



**Forensic Psychology Training Program
Post Doctoral Fellowship
Brochure**

**Liberty Healthcare
Illinois Department of Human Services
Treatment & Detention Facility
Rushville, Illinois**

September 2012

(revised to reflect UNDr 8/24/11)

**Liberty Healthcare
Illinois Department of Human Services
Treatment & Detention Facility
Forensic Psychology Training Program
Post Doctoral Fellowship Training Manual**

Introduction

Liberty Healthcare in coordination with the Illinois Department of Human Services-Treatment & Detention Facility is offering the unique opportunity to complete a one-year Psychology Post Doctoral Fellowship specializing in Sex Offender Treatment. This one-year Forensic Psychology training will offer the selected candidates the opportunity to participate in intensive sex offender-specific group therapy with an experienced co-therapist. During this treatment-intensive, post doctoral training, the Fellow will function as a member of a multidisciplinary team providing psychological testing and report writing; treatment planning; group and individual treatment; as well as, supervisory experience. The Fellow will participate in weekly training provided in multiple formats including case conferencing, multidisciplinary treatment plan staffing, staff trainings and didactic seminars.

**Forensic Psychology Training Program
Post Doctoral Fellowship Training Manual
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Liberty Healthcare
Illinois Department of Human Services
Treatment & Detention Facility
Fellowship Training Manual

I. Introduction to the Treatment Program

A. Background & History of Treatment Program

In July 1997, the Sexually Violent Persons Commitment Act was signed into law in Illinois. Under this new legislation, individuals released from confinement could be remanded into the custody of the Department of Human Services if they were considered “sexually violent.” The legislation was created to target those individuals with a record of sexual offenses, who continued to present significant risk to public safety due to the likelihood of further sexual offenses upon release to the community.

The Department of Human Services designated a new Sexually Violent Persons Treatment and Detention Facility (TDF) to house and provide treatment for these high-risk individuals. Following a competitive bidding process in December 1997, Liberty Healthcare Corporation was selected by the Department to create, develop and operate a comprehensive program of sex offense-specific treatment and related behavioral health services that would fulfill the mission of the SVP Commitment Act. Originally, the TDF was located on the grounds of Sheridan Correctional Center. Subsequently, in 2000, the program was moved to the former Joliet Correctional Annex in Joliet, Illinois to accommodate the growing number of individuals under civil commitment and detention under the SVP Act. As the program continued to grow, in February 2006 the decision was made to relocate the program to Rushville Illinois, where it is currently housed in a state of the art facility.

At the present time, Liberty continues to provide most clinical staff (Clinical Director, psychology, psychiatry, social work, addictions counseling, recreational therapy, etc.) and is responsible for all offense specific treatment and rehabilitative programming. DHS provides on-site administrative overview (Program Director) and direct care staff (Security Therapy Aides).

B. Mission Statement

The Illinois Department of Human Services Treatment and Detention Facility provides evidence-based sex offender specific treatment in a safe, structured residential environment. We focus on the individualized needs of the residents and treat each resident respectfully, professionally and with dignity. We believe that all residents can change. We strive to reduce risk to society by facilitating life-long behavioral change in residents

C. Population Served

The SVP Treatment and Detention Facility is a secure residential treatment facility providing services to individuals, who have been civilly committed under the Illinois Sexually Violent Persons Commitment Act and remanded to the custody of the Department of Human Services for treatment.

1. Standards for SVP Commitment

In Illinois, civil commitment as a Sexually Violent Person has four standards:

- ◆ The person must be within 90 days of release or discharge from an adult criminal sentence, or a forensic commitment for a qualifying sexual offense.
- ◆ The person must have a mental disorder, which predisposes them to engage in acts of sexual violence.
- ◆ The person must have a substantial probability of committing future acts of sexual violence because of his mental disorder.
- ◆ It must be proved, beyond a reasonable doubt, that the person's risk of future sexual violence is the result of his mental disorder.

2. Referral and Commitment Procedures

Since the inception of the program in 1997, every candidate for admission to the Sexually Violent Persons Treatment and Detention Facility has been referred from the Department of Corrections where they were incarcerated for sexual offenses. However, the SVP statute also allows candidates to be referred from the forensic units of Illinois state psychiatric hospitals under the Department of Human Services, where they are currently under forensic commitment. The procedure for each is described below.

a. Referral from the Department of Corrections: Based on record review and if needed a clinical interview, the contracted evaluators for the Department of Corrections identify those inmates imprisoned for qualifying sexual offenses, who are within 90 days of release and who may continue to pose substantial risk to the community for sexual re-offending. The examiner files a report with the Attorney General indicating that the inmate meets the standards for civil commitment. The Attorney General has the discretion to decide whether to file a motion to detain the individual pursuant to commitment. If a detention order is issued, the state must schedule a "probable cause" hearing within 72 hours. Under the detention order, detainees may be sent to TDF in Rushville to await evaluation by an independent clinical psychologist, under contract with DHS, who specializes in the assessment of sexual offenders. When the individual is detained, he is entitled to prompt and adequate treatment for his needs.

