# Dallas-Fort Worth OCD Treatment Specialists Postdoctoral Fellowship Consortium

**Training Handbook** 

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# DFW OCD Treatment Specialist (DOTS) Postdoctoral Fellowship Consortium

#### **Overview**

The Dallas-Fort Worth (DFW) OCD Treatment Specialist (DOTS) Postdoctoral Fellowship Consortium ("DOTS Consortium") is a collaboration between outpatient psychotherapy practices specializing in cognitive-behavioral treatments for obsessive compulsive disorder (OCD) anxiety, depression and related disorders. The DOTS Consortium fills a specific need for evidence-based and specialized practice in the Dallas area. The DOTS Consortium currently consists of two private group practice training sites: Gayle Psychology, PLLC, and Specialists in OCD & Anxiety Recovery (SOAR), PLLC.

Established in 2022, the DOTS Consortium was founded on the premise of creating an environment of providing excellent care to clients as well as uplifting the next generation of psychologists by providing them with comprehensive clinical training and professional development.

Each member of the DOTS Consortium has both a general expertise in psychology as well as specialized training in specific areas. The hope is to learn from each other's strengths and support one another's practice of psychology through collaboration and consultation.

#### **Our Team**

<u>Training Director - Crystal Gayle, Ph.D.</u>

Crystal Gayle, PhD, serves as the DOTS Consortium Training Director and primary supervisor for all postdoctoral trainees assigned to the Gayle Psychology, PLLC training site. Dr. Gayle earned her master's and doctorate degree from the APA-accredited and NASP-approved School Psychology program at the University of Rhode Island. She earned her bachelor's degree in psychology and educational studies from Emory University. Her doctoral training focused on psychological and educational assessment, as well as utilizing CBT to treat anxiety, depression, behavior problems, stress, anger, and trauma. She has provided therapy and assessments in elementary and high schools located in urban and rural communities in Rhode Island, university treatment programs, juvenile correctional facilities, and children's hospitals. Dr. Gayle completed her pre-doctoral internship at Rutgers University Behavioral Health Care in New Jersey where she conducted child and adolescent assessments, and individual, group, and

family therapy. There she also helped supervise the master-level interns. Dr. Gayle completed her post-doctoral training at Dallas CBT, a private practice that specializes in anxiety disorders, OCD, and psycho-education evaluations. She also helped train and supervise the master's level clinician there. After, she worked at the Great Life counseling center for two years where she was the assessment supervisor and supervisor to many of the practicum students and postdoctoral fellows. Since opening Gayle Psychology in 2022, she also is the primary supervisor for a doctorate-level clinician pursuing independent licensure.

#### <u>Lead Training Psychologist - Molly Martinez , Ph.D.</u>

Molly Martinez, PhD serves as the DOTS Consortium Lead Training Psychologist and primary supervisor for all postdoctoral trainees assigned to the Specialists in OCD & Anxiety Recovery (SOAR), PLLC training site. Dr. Martinez is a licensed clinical psychologist and Owner and Director Specialists in OCD & Anxiety Recovery (SOAR), a specialist group practice in Dallas, Texas. Dr. Martinez completed her doctoral degree in clinical child and adolescent psychology at The Ohio State University and her internship at Lurie Children's Hospital of Chicago. She is currently licensed in Texas (previously licensed in Hawaii and Ohio) and is credentialed with PSYPACT to provide telehealth services to patients across the United States.

Dr. Martinez is a regular presenter on topics related to OCD at national conferences, including the International OCD Foundation (IOCDF) and Anxiety & Depression Association of America. Her presentations cover various topics related to OCD, developmental considerations in the treatment of children and adolescents, and ethical considerations in the field of mental and behavioral health. In 2023, Dr. Martinez was honored to join the faculty of the IOCDF's Behavioral Therapy Training Institute in 2023, the premier professional training and certification program for the evidenced-based treatment of OCD.

