



RICHARD J. DONOVAN CORRECTIONAL FACILITY HEALTH SERVICE

PSYCHOLOGY INTERNSHIP HANDBOOK



CALIFORNIA CORRECTIONAL
HEALTH CARE SERVICES



2023-2024 TRAINING YEAR

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Introduction from Training Director

Dear Potential Internship Applicant:

Thank you for your interest in the Richard J. Donovan Correctional Facility Health Service Psychology (RJDCF HSP) Internship Program. The RJDCF HSP Internship Program offers a broad range of clinical experiences with a diverse patient population to pre-doctoral students seeking well-rounded training in the field of psychology. Clinical practice is carried out within one of the most challenging institutions in the California Department of Corrections and Rehabilitation (CDCR). As an intern at RJDCF HSP Internship Program, you are afforded the opportunity to provide individual and group therapy, crisis intervention, and suicide risk assessment. In addition, you will receive weekly on-site didactic trainings and state-wide monthly trainings, where you will be able to interact with staff and interns from other institutions. The monthly statewide didactic seminars are sponsored by the statewide Training Unit of the CDCR. Here, you will have the opportunity of learning from experts in diverse areas of psychology; exchanging ideas with peers, subject matter experts and members of the professional community. This program has adopted the Practitioner-Scholar Model, which strives to promote a breadth of experience to our trainees, in order to develop a diverse group of well-rounded, competent, entry-level clinicians, prepared to work both inside and outside of the correctional system.

The diverse population of patients housed at RJDCF offers a unique opportunity for interns embarking on the journey of becoming culturally competent clinicians. Also within the frame-work of the scientifically-informed practitioner model, our training programs emphasize the incorporation of psychological science into the practice and delivery of culturally competent services.

CDCR allocates civil service positions for Psychology Interns. In the RJDCF HSP Internship Program we have eight internship slots per year. This means that the slots are guaranteed, and that the information we present is secured.

Thank you again for your interest in RJDCF HSP's Internship Program. The following sections of this brochure have been organized in a manner that will provide you with a comprehensive description of our training philosophy and intern experiences. If you have further questions that are not answered by this brochure, feel free to contact me directly by phone or email, at the number or email address below, with any questions regarding our internship program.

Sincerely,

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Richard J. Donovan Correctional Facility at Rock Mountain (RJDCF)

Mission Statement

RJDCF is a multi-mission institution. RJDCF's primary mission is to provide housing for General Population (GP), Sensitive Needs Yard (SNY), Level II, III, and IV residents serving their term of incarceration at RJDCF. Additionally RJDCF provides health care services and rehabilitative programs to residents while incarcerated at RJDCF. RJDCF is a designated institution for inmates with severe mental illness, inmates with developmental disabilities, and is responsible for providing officer coverage for inmates being treated in community hospitals throughout San Diego County.

Institution Details and Programs

RJDCF's missions include housing and providing treatment to inmates with severe mental illnesses, as well as inmates who have been identified as having medium to high risk medical concerns. RJDCF houses approximately 3000 offenders who identify as male, female, transgender, and non-binary. Approximately 65% of these offenders are enrolled in the Mental Health Services Delivery System (MHSDS).

The Institutional Hearing Program (IHP) at the RJDCF is designed to prepare inmates, who are illegal immigrants, for release to the United States Department of Homeland Security's custody and return to their country of origin. Self-Help and Inmate Leisure Time Activity Groups include Narcotics Anonymous, Alcoholics Anonymous, Criminal and Gang Anonymous.

Rehabilitative resident leisure activities include social, educational, recreational, and mentoring groups. RJDCF offers study in the areas of Recycling and Green Industries, Food Handling, Coastline College, Creative Writing, and the highly acclaimed Thinking for a Change. Inmates may also participate in a Veteran's Group and other volunteer-led community service activities.

Academic opportunities include Literacy and Adult Basic Education through GED. Vocational opportunities include the Machine Shop, Welding, and HVAC. Additionally, California Prison Industries Authority (CALPIA) employs inmates at RJDCF in its laundry, bakery, and casual shoe factory.

Religious services are provided for inmates of all denominations. RJDCF employs a Catholic Priest, a Protestant Chaplain, a Muslim Imam, a Native American Spiritual Leader, and a Jewish Rabbi. Additionally, nearly four hundred and thirty volunteers provide volunteer-led religious and other programs such as KAIROS, Alternatives to Violence/Hands of Peace, the Urban Ministries Institute (TUMI), and many other faith-based programs.

Mental Health Services Delivery System (MHSDS) Mission Statement

To provide ethical, professional, and effective mental health care services for individuals remanded to CDCR.

MHSDS Vision

Our services meet or exceed national mental health care standards. We ensure optimal functioning of individuals in our care and promote their successful reintegration into society by using research, evaluation, and assessment to develop and enhance evidence-based treatment strategies. We foster safe and secure environments within the institution and are committed to public safety.

We are a competent, well-trained staff, who uphold and live our organizational values to promote interdisciplinary cooperation, employee wellness, effective leadership, humane treatment, and a highly productive workforce.

Self-governance, program and service evaluation, assessments, and continuous self-monitoring are used to ensure quality improvement and system-wide, multi-level information sharing and decision making. Our information technology system is state of the art and staffing and space meet evolving operational requirements.

We are an accredited program, cooperating and partnering with external stakeholders to sustain sufficient funding to fulfill our mission and to minimize recidivism by providing continuity of care.

RJDCF Mental Health Programs

RJDCF houses a very diverse resident population. RJDCF treats a range of residents with chronic medical illnesses, including HIV, hepatitis, asthma, high blood pressure, pain, and many more. RJDCF is an institution designated to care for residents with developmental disabilities, physical disabilities, and mental disorders. RJDCF is also a designated institution for residents who are transgender. Over half of the total resident population (65%) receives treatment from the Mental Health (MH) Department with the full range of psychotic, mood, and personality disorders represented in the resident population.

MHSDS provides three levels of care for our patient population.

- Correctional Clinical Case Management System (CCCMS): CCCMS is designated for residents diagnosed with one of the ten identified diagnoses or medical necessity. They are higher functioning and able to interact with the GP. They are seen a minimum of once every ninety days for case management, but can be seen more frequently as appropriate.
- Enhanced Outpatient Program (EOP): EOP is designated for residents with a qualifying diagnosis who are not functioning well in the GP. EOP patients are scheduled for a minimum of ten hours of structured treatment to include both individual and group therapy.
- Mental Health Crisis Bed (MHCB): Residents who meet criteria for danger to self or others, or are gravely disabled due to mental illness, are admitted to the MHCB. The MHCB provides daily encounters with members of the Interdisciplinary Treatment Team (IDTT) in an acute care setting.

Interdisciplinary Approach to Care

RJDCF has the largest mental health program in the state of California's correctional system. As such, we have over 90 psychologists, social workers, and psychiatrists working at the facility, in addition to recreational therapists and psychiatric technicians. A wide variety of theoretical orientations are represented among staff members, including cognitive behavioral, humanistic, psychodynamic, and psychosocial approaches to treatment. Areas of staff interest or expertise include forensic psychology, program planning and development, drug and alcohol treatment, treatment of personality disorders, psychology of the aged, staff training and development, treatment for the LGBTI population, behavioral assessment and treatment planning, among others.

RJDCF is also a high risk medical facility and as such, we have a large number of physicians, nurses, psych techs, dietitians, dentists, and medical assistants employed at RJDCF as well. Custody staff are also an integral part to the treatment team and can often offer information about residents that we are not privy to. Our unique team allows for interdisciplinary consultation and whole patient care that ultimately results in the best possible treatment for the resident. Interns are an integral part of the treatment team and are encouraged to consult with co-workers on a continuous basis for optimal patient care.

Special Programs for Residents at RJD

Striving To Achieve Rewards (STAR) Program

There is increasing evidence that programs that are focused on changing the social environment including token economies have beneficial impact on improving behavior. Correctional settings that have focused on a reinforcement model for behavior modification have observed improvements in resident behavior. The objective of the S.T.A.R. EOP Incentive Program is to utilize the principles of contingency management to encourage inmates to take responsibility of one's actions, thus improving their behavior. The program provides rewards for one's efforts, thus increasing the likelihood of repeating positive actions again in the future. Residents will receive points for positive behaviors and participation in mental health programming.

LBGTI Support Unit

RJD is designated as one of the 11 transgender hubs in CDCR. The Gender Identity Program at RJD was developed to offer mental health services to patients who identify as transgender, gender non-conforming, or non-binary. The program consists of weekly group therapy which is psycho-educational and process based, adjunctive care for crisis management, and pre-release treatment and resources. CDCR offers transgender patients the ability to be evaluated for initiation of hormone therapy and gender affirming surgery and RJD clinicians conduct the mental health evaluations that are a component of these processes.

Pooch Program

RJD has created the Prisoners Overcoming Obstacles & Creating Hope (POOCH) Service Dog Program. The POOCH Service Dog Program is a community partnership with the nonprofit San Diego based Tender Loving Canines Assistance Dogs, Inc., and RJDCF. The POOCH Service Dog Program allows residents to raise and train service dogs for wounded warriors and children with autism. The dogs graduating from the POOCH Program will be Assistance Dogs International (ADI) certified. The RJDCF staff is also very excited about the program due to the opportunity to take the dogs in POOCH Program home on the weekends to socialize the dogs to new and different environments that they will not be exposed to at the institution, according to those close to the program.

TEDx

The independently organized program, licensed by TED, features a broad spectrum of TEDx Talks under the theme "Beyond the Surface." Beyond the surface of fences and walls, TEDxDonovanCorrectional allows residents to strategize, plan, and facilitate the discussion of their life in prison, how they have been rehabilitated, and hopes for the future, supported by a group of local TEDx volunteers.

Playwrights Project

Playwrights Project is a nonprofit organization with a mission to advance literacy, creativity, and communication by empowering individuals to voice their stories through playwriting programs and theatre productions. Playwrights Project provides playwriting workshops in schools and underserved communities, including RJD.

UC San Diego Books Beyond Boundaries

UCSD students volunteer to run book clubs at RJD with the mindset that incarcerated individuals are going to re-enter society and these book clubs are an effective way to create a relationship between the residents and the university. According to the program, the mere task of sitting in smaller groups and discussing literature of any genre builds a sense of community, encourages understanding and listening skills, and promotes stimulating and intellectual debate between the residents and UCSD as well as between the residents themselves.

