

UC DAVIS

STUDENT HEALTH AND COUNSELING SERVICES

2020 – 2021

POSTDOCTORAL RESIDENCY IN PSYCHOLOGY

An APPIC Postdoctoral Training Program



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University of California, Davis Student Health and Counseling Services
(530) 752-0871 <https://shcs.ucdavis.edu/about/employment-caps-training>

Updated 11/16/2020

POSTDOCTORAL RESIDENCY PROGRAM

Note: The SHCS Training Program Response to Coronavirus Pandemic/COVID-19:

Like the rest of the country and the world, UC Davis Student Health and Counseling Services (SHCS) is being affected by the outbreak of the Coronavirus Pandemic. We have taken measures to increase protection for staff and students, while still providing needed services to our campus community. This is a necessarily evolving process, and this document will be updated periodically to reflect the reality of the current situation at SHCS.

At the time of this posting (August 2020), all SHCS counseling and consulting services are being offered remotely to students and campus partners through HIPPA-compliant video-based conferencing. We are also providing services by telephone when needed, recognizing that not all students have equal access to the privacy and technological means necessary for using video. We began moving services remote in the middle of March 2020. All clinical staff were provided access to a 26-hour online training course in telemental health and were required to complete the basic 12-hour portion of the training before beginning to provide services remotely. Supervision of trainees remained in-person until such time that the California Board of Psychology published guidance that the portion of clinical supervision that the Board has historically required be conducted individually and in-person in order for Supervised Professional Experience to be accrued in California could be met through the use of 1:1 secure video conferencing. All supervision (individual and group) is currently being provided remotely through secure video conferencing. An additional group meeting hour has also been added to the Resident's weekly schedule (as compared to the traditional training schedule) for the Resident cohort to meet with the each other and the Postdoctoral Training Coordinator to increase time for social support and help with adjustment to ongoing stressors and changes brought on by the pandemic.

Looking ahead, we are working on adapting our orientation and training materials to allow for the 2020-21 training year to proceed as generally outlined in this document. We are working to prepare for a return to at least some in-person clinical services over the course of the coming training year, but no decisions have been made yet as to the scope or timeline of the resumption of in-person services. Please be assured we will make all decisions with the safety of our students, trainees, and staff as our top priority, and in accord with the guidance we receive from our local and state public health departments, our UC and SHCS leadership, APA, APPIC and the California Board of Psychology. Please check the SHCS Employment page for updates to this Note.

Lissa Joy Geiken, Ph.D., SHCS Director of Training
Karin E. Nilsson, Ph.D., SHCS Coordinator of Postdoctoral Training
July 31, 2020

The University and Surrounding Community

The University of California, Davis (UCD) is noted for its academic excellence, pastoral setting and friendly small town atmosphere. It encompasses a complex aggregation of people, programs and facilities united by a shared desire to learn. The University is organized into four undergraduate colleges, a graduate division and six professional schools—Education, Law, Management, Medicine, Veterinary Medicine, and the Betty Irene Moore School of Nursing. UCD offers more than 100 undergraduate majors in 16 disciplines (groups of related majors) and 94 graduate degree programs in 8 broad fields of study. You can learn more about UC Davis, by visiting the UCD website at: <http://www.ucdavis.edu/>

With an enrollment of 35,000+ students, it is the third largest campus in the University of California system. Reflecting recent demographic changes throughout the state, the proportion of ethnic students at Davis has increased significantly: it has from 17% in 1980 to over 60% in 2016. At the undergraduate level African American students comprise about 4% of the student body, Asian/Pacific Islander 35%; Chicano/Latino 21%; Native-American 1%, White/Caucasian 26% and international students 12%. There is a commitment to the continued growth and improvement of the campus environment to foster cooperation and understanding between an increasingly diverse student population.

The Davis campus lies adjacent to the City of Davis (<http://cityofdavis.org/>). Sacramento, with all its resources as the state capital, is only 20 minutes away, yet Davis is surrounded on all sides by open spaces. Within a 70-mile radius are several lakes, the famed Napa Valley wine country, San Francisco, and the foothills of the Sierra Nevada mountains. Within 150 miles are the Pacific Ocean coastal areas to the west and Lake Tahoe to the east.

Winters in Davis are mild with rain and the temperatures rarely go below freezing. Summers are sunny, hot and dry. Davis weather in the spring and fall is among the most pleasant in the state. Davis is very much a bicycling town. More than 40 miles of bike paths and 30,000 bicycles have given Davis the title of “City of Bicycles”. A local bus line links Davis with nearby cities of Sacramento and Woodland. A Greyhound bus terminal and Amtrak station are also located in town and the Sacramento Metropolitan Airport is a 20-minute drive from Davis.

ABOUT STUDENT HEALTH AND COUNSELING SERVICES (SHCS)

Overview – Counseling Services at UCD is a department of Student Health and Counseling Services (SHCS), a comprehensive student health service. The Counseling Services programs are designed to enhance the personal, social, educational and career development of the students of University of California, Davis. These services and programs include individual counseling and psychotherapy, group counseling and psychotherapy, couples counseling, psychological assessment, crisis intervention, and career counseling and testing. Staff also provide referral information, consultation, and educational programs. Counseling Services also offers specific services in Eating Disorders and Sport Psychology. Students in need of evaluation for psychiatric medication can be referred to psychiatrists within SHCS.

