facility, a women's residential substance abuse program, a community health center, a university hospital smoking cessation research department, and military treatment facilities. Dr. Watson strives to empower individuals to become their healthiest selves, and as a result, reach their greatest potential for living happy, balanced, and fulfilling lives.

Dr. Watson received her undergraduate degree in Psychology from the University of Florida and her graduate degree in Clinical-Community Psychology from the University of South Carolina at Columbia. She completed her doctoral internship in the Department of Psychiatry at Cook County Hospital in Chicago. This experience provided a wealth of exposure to the consultation-liaison model, an interdisciplinary

treatment team approach, and opportunities to provide services to many in underserved communities.

Specialties: Psychological testing, chronic illness, trauma, abuse, mood disorders, anxiety, Cognitive Behavioral Therapy, solution-focused therapy, women's issues, phase of life issues, marriage/family

ALYSSA GREINEISEN, PSY.D., LCP

Dr. Alyssa Greineisen is a Licensed Clinical Psychologist who works with individuals of all ages across the lifespan. She has experience in individual and group therapy with adolescents and adults and has completed psychological assessments with children, adolescents, adults, and older adults with a wide range of concerns. Dr. Greineisen has worked in various settings including community mental health centers, private practices, VA medical hospitals, and inpatient units. She typically uses a cognitive behavioral approach in therapy and enjoys working with individuals dealing with depression, anxiety, trauma histories, and relationship challenges.

Dr. Greineisen completed her Doctorate in Clinical Psychology (Psy.D.) at Nova Southeastern University. Her internship was through Nova Southeastern University's South Florida Consortium Internship Program and her post-doctoral residency was completed at Genesis Counseling Center.

Dr. Greineisen is a military spouse and mother. In her free time, she enjoys traveling, bike riding, beach trips and boating with her family and their golden retriever.

Specialties: Counseling with adolescents and adults coping with anxiety, depression, trauma/PTSD, relationship difficulties, bipolar disorders, and adjustment challenges. Assessments for individuals 4 and up. Psychological testing for learning disorders, ADHD, behavioral challenges, depression, anxiety, mood disorders, trauma/PTSD, and memory concerns.

LORI BURKETT, PSY.D., LCP

Working in the mental health field since the early 1990's, Dr. Lori Burkett has provided services to individuals across the lifespan in a variety of settings (inpatient, community, forensic, residential, and university). She is a Licensed Clinical Psychologist in Virginia. Dr. Burkett is a Forensic Evaluator for the Commonwealth of Virginia having completed training through the Institute of Law, Psychiatry, and Public Policy for juvenile and adult populations. Dr. Burkett provides counseling services from a collaborative and strength-based perspective to children (10+), teens, and adults. She has a nonjudgmental approach and believes that the therapeutic relationship is essential to success in treatment.

Dr. Burkett completed her Master's (M.A) and Doctorate in Clinical Psychology (Psy.D) from Regent University. She completed a Master's (M.A) in Criminology from Indiana University of Pennsylvania and her Bachelor (B.S.) degrees in Psychology and Sociology from Evangel University in Missouri. Committed to ethical and effective mental health services, Dr. Burkett invests time in a wide variety of clinical, teaching, research activities. She is a published author and enjoys developing curriculum and writing on topics related to mental health from a faith perspective. Dr. Burkett is a member of the American Psychological Association (APA) and the Christian Association for Psychological Studies (CAPS).

Specialties: Psychological (specific to mood disorders, sexuality, psychosis, and dissociative disorders) and Forensic Evaluations (CST, OCST, and MSO). Individual Therapy - mood disorders, grief/loss, LGBTQ+, issues of spirituality and faith (from a Christian perspective). Dr. Burkett has a specific passion for working with teens and young adults who are grappling with their identity and sexuality.