A court hearing, held in the originating county, determines whether the individual is civilly committed to the TDF program. The person has the right to the full adversarial process and the Attorney General must demonstrate that the individual's risk of sexual violence is "beyond a reasonable doubt." If the person was remanded to the TDF program, he must be re-evaluated at the end of the first six months, and once every year thereafter to determine whether he remains a sexually violent person and, if so, what are the least restrictive conditions in which he can be safely treated.

b. Referral from the Department of Human Services: The SVP statute also allows for civil commitment of individuals adjudicated as Not Guilty by Reason of Insanity (NGRI) for a qualifying sexual offense. If applicable, the Department of Human Services may designate psychologists to conduct an initial evaluation of NGRI patients identified as qualifying candidates for civil commitment as a Sexually Violent Person. The psychologists review the individual's records; perform a structured clinical interview; and complete other psychological and risk assessments as appropriate. Based on the DHS psychologist's evaluation, the Attorney General has the discretion to petition the court to detain the person pursuant to commitment. The remaining procedure would be the same as that noted above.

D. Treatment Objectives & Services Provided

1. Philosophy of Treatment

Liberty Healthcare's philosophy of treatment is based on the following presumptions:

- ◆ Provide specialized sex offense-specific treatment by skilled professionals, so that many sexual offenders can learn how to manage and control their sexually deviant behaviors.
- ◆ The provision of effective treatment of sexual offenders can reduce and prevent future victimization.
- ◆ Sex offenders have a responsibility to halt their sexually abusive behaviors.
- ◆ Not all sexual offenders are amenable to treatment. Individuals vary significantly in their level of motivation and capacity to benefit from treatment, but sometimes these variables may change over time. Hence, although an individual may currently refuse treatment, or may fall short in the treatment process, the individual may be able to benefit from treatment at a future time. Sexual offenders should be given the opportunity to participate in treatment.
- ◆ The evaluation and determination of treatment effect on sexually aggressive and deviant behavior and thoughts for any given individual are exceedingly complex and subject to the vicissitudes of self-deception, fraudulence and relapse. Consequently, to the greatest degree possible, measures of treatment effectiveness should be objective, based on observable behavior, and supported by cross-validating data and observations from multiple sources.

2. Treatment Goals

The major goal of treatment at the TDF is successful re-integration of residents into the community as safe and responsible citizens. The most important measure of success is reduction of sexual re-offending with the goal of reducing victimization for any given resident to zero. The goals of treatment are for the residents to progress through the following stages: acceptance of responsibility; acknowledging their deviant behavior; identifying its origins and precipitating factors; and, substituting alternative coping behaviors that prevent relapse. In particular, the Sexually Violent Persons Treatment and Detention Facility places a heavy emphasis on cognitive-behavioral and relapse preventive treatment principles as reflected in our overall treatment goals for residents in this program:

- ◆ Accepting responsibility: Offenders must accept full responsibility for all sexually offending behavior and deviant thoughts – without minimization, rationalization, or blaming. The offender must admit guilt for actual offenses, exonerate his victims, understand dynamics without placing blame or making excuses, and recognize that his motivations are deviant and require help.
- ◆ Awareness of deviant cycle: Offenders must be able to identify the cycle of sexual deviance/aggression in specific concrete terms applicable to themselves and demonstrate acquisition of coping strategies/interventions that can prevent relapse.
- ◆ Victim empathy: Offenders must demonstrate empathy for victims of sexual offenses, including awareness of the many immediate and extended harmful consequences of victimizing behaviors.
- ◆ Active, meaningful participation: Offenders must participate in an on-going process of change and growth through active engagement in treatment and program activities (e.g., regular attendance, meaningful contributions to activities, initiation without prompting, extension of learning to daily life and relationships on the living unit, etc.).
- ◆ Eliminate cognitive distortions: Offenders learn to identify, challenge and modify cognitive distortions in relation to offending sexual behavior and interpersonal relationships.
- ◆ Self-regulation skills: Offenders demonstrate the knowledge and skills to manage problems and conditions related to psychiatric illness, substance abuse, deviant sexual arousal, personal victimization, or other identified areas of need.
- ◆ Knowledge of healthy sexuality and relationships: Offenders acquire knowledge of human sexuality, healthy and appropriate relationships, and effective interpersonal skills.
- ◆ Awareness of internal states: Offenders learn techniques acquire an effective internal awareness of emotions, thoughts, and feelings (particularly in relation to the sexual assault cycle) and the ability to express these thoughts and feelings appropriately.
- ◆ Prosocial values: Offenders learn and practice prosocial values, which counteract criminal lifestyle and behavior patterns while supporting efforts to not re-offend.
- ◆ Preparation for re-integration: The program is designed to facilitate a progressive process of learning, acquisition and mastery of prosocial skills and attitudes that will prepare the individual for successful re-integration into the community.