Staff - The Counseling Services professional staff consists of a multidisciplinary and culturally diverse group of psychologists, marriage and family therapists, licensed professional clinical counselors, and licensed clinical social workers. A variety of psychotherapeutic orientations are

represented including psychodynamic, interpersonal, family systems, cognitive-behavioral, relational-cultural, feminist, Gestalt, and organizational development approaches. Most of the staff is integrative in the ways they work with students and they share a commitment to a developmental point of view. Staff members are active in professional organizations and some have served in leadership roles within in these national organizations.

Resources - There is a variety of technological support available. All residents are provided Apple computers, video cameras, and e-mail and Internet access. Counseling Services has a small resource library and Residents also have access to one of the largest libraries in the UC System.

Clientele - During the 2018-2019 academic year, more than 5400 students received counseling services, which represents about 15% of the approximately 35,000 enrolled undergraduate, graduate, and professional students. The demographics of the campus are roughly proportionally reflected in the population of students who receive services. Students seeking services presented a variety of symptoms, syndromes, and disorders including affective disorders, anxiety disorders, relationship problems, eating disorders, and personality disorders. A few students present with schizophrenic disorders or psychotic symptoms. The majority of clients, however, present with adjustment reactions, mood and anxiety concerns, and developmental problems typical of a college student population.

Through our psycho-educational programs and outreach efforts, staff annually provide information and training to over 10,000 students, faculty, and staff annually. We receive requests from a wide variety of communities and units within the University community. Primary recipients of Counseling Services programming efforts include: the Cross Cultural Center; Lesbian Gay Bisexual Transgender Queer Intersex Asexual Resource Center; Women's Resource and Research Center; Educational Opportunity Program; Student Recruitment and Retention Services; Transfer, Reentry and Veteran Center; Center for Chicanx and Latinx Academic Student Success, Services for International Students and Scholars; Student Housing; Asian American Studies Department; African American and African Studies; Department of Chicana and Chicano Studies; Native American Studies Department; Middle East/South Asia Studies; the four undergraduate Colleges Deans' offices; Graduate Studies; School of Law; School of Medicine; Betty Irene Moore School of Nursing; School of Veterinary Medicine; and Intercollegiate Athletics. Topics included cross cultural communication, adjustment, stress management, drug and alcohol abuse, eating disorders, body image, communication skills, career decision making, stress & wellness, assertiveness training, managing critical situations and making referrals, dealing with distressed students, among others.

Accreditation – Student Health and Counseling Services is accredited by the Accreditation Association for Ambulatory Health Care (AAAHC). Counseling Services is accredited by the International Association of Counseling Services (IACS). The Internship Program is accredited by the American Psychological Association (APA) and is a member of the Association of Psychology Postdoctoral and Internship Centers (APPIC) and the Association of Counseling Center Training Agencies (ACCTA). The Postdoctoral Program is a member of the Association of Psychology Postdoctoral and Internship Centers (APPIC). Questions related to the program's accredited status should be directed to the Commission on Accreditation:

Office of Program Consultations and Accreditation, American Psychological Association,
750 1st Street, NE, Washington, DC 20002; Phone (202) 336-5979

apaaccred@apa.org

www.apa.org/ed/accreditation

B. Postdoctoral Residency Program Description

The Postdoctoral Residency Program provides advanced training opportunities in the core service areas provided by SHCS including: Intake Assessment, Crisis Intervention, Brief Psychotherapy, Multicultural Counseling, Career Counseling, Consultation to Campus Units and Departments, Program Development and Outreach. The program stresses Generalist Training, with the goal of preparing the Resident for a staff position in a university counseling center. <https://shcs.ucdavis.edu/about/employment-caps-training>

We currently offer specialized training and clinical experience in 5 areas: Eating Disorders, Sport Psychology, Campus Community Outreach and Programming, AB540/Undocumented Students, and Generalist Training with or without a specialized Clinical Practice area (e.g., Alcohol, Tobacco, and other Drug Treatment; Couples Therapy) – depending upon Resident’s interests, experience level, and the current needs of the Counseling Services. Note: In the 2021-22 training year we will be adding specialized training and experience in a new 6th area: Veterinary Medicine. **Each Focus Area has its own entry in the APPA CAS portal, to facilitate application to a specific focus area track. If you are applying to the program, please be sure to indicate in your cover letter which of these focus areas you have are applying for, and describe what education and experience you have in that area.**

During orientation, the Coordinator of Postdoctoral Training and each Resident meet and review professional interests and training objectives to develop individualized training plans for the year and for the focus area that the Resident will be working in.

Applicants are expected to have completed an academic program accredited by the American Psychological Association and to have completed ALL requirements for the doctoral degree by the start date of the Residency. Only applicants from an APA/CPA accredited academic program who have completed, or are in the process of completing, an APA/CPA accredited pre-doctoral internship will be considered. Applicants need to have had ample experience with diverse populations. It is desirable that an applicant already have strong experience in one of the aforementioned focus areas or in another area that could augment the Counseling Services current offerings.

The Residency is a 12-month full time program. It ordinarily begins on August 1 and ends on July 31. It is expected that the post-doctoral Resident will accrue 2,000 hours of supervised professional experience by the completion of this year and be eligible for licensure in any state. The expected salary is approx. \$48,900 per year, with paid sick leave, paid vacation days, 5 professional development days, 13 paid holidays, and eligibility to purchase health insurance from the menu of UCD staff/faculty health benefit plans.