Staff

In addition to the faculty mentioned above, Genesis Counseling Center has over 55 licensed behavioral health clinicians in 6 locations throughout Southeastern Virginia. Genesis's clinicians represent the following specializations, licenses, and certifications:

Virginia Board Approved Supervisors (LCP, LPC, LMFT, LCSW)
ADOS-2 Certified Psychologists
EMDR Certified Clinicians
DBT Specialists
Certified Substance Abuse Counselors (CSAC)
Certified Sexual Offender Treatment Providers (CSOTP)
Certified Art Therapists
Registered Play Therapists
National Register of Health Service Psychologists
LCP Board Certified in Clinical Psychology by ABPP
Sexual Identity Therapy (SIT) trained clinicians
Gottman Certified Couples Therapists
Prepare & Enrich Certified Couples Clinicians
International Coach Federation (ICF) credentialed Life Coaches
EEG Info Neurofeedback Specialists
Licensed Marriage and Family Therapists
Licensed Professional Counselors
Licensed Clinical Social Workers

Appendix A: Genesis Doctoral Internship Program – Intern Evaluation

NOTE: The Genesis Supervisor (Licensed Clinical Psychologist) completes the Genesis Doctoral Internship Program - Intern Competency Evaluation form below twice a year and as needed. The Genesis Supervisor reviews the evaluation form with the intern and provides a copy to the designated official at the intern's school program at each time interval. The Supervisor also reaches out to the doctoral intern's graduate Clinical Training Director or designated school supervisor to share feedback on the intern's progress at least two times per year.

Genesis Doctoral Internship Program - Intern Evaluation

(To be Completed by the Supervisor)

Intern: _____ Supervisor: _____

Dates of Evaluation: _____ to _____ Training site: _____

Methods used in evaluating competency:

Direct Observation Review of Audio/Video Case Presentation
 Documentation Review Supervision Comments from other staff/faculty

Scoring Criteria

1 -- Remedial Significant skill development required; remediation necessary
2 -- Beginning/Developing Competence Expected level of competence pre-internship; close supervision required on most cases
3 -- Intermediate Competence Expected level of competence for intern by mid-point of training program; routine or minimal supervision required on most cases
4 -- Proficient Competence Expected level of competence for intern at completion of training program; ready for entry-level practice
5 -- Advanced Competence Rare rating for internship; able to function autonomously with a level of skill representing that expected beyond the conclusion of internship training

Competency 1 - Intern will achieve competence in the area of: Research	
Demonstrates the substantially independent ability to critically evaluate research or other scholarly activities (e.g., case conference, presentation, publications)	
Disseminates research or other scholarly activities (e.g., case conference, presentation, publications) at the local (including the host institution), regional, or national level.	
AVERAGE SCORE FOR BROAD AREA OF COMPETENCE	#DIV/0!
Comments:	

Competency 2 - Intern will achieve competence in the area of: Ethical and Legal Standards	
Demonstrates knowledge of and acts in accordance with each of the following:	
The current version of the APA Ethical Principles and Code of Conduct;	
Relevant laws, regulations, rules, and polices governing health service psychology at the organizational, local, state, regional and federal levels;	
Relevant professional standards and guidelines;	
Recognizes ethical dilemmas as they arise and applies ethical decision-making processes in order to resolve the dilemmas	
Conducts self in an ethical manner in all professional activities	
AVERAGE SCORE FOR BROAD AREA OF COMPETENCE	#DIV/0!
Comments:	

Competency 3 - Intern will achieve competence in the area of: Individual and Cultural Diversity	
Demonstrates an understanding of how their own personal/cultural history, attitudes, and biases may affect how one understands and interacts with people different from oneself	
Demonstrates knowledge of the current theoretical and empirical knowledge base as it relates to addressing diversity	
Integrates awareness and knowledge of individual and cultural differences in the conduct of professional roles	
Applies a framework for working effectively with areas of individual and cultural diversity	
Works effectively with individuals whose group membership, demographic characteristics, or worldviews create conflict with their own	
AVERAGE SCORE FOR BROAD AREA OF COMPETENCE	#DIV/0!
Comments:	
Competency 4 - Intern will achieve competence in the area of: Professional Values and Attitudes	
Behaves in ways that reflect the values and attitudes of psychology	
Engages in self-reflection regarding personal and professional functioning	
Engages in activities to maintain and improve performance, well-being, and professional effectiveness	
Actively seeks and demonstrates openness and responsiveness to feedback and supervision	
Responds professionally in increasingly complex situations with a greater degree of independence as they progress across levels of training	
AVERAGE SCORE FOR BROAD AREA OF COMPETENCE	#DIV/0!
Comments:	
Competency 5- Intern will achieve competence in the area of: Communication and Interpersonal Skills	
Develops and maintains effective relationships with a wide range of individuals	
Demonstrates a thorough grasp of professional language and concepts	
Produces, comprehends, and engages in communications (oral, nonverbal, and written) that are informative and well-integrated	
Demonstrates effective interpersonal skills and the ability to manage difficult communication well	
AVERAGE SCORE FOR BROAD AREA OF COMPETENCE	#DIV/0!
Comments:	