3. Services Provided by Liberty Healthcare

The TDF is a secure treatment environment designed to deliver sex offense-specific treatment to residents, who are detained or civilly committed, under Illinois' Sexually Violent Persons Commitment Act. Liberty Healthcare's program offers a full range of diagnostic, treatment and rehabilitative services for sexually deviant behavior, mental disorders and chemical dependency. An integrated interdisciplinary team of Liberty professionals, including psychiatrists, psychologists, social workers, counselors, substance abuse counselors and recreation therapists, who work closely with state-employed security and paraprofessional staff to deliver a consistent, humane treatment program, staffs the facility.

Liberty staff will perform comprehensive evaluations, including a psychiatric assessment, on all admissions to the TDF unit. Based on the evaluation, the professional staff creates an individualized plan of treatment that may include psychopharmacology, individual and group counseling, psychoeducational programs, behavior management, psychosocial rehabilitation, and other modalities. Treatment programs and modalities offered by Liberty at the TDF include, but are not limited to, the following:

- ◆ *Sex offense-specific psychoeducational groups*: Structured psychoeducational sessions are provided to address issues specific to this population, including topics such as the sexual violence cycle; cognitive-behavioral principles; victim empathy; journaling; offense description; relapse prevention; sexual education; and so forth.
- ◆ *Individual psychotherapy*: The goals of individual therapy are dependent on the needs and abilities of the individual resident. As a rule, individual therapy addresses time-limited, specific problems.
- ◆ *Substance abuse counseling*: Given the high incidence of drug and alcohol abuse for this population, TDF offers group counseling for substance abuse problems.
- ◆ *Therapeutic milieu*: All interventions and activities take place in the context of a well-organized therapeutic milieu. The goal is to maintain a stable and predictable environment that is reality-oriented and humane. The therapeutic milieu is based on the idea that the program is a social system in its own right. The individuals who are its members influence the program; both residents and staff are influenced by the therapeutic surroundings. The social environment of the therapeutic milieu is used to promote prosocial behavior and help residents manage their lives and personal relationships in a more responsible and constructive manner.
- ◆ *Psychophysiological sexual assessment*: Detection and measurement of deviant sexual arousal is an important index of response to treatment and treatment effectiveness. TDF offers an on-site sexual assessment, including the Abel Assessment for Sexual Interest and penile Plethysmograph for direct physiological monitoring of sexual arousal and arousal management reconditioning/reduction treatment.
- ◆ *Psychopharmacology*: All psychiatric medications are prescribed and managed by qualified psychiatrists. In addition to various mental health medications, residents may consent to psychopharmacologic treatment for the specific purpose of reducing or eliminating deviant sexual arousal and activity. Residents are educated about their prescribed medications, including the benefit of the medication and possible side effects.
- ◆ *Behavioral rehabilitative programming*: A number of psychoeducational programs offered to residents assist in the development of life skills and coping skills. These programs utilize behavioral and rehabilitative principles and focus on concrete, practical instruction and rehearsal of skills and techniques. Some examples may include anger management; stress management; communication skills; assertiveness; social values; medication management, and symptom management.
- ◆ *Recreation and leisure activities*: A variety of recreational programs and activities offered to the residents encourage the development and acquisition of healthy behavioral alternatives through leisure, relaxation and interpersonal cooperation. Board games, cards, dominoes and other materials are available for use. Residents may possess musical instruments and have access to musical activities. In addition, residents have direct daily access to outdoor recreation within the secure perimeter and two indoor fitness facilities.

II. Post Doctoral Fellowship Program

A. Training Program Overview

During the training year, the Post Doctoral Fellow is provided with supervised direct contact with a challenging clinical forensic population that takes place in a secure treatment facility operated by the Department of Human Services. The purpose of the Fellowship experience is to provide the environment and opportunity for the Fellow to apply theoretical knowledge; to implement and develop clinical techniques based on this knowledge; and to foster the professional and personal attitudes important to the identity of a professional psychologist. Evaluation of the Fellow's progress in clinical training focuses on three areas: theoretical knowledge, clinical skills, and professional attitudes.

The foundation of the Fellow's clinical training in professional psychology is the accurate assessment, understanding and treatment of the perpetration of sexual violence. Secondly, Fellows receive psychological training in dealing with additional mental health needs of our diverse client population, including affective disturbances, personality disorders, and chronic mental conditions such as Schizophrenia and Bipolar Disorder. The Fellow's assessment and understanding is the basis for the recommendation and/or implementation of effective techniques for the alleviation or resolution of these problems within a climate of absolute respect for the patient population. Fellows receive training in all aspects of patient care including formal psychological assessment; individualized treatment planning based on the results of that assessment; and, implementation of treatment interventions, outcome assessment, and discharge planning. Ethical standards of the State of Illinois, the Department of Human Services, Liberty Healthcare, the American Psychological Association (APA) and the Association for the Treatment of Sexual Abusers (ATSA) are incorporated into the Fellow's training.

During the Fellowship, the Director of Training & Research monitors the development of the Fellow. Supervision by two independent licensed staff, one of which will be a Licensed Clinical Psychologist, will address the issues of clinical suitability as well as the application of academic knowledge. All aspects of the Fellow's personal adjustment, interpersonal relationships, and behavior in all settings are relevant to their progress throughout the Fellowship.