HEAL – Resident-Lead Memorial Services

To help bereaved residents create a safe space to heal from loss, the Mental Health Department is supporting resident-lead Memorial Service events across multiple yards. The first memorial service was held on E yard in March 2018 and was a resounding success. Residents were able to honor the lives of loved ones they have lost during their time of incarceration by creating an obituary, sharing a photo, sharing a short speech and/or lighting a candle.

Clinical Assignments and Specialty Rotations

Core Clinical Assignments

Each intern completes a core clinical assignment while completing two specialty rotations. The intern's core assignment is to work with a caseload of residents with a variety of mental illnesses and custody classifications to provide individual therapy, group therapy, suicide risk assessment, initial assessments, crisis intervention, treatment planning, level of care decisions, administer clinical outcome measures and other self-report measures, and make client case presentations during interdisciplinary treatment team meetings. At the beginning of the internship year, interns rank their preferences for location of their core clinical assignment and are assigned rotations based on preference, institutional need, equal distribution, training and experience, and goals of the intern. Locations that may be available include: Level 2 Yard CCCMS/EOP, Level 3 Yard CCCMS/EOP, Level 4 Yard CCCMS/EOP, and Administrative Segregation Unit CCCMS/EOP. Interns will function in their core clinical assignment 3 days a week.

Specialty Rotations

Each intern will complete 2 specialty rotations during the internship year and will switch rotations at the 6 month mark. At the beginning of the internship year, interns rank their preferences for specialty rotations and are assigned rotations based on preference, institutional need, equity, training and experience, and career goals of the intern. Interns will work in their specialty rotation 1 day a week. Specialty rotations may consist of the following:

Behavioral Health Unit (BHU)

The behavioral health unit primarily provides individual therapy to residents placed in the Correctional Treatment Center at RJD, who have serious medical conditions, are recovering from surgery, are undergoing chemotherapy or dialysis treatment, or who are in end-of-life care. The intern meets with these residents weekly to provide supportive therapy, consults with the medical and mental health treatment team, and completes needed mental health evaluations/assessments. The behavioral health unit also has the ability to provide group or individual therapy throughout the institution on chronic pain management, insomnia, and diabetes management.

Sex Offender Treatment

Interns in this rotation will provide individual sex offender treatment to resident-patients with sex offenses utilizing standardized sex offender treatment manuals that follow the Good Lives Model, Risk Needs Responsivity Model, CBT, and Trauma-Informed Care. Interns will also be trained on sex offender treatment, evaluation, and parole methods utilized in the State of California.

Gender Identity and Lesbian/Gay/Bisexual/Transgender/Intersex Support Unit (LGBTI) The Gender Identity Program was developed to offer mental health services to patients who identify as transgender, gender non-conforming, or non-binary. The program consists of weekly group therapy which is psycho-educational and process based, adjunctive care for crisis management, and pre-release treatment and resources. The rate of suicide attempts among the transgender population may be higher in some populations in comparison to the GP. The Gender Identity Program aims to support the population and reduce suicidality, suicide attempts, and self-harm within the transgender resident population at RJDCF. The group therapy curriculum specifically addresses negative thoughts, minority stress, identifying triggers, and identity development that may lead to suicidal thinking, as well as teaches patients about coping skills and safety plans to use to manage depressive and suicidal thoughts.

- The crisis management piece of the Gender Identity Program is a form of secondary prevention in which patients are offered weekly adjunctive therapy in addition to the therapy they already receive from their primary clinician, in order to manage crisis situations, such as suicidality.
- The pre-release aspect of the Gender Identity Program serves to introduce patients to LGBTI resources in the community in order for them to pursue ongoing treatment once they parole and become connected with the LGBTI community.

LGBTI support groups and adjunct individual services within the patient's treatment plan, including for GP patients not within the MHSDS, are offered to support the LGBTI community and to reduce suicidality and suicide in the community within corrections.

The psychologist in the LGBTI Support Unit is also responsible for completing evaluations for patients who are requesting hormone therapy or gender affirmation surgery. The intern in this rotation will be able to shadow these evaluations and contribute to the records review incorporated in the evaluations.

Developmental Disabilities Program

The Developmental Disabilities Program provides clinical support and treatment to patients who have developmental disabilities and cognitive or adaptive functioning deficits that inhibit their ability to independently perform essential ADLs. Patients in this program may have neurodevelopmental disorders, or neurocognitive disorders, and receive treatment and assistance through the DDP program. Through screening and evaluation, this team also identifies those who have recently experienced a significant decline in cognitive functioning and are now appropriate for the DDP program, although they may not have been at the beginning of their incarceration period. These patients often have progressing neurocognitive disorders, suffer a traumatic brain injury while incarcerated, or have a medical illness that causes cognitive decline. The intern in this rotation will be trained on, and will be able to administer the QT, TONI-4, and the CASE.

DBT-Informed Skills Based Program

The DBT-Informed Skills Based Program offers skill building group therapy and individual therapy to resident-patients with personality disorders, self-harm behaviors, and difficulty regulating their emotions. The psychologist in charge of this rotation also facilitates a weekly DBT consultation group that includes the intern in the specialty rotation and other RJDCF clinical staff who work with difficult patients or use DBT-informed skills in their treatment.

Substance Use Treatment

Substance use in correctional settings is an ongoing and serious issue. The intern in this rotation will provide group therapy to residents throughout the institution using the SMART Recovery approach to Substance Use Treatment. The intern will also administer drug use screeners pre and post group therapy and assess for movement within the stages of change.

Should the specialty rotations listed above not be available, the following specialty rotations may be available:

Supervision – Interns experience providing clinical supervision to a greater extent than is offered as part of the general internship experience, including observing a licensed psychologist providing individual clinical supervision to practicum students, reviewing documentation for co-signature, and extensive training on providing clinical supervision.

Suicide Prevention – Interns gain work experience providing patients with psycho-educational and process groups regarding substance use, utilizing structured group therapy curriculums.

Pre-Release Program – Interns gain work experience in the pre-release program, preparing patients for release into the community by providing group therapy, individual therapy, and resources in the community for continuing mental health care, including establishing housing, and employment once released.

Creative Therapy – Interns gain work experience providing patients with creative therapies including mindfulness/meditation, art therapy, music therapy, poetry therapy, and pet therapy.

Mental Health Crisis Bed (MHCB) – Interns gain work experience providing treatment to residents admitted to the MHCB for danger to self, danger to others, or grave disability..

Clinical Support Unit (CSU) - Interns gain experience working with residents who frequently engage in self-injurious behavior and/or frequently utilize the MHCB and other clinical resources.

Personal Insight and Restorative Justice - assist inmates who are within 6-12 months of paroling to the community, with gaining insight, reflecting on past and present behaviors, exploring life choices, encouraging self-realization, gaining empathy, repairing relationships, reaching emotional self-forgiveness, rebuilding self-acceptance, and fostering personal growth.

Assessment Unit - evaluations to determine if mental illness symptoms contributed to in-prison offenses (rules violations) and whether penalties should be mitigated, as well as diagnostic clarification and malingering assessments when time permits

Each specialty rotation also includes a special project that the intern completes during the rotation. The special project is determined and assigned by the clinical psychologist in charge of that rotation. The special project is to be completed and turned in to the specialty rotation psychologist by the last day of the rotation.

Treatment Issues

Types of disorders treated in MHSDS:

Core Mental Disorders

Treatment and monitoring are provided to any individual who has **current** symptoms and/or requires treatment for the current Diagnostic and Statistical Manual (DSM) diagnosed (may be provisional), serious mental disorders listed below:

- Schizophrenia
- Delusional Disorder
- Schizophreniform Disorder
- Schizoaffective Disorder
- Brief Psychotic Disorder
- Substance-Induced Psychotic Disorder (exclude intoxication and withdrawal)
- Psychotic disorder due to a General Medical Condition
- Psychotic Disorder Not Otherwise Specified
- Major Depressive Disorders
- Bipolar Disorders

Medical Necessity

"Medical Necessity" represents a second group-type of mental distress for which treatment may be provided as needed. Treatment is to be continued as needed, after review by an IDTT, for all cases in which mental health intervention is necessary to protect life and/or treat significant disability/dysfunction in an individual diagnosed with or suspected of having a mental disorder. Treatment is continued for these cases only upon reassessment and determination by the IDTT that the significant or life threatening disability/dysfunction continues or regularly recurs.

Exhibitionism

Treatment is required when a resident has had at least one episode of indecent exposure in the six-month period prior to the IDTT that suggests the need for exhibitionism treatment and the resident is either:

- Diagnosed with Exhibitionism, or
- Meets the alternate criteria. (A resident who meets all criteria for the diagnosis of Exhibitionism, except that the victim was not an "unsuspecting stranger" but was a staff member, volunteer, or resident who did not consent to or encourage the behavior.)

Levels of Care

The levels of care found in the MHSDS are similar to those found in many community organizations. Final determinations of a resident's level of care are made by the IDTT. The levels of care are as follows:

- **Correctional Clinical Case Manage System (CCCMS)** is an outpatient program for those whose symptoms are generally under control, or who are in partial remission as a result of treatment. This may include a response to symptoms that require only a brief intervention, such as a psychotherapy session or an adjustment in medications. When mentally disordered, these residents can function in the GP and do not require a clinically structured therapeutic environment.
- **Enhanced Outpatient Program (EOP)** is an outpatient treatment program for residents whose functioning is lower than those in CCCMS, for example by:
 - An acute onset or significant decompensation of a serious mental disorder characterized by increased delusional thinking, hallucinatory experiences, marked changes in affect, and vegetative signs with definitive impairment of reality testing and/ or judgment; and/or,
 - Inability to function in the GP based upon an inability to program in work or educational assignments, or other correctional activities such as religious services, self-help programming, canteen, recreational activities, visiting, etc., as a consequence of a serious mental disorder; and/or,
 - The presence of dysfunctional or disruptive social interaction, including withdrawal, bizarre or disruptive behavior, extreme argumentativeness, inability to respond to staff directions, provocative behavior toward others, inappropriate sexual behavior, etc., as a consequence of serious mental disorder; and/or,
 - An impairment in the activities of daily living (ADL), including eating, grooming, personal hygiene, maintenance of housing area, and ambulation, as a consequence of serious mental disorder.
- **Mental Health Crisis Bed (MHCB) Placement** is an inpatient treatment program (generally in a licensed facility within the prison) for residents who require continuous nursing care due to:
 - Marked impairment and dysfunction in most areas (ADL, communication, social interaction, etc.); and/or, Dangerousness to others as a consequence of a serious mental disorder, and/or dangerousness to self for any reason.
 - These conditions usually indicate that this particular individual is highly impaired.
- **Acute Care/Intermediate Care** is a referral to inpatient programs provided in other CDCR institutions, or via contract with the Department of State Hospitals, is available for residents whose conditions cannot be successfully treated in the outpatient setting or in short-term MHCB placements. Both acute and intermediate care programs are offered in these facilities.