Competency 6 - Intern will achieve competence in the area of: Assessment	
Demonstrates current knowledge of diagnostic classification systems and functional and dysfunctional behaviors, including consideration of client strengths and psychopathology	
Demonstrates understanding of human behavior within its context	
Applies knowledge of functional and dysfunctional behaviors including context to the assessment and/or diagnostic process	
Selects and applies assessment methods that draw from the best available empirical literature	
Collects relevant data using multiple sources and methods appropriate to the identified goals and questions of the assessment as well as relevant diversity characteristics of the service recipient	
Interprets assessment results to inform case conceptualization, classification, and recommendations while guarding against decision-making biases	
Communicate the findings and implications of the assessment in an accurate and effective manner sensitive to a range of audiences.	
AVERAGE SCORE FOR BROAD AREA OF COMPETENCE	#DIV/0!
Comments:	
Competency 7 - Intern will achieve competence in the area of: Intervention	
Establishes and maintains effective relationships with recipients of psychological services	
Develops evidence-based intervention plans specific to the service delivery goals	
Implements interventions informed by the current scientific literature	
Demonstrates the ability to apply the relevant research literature to clinical decision making	
Modifies and adapts evidence-based approaches effectively	
Evaluates intervention effectiveness and adapts intervention goals and methods consistent with ongoing evaluation	
AVERAGE SCORE FOR BROAD AREA OF COMPETENCE	#DIV/0!
Comments:	
Competency 8- Intern will achieve competence in the area of: Supervision	
Applies overall knowledge of supervision in direct or simulated practice with psychology trainees or other health professionals	
Applies the supervisory skill of observing in direct or simulated practice	
Applies the supervisory skill of evaluating in direct or simulated practice	
Applies the supervisory skills of giving guidance and feedback in direct or simulated practice	
AVERAGE SCORE FOR BROAD AREA OF COMPETENCE	#DIV/0!
Comments:	

Competency 9 - Intern will achieve competence in the area of: Consultation and Interprofessional/Interdisciplinary Skills	
Demonstrates knowledge and respect for the roles and perspectives of other professions	
Applies knowledge about consultation in direct or simulated (e.g. role played) consultation	
AVERAGE SCORE FOR BROAD AREA OF COMPETENCE	#DIV/0!
Comments:	
OVERALL RATING (average of broad competence area scores)	
#DIV/0!	
Comments on Intern's overall performance:	

I acknowledge that my supervisor has reviewed this evaluation with me.

Intern Signature Date

Supervisor's Signature Date

Appendix B: Due Process and Grievance

Genesis Doctoral Internship Program: Due Process and Grievance Policy

Due Process Procedure

The Genesis Doctoral Internship Program's **Due Process Procedure** is implemented in situations in which a supervisor or other faculty or staff member raises a concern about the functioning of a doctoral intern. This procedure occurs in a stepwise fashion, involving greater levels of intervention as a problem increases in persistence, complexity, or level of disruption to the training program.

Rights and Responsibilities

This procedure is a protection of the rights of both the intern and the doctoral internship training program and carries responsibilities for both.