Dr. Martinez is passionate about the evidence-based treatment of OCD and anxiety in children, adolescents, & adults. In addition to serving individuals and families with OCD, she strives to increase understanding and decrease stigma surrounding OCD among professionals and the general public. Dr. Martinez founded and coordinates DFW OCD Treatment Specialists (DOTS), a professional consultation, networking, and advocacy group serving the Dallas-Fort Worth area. She is also past-president of the non-profit Humanitarian Outreach for Migrant Emotional Health (H.O.M.E., homemigration.org), which provides vital documentation of trauma and mental health concerns for immigrants and asylum-seekers to the U.S. in support of their legitimate claims for protection within American borders.

#### **Consortium Sites**

1. Gayle Psychology PLLC

Address: 6301 Gaston Ave., Suites 1204 and 1217

Dallas, Texas 75219

Phone: 805-668-4522

*Fax*: 866-875-4482

General email: Crystal@GaylePsychologyPLLC.com

Website: www.GaylePsychologyPLLC.com

2. Specialist in OCD and Anxiety Recovery, (SOAR), PLLC

Address: 1701 N Collins Blvd, Suite 230,

Richardson, TX 75080

Phone: 214-810-4667

General email: admin@soartogether.net

Website: <a href="https://soartogether.net">https://soartogether.net</a>

# **Training Director Responsibilities**

The postdoctoral fellowship is overseen by the training director and lead training psychologist. The training director and lead training psychologist are licensed psychologists in the state of Texas with experience in training and supervision of psychology trainees. The training director is directly responsible for ensuring the overall quality of the training program and that the training needs of the trainees are met through the overseeing of training activities, goals, and objectives as well as documentation of the trainee's training record.

# **Clinical Supervision**

The Training Director will serve as the primary supervisor for post-doctoral fellows at the Gayle Psychology, PLLC location and the lead psychologist will serve as the secondary supervisor. The Lead psychologist will serve as the primary supervisor for postdoctoral

fellows at Specialist in OCD and Anxiety Recovery, (SOAR), PLLC and the training director will serve as the secondary supervisor. Other licensed team members or advanced trainees at both sites may also provide supervision and consultation. When needed, other psychologists in the community will be designated as consultants for presenting issues outside of the treatment specialties of the primary supervisor and/or secondary supervisor. Supervision will be provided in compliance with the standards set forth by the Texas State Board of Examiners of Psychology. Individual and/or group supervision will be scheduled and held weekly notwithstanding reasonable scheduling conflicts.

According to the Texas Behavioral Health Executive Council and Texas State Board of Examiners of Psychologists Rules:

A formal post-doctoral program which meets the following criteria will be considered substantially equivalent to an APA accredited or APPIC member program:

- (1) An organized experience with a planned and programmed sequence of supervised training experiences.
- (2) A designated psychologist responsible for the program who possesses expertise or competence in the program's area.
- (3) Two or more licensed psychologists on staff, at least one designated as supervisor with expertise in the area of practice.
- (4) A minimum of 2 hours per week of face-to-face supervision.
- (5) A minimum of 2 additional hours per week of learning activities.
- (6) A minimum of 25% of the fellow's time is spent providing professional psychological services.
- (7) Admission requirements that require the applicant to complete all professional degree requirements and a pre-doc internship, which at a minimum meets Council requirements.
- (8) A requirement that participants use titles such as intern, resident, fellow, or trainee.
- (9) Documentation describing the goals, content, organization, entrance requirements, staff, mechanisms for a minimum of 2 evaluations per year, and a statement that the program meets Texas' licensure requirements.
- (10) At a minimum, an informal due process procedure regarding deficiencies and grievances.
- (11) A written requirement for at least 1500 hours to be completed in not less than 9 months and not more than 24 months.

# **DFW OCD Treatment Specialist Consortium Values**

The DFW OCD Treatment Specialist Consortium team is guided by the following core values:

**Transparency:** We believe that the best work environment is cultivated by being true to yourself as well as being honest and forthright.

**Balance:** We show up as our true selves every day as well as to our clients. We support taking care of ourselves so that we can show up as our best selves for the team and our clients.

**Excellence:** We go above and beyond to treat our clients. We always use evidence based treatments as well as keep up to date on the most effective interventions to ensure that we are giving our clients the best care possible.