The goal of the Forensic Psychology Training Program within the Illinois Department of Human Services is to assure that Fellows are well qualified and will leave the program ready to assume their roles in the psychology community as competent, confident and ethical professionals. This goal is accomplished by guidance and supervision of the Fellow's direct patient contact to ensure the delivery of professional quality effective assessment and therapeutic intervention. The training curriculum utilizes live supervision and mentoring to foster appropriate development of the Fellows' clinical skills and professional development. As well, the Fellows will be provided with didactic training experiences to provide them with insights into the practice of Professional Psychology.

The guiding principle of the program is that clinical practice in the field of sexual violence requires an application of the core clinical skills and knowledge base used in general

professional practice adapted to the specific needs of the adult male sexual offenders treated at the institution. This Fellowship provides the Post Doctoral trainee with the preparation necessary to enter into the practice of professional psychology. The Fellowship is designed to provide the foundation of knowledge and skills necessary for licensure and ultimately the practice as a professional Psychologist.

Fellows are selected for this unique training experience based upon appropriateness of their educational and practical experiences. The ideal candidate will be from an American Psychological Association (APA) approved graduate training program and Internship, which provided the appropriate foundation in assessment, intervention and consultation. Prior experience or interest in working in a forensic setting is preferred. The program offers intensive, skill based training opportunities; the ability to work with a large, diverse and multi-disciplinary staff as well as an extremely challenging client population. Due to the broad spectrum of training provided, Fellows who successfully complete the Forensic Psychology Training Program will be well equipped to function as a psychologist in a wide variety of settings.

B. Mission Statement

The mission of the Forensic Psychology Training Program is to actively function within the standards and regulations of the State of Illinois, the Illinois Department of Human Services, Liberty Healthcare, the American Psychological Association and the Association for the Treatment of Sexual Abusers. The mission of the Illinois Department of Human Services Treatment and Detention facility states:

“The Illinois Department of Human Services Treatment and Detention Facility provide state of the art, sex offender specific treatment in a safe, structured residential environment. We focus on the individualized needs of the residents and treat each resident respectfully, professionally and with dignity. We believe that all residents can change. We strive to reduce risk to society by facilitating life-long behavioral change in residents.”

C. Training Model

The training model of the Forensic Psychology Training Program is best described as a *Practitioner-Scholar* model. This model includes the view that science and practice are mutually informative; emphasize critical thinking; and, the inclusion of empirically supported treatment (Rodolfa, Kaslow, Steward, Keilin & Baker, 2005). The primary emphasis of this program is clinical training that recognizes the importance of generating knowledge through practice. With supervision and mentoring throughout the training year, the Fellow will grow toward being an autonomous professional prepared to gain entry into the professional practice of psychology.

The Training seminars and the weekly didactic support the *Practitioner-Scholar* model of Fellowship training. The goal of these activities is to create a learning environment, which fosters the translation of theory, research and knowledge into practice. The Fellow will also have

the opportunity to attend treatment specific educational conferences to gain exposure to varying theoretical conceptualizations and treatment approaches.

D. Development of Professional Autonomy

Fellows within this program will be recognized as fully participating members of the multi-disciplinary treatment team, under the direction of a supervising Psychologist. Boundary and ethical issues will be addressed in detail to aid the transition to working in a detention environment and the complexities of providing treatment in a secure setting. Fellows will be offered a significant degree of autonomy as the training year progresses. A primary goal of the training experience is the development of professional self-confidence, through the Fellows' participation in intensive modeling and live supervision experiences throughout the year

E. Specialized Knowledge: Sexual Offending & Forensics Issues

The Fellowship provides the unique opportunity to gain specialized knowledge in Clinical Psychology, the many different facets of Forensic Psychology and sexual violence. All members of our clinical staff belong to professional organizations devoted to the integration of current research and practice in the treatment of sexual violence and general forensic psychology issues. Fellows are encouraged to join such relevant professional organizations as student members, at no cost to them. Though development of specific expertise as a forensic psychologist requires additional training and experience after the Fellowship year, the program serves as a foundation for such specialization.

F. Service to Diverse Populations

The Fellowship program provides the Fellow with the opportunity to provide service to diverse and under-served populations. Fellows will provide psychological services to clientele from all lifestyles, race, age, and ethnicity in group therapy and case management settings. The Treatment and Detention Facility provides specialized treatment for developmentally delayed and learning disabled residents. Crisis management situations provide training in assessment, immediate intervention for psychological distress, intensive behavior management and manipulative issues.

G. Training Objectives

The objective of the Forensic Psychology Training Program is to provide a comprehensive learning experience that will provide the Fellow with all the requirements necessary for licensure. The planning and development of the Fellowship training program will emphasize the individual needs and preferences of the Fellows. A detailed self-assessment and interests survey will be addressed during the first week of the training program, which will lead to the development of specialized training and supervision throughout the training year. This flexibility in training will allow the Fellows the opportunity to pursue specific interests, such as research. Though there are stated performance objectives for the completion of the program, within that framework, flexibility is available. This approach assures that each Fellow has the opportunity to tailor the training experiences to maximum their progress toward autonomous practice

H. Competency Goals

To guide the Fellow's professional growth throughout the Forensic Psychology Training Program, Competency goals are presented as a framework for development. In an effort to train Fellows to think critically about psychological theories/issues and to apply these theories/issues to their daily experience, the Forensic Psychology Training Program will detail the specific areas of competency expected of our graduates. Understanding exists within the training program that the Fellows bring a varying level of individual skills and interests, which may impact individual progress over the course of the training year. Close supervision will assist each Fellow to develop individualized goals that take into account the varying level of skills and interests.