Training Philosophy

The educational philosophy and training model of the SHCS Psychology Residency program is to provide training grounded in core competencies and the scientific principles of our profession that emphasize the area of applied practice. The overarching objective of the Residency training program, an integral element of SHCS, is to train ethical, competent psychologists who are capable of functioning independently and will contribute both to the welfare of society and to the profession.

The program is designed to allow a Resident to accrue 2000 hours of supervised experience, which will meet the postdoctoral professional experience requirements for licensure in all licensing jurisdictions. Accrual of 2,000 hours is based on a 43-hour work-week for the 12-month contract.

The training staff realizes that the most important learning occurs through providing service under the direct supervision and mentorship of a senior staff professional. Such "learning by doing" is guided, enriched and deepened through the postdoctoral seminar, focus area activities, clinical work, consultations, and in-service staff development activities.

Goals of the Postdoctoral Program

Goal #1: Commitment to mentoring and the practitioner-scholar model

The training staff believes that mentor relationships are essential methods to transmit knowledge and appropriate professional, ethical behavior. Thus, the training staff emphasizes the development of supportive, challenging collegial relationships with their Residents. In addition, the Residency emphasizes training in the area of applied practice. Our model stresses the development of knowledge, skills and attitudes that encourage a scientific approach to practice.

Goal #2: Commitment to developing a broad range of competencies

The training year is designed to offer supervised experiences to Residents who wish to develop and enhance competencies in providing the varied services offered through a university counseling center. These services include assessment, psycho-diagnostics, individual and group counseling, crisis intervention, consultation, outreach and program development. The core of the Residency is intensive supervision in short-term psychotherapy.

Goal #3: Commitment to training Residents to provide services to a diverse clientele

Integral to the functioning of a psychologist is the ability to understand and competently provide clinical and counseling services to a pluralistic clientele. This function is particularly relevant in the state of California where the changing demographics bring a richness of diversity in our student population. Our program aims to weave training in cultural competence into all training experiences. The goals of diversity training emphasize, but are not limited to improving ethnic and cultural sensitivity, increasing awareness of students' multiple identities (e.g. gender identity, sexual orientation, physical ability status, non-traditional student age, veteran status), and developing competence in multicultural counseling. Intermittent all-staff CEU trainings, monthly staff diversity dialogues, weekly postdoctoral training seminars, weekly supervision and daily interactions with a diverse staff, and the richness of the diverse client population provide

numerous opportunities for Residents to examine their own reactions to differences and the effects of their own backgrounds or privilege on their attitudes, biases and behaviors when providing services to students.

Goal #4: Commitment to facilitating personal growth and professional identity

The Residency is viewed as a period of deepening the integration of academic learning and applied experiences that occurred during internship. Emphasis is placed on the development of professional identity and facilitating personal growth. This process incorporates gaining self-knowledge, having confidence in the ability to make sound, ethical, clinical, and personal judgments, being comfortable with multicultural settings, and experiencing a sense of responsibility to oneself, the profession, and society. As a training faculty, we facilitate this process through mentoring, supervision, consultation, modeling and professional interaction. We also recognize that this is a developmental process with individual variability and therefore work to provide support and meet each Resident's needs as he/she progresses through this process.

Goal #5: Commitment to flexibility in developing each Resident's training program

The Residency program provides a series of structured activities that take into account the needs, interests and backgrounds of each individual Resident. Residents select their objectives and areas of emphasis to meet their own goals. Individualized plans are established in consultation with the Coordinator of Postdoctoral Training. Plans are reviewed and revised as necessary on a quarterly basis. The primary supervisors, Postdoctoral Coordinator, and Director of Training meet regularly to discuss aspects of each Resident's specific program as well as aspects of the Residency program generally.

Self Disclosure

Given our training program's goal to train ethical, competent psychologists who are capable of functioning independently, opportunities for personal exploration and self-reflection occur throughout the year. When appropriate, Residents are encouraged to explore historical influences and personal data that may affect subsequent clinical practice. Our staff use a consultative model of supervision and supervisors may consult with one another about trainees when relevant. The training program functions in a manner consistent with the American Psychological Association's Ethical Standard 7.04 (Student Disclosure of Personal Information), as contained in the Revised Ethical Principles of Psychologists and Code of Conduct (APA 2017).

UC Davis SHCS Values Statement Addressing Diversity

Respect for diversity and for values different from one's own is a central value of counseling psychology training programs. The valuing of diversity is also consistent with the profession of psychology as mandated by the APA's Ethical Principles and Code of Conduct (revised 2017) and as discussed in the Guidelines and Principles of Programs in Professional Psychology (APA, 2005). More recently there has been a call for counseling psychologists to actively work and advocate for social justice and prevent further oppression in society.

Our internship and postdoctoral training programs exist within a multicultural community which contains people of diverse racial, ethnic, and class backgrounds; national origins; religious, spiritual and political beliefs; physical abilities; ages; genders; gender identities,

sexual orientations, and physical appearance. We believe that our training community is enriched by members' openness to learning about others who are different than them as well as acceptance of others. We recognize that no individual is completely free from all forms of bias and prejudice and acknowledge that SHCS will evidence a range of attitudes, beliefs, and behaviors.