**Individuality:** We play to our strengths and honor the unique attributes and personality of team members.

**Accountability:** We pride ourselves on holding each other responsible for our words and actions.

# **Training Goals and Objectives**

The overarching goal of the postdoctoral fellow program is to provide advanced training in psychology and prepare the fellow for independent practice as a licensed psychologist with a specialty in the assessment and treatment of OCD, OC-related disorders, anxiety disorders (and their common comorbidities) in adults, adolescents, and children. Similarly, the goal for the advanced practicum placement is to fine tune the clinicians clinical skills and prepare them for independent practice.

Fellows will be placed based on site availability, fit for the clinical emphases of each site, and in consideration of fellow preference. Whether you are training at Gayle Psychology, PLLC or Specialists in OCD and Anxiety Recovery (SOAR), PLLC, you will be comprehensively trained in Cognitive Behavioral Therapy. You will also be trained in Exposure and Response Prevention and other evidence-based treatments of OCD, anxiety, and related disorders. The goal of the consortium is to train more competent psychologists that specialize in OCD, anxiety, and related disorders to serve the Dallas-Fort Worth area. There is currently a dire need for this type of treatment in the Dallas-Fort Worth area. All postdoctoral fellows will have a chance to be a part of the DFW OCD Treatment Specialists (DOTS), a consultation group founded by Dr. Martinez for specialists who treat OCD, anxiety, and related disorders. This serves as a great networking opportunity for postdoctoral fellows to meet other therapists and psychologists in the area, as well as learn about different employment opportunities in the area to consider at the completion of their postdoctoral fellowship.

The specific goals and objectives of the DOTS Consortium fellowship are as follows.

#### Goals and Objectives

GOAL 1: Development of professional identity and broad competencies in the field of psychology, as outlined below (see "General Training Competencies").

GOAL 2: Competence in delivering evidence-based treatment in OCD and anxiety disorders

#### Objectives

- 1. Training in cognitive behavioral therapy
- 2. Training in exposure and response prevention
- 3. As applicable, training in comprehensive behavioral (ComB) treatment for body-focused repetitive behaviors, comprehensive behavioral treatment for tics and Tourette disorder (CBIT), and other evidence-based protocols

#### GOAL 3: Preparation and completion of licensure in psychology in the state of Texas

#### Objectives

- 1. Passing the EPPP examination
- 2. Passing of the Texas jurisprudence examination
- 3. Completion of 1500 or more clinical hours

The primary goal of the DOTS Consortium fellowship is to guide the fellow in developing and strengthening their professional identity and achieving the following general competencies.

#### **General Competencies**

- 1. Competency in providing evidence-based treatment to adult, adolescent and child clients.
- 2. Ability to formulate and conceptualize clinical cases within an evidence-based framework.
- 3. The fellow will be able to conduct intake evaluations and formulate treatment plans based on an evidence-based framework.
- 4. Competence in psychological assessment and diagnosis.
- 5. The fellow will understand and maintain ethical standards.
- 6. A foundation in evidence-based practices through the ability to integrate scientific findings with clinical practice.
- 7. The training program will provide general professional training and guidance as the trainee develops a sense of professional identity in his/her own independent practice.
- 8. The fellow will be able to readily accept and perform tasks and seek opportunities to improve their knowledge base.

- 9. The fellow will be able to present him/herself in a professional manner through composure, organization, and confidence.
- 10. The fellow will be able to demonstrate awareness of personal and professional limitations.
- 11. The fellow will be able to demonstrate an ability to interact appropriately with clients, supervisors and staff.
- 12. The fellow will be able to demonstrate sensitivity to others' perception of his/her behavior
- 13. The fellow will be able to conform to ethical principles in professional work and practice
- 14. When available, the postdoctoral fellow will provide training and clinical supervision to graduate students, interns, and/or masters level practitioners.
- 15. The fellow will be able to obtain licensure as a Provisionally Licensed Psychologist in the state of Texas
- 16. The Fellow will meet all deadlines for submission of application materials to the Texas State Board of Examiners of Psychologists (TSBEP) for required exams and licensure.

