

Child and Adolescent Rotations

[The Emotion Awareness and Skills Enhancement \(EASE\) Program for Autism Spectrum Disorder Supervision: Carla Mazefsky, PhD; Caitlin Conner, PhD](#)

The Emotion Awareness and Skills Enhancement Program (EASE; see <http://www.reaact.pitt.edu/studies-2/>) is a 16-week individual therapy intervention to improve emotion regulation in verbal 12- to 21-year-olds with autism spectrum disorder (ASD) and IQ >80. EASE is a mindfulness-based intervention that emphasizes distress tolerance and incorporates some cognitive-behavioral therapy components. EASE is being evaluated in a two-site randomized controlled trial in comparison to individualized supportive therapy. Ideally, interns would complete at least one EASE and one individualized supportive therapy case. The supportive therapy condition allows for the use of any therapeutic approach that is not a primary component of EASE and does not target emotion regulation, providing exposure to and experience with a range of empirically-based approaches. When possible, interns would participate in both local group supervision and cross-site supervision, providing exposure to a wide range of patients, including commonly encountered therapeutic challenges and discussions to generate solutions. Interns will gain experience adhering to a standardized protocol within a clinical trial. Prior ASD experience is helpful but not required. While EASE was developed for and is being tested in an ASD sample, the skills learned when implementing EASE would easily translate to emotion regulation-focused interventions with other populations as well as support for the transition from adolescence to adulthood. EASE is currently being offered as an in-person (preferred) or telehealth intervention. There may also be additional opportunities to participate in eligibility and outcome assessments (e.g., psychiatric and emotional assessments, EEG assessments). Due to the length of EASE, it is recommended for this rotation to occur over 6 months.

[Center for Adolescent Reward, Rhythms, and Sleep \(CARRS\)](#)

[Supervisor: Jessica Levenson, PhD](#)

The Center for Adolescent Reward, Rhythms, and Sleep (CARRS) is a NIDA-funded Center of Excellence grant awarded to the Department of Psychiatry, to study the impact of adolescent sleep and circadian rhythm changes on reward circuitry and substance use-relevant outcomes. CARRS comprises five projects and three cores led by University of Pittsburgh faculty from the Departments of Psychiatry, Neuroscience, and Biostatistics. Two projects involve human participants who complete semi-structured diagnostic interviews focused on sleep, psychopathology, and substance use as part of their screening for study eligibility. Participants who are involved in one of the human projects also receive a one-session experimental intervention intended to manipulate sleep and circadian rhythms to directly examine its impact on reward function and cognitive control. Adolescent participants are 13-15 years old. Interns involved in this rotation will conduct the semi-structure clinical interviews and one-session experimental intervention with teen participants. This rotation offers an opportunity to learn and/or enhance one's existing training in sleep and strategies for altering sleep and circadian rhythms; rigorous conduct of diagnostic interviews, including assessment of substance use; and writing brief narratives of participant reports. Interns are invited to attend didactic training opportunities offered by the Center for Sleep and Circadian Science (www.sleep.pitt.edu), including the weekly Multidisciplinary Sleep Conference, among others.

Obsessive-Compulsive Disorder Intensive Outpatient Program for Children and Adolescent

Supervision: Amy Kelly, MD; Shayna Honzo, LPC, Maria Nicholas, LCSW Elizabeth Gillespie, DO

The Pediatric Obsessive-Compulsive Disorder (OCD) Intensive Outpatient Program (IOP) is a program devoted to the assessment, treatment, and study of children and adolescents with OCD and obsessive compulsive spectrum disorders. At the Pediatric OCD IOP our main objectives include the following: assisting patients in appropriately identifying and labeling obsessions and compulsions; assisting patients in learning and utilizing Cognitive Behavioral Therapy (CBT)/Exposure with Response Prevention (E/RP) techniques; identifying and treating comorbid conditions frequently associated with pediatric OCD; educating children, adolescents, and families about OCD; providing psychoeducation about our treatment approach to patients, families and the community. The population includes children and adolescents aged 5-18 years with a primary diagnosis of Obsessive-Compulsive Disorder (OCD). The IOP runs MTTh for three hours/day (there is a morning group and an afternoon group). The program includes group and individualized CBT, family therapy, parent/family support groups, and pharmacotherapy. Clinical psychology interns will have the opportunity to participate in all aspects of the clinic, with a particular focus on learning and carrying out CBT and ERP in a group setting and on an individual basis. There is a strong emphasis on clinical supervision, with weekly group and individual supervision and treatment team meetings, during which interns are encouraged to participate both as group members and as leaders. Other opportunities include conducting intake assessments, contributing to the clinical research registry, and developing individual projects aimed at improving clinical care.