RJDCF HSP Internship Program Mission Statement

The Psychology Internship Program at Richard J. Donovan Correctional Facility aspires to provide the highest level of training for our interns to prepare them for assuming a dynamic role as professional psychologists in the rapidly changing world of mental health care. The overriding mission is to support the provision of broad-based clinical training in the areas of assessment, intervention, professional development, professional ethics and standards, as well as multicultural issues. An emphasis is placed on providing direct patient care with a considerable amount of close supervision throughout the year. Interns are taught the necessary skills to be diagnosticians and clinicians, with an emphasis on the development of clinical skills that are based on sound psychological principles and steeped in scientific inquiry.

Training Approach

The RJDCF HSP Internship Program offers intensive training, providing interns with a broad range of experiences. All internships are for a duration of twelve months or for a minimum of two-thousand hours. An Individual Learning Plan or ILP, building upon prior classroom and experiential education, is established for each intern during the initial weeks of participation in the RJDCF HSP Internship Program. It is the intern's responsibility to track their hours and have their primary supervisor sign to confirm them. This is done in two ways; one is through supervision forms/tracking sheets and the other is through timesheets. As per *Policies and Procedures*, RJDCF HSP Internship Program provides a minimum of two-thousand hours and interns must complete a minimum of two-thousand hours to pass the training program. Interns may be able to accrue more than two-thousand hours depending on how much time they take off throughout the year. Interns are responsible for calculating how much time is needed and to plan accordingly. Interns who fall short of their school's requirement, should address this with their school and develop a plan to meet the school's requirement.

Internships increase in depth and complexity as the program year progresses. The intern is expected to increase his/her level of independence in clinical activities through regular individual and group supervisions. RJDCF HSP Internship Program provides a wide range of training opportunities and excellent supervision. Institutional staff, working in tandem with the RJDCF HSP Internship Program organization, support interns to attain the competencies that are foundational to professional development.

Interns attend mandatory weekly two-hour didactic trainings and monthly state-wide assessment seminars, conducted by professional staff who are experts in special areas. Interns also have the opportunity to attend trainings sponsored by the CDCR Statewide Training Unit, which is an APA-approved sponsor for Continuing Education. As part of the benefits package, interns are also entitled to 40 hours of paid education leave to attend trainings or conferences, and are able to be reimbursed for costs up to \$500.

In addition, interns attend a thirty-two-hour clinician onboarding academy for new mental health clinicians in CDCR, a separate orientation to the internship by the Training Director, a forty-hour training on the Electronic Health Records System (EHRS), and a forty-hour New Employee Orientation for all new correctional employees, within the first few months of their internship.

Training Principles

RJDCF HSP Internship Program adheres to the following training principles, as established by the RJDCF HSP Internship Program Committee:

- Initial caseload assignments are consistent with the intern's professional developmental level.
- Thirty to fifty percent of the total hours per week are spent in face-to-face delivery of services.
- Intensive supervision of case activity is provided.
- All interns attend the Assessment Workshop facilitated by the AU Senior Psychologist.
- Interns act as co-consultants with a supervisor. As competence increases, intern responsibilities and independence also increase.
- Interns are encouraged to consult with each other, with or without the presence of a supervisor, as needed. Interns are provided time to participate in weekly didactic training and monthly seminars that include case conferences and presentations on clinical and professional issues.
- Regular in-service educational opportunities are available to all interns, including administrative meetings, case conferences, and intake conferences.
- Interns receive a minimum of two hours of individual supervision by two different supervisors (a primary and a delegated supervisor) and a minimum of two hours of group supervision per week by a licensed psychologist;
- Interns incorporate research articles into their case presentations, and facilitate discussions that relate the significance of the article to practicing psychologists. Journal articles must be pre-approved by the intern's supervisor and, have been published in a reputable journal within the last two-years.

Educational and Training Goals and Objectives

At the beginning of the first rotation, interns complete the Intern Self-Assessment form, which provides interns the opportunity to evaluate their skill level in each of the areas of required competencies. This assessment provides a basis for designing the ILP by the primary supervisor, in collaboration with interns. The ILP outlines training and career goals, specifies the areas of rotation, and names the delegated supervisor for each area of activity.

Training Program Core Requirements

Goals and Processes

The overarching goal of the RJDCF HSP Pre-Doctoral Internship Program in Clinical Psychology is to provide a planned, programmed sequence of training experiences that assure breadth and quality of training, in order to prepare interns for postdoctoral fellowships or entry into practice in clinical psychology, by providing in-depth training in the basic foundations of psychological practice. The internship program allows sufficient flexibility for interns to structure their training experiences in accordance with their career goals and interests, while providing all interns enough structure to ensure that they develop the core competencies in clinical psychology outlined in the following sections. Regardless of the intern's chosen theoretical orientation, our training model emphasizes the development of cultural competence and scientifically-informed practice in all areas of practice.

Core Competencies and Goals

Educational and Training Goals

The education and training goals for the RJDCF HSP Internship Program include the following core competencies and goals:

I. Research

GOAL: The RJDCF HSP Internship Program is committed to providing a training program aimed at developing practitioners who integrate the findings of scientific research and theory into daily clinical practice. Practitioners will become increasingly skilled in their ability to independently collect, critically evaluate, and disseminate research or other scholarly activities.

COMPETENCIES:

After completion of this internship program, interns will exhibit the following competencies at the intermediate-to-advanced levels in the area of Research:

- Demonstrates ability to critically evaluate research associated with didactic training topics, and disseminates findings with colleagues during didactic trainings.
- Independently seeks out recent scholarly research findings regarding evidence based practices to integrate into case presentations and interdisciplinary treatment team presentations
- Administers, collects, and analyzes data for program evaluation and presents results to administration, clinical teams, and/or at the regional/national level
- Demonstrates the ability to critically evaluate research on treatment interventions with the prison population and presents this during case presentations
- Participates in data collection efforts to norm the WHODAS on a correctional population and disseminates findings during case conferences

II. Ethics and Legal Standards

GOAL: The RJDCF HSP Internship Program is committed to the development of practitioners who know and use ethical principles as a guide for professional practice, research, assessment, self-evaluation and professional growth. Knowledge of ethics and the law will be increasingly demonstrated and consistently applied, while seeking consultation as needed. The practitioner will demonstrate a growing autonomy in recognizing ethical dilemmas as they arise, and making informed legal and ethical decisions. The practitioner will demonstrate knowledge and application of the APA Ethical Principles of Psychologists and Code of Conduct, relevant laws, regulations, rules, and policies, and relevant professional standards and guidelines, and conduct themselves in an ethical manner in all professional activities.

COMPETENCIES:

After completion of this internship program, interns will exhibit the following competencies at the intermediate-to-advanced levels in the area of ethical and legal standards.

- Exhibits conduct that reflects knowledge and conformance to APA ethical principles and state laws
 - Demonstrates awareness of the safety concerns necessary for working in a correctional setting
- Understands law and ethics related to conducting treatment and assessment in a correctional setting.
- Maintains ethical behavior in all situations
- Communicates/clarifies ethical principles when confronted by ethical dilemmas
- Communicates and documents informed consent and limits of confidentiality with all patients
- Demonstrates understanding of the limits of confidentiality and consults when a breach of confidentiality is required
- Adheres to mandated reporting requirements
- Consults with clinical supervisor regarding ethical and legal standards on a regular basis
- Communicates and documents intern status and clinical supervisor's role to all patients
- Effectively discusses and sets limits with patients regarding nature of professional relationship □
Maintains appropriate and professional relationships with all patients

III. Individual and Cultural Diversity

GOAL: It is the goal of the RJDCF HSP Internship Program to develop and train practitioners who recognize the importance of diversity and individual differences, and who are aware of the effects of their own cultural and ethnic background and attitudes in clinical practice. Practitioners will also be aware of their own backgrounds and the impact on clients, using supervision well to reinforce this process. The practitioner will demonstrate knowledge of the current theoretical and empirical knowledge base as it relates to diversity in all professional activities. An increasing knowledge of and sensitivity to the cultural and individual diversity will be exhibited, and this will be manifested in the treatment and care of all the diverse patients encountered during internship.

COMPETENCIES:

After completion of this internship program, interns will exhibit the following competencies at the intermediate-to-advanced levels in the area of individual and cultural diversity issues:

- Is able to include cultural variables in alliance building
- Understands cultural background in patient presentation
- Discusses impact of culture and background in assessments and case formulation

Discusses cultural humility and the impact of culture on patient care during supervision
Appropriately engages in self-reflection to examine own biases and values and how they may impact work with patients

- Is able to integrate cultural, spiritual/religious, and familial information within suicide and violence risk assessments
- Understands disadvantages that contribute to incarceration and further impact patient's risk of recidivism
- Is aware of one's own cultural and ethnic background, and how this impacts work with the treatment population
- Is aware of power dynamics that impact their relationships with the treatment population
- Consults with staff and reviews literature to examine the impact of culture and race on psychological testing and in making an informed decision about assessments to administer

IV. Professional Values, Attitudes and Behaviors

GOAL: The RJDCF HSP Internship Program aims to develop practitioners who combine an awareness of person/professional strengths as well as growth areas. Interns will receive training aimed at helping instill in each intern a personal commitment to behaving in ways that reflect the values and attitudes of the field of psychology, engage in self-reflection regarding one's personal and professional functioning, and actively seek and demonstrate openness and responsiveness to feedback and supervision. Interns will demonstrate increased independence in their ability to respond professionally in increasingly complex situations throughout the internship year.

COMPETENCIES:

After completion of this internship program, interns will exhibit the following competencies at the intermediate-to-advanced levels in the areas of professional values, attitudes, and behaviors:

- Is conscientious, fulfills responsibilities without reminders
- Is reliable, dependable, and punctual
- Works cohesively with other staff members to complete tasks
- Completes work in a timely, efficient manner
- Maintains complete records of all contacts and includes all pertinent information
- Demonstrates professionalism at all times as evidenced by following RJDCF rules and regulations
- Is motivated to learn (e.g., seeks information and help)
- Actively participates in trainings and supervision
- Adheres to CDCR Employee Performance Standards at all times
- Exercises good judgment when acting independently

V. Communication and Interpersonal Skills

GOAL: The RJDCF HSP Internship Program is committed to the development of practitioners who demonstrate increasing improvement in skills over the course of the internship year, while exhibiting increased autonomy, and the ability to respond professionally in increasingly complex situations. Practitioners will demonstrate development of effective relationships with a wide range of individuals, demonstrate the ability to produce and comprehend all forms of communication, demonstrate a thorough grasp on professional language and concepts, and demonstrate effective interpersonal skills and the ability to manage difficult communication well.