Interns: The intern has the right to be afforded every reasonable opportunity to remediate problems. This procedure is not intended to be punitive; rather, it is meant as a structured opportunity for the intern to receive support and assistance to remediate concerns. The intern has the right to be treated in a manner that is respectful, professional, and ethical. The intern has the right to participate in the Due Process procedure by having their viewpoint heard at each step in the process. The intern has the right to appeal decisions with which they disagree, within the limits of this procedure. The responsibilities of the intern include engaging with the training program and Genesis in a manner that is respectful, professional, and ethical, making every reasonable attempt to remediate behavioral and competency concerns, and striving to meet the aims and objectives of the program.

Genesis Doctoral Internship Program: Genesis has the right to implement this Due Process procedure when it is called for as described below. The program and its faculty/staff have the right to be treated in a manner that is respectful, professional, and ethical. The program has a right to make decisions related to remediation for an intern, including probation, suspension, and termination, within the limits of this procedure. The responsibilities of the program include engaging with the intern in a manner that is respectful, professional, and ethical, making every reasonable attempt to support interns in remediating behavioral and competency concerns, and supporting interns to the extent possible in successfully completing the training program.

Definition of a Problem

For purposes of this procedure, a problem is defined broadly as an interference in professional functioning which is reflected in one or more of the following ways: 1) an inability and/or unwillingness to acquire and integrate professional standards into one's repertoire of professional behavior; 2) an inability to acquire professional skills in

order to reach an acceptable level of competency; and/or 3) an inability to control personal stress, psychological dysfunctions, and/or excessive emotional reactions which interfere with professional functioning.

It is a professional judgment as to when an issue becomes a problem that requires remediation. Issues typically become identified as problems that require remediation 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 the scheduled sequence of clinical 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 intern's behavior does not change as a function of feedback, and/or time;
7. the problematic behavior has potential for ethical or legal ramifications if not addressed;
8. the intern's behavior negatively impacts the public view of the agency;
9. the problematic behavior negatively impacts other trainees;
10. the problematic behavior potentially causes harm to a client; and/or,
11. the problematic behavior violates appropriate interpersonal communication with Genesis's staff.

Informal Review

When a supervisor or other faculty/staff member believes that an intern's behavior is becoming problematic or that an intern is having difficulty consistently demonstrating an expected level of competence, the first step in addressing the issue should be to raise the issue with the intern directly and as soon as feasible to informally resolve the problem. This may include increased supervision, didactic training, and/or structured readings. The supervisor or faculty/staff member who raises the concern should monitor the outcome.

Formal Review

If an intern's problem behavior persists following an attempt to resolve the issue informally, or if an intern receives a rating below a "3" on any element on a supervisory evaluation, the following process is initiated:

- A. **Notice:** The intern will be notified in writing that the issue has been raised to a formal level of review, and that a Hearing will be held.
- B. **Hearing:** The supervisor or faculty/staff member will hold a Hearing with the Director of Clinical Training (DCT) and intern within 10 working days of issuing a Notice of Formal Review to discuss the problem and determine what action needs to be taken to address the issue. If the DCT is the

supervisor who is raising the issue, an additional faculty member who works directly with the intern will be included at the Hearing. The intern will have the opportunity to present their perspective at the Hearing and/or to provide a written statement related to their response to the problem.

C. **Outcome and Next Steps:** The result of the Hearing will be any of the following options, to be determined by the DCT and other faculty/staff member who was present at the Hearing. This outcome will be communicated to the intern in writing within 5 working days of the Hearing:

1) Issue an "Acknowledgement Notice" which formally acknowledges:

- a) that the faculty is aware of and concerned with the problem;
- b) that the problem has been brought to the attention of the intern;
- c) that the faculty will work with the intern to specify the steps necessary to rectify the problem or skill deficits addressed by the inadequate evaluation rating; and,
- d) that the problem is not significant enough to warrant further remedial action currently.

2) Place the intern on a "Remediation Plan" which defines a relationship such that the faculty, through the supervisors and DCT, actively and systematically monitor, for a specific length of time, the degree to which the intern addresses, changes and/or otherwise improves the problematic behavior or skill deficit. The implementation of a Remediation Plan will represent a probationary status for the intern. The length of the probation period will depend upon the nature of the problem and will be determined by the intern's supervisor and the DCT. A written Remediation Plan will be shared with the intern and the intern's home doctoral program and will include:

- a) the behaviors or skills associated with the problem;
- b) the specific actions to be taken for rectifying the problem;
- c) the timeframe during which the problem is expected to be ameliorated; and,
- d) the steps designed to ascertain whether the problem has been appropriately remediated.