Services for Teens at Risk (STAR)

Supervision: David A. Brent, MD; Kimberly D. Poling, LCSW

Services for Teens at Risk (STAR) is a specialty clinic funded by the Commonwealth of Pennsylvania since 1987. The mission of STAR is the prevention of adolescent suicide through research, community outreach, clinical training and supervision, parental psychoeducation, and clinical interventions. Clinical interventions focus on the assessment and psychiatric outpatient treatment of adolescents at risk for suicidal behavior, especially those with major depression. Intensive outpatient treatment is provided through our STAR IOP, which provides 9 hours of treatment per week, comprised of group & individual Clinical Psychology Internship - Child and Adolescent Rotations therapy and medication management sessions. In addition, we see patients with primary anxiety disorders and bereaved youth. In response to Commonwealth-wide concern about suicide in college students, STAR-Clinic has developed a new program for students attending a Western PA college or university, called Co-STAR (College Option, Services for Transition Age Youth at Risk). The goal of 'CO-STAR' is to partner with local colleges and universities and provide rapid and comprehensive assessment and treatment for depressed, anxious, and suicidal undergraduate (18 to 24-year-old) college students. Six local universities have been chosen based on the high level of demand for access to specialty services as well as the high risk for suicide in this population. Typically, these would-be undergraduate college students "stepping down" from the acute inpatient level of care following a suicidal episode; students in crisis presenting at the WPH Psychiatric Emergency Services (PES) or students in crisis at the University Counseling Centers.

Science and Practice for Effective Children's Services (SPECS)

Supervision: David J. Kolko, PhD, ABPP; Barbara L. Baumann, PhD; Oliver Lindhiem, PhD

Science and Practice for Effective Children's Services (SPECS) offers interns an opportunity to expand their collaborative treatment experiences by working in at least one of three treatment programs, each with a different focus: interns can participate in a comprehensive on-site treatment program for children/youth involved with the juvenile court due to sexually abusive/inappropriate behavior, an on-site treatment program for children/youth and their families who are referred for anger, aggression, conflict, coercion, or abuse, or an integrated care program in an affiliated family health center in a nearby community. Many of these cases have histories of chronic behavioral health disorders (both externalizing and internalizing problems), sexual or physical abuse/trauma /PTSD, caregiver stress/psychiatric disorders, and family conflict/chaos. An intern can participate in more than one of the programs, as described below.

In the **Services for Adolescent and Family Enrichment (SAFE) Program**

(<http://www.safessu.pitt.edu/professionals/>) interns provide services to children/youth and their families referred by Juvenile Court due to sexually inappropriate behavior. Many of these youth have diverse psychiatric, trauma, and family histories. Interns can deliver assessment, education, individual and family treatment of the child/adolescent and their caregivers and participate in a group program in collaboration with probation officers and SAFE clinicians.

The **Services Aimed at Fire Education and Treatment of Youth (SAFETY)** program

(<http://www.safetyssu.org/>) is a treatment and research program for children and youth referred for firesetting behavior by the Juvenile Court or Child Welfare. The program provides comprehensive clinical and educational services to the child/youth and family. Interns who work in the SAFETY program can gain valuable assessment, treatment, and research experiences.

The **Alternatives for Families: a Cognitive Behavioral Therapy (AF-CBT)** program (www.afcbt.org) offers interns the chance to be trained in and utilize a trauma-informed, evidence-based treatment to work with families involved in arguments, frequent conflict, physical force/discipline, child physical abuse, or other behavior problems. Interns will support children and caregivers exposed to trauma, help to enhance the safety of children and their families, and teach valuable emotional regulation, behavior management, and problem-solving skills that will help families reduce the risk of high conflict interactions themselves.

The **Services for Kids In Primary Care (SKIP)** program (www.skipproject.org) offers interns an opportunity to deliver behavioral health services in collaboration with primary care providers in an offsite family medicine practice affiliated with the UPMC Family Medicine Department (UPMC McKeesport Clinical Psychology Internship - Child and Adolescent Rotations Family Health Interns conduct screening, clinical assessment, "curbside" consults with primary care providers (residents, faculty), brief behavioral health education, and short-term individual and family intervention, and can facilitate a medication evaluation with the child's PCP.