Expectations of Trainers and Trainees

Trainers and trainees:

- ✓ Agree to work together to create a training environment that is characterized by respect, safety, and trust and are expected to be supportive of all individuals
- ✓ Are committed the social values of respect for diversity, inclusion, and equity
- ✓ Are committed to critical thinking and the process of self-examination so that prejudices or biases (and the assumptions on which they are based) may be evaluated
- ✓ Acquire and utilize professionally relevant knowledge and skills regardless of their beliefs, attitudes, and values

Expectations Specific to Trainers

Trainers agree to:

- ✓ Engage trainees in a manner that is inclusive and respectful of their multiple cultural identities
- ✓ Examine their own biases and prejudices in the course of their interactions with trainees as a way to model and facilitate this process for their trainees (can include discussions about personal life experiences, attitudes, beliefs, opinions, feelings, and personal histories)
- ✓ Assume that no one is free from biases and prejudices and will remain open to appropriate challenges from trainees to their held biases and prejudices
- ✓ Be committed to lifelong learning relative to multicultural competence
- ✓ Examine and engage in exploration of multiple intersecting identities as they relate to nuances of power and privilege within the supervisory relationship.

Expectations Specific to Trainees

Trainees agree to:

- ✓ Engage in self-reflection and introspection of attitudes, beliefs, opinions, feelings, personal history
- ✓ Examine and attempt to resolve any of the above to eliminate potential negative impact on their ability to perform the functions of a psychologist, including but not limited to providing effective services to individuals from cultures and with beliefs different from their own. Members of our training community are committed to educating each other on the existence and effects of racism, sexism, ageism, heterosexism, religious intolerance, and other forms of prejudice.

C. Components and Sequence of Training Program

A. Elements of the postdoctoral training program:

Supervisory experiences, didactic/educational experiences, consultative experiences and professional interactions. Each aspect has been scheduled and planned in such a way that is intended to maximize the professional development of the Residents over the course of the training year.

In addition to the experiences described below, in which all postdoctoral Residents participate, there is an individualized aspect of the training. The Residents program planning begins during the selection process when applicants describe their goals for training. Once selected, the Coordinator of Postdoctoral Training has a number of additional contacts with each future Resident. During this time initial goals are explored more fully, tentative plans are made, and schedules are set for the fall quarter. The process of self-evaluation and program planning continues during the orientation period as Residents are asked to identify their skill levels and to articulate objectives and individual areas of interest, which are then developed into the final fall plan. Each subsequent quarter, each Resident meets with the Postdoctoral Coordinator who provides guidelines for development of the upcoming quarter's schedule.

B. A description of the 6 components of the postdoctoral training program:

Note: Due to the ongoing COVID-19 pandemic and necessary precautions to protect public health, much of what follows describing the program will be adjusted and delivered through remote means. Appropriate training in telemental health services and supervision, as well as tech support for providing the services, will be provided to Residents. We expect there to be some required in-person interactions during Orientation (e.g., signing Supervised Professional Agreements the first day, picking up university-provided laptops and equipment), but we also expect much of the Orientation to be delivered through remote means. Residents will have access to their private offices on-campus to use while participating in trainings and providing services, both during Orientation and throughout the year. The use of social distancing, wearing of facial coverings, and following any other recommended public health guidelines to reduce the risk of the spread of the virus will be enforced at all times while on campus. As the campus opens back up to more in-person services, SHCS is planning a phased response to re-introducing in-person services, with that response returning to higher levels of precaution as needed, prioritizing the health and safety of our students, trainees, staff and faculty.

- 1. Orientation.** The postdoctoral training year begins the first week of August. This training is designed to familiarize incoming Residents with SHCS' operation and facilitate their transition to the University of California, Davis community. Residents attend several orientation sessions which cover the SHCS Counseling Services' clinical, administrative and personnel policies and procedures. Residents are familiarized with the essential aspects of the Counseling Services' Clinical Plan that includes assessment, crisis intervention, hospitalization, brief therapy and clinical consultation and outreach. Residents learn about other campus agencies including, the Student Academic Success Center, Internship and Career Center, Cross-Cultural Center, LGBTQIA+ Resource Center, Student Recruitment and Retention Center, and Women's Research and Resource Center. Residents meet with the Management Team, Counseling Services' program coordinators and the postdoctoral training staff, who are the postdoctoral Residents' potential supervisors. A service plan and schedule are developed in consultation with the Coordinator of Postdoctoral Training.
- 2. Postdoctoral Retreats.** At the conclusion of orientation, Residents and the postdoctoral coordinator have a one-day retreat. The purpose of this meeting is to promote group cohesion, provide follow-up and review of orientation experiences, develop personal goals

and finalize each Residents contract. There is a year-end retreat that occurs at the end of the training year with a primary goal of reviewing the contributions the program has made to each Resident's personal and professional development and each Resident's contributions to the program.