COMPETENCIES:

After completion of this internship program, interns will exhibit the following competencies at the intermediate-to-advanced levels in the areas of communication and interpersonal skills:

- Interacts in a professional manner with psychologists and staff members from other disciplines
- Appropriately questions and challenges colleagues and supervisors
- Communicates concerns that arise in a professional, appropriate, and timely manner
- Handles differences tactfully and effectively, maintaining smooth working relationships with all staff and other interns
- Demonstrates effective interpersonal skills and the ability to manage difficult communication well
- Demonstrates personal commitment to respect with others
- Demonstrates knowledge of professional language and concepts and incorporates this into oral, nonverbal, and written communications
- Is open to new ideas, and is able to integrate new materials into understanding and formulation of individual cases

VI. Assessment

GOAL: The RJDCF HSP Internship Program is committed to developing practitioners who have knowledge of the diagnostic classification system, have an understanding of human behavior and apply that knowledge to the assessment and diagnostic process, accurately select and apply psychological assessment tools, are able to synthesize assessment findings into a well-integrated report, and who are able to use assessment findings in the diagnosis and treatment of clients. The practitioner will utilize historical, interview, consultation, and psychometric data (if available) to diagnose accurately, demonstrating a thorough knowledge of psychiatric classification and relevant diagnostic criteria to develop an accurate diagnostic formulation. The practitioner will be observed administering mental health assessments and will receive feedback on interviewing skills and report writing skills. The practitioner will be trained on administering and documenting suicide risk and self-harm risk assessments and evaluating patients for risk of harming themselves or others, and risk of psychiatric decompensation, as well as communicating these findings to the treatment team. The practitioner will learn how to complete a thorough records review, gather collateral information, incorporate behavioral observations, administer mental status exams, incorporate psychological testing results (if available), develop interview techniques, arrive at a diagnostic conclusion with supporting rationale, and write well-organized reports incorporating findings that answer the referral question(s) clearly and provide specific recommendations.

COMPETENCIES:

After completion of this internship program, interns will exhibit the following competencies at the intermediate-to-advanced levels in the area of assessment:

- Is able to accurately administer Mental Health Initial Assessments
- Is able to accurately administer Suicide Risk and Self-Harm Evaluations
- Is able to accurately assess risk of imminent violence and grave disability on a consistent basis
- Demonstrates accurate assessment of risk and comprehensive safety plans
- Generates accurate case formulation, integrating records review, self-report, interview, observations, and other data
- Generates accurate differential diagnoses with appropriate justification
- Is able to accurately integrate findings from all sources of data into a comprehensive assessment/case formulation
- Describes findings using well-developed written communication

- Is able to formulate a theoretically based conceptualization of personality and/or cognitive functioning
Is able to generate appropriate treatment recommendations based on the results of the assessment, observation, interview, and collateral consultation
Is proficient in providing verbal feedback to patients
- Demonstrates knowledge of cultural diversity issues when diagnosing
- Provides accurate diagnosis, demonstrating a thorough working knowledge of DSM-5 diagnostic criteria
- Provides clinical rationale for diagnoses assigned
- Considers impression management issues in patient's presentation
- Participates to an expected level in the Assessment Workshop
- Demonstrates an ability to accurately assess and place patients in the appropriate level of mental health care
- Is receptive to feedback on interviewing skills and report writing skills
- Is able to incorporate feedback on interviewing skills and report writing skills as evidenced by improvement in observed assessments over the internship year
- Demonstrates knowledge of the APA Ethics Code and the APA Specialty Guidelines for Forensic Psychology as they relate to assessment

VII. Intervention

GOAL: The RJDCF HSP Internship Program is committed to developing practitioners who are competent health service psychologists, and who can apply knowledge based on various theoretical orientations and a range of psychological interventions that are current, evidence-based, and empirically grounded. Practitioners will develop skills in effectively developing appropriate therapeutic relationships with clients, developing evidence-based treatment plans, implementing interventions informed by research and recognizing diversity characteristics, and evaluate their intervention effectiveness. Practitioners will continue to choose interventions that facilitate patient acceptance and change, recognize when supervision is needed, and they will increasingly demonstrate motivation to increase knowledge and expand the range of interventions through reading, research, and consultation.

COMPETENCIES:

After completion of this internship program, interns will exhibit the following competencies at the intermediate-to-advanced levels in the area of intervention:

- Undertakes individual or group interventions that are consistent with a theoretical formulation
- Undertakes interventions that are individualized and prescriptive rather than generic
- Utilizes individual or group interventions that are consistent with empirically supported treatments
- Understands and uses own reactions to the patient productively in treatment
- Makes thoughtful and well-timed interventions during group or individual sessions
- Formulates realistic short-term and long-term goals for individual or group sessions and formulates methods to achieve these outcomes
- Understands when specific interventions are contraindicated
- Evaluates and documents outcomes of therapeutic interventions on a consistent basis
- Recognizes and understands non-verbal communication
- Recognizes and understands metaphorical communication
- Maintains fidelity of structured and manualized treatments in group and individual therapy
- Formulates case conceptualizations that are thorough and accurate
- Develops treatment interventions and goals that are based on case conceptualization

- Facilitates depth of patient self-disclosure during clinical interviews
- Is aware of the possibility of counter transference in therapy with patients and is willing and able to address it
- Conveys clinically appropriate warmth, genuineness, and empathy to form alliance with patients

VIII. Supervision

GOAL: The RJDCF HSP Internship Program will develop practitioners who are knowledgeable about various models of supervision and consultation and who, in their professional work, are able to competently provide supervision, consultation, and mentoring to trainees or other health professionals.

COMPETENCIES

After completion of this internship program, interns will exhibit the following competencies at the intermediate-to-advanced levels in the area of supervision:

- Comes prepared to and actively participates in supervision with primary, delegated, and group supervisors
- Is receptive to feedback from supervisors, incorporates feedback into practice, and completes all assignments given by supervisor to enhance clinical practice in a timely manner
- Demonstrates insight into own barriers, challenges, strengths, and professional development during supervision.
- Addresses concerns within the supervisory relationship with supervisor in an appropriate and timely manner
- Actively participates in clinical supervision didactic training and engages in meaningful role-played supervision with others during the training
- Demonstrates knowledge of supervision models and practices when providing supervision to practicum level trainees
- Demonstrates knowledge of professional boundaries and ethics while providing supervision to practicum students and other trainees
- Provides useful feedback and supervision to practicum students during didactic trainings and group supervision
- Demonstrates growth in ability to provide clinical supervision to practicum students

IX. Consultation and Interprofessional/Interdisciplinary Skills

GOAL: The RJDCF HSP Internship Program is committed to developing practitioners who demonstrate an ability to collaborate effectively with other professionals in order to address problems, seek or share knowledge, improve quality of patient care, and promote effectiveness. Interns will be able to demonstrate and apply knowledge of consultation models in interdisciplinary teams, formal and informal consultation practices, and when providing consultation to trainees, peers, and other staff.

COMPETENCIES:

After completion of this internship program, interns will exhibit the following competencies at the intermediate-to-advanced levels in the areas of consultation and interprofessional/interdisciplinary skills:

- Demonstrates knowledge and respect for the roles and perspectives of other professions when consulting with interdisciplinary teams

- When working with patients from unfamiliar cultural, racial, ethnic, gender identity, or sexual orientation backgrounds, seeks consultation, training, and/or supervision to develop competency in new areas
- Applies knowledge of consultation models and practices in direct consultation with individuals, other health care providers, and interdisciplinary teams
- Provides appropriate consultation to correctional officers to enhance their knowledge of working with patients who are mentally ill, while maintaining confidentiality
 - Participates in consultation didactic training and demonstrates learned skills in role-play consultation activities with other trainees
 - Appropriately consults with supervisor regarding suicidality, self-harm, homicidality, and grave disability, and applies this knowledge when consulting with other trainees on these topics
- Provides consultation to doctoral practicum students and social work students during student group supervision and on an as needed basis
- Provides consultation to the assessment unit when conducting RVR evaluations on the status of their patient's mental illness and provides recommendations for privileges that, if taken away, may lead to psychiatric decompensation.
- Provides consultation during interdisciplinary treatment team meetings on treatment interventions, case formulation, and implementing behavioral plans
- Provides consultation during treatment team meetings on prognosis and recommendations for higher or lower level of care determinations

Organization of Internship Training Program

The training program is tailored to meet the needs, interests, and current level of training of each intern. At the beginning of the internship, interns are assigned to a Primary Clinical Supervisor who oversees the intern's training and caseload, and incorporates live observation into the evaluation of the intern. The Primary Clinical Supervisor (with the intern) conducts an initial evaluation of the intern's skills that forms the basis for planning an individualized training experience within the context of a RJDCF HSP Internship Program internship.

Intern Evaluation

Intern Performance Evaluation

The Primary Clinical Supervisor is responsible for completing formal evaluations of each intern's abilities, on the following schedule, in conjunction with delegated supervisors and other individuals involved in the interns training program. The evaluations occur at the three-month, six-month, nine-month and twelve-month mark. There are certain minimum levels of achievement the intern must reach by each evaluation period throughout the internship. Should any area be rated as deficient during the year, the clinical supervisor and intern work together to create a plan for more supervision and training in this area, in order to reach the minimum level of achievement. These bench marks are provided to the intern on the first day of the internship. Feedback from evaluations are provided to the intern, as well as to their training program. Informal feedback is also provided to interns on an ongoing basis during supervision. After all training requirements are completed, a certificate of completion is awarded to each intern with a copy sent to the school.

Program Performance Evaluation

Throughout the year, interns are invited to bring their concerns to the Clinical Training Program's Executive Committee through their Primary Supervisor or the Training Director. The Executive Committee and Training Director consider the intern's concerns and make changes as appropriate.

Every 3 months during the internship year, interns complete evaluations of the program and their supervisors and evaluate their experiences, trainings, and the program as a whole. Additionally, internship alumni are surveyed ninety days post internships, and again every year, to provide longitudinal data on intern career paths and satisfaction with the training experience they received during their internship. This feedback is used to modify the program as part of the goal of continuously improving the quality of training.