The key competency areas for the Post Doctoral Fellows participating in Forensic Psychology Training Program are: Psychological Assessment; Psychotherapeutic Intervention; Supervision; Consultation; Professional, Ethical and Legal Conduct; Multicultural Competency; Forensic Issues; and Case Conference & Presentation.

III. Framework of Fellowship Training

The Forensic Psychology Training Program of Liberty Healthcare functions within Illinois Department of Human Services. The Training Program has been designed to provide the Fellow with the opportunity to participate in the multiple facets of treatment within this secure environment. The Fellow's growth in professional functioning will be guided within the context of close supervisory support, role modeling of the professional staff, and participation in intensive training opportunities.

1. The activities of the Fellow will be clinical in nature and are central to the training experience (e.g., psychological assessment; individual treatment planning; therapeutic treatment in both group and individual milieu; resident staffing opportunities with multidisciplinary teams; case conferencing; didactic training experiences; and, multiple opportunities for direct supervision). Direct, face-to-face, contact with residents will comprise approximately 30% of the Intern's time; while other clinical activities will represent approximately 60%. Non-clinical activities will be included in the Fellowship (e.g., administration); however, care will be taken to ensure these activities are kept to a minimum.
2. The clinical staff of the Illinois Department of Human Services is provided through contract arrangements with Liberty Health Care, and is sufficiently large and stable to provide a unique breadth of knowledge and experience. The Fellow will receive two hours of licensed supervision each week: one from the Director of Training & Research and another from a Licensed Psychologist on staff. The format of supervision is trainee focused; addressing services provided and other topics the Fellow might bring.
3. The Treatment and Detention Facility uses a multidisciplinary team model. The Fellow will perform the Fellowship duties as a member of the multidisciplinary team on one of the Treatment Units within the facility. The Fellow will collaborate with other disciplines,

including: Psychiatrists; Physicians; Social Worker; Recreation Therapists; Nurses, and security staff.

4. The Director of Training & Research is a Licensed Clinical Psychologist in the State of Illinois and is responsible for both the quality and integrity of the training experience.
5. Opportunities for training are multifaceted and extend beyond the individual supervisor. Weekly training opportunities include, but are not limited to: formal topic driven training seminars; all-staff case conferencing; Treatment plan/staffing provided by multidisciplinary team; observation of court testimony; and professional training opportunities offered outside the facility. The Fellow is expected to provide presentations to staff during the training and case conference sessions.
6. Specific service requirements to the Illinois Department of Human Services will not interfere or usurp the training goals of the Forensic Psychology Training Program. The provision of services by the Fellow to the residents of the detention facility will be carefully supervised and integrated into the training program to ensure the goals of the training program are met.
7. The Fellow will be kept informed of their progress in the Fellowship program by means of clearly identified evaluative sessions. Formal performance reviews will be provided to the Fellow by each of the licensed supervisors, at a minimum of three times during the training year. The formal review will be discussed with the Fellow.
8. The Fellow will provide an evaluation the training site; the learning experiences during the review period; and, the quality of the supervision/mentoring received.

The above are basic requirements for the Forensic Psychology Training Program. Some States may have additional Fellowship requirements that must be met for licensure/certification. The Fellow must be familiar with the specific regulations of the state or states in which they wish to practice so that the Fellowship experience conforms to the guidelines of those States. The Fellow will be expected to negotiate any additional requirements at the commencement of the training program.

IV. Supervision & Training

The objective of the Forensic Psychology Training Program is to provide a comprehensive learning experience that will provide the Fellow with all the requirements necessary for licensure. The planning and development of the Fellowship training program will emphasize the individual needs and preferences of the Fellows. Flexibility in training will allow the Fellows the opportunity to pursue specific interests. Though there are stated performance objectives for the completion of the program, within that framework, limited flexibility is available. This approach assures that each Fellow has the opportunity to tailor the Fellowship experiences to maximize their progress toward autonomous practice

A. Supervision & Training

The Fellow will receive multiple forms of supervision and training during this Fellowship-training year. The time spent in supervision each week will include the following:

<u>Form of Supervision/Training</u>	<u>Hours per week</u>
Individual Supervision	2 hours
Case Conferences/Staffing	1 hour
Didactic Seminars	2 hours
Liberty Staff Training Opportunities	1 hour
Group Supervision/Team Meeting	<u>1 hour</u>
TOTAL	<u>7 hours</u>

Individual Supervision: will be provided by two Licensed Clinical Psychologist for a total of two hours per week. The Team Leader of the Unit to which the Fellow is assigned will provide one hour of individual supervision. This hour of supervision will focus on the delivery of direct contact and treatment of the residents. The Director of Training & Research will provide the second hour of supervision.