#### General Training Plan

An individual training plan will be developed for each fellow to address specific activities and supervision. In general, training activities will occur at the main office where their primary supervisor is located. However some of the activities listed - such as area workshops, didactics, presentations, etc. will take place outside of the practice. The fellow will always be notified in advance as to when and where these activities will occur.

1. Direct clinical practice with child, adolescent, and adult clients.

The trainee will be assigned cases meeting the needs of the agency as well as the needs of the fellow. This is done through regular meetings with the clinical supervisor. The trainee is generally expected to spend 50% of his/her time in direct clinical practice (that is, 25-30 sessions/per week for a postdoctoral fellow).

2. Clinical supervision.

Clinical supervision will consist of weekly individual supervision for general cases (2 hours, additional time as needed). The primary clinical supervisor will have the opportunity to observe the fellow live (via remote a/v feed) or recordings of sessions. The secondary supervisor will conduct supervision based on areas of specialization and as needed.

3. Co-facilitation of groups with an experienced clinician.

The fellow will have the opportunity to assist experienced clinicians with groups such as the social anxiety group. Responsibility for the group will increase as the fellow's experience increases.

4. Direct observation of other clinicians.

The fellow will have the opportunity to observe other licensed clinicians when discussed in advance with the clinician who will ensure this is acceptable and in the interest of the client.

6. Participation in weekly consult meetings.

The trainee is expected to participate as a full member of the staff and as such will be expected/required to attend and participate in the practice's weekly consult meeting. The weekly hour meeting consists of team announcements, case consultations, and didactic activities.

7. Participation in workshops and professional conferences.

The trainee will have the opportunity to attend professional workshops and conferences sponsored by area partnerships.

8. Development and presentation of workshops, community in-service trainings, and or other presentations.

The fellow may be asked to assist in developing training activities for consult meetings.

#### Site Specific Training

The DOTS Consortium consists of two training sites: Gayle Psychology, PLLC and Specialists in OCD & Anxiety Recovery (SOAR), PLLC. Fellows will be placed based on

site availability, fit for the clinical emphases of each site, and fellow preference. The clinical emphases of the sites are as follows:

#### Site 1 (Gayle Psychology, PLLC)

- 1. The training program will provide training in Cognitive-Behavioral Therapy
  - a. General CBT and CBT for depression (1st quarter)
  - b. Exposure therapy (2<sup>nd</sup> quarter)
  - c. ERP for OCD (3<sup>rd</sup> quarter)
  - d. Optional training track (4<sup>th</sup> quarter)
  - e. Optional training experiences include:
    - i. evidence based treatments for Trauma
    - ii. evidence based treatments for trichotillomania and body focused repetitive disorders.
- 2. Additional site emphasis at Gayle Psychology, PLLC
  - a. multicultural considerations
  - b. ADHD and Psycho-educational Assessments

#### Site 2 (SOAR, PLLC)

- 1. First month: Review fundamentals of CBT (qualified candidates will have a solid background in CBT coming into their postdoc)
- 2. Quarter 1:
  - a. Diagnosis and assessment of OCD/anxiety disorders
    - i. Clinical interview
    - ii. Standardized rating scales
    - iii. Ongoing symptom tracking and assessment
  - b. ERP for OCD
  - c. exposure therapy for generalized anxiety
  - d. Ethical considerations in psychotherapy
- 3. Quarter 2:
  - a. Focus on challenging comorbidities (mood disorders, depression, trauma, comorbidities, etc)
    - b. Working with children/adolescents
- 4. Quarter 3:
  - a. OCD-related disorders (eg, BFRBs, BDD, tics/Tourette, health anxiety disorder)

- b. Additional evidence-based therapies for OCD/anxiety (eg, ACT, Inference-Based CBT)
- 5. Quarter 4:
  - a. Complex cases
  - b. Maintenance, relapse prevention, and termination
- 6. Additional site emphasis at SOAR
  - a. Ethics issues in therapy and the profession
  - b. Home-, community-, and school-based therapy and outreach
  - c. Body-focused repetitive behaviors (BFRBs)
  - d. Tic and Tourette Disorders
  - e. Out of network insurance coverage
  - f. Advocacy

#### Postdoctoral Position and Designation:

Depending on site assignment, the postdoctoral fellow will be considered members of the Gayle Psychology, PLLC team or Specialists in OCD & Anxiety Recovery (SOAR), PLLC team and are expected to participate in meetings and activities as any team member would. The postdoctoral fellowship is a one-year position with the expectation of completing requirements for full licensure in the state of Texas. Upon completion of 1500 hours of clinical and administrative work, as required for licensure in the State of Texas, a certificate will be provided.