Supervision and Training

Supervision Requirements

Interns shall receive:

- Supervision at a minimum rate ten percent of the total time worked per week (four hours per week); and
- At least two hours of regularly scheduled individual face-to-face supervision per week, provided by one or more licensed doctoral-level psychologists; and
- At least two hours of regularly scheduled group supervision per week, provided by one or more licensed doctoral-level psychologists; and
- At least two hours a week of didactic activities such as case conferences, seminars, in-service training, or grand rounds.

Individual Supervision

Interns receive a total of two hours of individual supervision per week. At least one hour of individual supervision is provided by their primary clinical supervisor, and the remaining hour of individual supervision is provided by their delegated (rotation) supervisor. Ample individual supervision is provided during the internship. Interns are responsible for logging their supervision hours and for having their supervisor regularly sign off on these hours. In the first quarter of the internship year, direct observation of the intern occurs while being trained in suicide prevention interviewing and assessment. In addition, the intern may be observed in individual and/or group therapy, and while completing mental health evaluations, throughout the internship year as direct observation is a requirement of APA and RJDCF HSP Internship Program. At the beginning of the internship year, the intern and supervisors will sign a supervision contract as well as the CA Board of Psychology Supervision Agreement form.

Group Supervision

Group supervision occurs a total of two hours per week with a licensed clinical supervisor. There are numerous opportunities for further group supervision to occur in settings where there are clinical discussions regarding the treatment plan for inmates, or other interdisciplinary meetings. Group supervision provides essential experience, and a setting for the acquisition of important skills for psychology interns, by stimulating the exchanging of ideas, observing various aspects of case conceptualization and treatment planning, clinical documentation, monitoring of patient treatment progress, and many other aspects of clinical practice. Interns are required to present at least two case presentations, with supporting research articles on research-based treatment, during group supervision throughout the year.

*Please see page 33 for modifications to individual and group supervision due to COVID-19

Core Training for All Interns

RJDCF HSP Internship Program Weekly Didactic Training

RJDCF HSP Internship Program interns attend weekly, two-hour scholarly didactic training sessions. Sample topics of the weekly trainings may include Mental Health Evaluations, suicide risk assessment, malingering, differential diagnosis, cultural humility, working with diverse populations, intellectual assessment, personality assessment, cognitive functioning assessments, forensic evaluations, trauma informed care, microaggressions, chronic pain management, affirming care for minority clients, and many other important areas of interest. Topics are chosen based upon their ability to broaden the intern's exposure to therapeutic techniques and interventions. Scholarly seminar sessions utilize model syllabi, which are the product of centralized and institutional collaboration, to ensure both consistency in the quality and breadth of information, while employing the institution's input, so that the special needs and strengths of the individual intern and institutional staff are integrated in an effective manner.

Assessment Training and Workshop

Assessment trainings are designed to help achieve goals specified in the areas of psychological assessment. The Assessment Unit consists of a small group of licensed psychologists who conduct a variety of clinical assessments at RJDCF, most frequently evaluations to determine if mental illness symptoms contributed to in-prison offenses (rules violations) and whether penalties should be mitigated. Other evaluations include diagnostic clarification and malingering assessments and evaluations to determine whether inmates meet criteria for Exhibitionistic Disorder subsequent to act(s) of indecent exposure in prison. Interns receive training, opportunities to shadow licensed clinical psychologists conducting various evaluations, and to perform evaluations under supervision. In addition, the following activities are provided:

- The AU Psychologist provides an assessment workshop to all interns, where a training on fundamental issues concerning completing psychological evaluations in a correctional setting, including relevant sections of the APA Ethics Code, is given. Then, background information, test findings, and audio recorded interviews of actual patients are presented. Interns individually determine a diagnosis and diagnostic rationale, and feedback is given on their diagnostic rationale and assessment writing skills.
- Interns are encouraged to attend the Assessment Report Review Meeting (ARRM) attended by AU Psychologists and MH Department Chiefs.

Additional Training Opportunities

Interns attend prison-wide training activities. Recent offerings have included suicide risk evaluation, clinical outcome measures, court hearing transfer process, developmental disabilities program overview, case formulation, differential diagnosis in complex mental health cases, DSM 5, functional evaluations, treatment team facilitation, level of care determination, evaluations for mental health crisis bed referrals, evaluations for minimum support facilities, routine interviews, safety planning for suicidal inmates, and custody related training. Staff members with expertise in various areas provide on-site and virtual trainings.

Meetings

Interns in the RJDCF HSP Internship Program are considered members of the MH staff and attend relevant staff meetings, high risk meetings, suicide risk management program meetings, Interdisciplinary treatment team meetings, medical huddles, administrative meetings, and learn to be professional psychologists by working in close association with other psychologists and other health care staff.

Resources for Interns

Training Materials

RJDCF HSP interns have access to the Statewide Mental Health Training Unit site, accessible to all RJDCF employees. This site contains a wide variety of materials, primarily for use in clinical practice, for example, Clinician's Guides to the differential diagnosis of a number of major mental health disorders, personality disorders, case formulation, theoretical orientations, and a host of other clinical themes. Additionally, interns have access to the physical library at RJDCF and electronic RJDCF shared folder entitled "Treatment Manuals and Curriculums", where they can find materials to use in individual and group therapy in a variety of clinical and treatment areas. Additionally, interns have access to APA PsychNet and Psychiatry Online portals by using the CDCR username and password. Through these websites, interns have access to research articles through PsychInfo and PsycArticles as well as full journals such as the American Journal of Psychiatry, The Journal of Neuropsychiatry and Clinical Neurosciences, The Journal of Lifelong Learning, and more. RJDCF HSP Internship Program has access to state-of-the-art training equipment such as laptops for each intern to use, projectors, screens, and flat screen televisions for PowerPoint presentations, specialized conference rooms with an abundance of desktop computers designated for internship educational activities, videoconferencing equipment to be able to incorporate telepsychiatrists into treatment team and for consultation purposes, VRI videoconferencing to be able to have sign language interpretive services for patients who are hearing impaired, webinar access, landline telephones with conference call capabilities, and EHRS, which each intern receives a minimum of forty hours of training on.

Supervisors

The clinical supervisors of the RJDCF HSP Internship Program are diverse and include psychologists with different ethnic, socioeconomic, religious, and educational backgrounds, interests, and areas of expertise. This makes it possible to include multicultural experiences as part of an intern's training, as well as to offer a breadth of experiences in areas of interest to interns. The Training Director makes an effort to continuously recruit new diverse clinical supervisors to join the RJDCF HSP Internship Program in order to broaden the pool of clinical supervisors, keep new ideas generating, and include a wide variety of training for interns from clinical supervisors with a variety of expertise. The Training Director also aims to pair interns with clinical supervisors who have expertise in areas interns are interested in, in order to assist interns in professional growth within their chosen field of psychology.

Office Space and Supplies

Each intern has an office, telephone, computer, agency email address, and internet access. Offices at RJDCF are appropriate for confidential interactions and are arranged so that the clinician has an egress route to exit the office in an emergency situation. All clinical contacts with patients must be confidential, which necessitates confidential offices. Other spaces such as shared computer rooms and conference rooms can be used for confidential documentation and consultation. RJDCF is in compliance with ADA standards, Federal and State laws, and departmental regulations, policies, and procedures for visitors and staff.

Application Information

General information

California Correctional Health Care Services (CCHCS) maintains responsibility for the hiring and recruitment processes for psychology interns at CDCR. This agency also maintains a website containing, among other things, the job posting and information for potential candidates. The Psychology Intern job bulletin posting can be accessed via the following link: <https://cchcs.ca.gov/wp-content/uploads/sites/60/Careers/ClinicalPsychIntern-OS-C.pdf>

Funding

Internships at the RJDCF HSP Internship Program are government-funded, California State civil service positions. The RJDCF Psychology Internship is a one-year, full-time, limited-term psychology internship with salary range of \$3,536.00 – \$4,219.00/month, approximately \$42,432 – \$50,628/year. Final salary is determined by the CCHCS Hiring Office at the beginning of the internship. Most interns will start at \$4,026 per month, then increase to \$4,219 per month after completing 500 hours of internship, for an overall annual salary of \$50,049 Please see the job bulletin listed above for more details on salary ranges.

Holidays, Vacation Time and Medical Benefits

Interns receive all state and federal holiday time off, which includes eleven holidays: New Year's Day, Martin Luther King Jr. Day, Presidents' Day, Cesar Chavez Day, Memorial Day, Independence Day, Labor Day, Veterans' Day, Thanksgiving Day, Day After Thanksgiving, and Christmas Day. At the start of the internship, interns meet with their RJDCF Personnel Specialist and choose to accrue either Vacation/Sick Leave, or Annual Leave. RJDCF Interns are eligible for Health, Dental and Vision benefits. For a summary of benefits, visit the California Department of Human Resources via the following link: www.calhr.ca.gov/employees/pages/salary-and-benefits.aspx

Pre-requisites for an internship with the RJDCF HSP Internship Program

Prospective interns must have completed all required coursework and supervised practicum experiences, as well as be in good standing with their psychology training program. Additionally, prospective candidates must have:

- 120 hours of assessment experience.
- 600 hours of direct client service gained through a practicum experience in settings appropriate for a doctoral level psychology intern.
- Acquired practicum experience at two independent sites.

*Please see pg. 33 for changes to the evaluation of intern applicants due to COVID-19.

Accreditation Status

On August 10, 2021, the Richard J. Donovan Correctional Facility Health Service Psychology Internship program became APA-Accredited by the Commission on Accreditation of the American Psychological Association. 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*

APPIC Application Process for Potential Candidates

Interns from both PhD and PsyD programs are encouraged to apply. In order to be appointed as a Psychology Intern at the RJDCF HSP Internship Program, applicants must submit an on-line application through the Association of Psychology Postdoctoral and Internship Programs (APPIC), called the APPI, which is available at <http://www.appic.org/AAPI-APPA#APP>. RJD's APPIC Program Code is 245611.

The RJDCF HSP Internship Program participates in the National Matching Service for internship selection. Once matched, interns must complete a security clearance screening, credentialing process, and drug screening as a condition of employment. Anyone who is an ex-offender would require an explicit written exception, not only at the level of the local Warden, but also by the Secretary of the CDCR. The default policy for CDCR is, in fact, not to hire ex-offenders, and as addressed in Title 15, section 3404. Such exceptions may only be made with the written approval of the Secretary. The security clearance screening process can take up to thirty days, and in cases by which the necessary candidate information is not readily available, extensions to the thirty day maximum may be granted. (*Source: "Streamlined Hiring Procedures for Dental and Mental Health Classifications, 2007*).