At the end of this remediation period as specified in 'c' above, the DCT will provide a written statement indicating whether the problem has been remediated. This statement will become part of the intern's permanent file and will be shared with the intern's home doctoral program. If the problem has not been remediated, the DCT may choose to move to Step D below or may choose to extend the Remediation Plan. The extended Remediation Plan will include all the information mentioned above and the extended time frame will be specified clearly.

3) Place the intern on suspension, which would include removing the intern from all clinical service provision for a specified period, during which the program may support the intern in obtaining additional didactic training, close mentorship, or engage some other method of remediation. The length of the suspension period will depend upon the

nature of the problem and will be determined by the intern's supervisor and the DCT. A written Suspension Plan will be shared with the intern and the intern's home doctoral program and will include:

- a) the behaviors or skills associated with the problem;
- b) the specific actions to be taken for rectifying the problem;
- c) the timeframe during which the problem is expected to be ameliorated; and,
- d) the steps designed to ascertain whether the problem has been appropriately remediated.

At the end of this suspension period as specified in 'c' above, the DCT will provide to the intern and the intern's home doctoral program a written statement indicating whether the problem has been remediated to a level that indicates that the suspension of clinical activities can be lifted. The statement may include a recommendation to place the intern on a probationary status with a Remediation Plan. In this case, the process in #2 above would be followed. This statement will become part of the intern's permanent file.

If the problem is not rectified through the above processes, or if the problem represents gross misconduct or ethical violations that have the potential to cause harm, the intern's placement within the internship program may be terminated. The decision to terminate an intern's position would be made by the Training Committee and the Director of Human Resources and would represent discontinuation of participation by the intern with every aspect of the training program. The Training Committee would make this determination during a meeting convened within 10 working days of the previous step completed in this process, or during the regularly scheduled monthly Training Committee meeting, whichever occurs first. The DCT may decide to suspend an intern's clinical activities during this period prior to a final decision being made if warranted. The internship program will notify APPIC and the intern's home doctoral program of the decision.

All time limits mentioned above may be extended by mutual consent within a reasonable limit.

Appeal Process

If the intern wishes to challenge a decision made at any step in the Due Process procedure, the intern may request an Appeals Hearing before the Training Committee. This request must be made in writing to the DCT within 5 working days of notification regarding the decision with which the intern is dissatisfied. If requested, the Appeals Hearing will be conducted by a review panel convened by the DCT and consisting of themselves (or another supervisor, if appropriate) and at least two other members of the training faculty who work directly with the intern. The intern may request a specific member of the training faculty to serve on the review panel. The Appeals Hearing will be held within 10 working days of the intern's request. The review panel will review all

written materials and have an opportunity to interview the parties involved or any other individuals with relevant information. The review panel may uphold the decisions made previously or may modify them. Decisions made by the review panel will be shared with the intern and the intern's home doctoral program.

If the intern is dissatisfied with the decision of the review panel, they may appeal the decision, in writing, to the DCT and Director of Human Resources. If the intern is dissatisfied with the decision of the DCT and Director of Human Resources, they may appeal the decision, in writing, to the Executive Director. Each of these levels of appeal must be submitted in writing within 5 working days of the decision being appealed. The Executive Director has final discretion regarding the outcome. Decisions made during these appeal processes will be shared with the intern and the intern's home doctoral program.

Grievance Procedures

Grievance Procedures are implemented in situations in which a psychology intern raises a concern about a supervisor or other faculty member, trainee, or any aspect of the internship training program. Interns who pursue grievances in good faith will not experience any adverse professional consequences. For situations in which an intern raises a grievance about a supervisor, staff member, trainee, or the internship program:

Informal Review

First, the intern should raise the issue as soon as feasible with the involved supervisor, staff member, other trainee, or the DCT to resolve the problem informally.