The trainees schedule will be set according to the needs and hours of operation of the practice, the needs of the trainee, and the availability of a licensed clinician to be in the office. Prior to licensure, the trainee is expected to ensure that a licensed clinician is in the office and is aware while the trainee is seeing clients. This is for emergencies only, as the other clinician will likely be in session. Once the post-doctoral fellow has obtained licensure for independent practice, this restriction will be lifted.

#### Requirements and Designations for Postdoctoral Fellows:

Prerequisites for employment as a postdoctoral fellow include completion of an APA doctoral program in clinical, counseling, or school psychology, and APA accredited internship. Applicants who interview prior to completion of their program should provide assurance of diploma completion date prior to the start date of employment at Gayle Psychology PLLC or SOAR (e.g., letter from DCT verifying completion of degree requirements).

The Postdoctoral Fellow will have the title of "Postdoctoral fellow in Psychology." The fellow should clearly indicate supervision status on all correspondence (e.g., "Supervised by Crystal Gayle, Ph.D."), notes and other communications. Notes and correspondence should be signed with the highest degree attained (e.g., Ph.D., Psy.D.) in addition to the appropriate title.

# **Funding**

Both sites (i.e., Gayle Psychology PLLC and SOAR) will offer the postdoctoral fellow a salary commensurate to \$65,000 per year for a caseload of 25 clients seen per week. In addition, the fellow will receive retirement benefits, a monthly stipend for health insurance reimbursement, paid liability insurance, reimbursement for the cost of the EPPP exam, and a \$250 stipend for educational activities.

#### **Evaluation Procedures**

The trainee receives a formal evaluation from the clinical supervisor at each 4 month period. The fellow will be evaluated in a variety of competency areas and will be given specific feedback on strengths and areas for improvement. The fellow will also have an opportunity to provide feedback to the Clinical Supervisor at the end of each 4 month period. Formal Due Process Procedures are in place for the trainee and Practice regarding problem situations.

#### **Due Process Procedure & Policies**

At the beginning of the training year, each fellow is provided with the following:

- 1. A copy of our Due Process policy (see below), which provides a definition of competency standards, a listing of possible measures, and an explicit discussion of the due process procedures; and
- 2. A copy of our grievance procedures policy (see below), which provides guidelines to assist fellow(s) who wish to file complaints against staff members and explains the process if a supervisor has a concern regarding a trainee that does not fall under the competence standards/adequate performance (see due Process).

#### General Due Process Guidelines

Due process ensures that decisions made about trainees by the DFW OCD Treatment Specialist Consortium are not arbitrary or personally based. It requires that DFW OCD Treatment Specialist Consortium identify specific evaluative procedures which are applied to all trainees; and have appropriate appeal procedures available to the trainee so that they may challenge an action taken by DFW OCD Treatment Specialist Consortium Training Program, which they do not agree with (see Appeals).

General due process guidelines include the following:

- 1. Communicating with trainees in writing with the DFW OCD Treatment Specialist Consortium Training Program's expectations related to professional functioning.
- 2. Communicating the various procedures and actions involved in making decisions regarding problems.
- Establishing a remediation plan for identified inadequacies, including a time frame for expected remediation and consequences of not rectifying the inadequacies.
- 4. Ensuring that trainees have enough time to respond to any action taken by DFW OCD Treatment Specialist Consortium Training Program.

- 5. Using input from multiple professional sources when possible for making decisions or recommendations regarding the trainee's performance.
- 6. Documenting to all relevant parties the action taken by the DFW OCD Treatment Specialist Consortium Training Program and its rationale.