Case Conferences and Staffing: occurs on a bi-weekly basis for the residents on the Unit. This is a multidisciplinary meeting with the resident to discuss treatment planning for the next quarter. Case conferences are held on a monthly basis to address challenging cases with the entire treatment staff.

Didactic Seminars: are planned on a weekly basis for the Fellows. Specialized topics are provided in a group setting. Other staff members have access to the didactic trainings if interested. At the beginning of the training year, an open discussion will determine topics to be addressed during didactic sessions. A sample didactic schedule is provided at the end of this section

Staff Training Opportunities: provided by Liberty Healthcare on a semi-monthly basis address sex offender treatment related topics.

Group Supervision: will take the form of weekly Team meetings during which approaches to treatment and case management will be discussed. Also join supervision with the co-therapists might be scheduled by the Team Leader on an ongoing basis to gain an understanding of the problems and issues being addressed during group treatment.

Sample Didactic Schedule (subject to change):

<u>Week of</u>	<u>Didactic Topic</u>	<u>Time/hrs</u>	<u>Provider</u>	<u>Location</u>
6-Sep-12	Orientation	24.0	various	B Unit
13-Sep-12	Orientation	40.0	various	B Unit
20-Sep-12	Didactic Planning/ Ethics	1.5	Dr. Dobier	E303
27-Sep-12	Difficult clients	1.5	Various	E303
4-Oct-12	Testing	1.5	Dr. Dobier	E303
11-Oct-12	Report Writing	1.5	Dr. Dobier	E303
18-Oct-12	ATSA	32.0	conference	location
25-Oct-12	Multicultural Cases PD	1.5	Post Doc	E303
1-Nov-12	Multicultural Cases INT	1.5	Intern	E303
8-Nov-12	Supervision Models	1.5	Dr. Dobier	E303
15-Nov-12	DSM-IV Mood (PD)	1.5	Post Doc	E303
29-Nov-12	DSM-IV Psychotic (PD)	1.5	Dr. Dobier	E303
6-Dec-12	DSM-IV Axis II (PD)	1.5	Post Doc	E303
13-Dec-12	EPPP Licensure	1.5	Dr. Dobier	E303
20-Dec-12	Cognitive Distortions	1.5	Dr. Dobier	E303
3-Jan-13	Interview Techniques	1.5	Dr. Dobier	E303
10-Jan-13	Ethical Pitfalls	1.5	Post Doc	E303
17-Jan-13	Ethical Dilemmas	1.5	Mr.Groot	E303
24-Jan-13	Vicarious Trauma	1.5	Dr. Dobier	E303
31-Jan-13	Self Care II	1.5	Dr. Dobier	E303
7-Feb-13	Multicultural Cases PD	1.5	Post Doc	E303
14-Feb-13	Multicultural Cases INT	1.5	Intern	E303
21-Feb-13	Court Testimony	12.0	TBA	Court
28-Feb-13	Case Presentation (PD)	1.5	Post Doc	E303
7-Mar-13	Professional Development	1.5	Various	E303
14-Mar-13	Career Planning	1.5	Dr Brucker	E303
21-Mar-13	Case Presentation (PD)	1.5	Post Doc	E303
28-Mar-13	EPPP-Theoretical	1.5	Dr. Dobier	E303
4-Apr-13	EPPP-Ethics	1.5	Dr. Dobier	E303
11-Apr-13	Wellness Planning	1.5	Dr Proctor	E303
18-Apr-13	Multicultural Cases PD	1.5	Post Doc	E303
25-Apr-13	Multicultural Cases INT	1.5	Intern	E303
2-May-13	Substance Abuse	1.5	Dr Proctor	E303
9-May-13	Forensic Reading	1.5	Intern	E303
16-May-13	EPPP-DSM Quest	1.5	Dr Dobier	E303
23-May-13	Testing administration	1.5	Dr Dobier	E303
30-May-13	Program Evaluation	1.5	Dr Dobier	E303
6-Jun-13	EPPP-Theoretical	1.5	Dr Dobier	E303
13-Jun-13	Career Planning	1.5	TBA	E303
20-Jun-13	Staff manipulation	1.5	Dr Jelinek	E303
27-Jun-13	Private Practice	1.5	Dr Brucker	E303
4-Jul-13	Case Presentation (INT)	1.5	Intern	E303
11-Jul-13	Empathy deficits	1.5	Ms Roth	E303
18-Jul-13	EPPP-Developmental	1.5	Dr Dobier	E303
25-Jul-13	Rethink pedophilia	1.5	Videoconference	E303
1-Aug-13	Countertransference	1.5	Dr Dobier	E303
8-Aug-13	Forensic Reading	1.5	Intern	E303
15-Aug-13	Self-care III	1.5	Dr Dobier	E303
22-Aug-13	Evaluation of Training	1.5	Dr Dobier	E303
Estimated training hours		<u>175.5</u>		