3. Consultation.

a) Group Supervision/Psychological Consultation Team. SHCS postdoctoral residents and pre-doctoral psychology interns meet in mixed teams for weekly group consultation meetings led by senior professional staff. Residents prepare and present case consultations and are encouraged to provide feedback to fellow trainees about case conceptualization, intervention and management.

b) Psychiatric Consultation. SHCS psychiatrists are available to discuss issues of psychiatric case management, differential diagnosis and medication on an as needed basis.

c) Professional Interactions. One of the particular strengths of our training program is the availability of staff members for consultation. Staff members are available as needed for consultation about particularly difficult cases/crisis situations when the primary supervisor, Coordinator of Postdoctoral Training, Clinical Director and Director of Training are not available. Residents are encouraged to seek out staff members who have expertise in treating particular disorders/problems that are relevant to their caseloads. The essence of staff collaboration is evident in the collegial interactions and mentorship provided by the training staff.

d) Multi-Disciplinary Eating Disorder Team Consultation. There is a Multi-Disciplinary Eating Disorder Management Team that meets regularly, which consists of the Eating Disorder Coordinator from Counseling Services, the Eating Disorder Specialty Resident and Intern, 2-4 physicians and the SHCS nutritionist. This is one of 3 consultation meetings that the Eating Disorder Focus Area Resident attends as part of their contract. Other Residents are invited to attend when they have an eating-disordered client case which requires consultation with the team.

4. **Supervision.** Residents receive two hours individual clinical supervision per week. Each Resident also receives an additional hour of individual supervision in their chosen focus area.

5. **Training Seminar.** The Residents meet in a weekly 2-hour postdoctoral training seminar. The seminar is a core training experience and reflects the primary objectives of the postdoctoral program. The purpose of the seminar is three-fold: 1) To provide a forum for collegial support, discussion of training/professional identity issues, and monitor workload/organizational issues; 2) To provide advanced training in selected areas of clinical practice; 3) To provide education and exposure to other aspects of psychology practice such as consulting, alternative careers, service to the profession, business management and agency management.

6. **Supervised Experiences.** Residents gain experience in a wide variety of activities including the following:

Experiences for ALL Postdoctoral Residents

a) **Individual Counseling and Psychotherapy.** Residents primarily provide short-term, individual personal counseling. They carry approximately 16 clients depending on their

individual contracts (approximately 40% of their contract). Clients typically receive about 5 to 6 sessions, about 20% can be carried to 10 sessions and one client can be seen on a long-term basis. Each Resident's clinical caseload is ethnically and culturally diverse.

b) Group Counseling and Psychotherapy. SHCS offers a variety of groups, including Undergraduate Process Groups, and specific population groups such as: Eating Disorders, Graduate Students, Lavender / Coming Out, Men, Women, and Grief Groups. Some groups run for the entire year and Residents co-lead for the life of the group, while other groups are short-term, structured groups and workshop series. For those who seek a group experience, every effort is made to have Residents lead or co-lead a counseling group.

c) Initial Assessment, Triage, Crisis Intervention: SHCS' first contact systems provide Residents the opportunity to perform initial assessments, crisis intervention and brief triage appointments. Residents identify client concerns, assess level of functioning, diagnose disorders, and determine the appropriateness of agency services. After orientation, Residents provide intake and urgent care services with staff available for back-up and consultation. Residents contract for approximately five first contact hours per quarter (12.5% of their training contract). If there is a specific clinical focus area that the Resident is pursuing, then one of the intakes is organized to coincide with this area (i.e., one intake is reserved for student athletes or eating disorder clients).

d) Consultation and Programming: SHCS staff provides psychological consultation and programming services to the University community. Opportunities exist for experience in presenting programs to the campus community and Residents are expected to offer at least 6 programs during the year. There are a number of campus units that welcome training and consultation from SHCS. Residents may also collaborate in establishing liaison relationships with other campus offices, depending on their interests. The liaison relationships become the foundation for consultation and outreach programs.

e) Trainee Special Project Guidelines (TSP): The TSP is intended to provide trainees with the opportunity to reach a supervised hour total of 2,000 hours. In addition to the 40 contracted hours, the TSP is 3 hours per week that is devoted to working on a project to further their professional/career goals. These hours are included in the quarterly plan and approved by the Training Coordinator at the start of each new quarter. This project is intended to further Residents' professional development during the training year. As these 3 hours are in addition to your 40 hours, they can be completed off-site if needed. At the end of the year each trainee will provide staff with a 30-minute presentation on how they used their TSP hours. The residents may do a joint research project. The goal of the project is to help the residents integrate science into their practice of psychology. An additional benefit of the project is that it allows the interns to accrue 2,000 hours of supervised experience.

f) Mentoring Program. During the training year, each Resident is matched with one of the predoctoral psychology Interns here at SHCS's APA-accredited internship program to spend one planned hour per month in mentoring activity. The first half of the year they are matched with the Intern who shares the same special interest area, and then midway through the year, matched with a different Intern. During Orientation, Residents have a seminar in which they read and discuss relevant literature on peer mentoring, and then practice applying this knowledge as they support the Interns in their professional development.

7. Optional Activities:

a. Committee Service

Residents will have the opportunity to serve on one of the standing CS committees: Quality Assurance, Clinical Operations, Cross Cultural, Staff Wellness. On these committees they will work alongside senior staff members to address operational concerns of the service and participate in the activities involved in running a large university counseling center.

b. Couples Therapy

Residents, depending on prior experience and interest in providing couples therapy, and current availability of couple clients and qualified supervisors may have the opportunity to further develop their skills and expertise in providing short-term couples therapy to students and their partners.

c. Supervision and Training

Residents may have the opportunity to provide training and/or supervision in several ways: 1) Co-lead one of the counseling groups with a pre-doctoral psychology intern; 2) Facilitate an intern seminar with one of the licensed staff; 3) Develop a special project with a training component that is then presented or provided to staff and trainees. The Coordinator of Postdoctoral Training, Training Director and the Resident's supervisors provide ongoing consultation about supervision issues.

d. Psychological Testing. Residents' skills in the administration and interpretation of psychological tests can be enhanced during the training year. Although SHCS does not provide extensive testing opportunities, Residents can gain experience in personality inventories, projectives, intelligence tests, and measures of interests and values frequently used in career counseling. The individual supervisors are available for consultation regarding psychological testing.

e. Development of Research. Although this is not an expected experience of the postdoctoral year, a Resident may work with a staff member to develop and conduct a individual research project during the training year. This project may be submitted for publication and/or presentation at the American Psychological Association Convention.