To be considered for match, submit a completed application through the APPIC applicant portal at <http://www.appic.org/AAPI-APPA#APP>. The completed APPI on-line application must include:

- A current curriculum vitae; and
- Official graduate program transcripts; and
- Three letters of recommendation from professionals familiar with the interns' clinical skills; and
- A certification of readiness from the applicant's training director; and
- A completed work sample (a de-identified psychological testing report)

CDCR Civil Service Application (STD 678)

In addition to the APPIC process, applicants must also submit an application to CDCR through the regular, civil service employee application process after the match process. Instructions for application can be found on the examination bulletin at <https://cchcs.ca.gov/wp-content/uploads/sites/60/Careers/ClinicalPsychIntern-OS-C.pdf>.

Upon receipt of an application, the RJDCF HSP Internship Program Central Office reviews all materials. If an application is deemed incomplete, RJDCF HSP Internship Program Central Office contacts the prospective intern, providing them with an opportunity to submit complete documentation within a given timeframe.

Equal Opportunity

RJDCF HSP Internship Program is dedicated to providing equal opportunity to participate in training opportunities. The State of California is an equal opportunity employer to all, regardless of age, ancestry, color, disability (mental and physical), exercising the right to family care and medical leave, gender, gender expression, gender identity, genetic information, marital status, medical condition, military or veteran status, national origin, political affiliation, race, religious creed, sex (includes pregnancy, childbirth, breastfeeding and related medical conditions), and sexual orientation.

Intern Selection Process

The RJDCF HSP Internship Program intern selection process begins with an evaluation of the candidate's application packet by the Training Director in which the Training Director rates each application based upon criteria including:

- Information contained in the application packet; and
- The hours and type of assessment experience; and
- The hours and type of direct client service experience; and
- Breadth of experience in treating diverse populations; and
- Breadth of experience in treating populations similar to those served by the Training Program; and
- Perceived level of interest in the Training Program; and
- Positive review from previous supervisors/instructors.

Candidates who pass the initial evaluation are invited to a virtual interview with the RJDCF HSP Internship Program Training Director and the Chief of Mental Health. Under special circumstances, a telephone interview may be permitted. *Please see pg. 32 for changes to evaluation of applicants and intern interviews due to COVID-19.

An additional rating is assigned to each candidate based upon completion of their interview. Each prospective intern is assigned a rank, reflective of the average of ratings from the initial evaluation and the interview. The Training Director submits the official ranking form to APPIC. RJDCF HSP Internship Program abides by the APPIC Match Rank Order List Submission deadlines.

Once an intern is matched to the RJDCF HSP Internship Program, they are notified by the National Matching Service (NMS). The intern receives a confirmation call by the Training Director within twenty-four hours, and an official follow-up letter, within seventy-two hours, from the RJDCF HSP Internship Program noting that the offer is contingent upon meeting all civil service requirements as previously indicated. The letter is sent to the applicant's graduate program Director of Training as well.

If there are no matches with potential interns during Phase I of the match, RJDCF HSP Internship Program proceeds to Phase II of the National Match. If there are still vacancies after Phase II of the match, RJDCF

HSP Internship Program proceeds to the Clearinghouse Phase through the APPIC Post-Match Vacancy Service. This internship site agrees to abide by the APPIC policy that no person at this training facility will solicit, accept, or use any ranking-related information from any intern applicant.

The internship is a full-time, limited term, one-year program. Interns accrue approximately three to four weeks of leave time that can be used for vacation, sick time, and/or research. As mentioned earlier, though internship matches are made in February/March, actual commencement of the internship in August is contingent on passing a security clearance/background check, fingerprinting, drug testing, and TB test.

Pre-Employment Qualifications

Once matched, you will need to complete a credentialing process, security clearance/background check, fingerprinting, drug testing, and TB test as a condition of employment. CDCR internship programs are not able to hire ex-offenders, as addressed in Title 15, section 3404 of the California Code of Regulations. An ex-offender is defined as anyone with a criminal record (other than Vehicle Code violations). In addition, failure to accurately list arrests will be grounds to deny the intern's application for employment. Due to the short time frames involved in a 12-month internship, if you do not pass the criminal background check, no appeal process will be allowed.

The California Department of Corrections and Rehabilitation has a zero-tolerance drug policy. Any potential internship candidate will be dismissed from the internship if a positive drug screening test occurs. The CalHR definition of a failed drug test is *any detectable amount* of the banned substance. One of the most misunderstood issues in this area is with regard to the recreational and medical use of marijuana (cannabis). Neither a prescription for marijuana, nor the fact that California allows the recreational use of marijuana, means that the intern's use of marijuana will be acceptable to the program. The CDCR prohibits the use of marijuana in ALL circumstances, and will refuse to hire an intern who tests positive for marijuana regardless of medical need, the presence of a prescription, or its legal status. No appeal is allowed per CalHR regulations.

CDCR EMPLOYEE PERFORMANCE STANDARDS

All RJDCF HSP interns are CDCR state employees, and as such, are subject to the Employee Performance Standards and Code of Conduct listed in the California Department Operations Manual, Article 22, which states:

33030.3.1 Code of Conduct

As employees and appointees of the Department, we are expected to perform our duties, at all times, as follows:

- Demonstrate professionalism, honesty, and integrity;
- Accept responsibility for our actions and their consequences;
- Appreciate difference in people, their ideas, and opinions;
- Treat fellow employees, inmates, wards, parolees, victims, their families, and the public with dignity and respect;
- Respect the rights of others and treat them fairly regardless of race color, national origin, ancestry, gender, religion, marital status, age, disability, medical condition, pregnancy, sexual orientation, veteran status, or political affiliation;
- Comply with all applicable laws and regulations;
- Report misconduct or any unethical or illegal activity and cooperate fully with any investigation.

33030.3.2 General Qualifications

All employees are subject to the requirements as specified in the California Code of Regulations (CCR), Title 2, Section 172, General Qualifications, which states, in pertinent part, the following:

All candidates for, appointees to, and employees in the in the state civil service shall possess the general qualifications of integrity, honesty, sobriety, dependability, industry, thoroughness, accuracy, good judgment, initiative, resourcefulness, courtesy, ability to work cooperatively with others, willingness and ability to assume the responsibilities and to conform to the conditions of work characteristic of the employment, and a state of health, consistent with the ability to perform the assigned duties of the class.

COVID-19 VACCINATION REQUIREMENTS

Pursuant to the August 19, 2021 public health order (Order) issued by the California Department of Public Health (CDPH), staff who are regularly assigned to provide health care or health care services to inmates, prisoners, or detainees shall show evidence of full-vaccination against COVID-19 by October 14, 2021, unless they qualify for an accommodation based on religious beliefs or due to qualifying medical reason(s). All staff subject to the Order, as determined by the Hiring Authority, shall complete the CDCR/ CCHCS COVID-19 Vaccination Requirement Form. Completed forms shall be submitted to the Hiring Authority via the staff's direct supervisor. The CDCR/CCHCS COVID-19 Vaccination Requirement Form requires employees to read, understand and acknowledge the CDPH vaccination requirement and occupational risk of COVID-19 exposure, and to declare, under penalty of perjury, their COVID-19 vaccination status. For more information on this policy, please directly email the RJDCF HSP Internship Program Training Director, Dr. Kristin Francis at Kristin.francis@cdcr.ca.gov.

Essential Employee Status

RJDCF HSP Internship Program interns are considered essential employees. Therefore, they are required to report to work onsite and provide face-to-face mental health services during their scheduled hours, unless they are experiencing symptoms of COVID-19, in which case they will not be allowed into the institution. Additionally, any staff including interns, can be called into the institution on a scheduled telework day to assist with institutional coverage. Therefore, even if interns are granted telework days, they must be able to report to RJD within 1 hour of being notified. Interns may not telework outside of California. Please see COVID-19 Related Testing and Safety Precautions sections of this handbook for more information on how essential employees are protected at RJDCF.

Due Process and Grievance Procedures

The RJDCF HSP Internship Program is committed to providing interns with a supportive, safe environment, in which to explore their professional interests, and to developing the skills and competencies that are foundational to future service and success. Consistent with these objectives, RJDCF HSP Internship Program encourages interns to seek clarification whenever questions or concerns related to their RJDCF HSP Internship Program experience arise. Interns have multiple avenues by which to communicate questions, issues, or concerns. The work performance of Psychology Interns is evaluated by two separate processes. First, there are evaluative processes specific to limited-term employment within CDCR, an agency of the State of California. A description of these processes is found in *Policy and Procedure Manual* in the section entitled "Due Process and Systematic Grievance Policy: Administrative Focus" on pages 28-35. Second, there are evaluative processes specific to the training program and in accordance with APA Accreditation standards. A description of these policies is found in the section of the *Policy and Procedure Manual* entitled "Due Process for Intern Grievance of Issues Related to Areas of Academics and Clinical Practice: Educational and Clinical Practice Focus" on pages 36-42. All interns receive a copy of the RJDCF HSP Internship Program *Policy and Procedure Manual* on the first day of their internship.

Internship Admissions, Support, and Initial Placement Data

Date Program Tables are Updated: 7/13/2023

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:	
Please see page 27-30 of this handbook for important information to assist in your assessment of likely fit with the RJDCF HSP Internship Program. You may also reference the California Department Operations Manual, Article 22, Section 33030.1-33030.3.2, page 246 located here: https://www.cdcr.ca.gov/regulations/cdcr-regulations/dom-toc/	

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:
RJDCF HSP Internship Program interns must have completed all required coursework from their PsyD or PhD program by the start of internship, be in good standing with their training program, have completed at least 2 practicum placements at 2 independent settings, and have accumulated a minimum of 600 hours of practicum experience and 120 hours of assessment experience (these numbers are flexible due to the impact of COVID-19 on practicum hours). CDCR is an equal opportunity employer. RJDCF interns must pass a security clearance/background check, fingerprinting, drug testing, and TB test as a condition of employment. CDCR internship programs are not able to hire ex-offenders. CDCR has a zero-tolerance drug policy. CDCR employees must abide by the CDCR Employee Performance Standards. CDCR employees are essential employees and are subject to the public health order issued by the California Department of Public Health (CDPH) that mandates full-vaccination against COVID-19, unless the individual qualifies for an accommodation based on religious beliefs or due to a qualifying medical reason(s). Please see page 27-30 of this handbook for full details.