In each of these programs, participation in program evaluation or research is strongly encouraged. Supervision is provided by a licensed clinical psychologist on an individual and/or group basis, possibly

supported by observations or videotapes and supervision by a member of our multidisciplinary treatment team (e.g., psychiatrists, social workers, other clinicians).

Theiss Center for Trauma and Early Childhood Behavioral Health

Supervision: Kimberly Blair, PhD, Devlina Roy, PsyD

The Theiss Center for Trauma and Early Childhood Behavioral Health provides center-based, mobile therapy, outpatient, and school-based treatment programs designed to be appropriate for children at risk for or experiencing emotional or behavioral concerns such as disruptive and other challenging behaviors and traumatic stress. Within the center-based program, the Matilda Theiss Therapeutic Nursery and Preschool, treatment is provided within natural settings and includes both child-oriented and family-oriented activities and interventions. For young children, it is during play that behaviors are learned, practiced, and tested. Therefore, five days per week our center-based program provides individualized, child-centered, and family-focused behavioral health treatment is delivered within — or in conjunction with — a stimulating, naturalistic, early-learning classroom environment. The following supplementary clinical services are utilized within the therapeutic classroom milieu including: individualized behavior plans and reinforcement systems; play therapy; dyadic therapy; family psychotherapy; parenting education; family support; medication management. These same supplementary clinical services may also be provided within our IMPACT mobile therapy program (Interactive Mobile Parent And Child Treatment) where mobile therapists provide treatment within the child's daycare, preschool, or home setting, up to six hours per week. Our newest program, COOL Zone, are Community and School-Based Behavioral Health (CSBBH) teams housed within the Woodland Hills, McKeesport Area, and Penn Hills School Districts and provide comprehensive behavioral health services to children within community, home/family, and school contexts. To expand access to similar services in this unique program, outpatient COOL Zone programs have been established at Hosanna House in Wilkinsburg and Pine Center in Wexford. First established in 2012 through a grant from the US Substance Abuse and Mental Health Services Administration, the Center for Child and Adolescent Trauma (CCAT) is as a Community Treatment and Services Center within the National Child Traumatic Stress Network (NCTSN) providing services to children through age seventeen who have experienced trauma, along with their caregivers and/or families. This goal is achieved through the use of evidence-based practices, such as Child-Parent Psychotherapy (CPP), Parent-Child Interaction Therapy (PCIT), Trauma-Focused Cognitive Behavioral Therapy, and Integrative Treatment for Complex Trauma (ITCT). Trauma treatment from CCAT is provided as an outpatient service or within any of the Matilda Theiss programs listed above.

Children's Hospital of UPMC – Behavioral Health

Supervision: Kathryn Barbash PsyD; Caitlyn (Baum) Coughlin, MS; Nicole Brynes, DNP; Kristin Dalope MD; Elizabeth Grandelis, PsyD; Chelsea Grefe McCann, PsyD; Anna Jolliffe, DO; Heather Joseph, DO; Krista Laux, PsyD; Lauren Lorenzi Quigley, PhD; Cristin McDermott, MD; Devin McGuier, PhD; Maura Miglioretti, PhD; Taylor Naus, LCSW; Tarin Santamaria Abigail Schlesinger, MD; Justin Schreiber, DO, MPH; Justine Vecchiarelli, MS; Kaycee Weir PhD

The UPMC Children's Hospital of Pittsburgh Behavioral Science Division provides a full array of behavioral health assessments and interventions for hospitalized children and their families, as well as specialty behavioral outpatient services in multiple pediatric subspecialty clinics. The goal is to provide family-centered care that mobilizes family resources to manage the challenges arising from their children's chronic and acute health problems. Interns have opportunities to work with children with chronic and

acute medical problems across the full developmental spectrum. Opportunities exist for inpatient and outpatient experiences dependent on interests and availability of training options at the time of the rotation. The rotation allows for interns to learn more about integrated care delivery models in an acute medical hospital setting.