Formal Review

If the matter cannot be satisfactorily resolved using informal means, the intern may submit a formal grievance in writing to the DCT. If the DCT is the object of the grievance, the grievance should be submitted to the Executive Director. The individual being grieved will be asked to submit a response in writing. The DCT (or Executive Director, if appropriate) will meet with the intern and the individual being grieved within 10 working days. In some cases, the DCT or Executive Director may wish to meet with the intern and the individual being grieved separately first. In cases where the intern is submitting a grievance related to some aspect of the training program rather than an individual (e.g., issues with policies, curriculum, etc.) the DCT and Executive Director will meet with the intern jointly. The goal of the joint meeting is to develop a plan of action to resolve the matter. The plan of action will include:

- a. the behavior/issue associated with the grievance;
- b. the specific steps to rectify the problem; and,
- c. steps designed to ascertain whether the problem has been appropriately rectified.

The DCT or Executive Director will document the process and outcome of the meeting. The intern and the individual being grieved, if applicable, will be asked to report back to the DCT or Executive Director in writing within 10 working days regarding whether the issue has been adequately resolved.

If the plan of action fails, the DCT or Executive Director will convene a review panel consisting of him/herself and at least two other members of the training faculty within 10 working days. The intern may request a specific member of the training faculty to serve on the review panel. The review panel will review all written materials and have an opportunity to interview the parties involved or any other individuals with relevant information. The review panel has final discretion regarding the outcome.

If the review panel determines that a grievance against a staff member cannot be resolved internally or is not appropriate to be resolved internally, then the issue will be turned over to the Director of Human Resources.

Please sign this acknowledgement page and return to the Clinical Training Director.

Acknowledgment

I acknowledge that I have received and reviewed the Due Process and Grievance procedures of the Genesis Doctoral Internship Program. I agree to abide by the procedures outlined in this document. I have been provided with a copy of the document to keep in my files.

Print Name

Signature

Date

Appendix C: 2022-2023 Didactic Training Schedule

Fridays, 1 pm to 2 pm (Hampton Location)

Month	Week	
August	Week 1	Orientation to Genesis Counseling Center and Genesis Assessment Center Presenters: Dr. Candace Lassiter (Clinical Training Director) and Dr. Trina Young Greer (Executive Director)
	Week 2	Genesis Assessments Overview Presenter: Dr. Candace Lassiter
	Week 3	Best Documentation Practices (in Valant) and Measurement-Based Care: Presenters: Dr Candace Lassiter
	Week 4	Intelligence Testing & Psycho-Educational Assessment Presenter: Dr. Sherri Spain
September	Week 1	Evidence-based Therapy Approaches Presenter: Dr. Candace Lassiter
	Week 2	Autism Diagnostic Observation Schedule (ADOS-2) training Presenter: Dr. Sherri Spain
	Week 3	DBT: Week 1 Presenter: Dr. Candace Lassiter, LCP
	Week 4	DBT: Week 2 Presenter: Dana Lyons, LPC
	Week 5	DBT: Week 3 Presenter: Dr. Trina Young Greer
October	Week 1	Neuro-Feedback Overview Presenter: Dr. Sherri Spain
	Week 2	ADHD Assessment and Best Practice Treatment Recommendations Presenter: Dr. Noelle Lowry
	Week 3	Autism Assessment and Best Practice Treatment Recommendations Presenters: Dr. Trina Young Greer and Dr. Cindy Kokoris
	Week 4	Integrated Report Writing Presenter: Dr. Cindy Kokoris