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: 600*
Total Direct Contact Assessment Hours	Yes		Amount: 120*

*Please see pg. 33 for changes to evaluation of intern applicants due to COVID-19.

Describe any other required minimum criteria used to screen applicants:
Hours and type of assessment experience, hours and type of direct client service experience, breadth of experience in treating diverse populations, breadth of experience treating correctional/forensic populations, positive reviews from previous supervisors/instructors, perceived level of interest in the RJDCF HSP Internship program. See page 27-30 of this handbook for full information.

Financial and Other Benefit Support for Upcoming Training Year

Annual Stipend/Salary for Full-time Interns	\$50,049	
Annual Stipend/Salary for Half-time Interns	N/A	
Program provides access to medical insurance for intern?	Yes	
If access to medical insurance is provided:		
Trainee contribution to cost required?	Yes	
Coverage of family member(s) available?	Yes	
Coverage of legally married partner available?	Yes	
Coverage of domestic partner available?	Yes – must be registered with the CA Secretary of State (SOS)	
Hours of Annual Paid Personal Time Off (PTO and/or Vacation)	11 hrs/month annual leave OR 7 hrs/month vacation AND 8 hrs/month sick leave	
Hours of Annual Paid Sick Leave	See above	
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	

Other Benefits (please describe):

Interns are allotted 16 hours of professional development leave as well as 40 hours of continuing education leave. Interns may also request reimbursement up to \$500 total for tuition and/or registration fees, cost of course-related books, transportation or mileage expertise, toll and parking fees, lodging and subsistence expenses, and all other related expenses for training. Interns at RJDCF HSP are also given time off on 11 state holidays: New Year’s Day, MLK Jr Day, President’s Day, Cesar Chavez Day, Memorial Day, July 4th, Labor Day, Veteran’s Day, Thanksgiving Day, Day After Thanksgiving, and Christmas Day. Interns may be reimbursed up to \$100 for recognized professional association fees. Interns are also eligible for up to 24 hours (3 working days) for bereavement leave, and paid time off for mandatory jury duty. For a full list of benefits, please email the training director.

Initial Post-Internship Positions

	2020-2023	
Total # of interns who were in the 3 cohorts	22	
Total # of interns who did not seek employment because they returned to their doctoral program/are completing doctoral degree	2	
	PD	EP
Academic teaching		
Community mental health center		2
Consortium		
University Counseling Center		
Hospital/Medical Center		1
Veterans Affairs Health Care System		
Psychiatric facility		
Correctional facility		10
Health maintenance organization		
School district/system		
Independent practice setting	1	4
Other	1	1

RJDCF HSP Internship Program Modifications Due to COVID-19

***Please note, although the changes listed below were implemented in 2020 due to COVID-19, they may be used or modified during any state of emergency/crisis that would impact the training program in a similar manner**

****As of July 2022, many of these restrictions have lifted in accordance with CDC and CDCR guidelines, however, they are included here in case another surge of COVID-19 cases emerges**

Current Changes in Competency Areas

Supervision

Prior to COVID-19, interns attended practicum student supervision throughout the internship year, observed a licensed psychologist, co-facilitated, and were on track to facilitate group supervision as their competency increased.

Due to COVID-19, practicum students were restricted from being onsite at RJD in March 2020. Therefore, interns began working on developing competency in the area of supervision by researching and reading supervision articles, policies, and guidelines, and then presenting their findings during intern group supervision. As of July 2022, students are currently allowed onsite and are expected to be for the upcoming training year. Interns will continue to attend practicum student group supervision and individual supervision, which will be conducted using HIPAA compliant video conferencing, and will observe the licensed psychologist facilitating group, and learn to co-facilitate and facilitate group supervision as their competency increases. Audio recordings of therapy sessions and mock therapy sessions may also be used in order for development of competency in this area.

Clinical supervisors will also give feedback to their intern supervisees during live supervision with regard to interventions they used and why so that the intern has a learning experience about supervision during supervision. Clinical supervisee will also be able to participate in mock clinical supervision with the clinical supervisor.

Communication and Interpersonal Skills

Prior to COVID-19, interns developed competency in this area by in person, face-to-face contact with other mental health providers, and other disciplines. They interacted with colleagues, peers, supervisors, and other professionals on a daily basis.

As a result of COVID-19, some communication with other providers, the treatment team, and co-workers, will be done via HIPAA compliant email, video, or phone conference. As such, clinical supervisors will be cc'd on emails and invited to join video and phone communications in order to properly assess this competency area.

Consultation and Interpersonal Interdisciplinary Skills

Prior to COVID-19, interns developed competency in this area by providing in person, face-to-face consultation to other disciplines, practicum students, peers, and the treatment team.

As a result of COVID-19, some consultation with other providers, the treatment team, and co-workers, will be done via HIPAA compliant email, video, or phone conference. As such, clinical supervisors will be cc'd on emails and invited to join video and phone communications in order to properly assess this competency area.

Intervention

Prior to COVID-19, interns developed competency in this area by providing in person, face-to-face, direct therapeutic services to clients in confidential offices.

As a result of COVID-19, interns are still providing face-to-face direct therapeutic services and intervention to clients, but during COVID outbreaks, are providing these services cell-side in a non-confidential setting, unless clinically indicated. During non-outbreak times, interns provide direct services while wearing a face covering and maintaining the recommended 6 foot distance between them and their client while in confidential offices. Should a supervisor be unable to be physically present to observe clinical encounters, including the mandatory observation of an initial assessment each half of the year, audio recorders will be used by the intern and reviewed with the supervisor during individual supervision. In 2020, interns temporarily had reduced onsite hours to provide the spread of COVID-19. Interns were still working a 40 hour week, and were doing research, training, and documentation during offsite hours.

Assessment

Prior to COVID-19, interns developed competency in this area by administering assessments in person to clients in a confidential location.

As a result of COVID-19, interns are administering assessments to clients while wearing a face covering and maintaining the recommended 6 foot distance between them and their client. Should a supervisor be unable to be physically present to observe assessments, including the observation of administering Suicide Risk and Self Harm Evaluations or giving verbal feedback to a patient, audio recorders may be used by the intern and reviewed with the supervisor during individual supervision.

Evaluation of Applicants

Prior to COVID-19, the RJDCF HSP Internship Program required applicants to have accumulated a minimum of 120 hours of assessment experience and 600 hours of intervention experience. In accordance with APPIC recommendations disseminated on June 18, 2020, the RJDCF HSP Internship Program will take into account the decreased direct service hours accumulated by applicants beginning in March 2020, and make exceptions for applicants whose clinical hours and training experiences were impacted by the pandemic. The RJDCF HSP Internship program will not exclusively rely on minimum hour requirements, as we recognize the significant and ongoing disruption to training experiences for many applicants. The RJDCF HSP Internship Program will consider additional training opportunities given to applicants to improve their skills during practicum experiences to prepare them for internship, as well as the overall application, and goodness of fit of the intern and RJDCF.

Virtual Interviews

Prior to COVID-19, the RJDCF HSP Internship Program required applicants to have an onsite, in person interview. In accordance with APPIC recommendations disseminated on June 18, 2020, the RJDCF HSP Internship Program will conduct all internship interviews using a HIPAA compliant video platform. Those invited to an interview should have a computer or phone with video/audio capabilities in order to participate in their interview. In rare circumstances where an interviewee does not have access to video capabilities or video transmission is disrupted during the interview, it will be acceptable to dial into the interview only using a telephone. RJD will inquire and provide any applicant invited for an interview with reasonable accommodations to participate in the interview. As recommended by APPIC, RJDCF HSP Internship Program will also offer a Virtual Open House to applicants after each phase of interviews where applicants can meet and ask questions to current clinical supervisors, the training director, and current interns, and watch a video with a virtual tour of the prison grounds and information on the multiple resident programs offered at RJDCF.

Access to Materials

If interns are required to telework, RJDCF HSP Internship Program will provide interns a CDCR issued laptop with the access to the CDCR remote server and electronic health records system, as well as video and audio capabilities in order to participate in supervision, training, and consultation. Interns will be responsible for their CDCR issued laptop and will be required to take an IT security course prior to being issued a laptop. Interns have access to the DSM 5 TR through Psychiatry online, as well as research articles through the CDCR HQ Training Unit intranet website, APA PsycNet, and the PsycArticles and PsychInfo databases. While onsite, interns will have access to a computer, testing materials, group and individual intervention materials, a confidential space to conduct patient interviews, ability to use a group room for individual therapy to

maintain as much distance as possible from clients, and training rooms large enough to accommodate all interns and a trainer while maintaining the recommended 6 foot distance.

Current Training Program Impact

As of July 25, 2022, the RJDCF HSP Internship Training Program has been impacted by COVID-19 in the following ways. Interns have moved to a 4 day onsite, 1 day remote work schedule. Orientation at the beginning of the internship year with mostly be held remotely, other than shadowing opportunities that will be held onsite. Additionally, any staff including interns, can be called into the institution on a scheduled telework day to assist with institutional coverage. Therefore, even on telework days, staff/interns must be able to report to RJD within 1 hour of being notified. Interns may not telework outside of California. While onsite, interns are providing face-to-face mental health services to resident-patients while wearing face masks and maintaining the recommended 6 foot distance. During Covid outbreak times, interns provide face-to-face services “cell side”, meaning they are standing in front of an inmate’s cell, talking to them through a closed door. If clinically indicated, the intern is expected to meet with the resident-patient at a table located in an open space within the resident-patient’s housing unit, or in a confidential office or group room, while maintaining the recommended 6 foot distance. Interns are able to use group therapy room for confidential individual sessions, as they are bigger than individual offices and allow for the most physical distancing in a confidential space. During remote work hours, interns are expected to attend individual and group supervision, didactic trainings, complete documentation through the electronic health records system, audit charts, participate in data analysis and research activities, and work on projects for their assigned Specialty Rotations.

On July 1, 2020, the California Department of Consumer Affairs (DCA) waived the face-to-face supervision requirement temporarily, which has been extended periodically. Currently, the California Board of Psychology has provided a grace period for supervision to be conducted via HIPAA compliant video through September 30, 2022. In accordance with APA policy, the RJDCF HSP Internship program has developed a formal telesupervision policy that describes how and when telesupervision is used – please contact the training director for the full policy. Per the APA Accreditation COVID-19 Updates and Information (March 23, 2020), the expansion of telesupervision beyond 50% of the required supervision hours, is permissible during this unprecedented time.