C. Focus Area Experiences

Depending on a postdoctoral Resident's areas of interest, previous experiences, training goals, and SHCS' needs, and in consultation with the Coordinator of Postdoctoral Training, a Resident will work in one of the areas listed below as their Focus Area for their postdoctoral year. The postdoctoral year will be focused on one of these areas, with approximately 10-15% of the time worked at SHCS focused on enhancing and developing skills within this area, depending on the area and Counseling Services' current needs. Each area has 4 hours of programmatic responsibilities each week and a percentage of clinical responsibilities also devoted to the area. There are currently 4 focus areas (Tracks) with clinical focus on specific individuals, populations or disorders. We will be adding a 5th focus area track in the 2021-22 training year that will work predominantly with School of Veterinary Medicine students. The remaining focus area is intended to be General Clinical

in nature, and could include a specific diagnostic or interest area (i.e., General Clinical with subfocus in Substance Abuse Treatment or General Clinical with subfocus in Couples Therapy). **Note: the following descriptions are approximate. Exact responsibilities/activities/hours may change in response to agency, student, and trainee needs.**

1. Sport Psychology Focus Area: This area provides a Resident with an opportunity to work with student-athletes, coaches, and athletic department staff through consultation and counseling. Sport consulting with student-athletes and coaches entails (a) performance enhancement skills training, (b) life skills training, (c) coach, athlete, and team relationship development, and (d) psycho-educational groups (e.g., goal setting, concentration, motivation, stress management, team cohesion, dealing with sport injury). Counseling with athletes will assist, educate, and support student-athletes to enhance positive performance within and outside of their given sport. A Resident may be able to work with the Intercollegiate Athletic Department and interact with various campus resources associated with Intercollegiate Athletics. A Resident whose focus is the Sport Psychology program receives weekly supervision to discuss organizational and clinical issues in working with student-athletes. The Resident may also have the opportunity to mentor a pre-doctoral intern within the Sport Psychology program area.

Responsibilities (hours per week indicated in parenthesis):

- Dedicate 35% of individual clinical appts to counseling student-athletes (5 hours per week)
- Dedicate one intake hour a week to student-athletes (1 hour per week)
- Co-lead 1-2 Sport Psychology groups (e.g., HEAL for Athletes, SHAPE, Leadership) (2-4 hours per week)
- Attend 5-6 Weekly meetings Fall and Winter quarters with the Director of Sports Psychology
- Maintain contact with training room and student trainers
- Recommend areas for group development
- Add contributions to the Sport Psychology group notebook
- Develop a relationship with ICA coaches and staff (3 hours per week)
 - Include time in the contract to network with ICA staff
 - Identify and work with 1-3 teams
 - Develop your areas of interest
 - Develop your areas of limited competence/comfort
- Develop presentations to ICA coaches and student-athletes (as needed)
- Monitor/Record hours of time spent with ICA issues
- Make suggestions for psychology Residency development opportunities
- Complete a 1 Year Review of time spent with ICA issues

Additional Opportunities

- Contribute to the Sport Consulting & Psychological Counseling Newsletter
- Research within an area(s) of interest and/or UCD ICA program development
- Teach Life Skills courses
- Provide classroom presentations in PE 8 Life Skills, or Sport Psychology courses

2. Eating Disorder Focus Area: This area provides a Resident with specific training and experience in individual and group therapy; consultation; and community programming in the area of eating disorders. The treatment approach at SHCS for Eating Disorders is a multi-disciplinary team approach (the APA recommended approach for treating eating

disorders) and involves collaboration on the Eating Disorder Management Team (EDMT). The EDMT is comprised of 2-4 medical physicians from Student Health Services, 2 Registered Dietitians, a psychiatrist, and 3 therapists from Counseling Services (the Eating Disorder Coordinator; the post-doctoral Resident and the pre-doctoral intern who are specializing in eating disorders). For direct clinical experiences, the Resident working in this interest area will facilitate an eating disorders group and will devote 50% of their clinical caseload to seeing eating disordered clients, as well as devoting one of their intakes to eating disorder clients. Committee work and collaboration with other campus entities includes working with The Body Project campus student group, attendance and participation on the eating disorders management team (EDMT) at the Student Health and Wellness Center (SHWC), and participation in the Yolo County Eating Disorders Network by attending monthly meetings. Major programming and outreach is done throughout the year and the Resident may provide consultation to the health advocates and peer counselors in athletics at the SHWC, as well as pre-planned consultations and presentations for the Women's Research and Resource Center. The Resident will have a key involvement in developing and implementing programs for Celebrate Your Body Week on campus. There is the opportunity to co-teach the Eating Disorder Seminar for pre-doctoral interns, in addition to guest-lecturing in the pre-doctoral Assessment Seminar on various Eating Disorder assessments. The Resident will receive supervision from the Eating Disorder Program Coordinator. Other training experiences will be provided throughout the year, and may include attendance at a local training conference provided by a local outpatient eating disorder program. The Resident will additionally assist in planning, coordinating and facilitating our 5-week Body Esteem Boot Camp series. For more information, see our Eating Disorders Services: <http://shcs.ucdavis.edu/services/eating-disorder.html>