#### Definition of inability to perform to competency standards:

Trainee's inability to perform to competency standards is defined broadly as an interference in professional functioning which is reflected in one or more of the following ways:

- 1. An inability and/or unwillingness to acquire and integrate professional standards into one's repertoire of professional behavior; An inability to acquire professional skills to reach an acceptable level of competency or;
- 2. An inability to control reactions which interfere with professional functioning.
- 3. Problem behaviors are noted when supervisors perceive a trainee's behaviors, attitudes or characteristics as disruptive to the quality of their clinical services; inability to comply with appropriate standards of professional behavior; or their relationships with supervisors, or other staff. It is a professional judgment as to when a trainee's behavior becomes serious enough and are compromised to necessitate remediation efforts rather than just behaviors to be not unexpected or excessive for professionals in training. Problems typically become identified as inability to perform to competency standards when they include one or more of the following characteristics:
- 4. The trainee does not acknowledge, understand, or address the problem when it is identified.
- 5. The problem is not merely a reflection of a skill deficit which can be rectified by supervision or didactic training measures.
- 6. The quality or quantity of services delivered by the trainee is sufficiently negatively affected
- 7. The problem is not restricted to one area of professional functioning
- 8. A disproportionate amount of attention by training personnel is required
- The trainee's behavior does not change as a function of feedback, remediation, and/or time.

When areas of weakness are observed, the trainee and supervisor will collaboratively address possible avenues of remediation and progress will be monitored and documented periodically and reviewed. However, should this collaborative effort fail in improving the trainee's performance rating, the procedures listed in the Due Process Procedure/Grievance Policy will be followed and the same consequences will be included as noted in policy.

#### **Due Process Procedure**

If a trainee's behavior is deemed problematic and/or the trainee receives a rating of "Unacceptable" from any of the evaluation sources, the following procedures may be initiated. These follow a Notice, Hearing and Appeal structure.

**Notice.** The trainee will be notified in writing by the training director of the specific concerns. The trainee's supervisor will meet with the Training Director no later than 2 weeks after the trainee has been notified of a deficiency and/or problematic behavior to discuss the problematic behavior or inadequate rating and determine what action needs to be taken to address the issues reflected the problematic behavior or rating;

**Hearing.** The trainee will be notified in writing at least one week in advance that a hearing is scheduled, and the trainee will have the opportunity to provide a statement related to his/her response to the problematic behavior or rating.

In discussing the problematic behavior or rating and the trainee's response (if available), the Director of Training may adopt any one or more of the following methods:

- 1. The first step to address a problematic behavior or rating would be an attempt at informal resolution. The Director of Training may recommend remedial training for the trainee that may include completing additional reading, taking a course pertinent to the problematic area, or preparing a presentation that would require the trainee to consolidate his or her knowledge of the subject matter in question. Other informal remedial actions may also be suggested to address the unique circumstances of the trainee at the discretion of the Director of Training.
- 2. If an informal resolution to problematic behavior or rating cannot be achieved, the trainee's direct supervisor, with the approval of the Training Director, will issue an "Acknowledgement Notice" formally acknowledging the following:
  - a. That supervisors are aware of and concerned with the problematic behavior or rating
  - b. That the problematic behavior or rating has been brought to the attention of the trainee
  - c. That supervisors will work with the trainee to specify the steps necessary to rectify the problem or skill deficits addressed by the problematic behavior or rating, and:
  - d. That the problematic behaviors or rating are not significant enough to warrant serious action.

- 3. The third course of action is to place the trainee on "Probation" which defines a relationship such that supervisors and the Director of Training actively and systematically monitor, for a specific length of time (up to 6 months), the degree to which the trainee addresses, changes and/or otherwise improves the problematic behavior or conduct associated with the rating. The probation is a written statement to the trainee and includes: The actual problematic behaviors or rating, the specific recommendations for rectifying the problem, the time frame for the probation during which the problem is expected to be remedied, and the procedures designed to ascertain whether the problem has been appropriately rectified. The Probation document will be prepared by the trainee's direct supervisor in collaboration with the Training Committee and will be approved by the trainee's direct supervisor and the Training Director.
- 4. The Director of Training may also determine that the disposition is to "Take no further action." The Director of Training will then meet with the trainee to review the action taken. If "Probation," is determined, the trainee may choose to accept the conditions or may choose to challenge the action (see Appeals section below).