Please see Changes in Competencies section for more information on how each competency requirement has been impacted.

RJDCF has a multi-phase reopening plan that relies on the recommended guidelines set forth by the Center for Disease Control and Prevention (CDC), the California Department of Public Health (CDPH), the California and American Dental Associations (CDA and ADA), and the California Medical Association (CMA). The CEO and Warden will assess on a daily basis whether RJDCF may move through phases. In Phase 2 of this plan, interns will be expected to return to full time, onsite face-to-face services. Please see Safety Precautions Implemented section for more information.

All interns participating in a CDCR internship program are employees of the State of California. In July 2020 due to the impact of COVID-19 on the state budget, the California Governor enforced a reduction to CA state employee compensation to achieve the necessary budget savings approved in the 2020-21 Budget Act. As of July 1, 2020, all California state employees who are under the Bargaining Unit 19 (BU-19) contract received a total salary reduction of 9.23%. This salary reduction was based upon both a suspension of the 3% prefunded medical retirement and a reduction of 6.23% based on the implementation of 2 Personal Leave Program (PLP) days per month. Please refer to the CalHR website for full details: <https://www.calhr.ca.gov/labor-relations/Pages/Unit-19-Health-and-Social-Services-Professional.aspx>. Salaries were reinstated July 1, 2021.

COVID-19 Related Policies

Please see vaccination requirements described on page 29 of this handbook. COVID-19 testing and masking requirements continue to evolve and reflect CDC and CDCR guidelines. Currently, staff who are unvaccinated are required to test every 72 hours. Any staff may voluntarily test at any given time, or may be instructed to test if they are notified of exposure. Testing is provided onsite and is free to state employees. Updated policies can be found on the CDCR Lifeline page: <http://lifeline/HealthCareOperations/MedicalServices/PublicHealth/Pages/Coronavirus.aspx>.

As of July 25, 2022, all staff and inmates are required to wear KN95 face masks at all times when onsite at RJD. Masks are available onsite at various locations around the institution, including at both staff entrances and in the administration buildings. Masks will be issued by RJDCF to all interns. In quarantine units, staff are required to wear full PPE, which will be issued by CDCR. Following identification of an active case within the institution, a formal notification process will take effect for anyone who was potentially exposed to the identified person. RJD has COVID-19 testing supplies and a testing strategy for inmates that is consistent with guidance provided by federal and state public health experts. Testing for inmates is offered in under the following circumstances, for all symptomatic patients (top priority): during outbreak investigations, upon arrival at reception center from county jail, and upon transfers out of reception centers and restricted housing units. In addition, consistent with guidance from state and local public health officials, CDCR has begun surveillance testing of incarcerated individuals at all adult institutions. Surveillance testing is used to detect outbreaks in an early phase, even before the development of symptoms. Early detection and rapid outbreak response can limit the spread of infection and prevent morbidity and mortality. Furthermore, with sufficient numbers of appropriately selected patients testing negative, an institution can demonstrate with confidence the absence of an outbreak. These widespread, voluntary testing measures will be performed across multiple facilities at each institution each month. Priority will be given to asymptomatic individuals who have been identified as vulnerable or high-risk for complications of COVID-19. Such testing will establish a baseline of cases as a preventive measure and for data-gathering purposes, as we work toward safely resuming operations. In addition to the measures described above, inter-institutional transfers, visiting, and volunteers have all been temporarily restricted in order to decrease the amount of traffic in and out of the institution and therefore decrease the likelihood of COVID-19 infection. Inmates who require a higher level of mental health care will be tested for COVID-19 prior to transferring out of the institution, and prior to transferring back into the institution once stabilized. Specific cells at RJDCF have been designated both as higher level of care cells, and as quarantine cells.

Interns who test positive for COVID-19 are responsible for reporting their positive status to their program supervisor, clinical supervisor, the Training Director, and the Chief of Mental Health/Chief Psychologist. Interns will be given direction from the Office of Employee Health and will be eligible to receive Administrative Time Off while they recover. Please contact the Training Director for the full policy.

A public website that tracks both resident and staff confirmed COVID-19 cases that is accessible for your reference as follows:

Inmates: <https://www.cdcr.ca.gov/covid19/population-status-tracking/> Staff: <https://www.cdcr.ca.gov/covid19/cdcr-cchcs-covid-19-status/>

Please see the CDCR COVID-19 Response Efforts website and Mandatory COVID-19 Staff Testing FAQ page listed on the next page for more information.

CDCR COVID-19 Response Efforts Website: <https://www.cdcr.ca.gov/covid19/covid-19-response-efforts/#CFC>
Mandatory COVID-19 Staff Testing FAQ page:
https://www.cdcr.ca.gov/covid19/wpcontent/uploads/sites/197/2020/05/R_COVID-19TestingFAQs.pdf

Safety Precautions Implemented

CDCR and CCHCS have established a Personal Protective Equipment (PPE) workgroup to monitor and assess the needs of all institutions and to ensure staff have an adequate supply of PPE. The goal is to identify the current need for PPE at each institution and to protect staff and incarcerated people by ensuring that upon identification, these needs are immediately met. The workgroup will continue to collaborate and maintain open lines of communication with the Governor's Office of Emergency Services to identify any deficiencies and ensure adequate supplies are available at each institution on an ongoing basis.

All CDCR institutions have been instructed to conduct additional deep-cleaning efforts in high-traffic, high-volume areas, including visiting areas and all areas where health care services are delivered. Those in the incarcerated population identified as assisting with cleaning areas of the institution have received direct instruction on proper cleaning and disinfecting procedures in order to eliminate coronavirus. Communal areas such as dayrooms, showers, restrooms and offices are cleaned between uses. Disinfecting frequency has been increased, including regular disinfecting of touch points (telephones, door knobs, desk areas, etc.). All cleaning practices will allow for physical distancing of staff and porters who are also provided ample cleaning supplies and protective equipment including gloves and masks. Additionally, when a cell or bunk is vacated, the assigned resident porter shall be responsible for disinfecting the space. For restricted housing units, cleaning is performed by staff.

All staff at RJD, including interns, are required to wear a face mask at all times when interacting with, or when in close proximity to others. Face masks will be provided by RJD to all interns, and interns are also allowed to bring in their own masks. All staff including interns are to maintain social distance of a minimum of 6 feet at all times. If clinically indicated to meet with a patient in a confidential setting, interns may ask the inmate porters to clean their office between patients, and they may choose to see patients in largest room available, such as a group room.

To further enhance physical distancing measures, CDCR has implemented the expedited release of approximately 3,500 inmates, suspended normal visiting, suspended all volunteers, suspended intake from county jails for 60 days, moved to conducting parole hearings through videoconference, limited mental health group capacity, limited in person inter-disciplinary treatment team meetings, and has suspended onsite training in groups of more than 10 staff.

The Department is committed to ensuring the safety, security, and well-being of all staff (including interns) and inmates by performing the following:

- Continuing to follow guidelines set by the CDC, CDPH, CDA, ADA, CMA and CCHCS.
- Maintaining physical distancing requirements.
- Ensuring cohorts move together for all clinic appointments, yards, and medication lines, and to prevent the mixing of populations.
- Establishing and continuing communication with local and state authorities to determine current mitigation levels in the community.
- Ensuring all staff and inmates wear cloth face coverings at all times.
- Implementing immediate modifications in program areas in the event of COVID-19 outbreaks as defined by CCHCS.
- Continuing to reinforce the importance of hand-washing, covering coughs and sneezes, and frequent cleaning of frequently touched areas, shared objects, food preparation surfaces, and equipment.

Ensuring ventilation systems operate properly, encouraging opening of windows and doors, increasing usage of fans, and using any other methods to increase ventilation that are feasible in a correctional setting. In addition to providing facial barriers to both staff and the incarcerated population, the following measures have been implemented to ensure that physical distancing behaviors are practiced: As the pandemic progresses, educational materials are continuously being updated or newly-developed, based on new guidance and direction from public health and health care experts. These materials are universally disseminated throughout CDCR by the resident advisory councils, public announcement systems, via posters and flyers placed throughout the prisons, verbal directives from custody staff, and video programming broadcast to TVs throughout the prisons

- In various areas where inmates must wait in lines—such as canteen lines and medication lines—the prisons have marked six-foot intervals on the ground to help inmates remember to continuously distance themselves from others.
- Limiting the number of inmates in the dayrooms to ensure there is sufficient space for physical distancing.
- Dining-hall schedules have been modified to limit the number of inmates in the dining hall to allow for better physical distancing
- Throughout the day, announcements are made over public-announcement systems in some dorm locations reminding inmates to take precautions to prevent the spread of COVID-19.

Please see COVID-19 Testing section for more information on safety precautions and other infection control measures related to testing.

Mental Health staff, including interns, have been allowed to move to a 50% onsite, 50% telework schedule, in order to decrease traffic in and out of the institution, in an effort to decrease the potential spread of infection to staff and inmates. Please see the Current Training Program Impact section for more information. CDCR has established a Reopening Plan that incorporates a multi-phase approach to reopening statewide operations. This plan is based upon the recommended guidelines set forth by the Centers for Disease Control and Prevention (CDC), the California Department of Public Health (CDPH), the California and American Dental Associations (CDA and ADA), and the California Medical Association (CMA).

It is important to note that a range of factors may impact the speed at which institutions and various program areas reopen. For example, institutions with low rates of confirmed COVID-19 cases will move through the phases at a different pace than those experiencing greater COVID-19 impacts on the programming and on an array of varied activities within a specific institution. CDCR and CCHCS provide ongoing guidance to institutions, whose management provides oversight to all areas of activity and health care issues within the institution. This close monitoring elicits the necessary data for determining the level of protective needs for a given institution at a given point in time. When negative trends are identified, for example, precautionary measures may be reinstated as needed to protect all of those who live and work in state prisons.

Phases Defined

Phase 1: Most Restrictive Modifications

Phase 2: Easing of Phase 1 restrictions

Phase 3: Expand opportunities outside housing units

Phase 4: Return to normal program for all staff and inmates

Institutions will move through the phases at different rates according to the specific circumstances of each institution, which are monitored and evaluated on an ongoing basis. Based on this information, movement to a different phase may be implemented. The determination for such a change will be at the discretion of the Warden and Chief Executive Officer, who must certify to their Associate Director and Regional Health Care Executive that the institution has met the criteria to advance or regress to a different phase.