Responsibilities (hours per week indicated in parentheses):

- Multi-disciplinary staff meeting at the Student Health and Wellness Center (1)
- ABIDE meetings / Eating Disorder Posse Meetings (1)
- Yolo County Eating Disorder Network (1 hour a month)
- Providing clinical services: intake, group & 7 individual appts. on average (10- Clinical)
- Seminar lectures for pre-doctoral interns (1- Fall quarter only)
- Program development (Coordinating Body Esteem Boot Camp) (3)
- Outreach & Consultation responsibilities (1-2 each month)

3. Campus Community Outreach and Programming Focus Area:

This interest area is designed to offer supervised experiences to Residents who wish to develop and enhance their skills in developing and delivering programmatic and clinical services to one or more campus communities that have been historically underrepresented and/or marginalized on college campuses. All SHCS Residents carry a multicultural caseload, by virtue of the fact that UC Davis has a very diverse student population, but the Resident working in the Campus Community Outreach and Programming (CCOP) Focus Area will gain more in-depth experience in providing culturally sensitive and responsive services to a particular population of the Resident's choice. The Resident will be asked to identify in their application material the campus population(s) they wish to work with, based on the Resident's interest as well prior experience, education and/or training. See our Community Advising Network webpage for a

listing of the campus units SHCS already closely partners with in delivering student services.
<https://shcs.ucdavis.edu/services/can>

The CCOP Resident will work the SHCS Director of Multicultural Services and/or a delegated supervisor who specializes in their area to create and provide a combination of activities designed to expand the Resident's skills and serve the needs of students. This combination may include a needs assessment; relationship-building with the particular community; outreach programming; drop-in, support, or therapy groups; providing individual therapy to members of the community; and providing consultation to student groups and faculty/staff on student mental health needs. The Resident may also provide consultation and education to the SHCS staff and undergraduate peer educators as appropriate. Given that some campus student groups meet in the evenings or have weekend retreats, there may be occasional evening and/or weekend work hours required in this focus area. The Resident's schedule at SHCS will flex as needed.

Responsibilities (possible hours per week indicated in parentheses):

Duties in this area will vary depending on the program designed by the Resident.

Typically, it may include:

- Consultation with campus staff and faculty who serve this area (.5-1)
- Provide drop-in consultation/relationship-building activities for students (1-2)
- Co-lead a support or therapy group for the community (2)
- Provide intake appointments reserved for members of this community, and follow-up appointments as appropriate (3-4)
- Develop and provide outreach programming (1-3).

Total Hours: Programmatic 2-5; Clinical 4-8. {6-13}

4. Working with AB540/Undocumented Students at UC Davis Focus Area

UC Davis is proud to have resources dedicated to supporting AB540/Undocumented Students and their families as they pursue their education on our campus. The Resident working in this focus area will meet with the Coordinator of Postdoctoral Training and their Focus Area supervisor to create and provide a combination of activities designed to expand the Resident's skills and to serve the needs of the students on our campus who fall under the umbrella of the AB540 designation and/or are undocumented. These activities may include a needs assessment; relationship-building with the particular community; outreach programming; drop-in, support, or therapy groups; providing individual therapy to members of the community; and providing consultation to student groups and faculty/staff on student mental health needs. The Resident may also provide consultation and education to the SHCS staff and undergraduate peer educators as appropriate. Given that some campus student groups meet in the evenings or have weekend retreats, there may be evening and/or weekend work hours required in this focus area a few times per month. The Resident's schedule at SHCS will flex as needed.

Responsibilities (hours per week indicated in parentheses):

Duties in this area will vary depending on the program designed by the Resident.

Typically, it may include:

- Consultation with campus staff and faculty who serve this area (1)
- Provide drop-in consultation/relationship-building activities for students
(e.g., Coffee Talks, Mellow Monday arts and crafts for stress reduction) (1-2)
- Co-lead a support or therapy group for the community (2)

- Provide intake appointments reserved for members of this community, and follow-up appointments as appropriate (1-5)
- Develop and provide outreach programming (1-2).

5. Working With Veterinary Medicine Students

New for the 2021-22 training year UC Davis SHCS is proud to be offering a Focus Area in counseling veterinary medicine students. Across the country, universities and professional school programs (e.g., medical schools, nursing schools, veterinary medical schools, law schools) are increasingly employing counseling staff dedicated to serving the needs of their students in high-stress specialized academic programs. UC Davis's School of Veterinary Medicine (SOVM), ranked the #1 School of Veterinary Medicine nationally by the US News and World Report, and globally by QS World University, is proud to be a leader in this area as well.

Currently SHCS employs two staff members dedicated to providing services to the SOVM students. The Resident working in this Focus Area will be unique among the Postdoctoral Residents in our program in that the bulk of their direct services will be provided to SOVM students and not to the broader campus community. In addition to addressing more common professional school student concerns related to adjustment to an intense, demanding academic program, the Resident will also work with the SOVM students as they adjust to both the scientific and existential issues around performing euthanasia, unique to veterinary medicine.