Children's Hospital of Pittsburgh - Transplant Psychology

Supervision: Diana Shellmer, PhD; Beth Logan, PhD

The Transplant Psychology service at CHP provides behavioral health services including assessment and intervention for solid organ transplant patients and their families. The service cares for children with inborn errors of metabolism (e.g., Maple Syrup Urine Disease [MSUD] and Crigler Najjar Syndrome [CNS]) who are assessed and treated with liver transplantation; children with chronic liver disease; children with bowel disorders including short gut, gastroschisis, and Hirschsprung's disease; children with cystic fibrosis and other lung diseases requiring lung transplantation; children who have heart failure requiring heart transplantation; children with end stage renal disease requiring kidney transplantation; and/or who are candidates for or have previously received a solid organ transplant. The focus of the service is to provide family-centered evaluation, intervention, and care. Transplant evaluations: (1) examine the family's experience in the medical environment; (2) assess the patient and family's readiness for transplantation; (3) assess risk factors for maladjustment and non-adherence posttransplantation, and (4) provide clear recommendations to the medical team to assist in the amelioration of risk-factors predicting maladjustment of patients and caregivers post-transplantation. For patients with MSUD screening evaluations both pre- and post-liver transplantation are also undertaken in order to provide accurate and detailed evaluation of cognitive, developmental, adaptive, and academic functioning of patients. Interventions are geared toward addressing psychosocial, organizational, and systematic barriers to successful transplantation and posttransplant adherence. An integral component of the service includes active, ongoing communication and consultation with the various medical teams involved in the care of these patients and families. Research efforts for the service include examination of cognitive and psychological functioning in patients with MSUD and other metabolic conditions; examination of parameters of adherence in transplant patients; and examination of the psychosocial functioning and adjustment of transplant patients

Pediatric Neuropsychology

Supervision: Sarah Laughlin, PhD; Melissa Sutcliffe, PhD, ABPP; or Amy Letteri, PhD

The Pediatric Neuropsychology Service within UPMC Children's Hospital of Pittsburgh (CHP) serves patients from infancy to age 26, and their families. Interns will have the opportunity to engage in assessment, consultation, and brief interventions that provide information to the child, family, and broad care team about 1) how a medical condition (e.g., epilepsy, traumatic brain injury, genetic syndrome) or treatment (e.g., radiation) places a child at risk for developmental, cognitive, and behavioral problems; and 2) how to intervene to improve outcomes.

Opportunities available include: 1) outpatient neuropsychological evaluation (interview, testing, feedback); 2) brief neuropsychological evaluation and broader service to families (e.g., participation in discharge school/family meetings) within inpatient rehabilitation; 3) clinical interview and consultation within hospital-based, interdisciplinary clinics (e.g., brain injury clinic, sickle cell clinic, epilepsy surgery clinic, audiology clinic); 4) joint presentation with medical fellows in interdisciplinary case conferences (e.g., Neuropsychology-Neurodevelopmental Disorder Case Conference); 5) case presentation within

phase I epilepsy surgery conference; 6) participation in CHP's tumor board conference; and 7) provision of brief executive functioning skills training with children and caregivers. The specific activities that define an intern's pediatric neuropsychology rotation will be based on the intern's prior experience, goals, and availability at the time of rotation. All interns will learn to administer standardized assessments, interpret neurocognitive data and engage in case conceptualization in a way that considers medical and psychosocial influences, integrate information to make diagnoses, write integrative reports, and provide verbal evaluation feedback to patients and families. Additional activities may include tiered supervision of clinical psychology doctoral externs, participation in CHP neuropsychology's APA-approved continuing education seminar, observation of neurosurgical and/or epilepsy monitoring procedures, and clinical program development.

Center for Autism and Developmental Disorders Merck Child Outpatient Program

Supervision: Benjamin L. Handen, PhD, BCBA; Cathryn Lehman, PhD

This outpatient program serves children and adolescents (ages 2 through 21) who have developmental disabilities coupled with psychiatric and behavioral disorders. The primary types of disabilities seen are autism and intellectual disability. Psychology interns have typically been involved in a one-day a week diagnostic clinic for children and adolescents with autism spectrum disorders. Interns serve on an assessment team and are instructed in the use of state-of-the-art diagnostic tools, such as the ADOS-2. In addition, psychology interns have the opportunity to serve as therapists in social skills training groups for children and adolescents with High Functioning Autism Spectrum Disorder. Interns can also participate as co-therapists in our Parent Child Interaction Therapy (PCIT) and Early Start Denver Model (ESDM) afternoon clinics, something that could be expanded to include a second afternoon if desired. Finally, the Merck Child Outpatient Program is also involved in a range of research studies examining the efficacy of pharmacologic and psychosocial treatments with this population. Opportunities are also available for interested interns to become involved in such efforts.