Once the Acknowledgment Notice or Probation is issued by the Director of Training, it is expected that the status of the problematic behavior or rating will be reviewed no later than the next formal evaluation period or, in the case of probation, no later than the time limits identified in the probation statement (up to 6 months). If the problematic behavior or rating has been remedied to the satisfaction of supervisors and the Director of Training, the trainee and other appropriate individuals will be informed, and no further action will be taken. If the trainee is placed on probation and the issue is not satisfactorily resolved during the probationary period, but progress has been achieved, the probationary period may be extended up to an additional three months at the discretion of the trainee's direct supervisor with the approval of the Training Director.

**Appeal.** If no progress has been realized during the probationary period, the Training Director may notify the trainee of an intent to terminate the fellowship after consulting with the Training Committee. The trainee would then have 10 days in which to seek an appeal. If an appeal is not sought, the trainee will be notified of termination from the program.

#### **Appeal Process**

Attempts to resolve disagreements will be undertaken immediately as outlined below. If the trainee disagrees with the decision to initiate (or extend) a formal remediation plan approved by the Training Committee, the trainee may appeal in writing to the Training Director within one (1) week following the decision to initiate (or extend) the remediation plan. The Director may attempt to mediate the dispute in collaboration with the trainee and their direct supervisor. If the disagreement remains unresolved after mediation, the postdoctoral fellow has the right to appear before the Training Committee at the next scheduled training committee meeting to appeal a decision. The postdoctoral fellow may also solicit additional professionals to present on their behalf during this appeal if desired. After hearing the trainee's appeal in person, the Training Committee will decide if the remediation plan should be altered.

The Training Committee will have one week to inform the trainee of their decision. If a disagreement remains, and cannot be resolved through informal mediation, the trainee may submit a second appeal in writing within two weeks of being notified of the Training Committee's decision. The Training Director will appoint a three-person advisory committee consisting of training faculty not directly involved in supervising the trainee to review the appeal. The Appeals Committee will provide a written report delineating the committee's findings and recommendations to the Training Director within 30 days.

#### **Grievance Procedures**

- 1. It is the program's intent to be receptive to all trainees' expression of problems encountered during fellowship training and to make reasonable and timely efforts to resolve any causes of trainee dissatisfaction.
- 2. The training team are expected to be candid and to act in good faith in dealing with problems and dissatisfaction expressed by fellows. No faculty member will interfere with a trainee's right to express or file a grievance. Fellows are assured freedom from restraint, discrimination, or reprisal in exercising that right.
- 3. Unless a fellow has grave reservations about expressing dissatisfaction to his/her immediate supervisors, any problem or dissatisfaction should initially be addressed on the first relevant level, to the supervisors.
- 4. If a satisfactory resolution cannot be achieved on that level the issues should be taken to the Training Director (assuming that was not done as part of step #3).
- 5. Upon receipt of the written grievance, the Training Director, or their designee, will convene a Grievance Committee consisting of the Training Director or designee and two other training faculty members

- 6. The Grievance Committee will have 30 days to resolve the grievance if possible. If not, the Committee may take any or a combination of the following actions:
  - a. Refer the grievance to the next scheduled Training Committee meeting
  - b. Call a special Training Committee meeting to consider the grievance
  - c. Consult with legal counsel
  - d. Consult with other professional organizations (e.g., APA, APPIC)
  - e. Advise the Training Committee on areas of concern in the management of the grievance.
- 7. The Grievance Committee will maintain minutes of all meetings. The Committee will also retain records of all documentation, such as written summaries.
- 8. The full Training Committee, upon request of the Grievance Committee, will review and evaluate grievances not resolved at any lower level within 60 days. The decision of the full Training Committee will be determined by majority vote excluding the member(s) involved in the grievance.
- 9. If the fellow is not satisfied with the decision of the Training Committee, they may consult with the American Psychological Association, the Association of Psychology Postdoctoral and Internship Centers, or consult legal counsel. At any stage of the process fellows may consult formally or informally with the Training Director, American Psychological Association, the Association of Psychology Postdoctoral and Internship Centers, or legal counsel about their problems, dissatisfactions, or grievances.