November	Week 1	Bariatric Assessment and Best Practice Treatment Recommendations Presented: Dr. Candace Lassiter,
	Week 2	Diversity Sensitivity Training Presenters: Dr. Ramona Watson and Dr. Trina Young Greer
	Week 3	Mood Disorders Assessment and Best Practice Treatment Recommendations Presenter: Dr. Candace Lassiter
	Week 4	Personality Disorder Assessment and Best Practice Treatment Recommendations Presenter: Dr. Candace Lassiter
December	Week 1	RAD Assessment and Best Practice Treatment Recommendations Presenter: Dr. Noelle Lowry
	Week 2	Substance Use Assessments and Best Practice Treatment Recommendations Presenters: Brent Griffin, LPC and Dr. Candace Lassiter
	Week 3	Neuropsychological Assessments Presenter: Dr. Sherri Spain
	Week 4	Compassion Fatigue and Self-Care Presenter: Mark Mortier, LPC
	Week 5	Christmas Break
January	Week 1	Sexual Minorities Sensitivity Training and Sexual Identity Therapy (Dr. Mark Yarhouse' research will be reviewed) Presenter: Dr. Trina Young Greer
	Week 2	LGBTQ+ Sensitivity and Spiritual Integration Approaches Presenter: Dr. Lori Burkett
	Week 3	OCD and Social Phobia Assessment and Best Practice Treatment Recommendations Presenter: Dr. Trina Young Greer
	Week 4	Professional Identity Development Presenter: Dr. Noelle Lowry
February	Week 1	Research Methods Presenter: Dr. Candace Lassiter
	Week 2	Prodromal Onset of Psychotic Disorders Presenter: Dr. Lori Burkett
	Week 3	Effective Children's Group Models Presenter: Aubrey Smith, LPC
	Week 4	Social Skills Training for Children (Review of Children's DBT curriculum)

		Presenter: Dr. Trina Young Greer and Dasmier Mason, LPC
March	Week 1	Play Therapy Presenter: Aubrey Smith, LPC
	Week 2	Art Therapy Presenter: Aubrey Smith, LPC
	Week 3	Acceptance and Commitment Therapy (ACT): 1 Presenter: Brent Griffin, LPC
	Week 4	Acceptance & Commitment Therapy (ACT) : Part 2 Presenter: Brent Griffin, LPC
	Week 5	Safety Plans: How Effective are Safety Plans? Presenter: Shelby DeBause, LMFT
April	Week 1	Trauma-Focused CBT Presenter: Dr. Trina Young Greer
	Week 2	Autism Best Practice Treatment (review of ABA) Presenter: Dr. Candace Lassiter and Cameron Ashworth, MA
	Week 3	Disability Assessments Presenter: Dr. Sherri Spain
	Week 4	Parental Capacity Evaluations Presenter: Dr. Trina Young Greer
May	Week 1	Subpoena with Dr. Trina: When the Psychologist receives an Expert Witness Subpoena Presenter: Dr. Trina Young Greer
	Week 2	Ethical Guidance for Virtual Therapy Presenter: Dr. Carolyn Bridges
	Week 3	Women's Reproductive Mental Health and Premenstrual Dysphoric Disorder Presenter: Dr. Carolyn Bridges
	Week 4	Anxiety Disorders Presenter: Dr. Noelle Lowry
June	Week 1	Empirically Validated Therapy Approaches Presenter: Dr. Candace Lassiter
	Week 2	Integrated Health Care and the Behavior Health Consultant Model Presenters: Dr. Ramona Watson
	Week 3	Genesis Integrated Health: Review of Learnings from Lackey Clinic Presenters: Dr. Trina Young
	Week 4	De-stigmatizing Mental Health Issues in the Church Presenters: Dr. Carolyn Bridges

	Week 5	Supervision Models, Ethics Best Practices Presenter: Dr. Candace Lassiter
July	Week 1	Supervision Models, Ethics Best Practices: Part 2 Presenter: Dr. Candace Lassiter
	Week 2	Collaborating with School Psychologists and IEP Teams Presenter: Dr. Sherri Spain
	Week 3	Common Ethical Mistakes and How to Avoid Them Presenter: Dr. Carolyn Bridges
	Week 4	PTSD and Dissociation Assessment and Best Practice Treatment Recommendations Presenter: Dr. Trina Young Greer
August	Week 1	What's next? Steps for pursuing licensure and career options after internship Presenter: Dr. Candace Lassiter

Appendix D: Sample Internship Certificate



This is to certify the successful completion of the
GENESIS DOCTORAL INTERNSHIP IN
CLINICAL PSYCHOLOGY.