B. Areas of Fellowship Training

During the Fellowship year, the Fellow will be an integral member of a treatment team on one of the Treatment Units listed above. The Fellowship will represent a 2000 hours training experience, which will span 1 year working 5 days a week for 43.5 hours per week (not including the generous paid time off allotment). During this time, the Fellow will be involved in the following professional activities each week:

1. **Group Treatment** – The Fellow will participate as a co-facilitator in two different types of treatment groups as listed below for approximately 15 hours per week:
 - *Sex Offender Specific Treatment* – During the training year there will be the opportunity to provide comprehensive sex offender specific treatment. The Fellow will be assigned to provide intense sex offender group treatment with an experienced co-therapist. Residents in the group will number between 8-10 members in the group.
 - *Ancillary group treatment* – the Fellow will be assigned to provide non-sex offender specific ancillary treatment groups (anger management, power to change, DBT, etc).
2. **Primary Caseload:** The Fellow will be assigned a primary caseload of between 10-12 residents; some may participate in the sex offender specific group co-facilitated by the Fellow. Other residents, who are not in treatment, will be assigned for primary case management. Individual therapy is not provided for sex offender specific issues, however, brief individual therapy may be providing as indicated.
3. **Documentation:** The Fellow will be expected to prepare all necessary documentation and case notes on a weekly basis as required by the Team Leader.
4. **Psychological Testing and Report Writing:** During the training year there will be a minimum requirement of 5 comprehensive testing batteries. The Fellow will be assigned at least five (5) 'Entry to Treatment To Evaluations' throughout the year and each with be completed by a scheduled completion date. The Fellow will provide direct supervision, guidance and mentoring to the Intern assigned to psychological testing. The Director of Training & Research will supervise all psychological assessments, prepared by the Fellow, on a weekly basis.
5. **Treatment Planning:** The Fellow will be responsible to prepare detailed treatment plans and quarterly treatment plan reviews for the residents on the primary caseload. Both formal mentoring and supervision will be provided to guide the Fellow through the treatment plan process and once completed the treatment plan will be presented at the scheduled staffing.
6. **Case Conceptualization/Staffing:** The Fellow will be expected to attend and participate in both the bi-weekly team staffing and the monthly case conceptualization provided for all staff. For the bi-weekly team staffing the Fellow will be expected to prepare the appropriate treatment documentation for all residents on the primary caseload. The treatment team will

present a case study to the all staff at the bi-monthly training and the Fellow will be responsible for contributions as required by the Team Leader.

7. ***Supervision/Training:*** During the training year the Post Doctoral Fellow will be providing supervision to an assigned Intern, which will focus specifically on psychological testing and report writing. The Fellow will be expected to closely monitor the Intern's psychological test administration, scoring and interpretation as well as assist the Intern with edits on the integrated report. Close supervision will require the Fellow to build rapport with the Intern and to work collaboratively to ensure psychological batteries are completed on a timely basis. Documentation of all supervision sessions will be required and well as a clear understanding of the Due Process procedures for the training program. The Fellow will also be mentored on the preparation of performance appraisals and will provide the Intern with an appraisal at the end of the testing rotation. The Fellow will be expected to attend and actively participate in all forms of supervision as listed above. As well the Fellow will be expected to address their supervisory skills in supervision with the Director of Training and Research and actively accept mentoring.
8. ***Forensic Issues:*** During the training year the Fellow will be exposed a broad scope of Forensic issues through various learning methods and opportunities. Attendance at court to observe the testimony of Clinical Psychologists, tours of mental health facilities within both male and female prisons, and other training opportunities will be made available throughout the training year. During the Didactic session diverse topics in Forensic Psychology will be addressed. The Fellow is encouraged to research didactic topics prior to attending the weekly presentation in order to facilitate meaningful discussions.
9. ***Treatment Improvement Committees:*** When a resident progresses in treatment his case is discussed in committee to determine how to guide him through the next milestone of treatment. For example, after the presentation of the predicate offense, the resident may be discussed in the Polygraph Committee to determine if he is ready for the polygraph evaluation. The Primary Therapist of the resident provides a presentation to the Polygraph Committee. The Fellow will be expected to participate in the committee presentation for any residents on the primary caseload.
10. ***Multicultural Training:*** Didactic training is committed to diversity awareness, knowledge, and the acquisition of skills to increase multicultural competencies. Critical examination of personal values, experiences, and gaining an understanding of the areas of growth required are considered critical to enhancing Fellow's understanding and appreciation of differences. The Fellow will be required to present a multicultural case presentation during Didactic trainings throughout the year.
11. ***Research Opportunities:*** There will be the opportunity for research at the facility if this is an area of interest for the Fellow. Specific research topics will be provided at the commencement of the training year.

V. Application Process

The procedures below must be followed precisely. Any deviation may cause the application to be nullified and removed from any other consideration.

A. Application Requirements

Individuals interested in a Fellowship position with the Forensic Psychology Training Program must have completed all requirements, for a Doctoral Degree in Clinical Psychology, or a related area, prior to the start of the Fellowship. The ideal candidate will be from an APA/CPA accredited doctoral program however applications from candidates from regionally accredited institution of higher learning will be accepted.