# **Syllabus**

#### Site 1 (Gayle Psychology, PLLC)

Crystal Gayle, PhD, serves as primary supervisor for all postdoctoral trainees assigned to the Gayle Psychology, PLLC training site.

- 1. The training program will provide training in Cognitive-Behavioral Therapy
  - a. General CBT and CBT for depression (1st quarter)
  - b. Exposure therapy (2nd quarter)
  - c. ERP for OCD (3rd quarter)
  - d. Optional training track (4th quarter)
  - e. Optional training experiences include:
    - i. exposure and response prevention for OCD,
    - ii. evidence-based treatments for Trauma
    - iii. evidence-based treatments for trichotillomania and body-focused repetitive disorders.
- 2. Additional site emphasis at Gayle Psychology, PLLC
  - a. Multicultural considerations
  - b. Assessment

#### Site 2 (SOAR, PLLC)

Molly Martinez, PhD serves as the primary supervisor for all postdoctoral trainees assigned to the Specialists in OCD & Anxiety Recovery (SOAR), PLLC training site.

- First month: Review fundamentals of CBT (qualified candidates will have a solid background in CBT coming into their postdoc)
- 2. Quarter 1:
  - a. Diagnosis and assessment of OCD/anxiety disorders
  - b. Clinical interview
  - c. Standardized rating scales
  - d. Ongoing symptom tracking and assessment
  - e. ERP for OCD
  - f. Exposure therapy for generalized anxiety
  - g. Ethical considerations in Psychotherapy
- 3. Quarter 2:
  - a. Focus on challenging comorbidities (mood disorders, depression, trauma, comorbidities, etc)
  - b. Working with children/adolescents

#### 4. Quarter 3:

- a. OCD-related disorders (eg, BFRBs, BDD, tics/Tourette, health anxiety disorder)
- b. Additional evidence-based therapies for OCD/anxiety (eg, ACT, Inference-Based CBT)

#### 5. Quarter 4:

- a. Complex cases
- b. Maintenance, relapse prevention, and termination
- 6. Additional site emphasis at SOAR
  - a. Ethics issues in therapy and the profession
  - b. Home-, community-, and school-based therapy and outreach
  - c. Body-focused repetitive behaviors (BFRBs)
  - d. Tic and Tourette Disorders
  - e. Out of network insurance coverage
  - f. Advocacy

# **Didactic Schedule**

Each seminar will be two (2) hours in length. Fellows will be assigned topics to co-present. Case presentations will

Date (Time)	Seminar Topic	Presenter	Cred.
Sept 1 (TBD)	Principles of cognitive behavioral therapy	Dr. Molly Martinez	Ph.D.
Oct 1 (TBD)	Principles of exposure and response prevention	Dr. Crystal Gayle	Ph.D.
Nov 1 (TBD)	Diagnostic assessment and evidence-based treatment of OCD	Dr. Molly Martinez	Ph.D.
Dec 1 (TBD)	Considerations in the treatment of children and adolescents	Dr. Crystal Gayle	Ph.D.
Jan 1 (TBD)	Diagnostic assessment and evidence-based treatment of GAD and other anxiety disorders	Dr. Molly Martinez	Ph.D.
Feb 1 (TBD)	Ethical considerations in evidence-based treatment of OCD	Dr. Crystal Gayle	Ph.D.
March 1 (TBD)	Working with ethnically diverse populations	Dr. Molly Martinez	Ph.D.
April 1 (TBD)	Diagnostic assessment and evidence-based treatment of tics and Tourette disorder	Dr. Crystal Gayle	Ph.D.
May 1 (TBD)	Diagnostic assessment and evidence-based treatment of BFRBs	Dr. Molly Martinez	Ph.D.
June 1 (TBD)	Diagnostic assessment and evidence-based treatment of BDD	Dr. Crystal Gayle	Ph.D.
July 1 (TBD)	Introduction to the business of private practice	Dr. Molly Martinez	Ph.D.
Aug 1 (TBD)	Marketing Strategies for private practice	Dr. Crystal Gayle	Ph.D.