_____ [intern name] _____

has completed 2000 Hours
in Clinical Psychology from
August 5th, 2022, to August 7th, 2023.

Candace Lassiter, Psy.D./LCP
Clinical Training Director
Genesis Counseling Center

Trina Young Greer, Psy.D./LCP
Executive Director
Genesis Counseling Center

Appendix E: Internship Admissions, Support, and Initial Placement Data

Internship Admissions, Support, and Initial Placement Data

Date Program Tables are updated: 08/30/2022

Program Disclosures

Does the program or institution require students, trainees, and/or staff (faculty) to comply with specific policies or practices related to the institution's affiliation or purpose? Such policies or practices may include, but are not limited to, admissions, hiring, retention policies, and/or requirements for completion that express mission and values?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
If yes, provide website link (or content from brochure) where this specific information is presented:	
Genesis Counseling Center is a faith-based outpatient private practice with a Christian affiliation. While interns are not required to sign specific policies associated with the Genesis Counseling worldview, the Genesis worldview is a principle that unifies and directs the clinical work of Genesis employees. More information about our worldview can be found on our website at https://genesiscounselingcenter.com/genesis-story/	

Internship Program Admissions

Briefly describe in narrative form important information to assist potential applicants in assessing their likely fit with your program. This description must be consistent with the program's policies on intern selection and practicum and academic preparation requirements:
Genesis Counseling Center is a private faith-based outpatient clinic that serves a diverse community in the Hampton Roads area, and there are opportunities to work with children, adolescents, adults, and marriage/family counseling. The internship has a heavy focus on assessment, outpatient psychotherapy, supervision, and group therapy, including DBT-skill groups. Opportunities for ADOS-2 specialized training and certification and neurofeedback training are also available. Additional emphases include specialized training and supervised experience with spiritual integration in therapy.

Does the program require that applicants have received a minimum number of hours of the following at time of application? If Yes, indicate how many:			
Total Direct Contact Intervention Hours	Yes		Amount: 500
Total Direct Contact Assessment Hours	Yes		Amount: 75

Describe any other required minimum criteria used to screen applicants:
<p>Applicants must have:</p> <ul style="list-style-type: none"> • Passed comprehensive examinations by the time they interview • Successfully defended their dissertation proposal by the time they start internship • Completed a minimum of three years in doctoral program by the time they interview

Financial and Other Benefit Support for Upcoming Training Year*

Annual Stipend/Salary for Full-time Interns	25,000	
Annual Stipend/Salary for Half-time Interns	12,500	
Program provides access to medical insurance for intern?	Yes	No
If access to medical insurance is provided:		
Trainee contribution to cost required?	Yes	No
Coverage of family member(s) available?	Yes	No
Coverage of legally married partner available?	Yes	No
Coverage of domestic partner available?	Yes	No
Hours of Annual Paid Personal Time Off (PTO and/or Vacation)	80	
Hours of Annual Paid Sick Leave	40	
In the event of medical conditions and/or family needs that require extended leave, does the program allow reasonable unpaid leave to interns/residents in excess of personal time off and sick leave?	Yes	No
Other Benefits (please describe): IRA		

*Note. Programs are not required by the Commission on Accreditation to provide all benefits listed in this table

Initial Post-Internship Positions

(Provide an Aggregated Tally for the Preceding 3 Cohorts)

	2018-2021	
Total # of interns who were in the 3 cohorts	0	
Total # of interns who did not seek employment because they returned to their doctoral program/are completing doctoral degree	0	
	PD	EP
Academic teaching	0	0
Community mental health center	0	0
Consortium	0	0
University Counseling Center	0	0
Hospital/Medical Center	0	0
Veterans Affairs Health Care System	0	0
Psychiatric facility	0	0
Correctional facility	0	0
Health maintenance organization	0	0
School district/system	0	0
Independent practice setting	0	0
Other	0	0

Note: "PD" = Post-doctoral residency position; "EP" = Employed Position. Each individual represented in this table should be counted only one time. For former trainees working in more than one setting, select the setting that represents their primary position.

*Note: Interns first matriculated in 2021-2022. Therefore, we do not have any inters represented in this table.