The John Merck Inpatient Unit for Autism and Intellectual and Developmental Disorders Supervision: Jessica Kettel, MD; Jennifer Lemmon, RN; Carla Mazefsky, PhD The Merck unit is a specialized inpatient unit at UPMC Western Psychiatric Hospital for individuals who have Autism Spectrum Disorder, intellectual disabilities, and other developmental disorders. There are separate wings for children, adolescents, and adults. The unit primarily provides acute stabilization. Most patients are admitted for aggression or self-injurious behaviors. The unit serves individuals with the full range of intellectual and verbal abilities, providing experience with patients with ASD with the most severe presentations (e.g., nonverbal, severe intellectual disability) as well as bright and verbal patients with severe emotional or behavioral problems. The rotation will be tailored to the intern's experience with the population and interests. Common elements include attending multidisciplinary treatment team, joining rounds with the attending psychiatrist, conducting interviews or assessments with patients, planning and implementing behavioral interventions, 1-on-1 interventions with cognitively-able patients, etc. Interns will also have the opportunity to participate in activities that occur on the unit as part of the Autism Inpatient Collection, which is a multisite research study (see <http://www.reaact.pitt.edu/studies-2/>). Research activities available to interns include observation or potential administration of the Autism Diagnostic Observation Schedule – 2, a test of receptive language ability, and a nonverbal IQ test (Leiter), and exposure to the collection of physiological arousal data via wrist worn sensors with concurrent coding of behaviors.

Youth and Family Research Program

Supervision: Heather Joseph, DO; Traci Kennedy, PhD

Program Co-Directors: Brooke Molina, PhD; Sarah Pedersen, PhD

We conduct research on the course, neurobiology, and treatment of Attention Deficit Hyperactivity Disorder (ADHD) and related cognitive-behavioral profiles, comorbid externalizing disorders, and alcoholism and other substance abuse. Interns may participate in ongoing studies or test new intervention ideas developed with the directors of the research program and clinic. Currently, among other research opportunities, for clinical experience interns may learn to conduct adult diagnostic, including ADHD, assessments as part of an ongoing studies. As part of the ADHD Across the Lifespan Clinic experience, interns may participate in the assessment and treatment of children, adolescents, and adults. The clinic provides evidence-based and evidence-informed treatment, including psychosocial and pharmacologic interventions, for the full developmental spectrum. Interns participate in multidisciplinary team meetings to review cases and contribute to team discussions. The Youth and Family Research Program includes ongoing studies of ADHD, alcohol and other substance abuse (including stimulant misuse), and alcohol response in the lab and in the real world (EMA). We focus on youth and young adults, and recently their offspring, using developmental, neurobiological, and multimethod approaches (e.g., imaging, psychophysiological, and ecological momentary assessment).

Center for Advanced Psychotherapy

Supervision: Lauren Bylsma, PhD; Holly Swartz, MD; Kelly Forster Wells, LCSW; Ran Li, MD

The Center for Advanced Psychotherapy (CAP) is an outpatient clinic that specializes in delivering evidence-based treatments for patients with unipolar depression, bipolar disorder, anxiety disorders, and personality disorders in children, adolescents, and adults. Supervision will be provided in evidence-based therapies including interpersonal psychotherapy (IPT), interpersonal and social rhythm therapy (IPSRT,) Cognitive Behavioral Therapy (CBT), and Mentalization Based Therapy (MBT). CBT will be the primary modality for child and adolescent cases (ages 8-17), with a focus on unipolar depression or anxiety disorders. CBT training for adult cases focuses on patients with unipolar depression and anxiety disorders but may include opportunities to work with traumatic stress disorders or obsessive-compulsive disorders, depending on trainee interests. MBT will be used to treat individuals with borderline and narcissistic personality disorders. IPSRT will be taught for the management of patients with bipolar disorder. IPT and CBT will be used for the treatment of depressive disorders. Training in the theory and implementation of evidence-based psychotherapies will be provided, in combination with pharmacotherapy (for adults or youth) as needed. Interns will be expected to participate in individual supervision, group supervision, and carry a small caseload of adult and/or child outpatients. Those who wish to learn MBT will be expected to see their cases for 6-12 months with ongoing supervision from Dr. Li.

Psychotherapy Training Clinic (PTC)

Supervision: Various Licensed PhD Supervisors

Each intern is expected to follow a minimum of two outpatients in individual psychotherapy during the year. Interns are provided access to patients through the WPIC Psychotherapy Training Clinic. Weekly supervision is offered by individual faculty members with expertise in a variety of empirically-supported treatments (including, for example, cognitive-behavioral therapy, interpersonal psychotherapy, and dialectical behavior therapy. Careful case conceptualization is encouraged. Interns develop case presentations for group feedback and discussion during Friday morning group supervision meetings.