All applicants will be required to successfully complete the Predoctoral Internship prior to the commencement of the Fellowship. The ideal candidate will be from an APA/CPA accredited Internship training however applications from candidates from APPIC member Internship sites will be accepted.

Experience with psychological testing is an important factor for the Fellow since he/she will be providing mentorship/supervision of an intern throughout the year. Experience administering and scoring the Rorschach is an important criterion in the selection of the Fellow.

To fulfill the application requirements, each of the following steps must be completed:

1. Submit a letter of interest with a current copy of your curriculum vitae;
2. Current copies of transcripts of all graduate work must be provided with the application materials. The selected Post Doctoral Fellows will be asked to provide official transcript prior to the start of the training year.
3. Submit one work sample. This should be an assessment report regarding an adult client that addresses, at a minimum, background information, current behavioral observations, results of a full battery of psychological tests, diagnostic formulation and treatment recommendations. Projective Testing using the Rorschach should be evidenced clearly in the psychological report. Choose this case carefully and take appropriate steps to protect the anonymity of the subject.
4. Current Letters of Reference (3) should be included in the application packet

Submit the above information via email to diana.dobier@illinois.gov or by mail to:

Director of Training & Research
Forensic Psychology Training Program
c/o Liberty Healthcare Corporation
IL Dept of Human Services - TDF
1680 E. County Farm Road
Rushville, IL 62681

Applicants are required to provide completed submission no later than January 30th, 2012. Late or incomplete applications will not be considered. Applicants who apply via email will receive a confirmation of receipt and those submitting by mail are encouraged to enclose a self-addressed, pre-paid post card for return receipt. Candidates asked to interview, as well as candidates not under consideration, might expect notification of status by February 7th, 2012.

Preliminary telephone interviews are planned for a limited number of applicants after which, a number of candidates will be asked for an on-site interview on Friday February 17th, 24th or March 2nd.

This site will abide by the requirements of the Uniform Notification Day: March 14th, 2012. Specific requirements will be confirmed with the candidates during the interview on site.

Failure to pass preliminary background screen will eliminate the candidate from further consideration.

B. Additional Security Clearance Application Procedures

Due to the sensitive nature of this training opportunity, final candidates are required to complete the Department of Human Services intense background security checks prior to admittance to the facility grounds. As well, the Fellows selected may be required to complete Liberty Healthcare application, credentialing process, including fingerprinting and pre-employment drug screen.

Offers of Fellowship positions are strictly contingent upon satisfactory completion of the background investigation process. Failure to complete this process or a finding that an applicant is outside the guidelines for employment in a sensitive position would preclude participation in this training program. Once hired, the Fellow must comply with the Department of Human Services and the Liberty Healthcare standards of employee conduct and responsibility.

The foregoing is not intended to discourage applications, but to ensure that applicants are aware of the additional security requirements that will be imposed on them should they wish to pursue an Fellowship experience with Liberty Healthcare at the Department of Human Services. Any questions you may have should be resolved prior to submitting your list for matching.

C. Benefits

During the 2012/2013 training year, the following benefits will be available for the selected Fellow who participates in the Forensic Psychology Training Program

- A stipend of \$40,000
- A full benefits package
- Paid time off earned each pay period
- Authorized leave to attend off-site training plus a training allowance
- Support for research activity (prior approval must be obtained from DHS)

The itemized benefit package will be addressed when a formal offer is issued.

D. Professional Liability Insurance

All Fellows accepted to this site for Fellowship Training will be covered by professional liability insurance under the Liberty Healthcare contract.

E. Equal Opportunity Employer

The Fellow will be selected without discrimination for any non-merit reason such as race; color; religion; national origin; sex; sexual orientation; status as a parent; age; physical disability; marital status or, membership in an employee organization.

The Illinois Department of Human Services provides reasonable accommodations to applicants with disabilities. If you need a reasonable accommodation for any part of the application and hiring process, please notify the Director of Training & Research. The decision on granting reasonable accommodation will be on a case-by-case basis.

VI. Rushville, Illinois

Located approximately 230 miles from Chicago, the city of Rushville is in Schuyler County, Illinois. Rushville is the county seat of Schuyler County. The nearest large city is Springfield, which is the state capital, approximately 120k population.

The facility is located at the following address:

Department of Human Services – Treatment & Detention Facility
1680 E. County Farm Road
Rushville, IL 62681

Computer mapping programs (www.Mapquest.com) will provide a systematic map to the facility from your home address.

Illinois Department of Human Services Treatment & Detention Center

Located in Rushville, Illinois



Red star at center of map (left of Beardstown) denotes Rushville, Illinois

Larger towns within commuting distance of Rushville, Illinois

- Springfield, Illinois (State Capital)
- Macomb, Illinois
- Quincy, Illinois

Major cities in the region - driving distances from Springfield, Illinois:

- St. Louis, MO – 2 hours
 - Chicago, IL – 3.5 hours
 - Quad Cities, IL & IA – 3 hours
 - Indianapolis, IN – 3 hours
 - Louisville, KY – 5 hours
 - Des Moines, IA – 5 hours
- regular non-stop flights & train service
regular non-stop flights & train service