While their client population will be specialized, the Resident will join with the rest of the SHCS Postdoctoral Resident cohort for Orientation activities, retreats, training seminars, consultation teams, and staff meetings, and have exposure to the breadth of college mental health through these activities. Similar to the other Residents, they will receive a total of three hours of individual supervision per week, and meet with the Coordinator of Postdoctoral Training and their Focus Area supervisor to create and provide a combination of activities designed to expand the Resident's skills and to serve the needs of the SOVM student community. These activities will include providing individual therapy to the SOVM students; planning and providing wellness programming; co-facilitating support or therapy groups, and providing consultation to student groups and faculty/staff on student mental health needs.

Responsibilities (hours per week indicated in parentheses):

Duties in this area will vary depending on the program designed by the Resident.

Possibilities include:

- Consultation with campus staff and faculty who serve this area (1)
- Providing drop-in consultation for students (1-2)
- Co-lead a support or therapy group for the community (2)
- Provide intake appointments reserved for members of this community (4-5) and follow-up appointments as appropriate (14-16)
- Develop and provide outreach programming (1-2).

6. General Clinical Residency With / Without Specialty Focus on Diagnostic Issue:

These two examples of focus areas described below are designed to offer supervised experiences to Residents who wish to develop and enhance skills in providing the varied clinical services offered through a university counseling center, and in becoming a skilled generalist who is marketable broadly and prepared for a career in a university counseling center environment.

These services include assessment, psychodiagnostics, individual and group counseling and psychotherapy, crisis intervention, undergraduate or graduate student career counseling, consultation, program development, and research. The core of this Residency opportunity is intensive supervision in short-term psychotherapy.

The Resident in **General Clinical with a Specialty Focus** will provide clinical services for at least 40% of their contracted clinical hours to the diagnostic issue that they choose to specialize in. In addition to devoting more of their caseload, a Resident with this emphasis area would have the opportunity to provide a group that specifically addresses the specialty topic. Examples of diagnostic issues that could be a specialty focus: Addictions; Anxiety; Childhood Trauma; Relationship Issues (Couple Therapy Focus); Sexual Abuse/Assault; Sexual Issues or Sexual Health. The Resident would receive emphasis area supervision from a staff member who has specialized clinical experience in the area. (Note: Availability of a particular Specialty Focus is dependent on senior staff availability for appropriate specialized supervision. Please contact the Coordinator of Postdoctoral Training to inquire about current availability. knilsson@ucdavis.edu)

General Clinical Residency Without a Specialty Focus. A General Clinical Resident contracts for a slightly larger clinical caseload, with the opportunity to see a few student clients for more sessions than the typical brief model Counseling Services offers. A Resident in the General Clinical focus could choose to devote their clinical time to primarily individual sessions, or could to run an additional general process group for graduate or undergraduate students.

Responsibilities (hours per week indicated in parentheses):

- Co-lead a group in specialty focus area (2)
- Mentor trainees in their group co-leader role in this specialty focus group (1)
- Devote 50% of clinical student hours and provide an additional intake
- Develop and facilitate an outreach or special project to meet the needs of students with a particular clinical presentation (1-3).

D. Evaluation of Postdoctoral Psychology Residents

Formal evaluations are provided in written and oral formats and provided by the Residents' individual Clinical supervisors and by their Focus Area supervisors at 3, 6 and 12 months. The supervisors may also contact other staff who have been involved in the Resident's training (e.g., seminar leaders, outreach co- presenters) to gain a broad picture of the Resident's participation, involvement, interests, skill level, professionalism, etc. Evaluation of group facilitation are provided at the end of each term. Group evaluations will be completed by the Resident's staff co-facilitators or group supervisors. The formal evaluation process considers both the Resident's objectives and goals as well gives feedback in areas that reflect domains of professional competence. The broad competency areas included in the clinical evaluations are:

- Ethical and Legal Matters
- Working with Individual and Cultural Diversity

- Professional Values, Attitudes and Behaviors
- Communication and Interpersonal Skills
- Assessment Skills
- Intervention Skills
- Consultation, Outreach and Interdisciplinary Skills
- Supervision

Focus Area evaluations also address knowledge, skills, and behaviors utilized in each area. At the end of the first two evaluation periods, new goals and priorities can be set to facilitate the future supervisory contacts in particular and future training in general. Throughout the supervision process, it is expected that feedback and discussion are continuous; thus, if goals are not being sufficiently met, formative feedback is given prior to a formal evaluation period. The Coordinator of Postdoctoral Training receives copies of all evaluation forms and monitors each Resident's progress.

Recognizing that evaluation is a two-way street, Residents evaluate their supervisory relationships during each evaluation period. They complete evaluations on their program experiences at the mid-year as well, and an evaluation of the entire program at the end of the year. All evaluation materials are reviewed by the Training Director, the Coordinator of Postdoctoral Training and training supervisors to assist in the development of each Resident's program and in the development of the training program overall. We seek feedback and ask for honest evaluations so that we can provide Residents with a program responsive to their training needs.

Note: The first day of the postdoctoral training year, all Residents are provided a copy of “Due Process In Action: The Identification and Management of Trainee Problems/Grievances”, a document which outlines our policies and procedures for addressing and managing trainee competency problems and concerns.

