

# County of Los Angeles Department of Mental Health

## Student Professional Development Program 2017-2018 Academic Year

*Complete this form for each discipline to be placed at this agency:*

 Service Area  
**4**

- |   |  |
|---|--|
| <input type="checkbox"/> Psychology<br><input type="checkbox"/> Practicum<br><input type="checkbox"/> Externshi<br><input type="checkbox"/> Internship<br><input checked="" type="checkbox"/> Social Work<br><input checked="" type="checkbox"/> Specialization <u>    MH, Adults &amp; OA    </u><br><input type="checkbox"/> Macro/Admi | <input type="checkbox"/> Nursing<br><input type="checkbox"/> Marriage Family Therapist<br><input type="checkbox"/> Occupational Therapy<br><input type="checkbox"/> Other (specify): _____ |
|---|--|

<b>DMH Agency:</b>	Northeast Mental Health Center
<b>DMH Agency Address:</b>	5321 Via Marisol Los Angeles, CA 90042
<b>DMH Agency Liaison:</b>	Jennifer Ruiz, LCSW
<b>New or Returning:</b>	<input checked="" type="checkbox"/> New <span style="margin-left: 100px;"><input type="checkbox"/> Returning</span>
<b>Liaison Email Address:</b>	jeruiz@dmh.lacounty.gov
<b>Liaison Phone Number:</b>	323-478-8200
<b>Liaison Fax Number:</b>	323-344-8829
<b>Agency ADA accessible</b>	<input type="checkbox"/> Yes <span style="margin-left: 100px;"><input checked="" type="checkbox"/> No</span> If "No" identify:

### Student Requirements:

<b>How many positions will you have?</b>	1-2
<b>Beginning and ending dates:</b>	Flexible

**Student Schedule:** *Please indicate days and times students should be available to provide services, including mandatory staff meetings (SM), training seminars (TR), supervision (SUP), etc.*

<b>Monday</b>	8:00 a.m. – 5:00 p.m.
<b>Tuesday</b>	8:00 a.m. – 5:00 p.m.
<b>Wednesday</b>	8:00 a.m. – 5:00 p.m. (TR)
<b>Thursday</b>	8:00 a.m. – 5:00 p.m. (TR)
<b>Friday</b>	8:00 a.m. – 5:00 p.m.
<b>Total hours expected to be worked per week:</b>	16-20 hours
<b>Number of direct client hours per week anticipated:</b>	
<b>Expected average consumer caseload:</b>	5
<b>What cultural groups typically received services at your site?</b>	Latino, Filipino, Asian, African American & Caucasian

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**Description of Site:** *(Please describe the type of Agency setting and services offered)*

**Target population and types of services provided:** *(please check all that apply)*

- |  |  |
|--|--|
| <input checked="" type="checkbox"/> <b>Individuals</b>   | <input type="checkbox"/> Psychoeducational groups (e.g. Parenting) |
| <input checked="" type="checkbox"/> <b>Groups</b>        | <input type="checkbox"/> Community Outreach                        |
| <input type="checkbox"/> <b>Families</b>                 | <input checked="" type="checkbox"/> Brief treatment                |
| <input type="checkbox"/> Children & Adolescents          | <input checked="" type="checkbox"/> Evidence Based Practices       |
| <input checked="" type="checkbox"/> <b>Adults</b>        | <input checked="" type="checkbox"/> <b>Crisis Intervention</b>     |
| <input checked="" type="checkbox"/> <b>Older Adults</b>  | <input checked="" type="checkbox"/> Screening and Assessment       |
| <input type="checkbox"/> <b>Court/Probation referred</b> | <input type="checkbox"/> Psychological Testing                     |
| <input type="checkbox"/> <b>Consultation/Liaison</b>     | <input type="checkbox"/> Other (specify):                          |

What are the most frequent diagnostic categories of your client population?

Mood Disorders (Depression, Bipolar), Anxiety Disorders (GAD, PTSD), Thought Disorders (Schizophrenia, Schizoaffective)

What specific (perhaps unique) training opportunities do students have at your agency?

Field-based experience, crisis intervention, engagement and middle phase therapy, groups. Recovery oriented and integrated care.

What evidence based practices or theoretical orientations will students be exposed to at this site?

Adlerian, Humanistic, Cognitive (CBT), Existential

Do students have the opportunity to work in a multidisciplinary team environment that includes those with lived experience?

Yes. Psychiatrists, Nurses, Social Workers, Psychologist, Case Managers, People with Lived Experience.

List locations where students will be providing services **other than agency**?

At homes of clients, community partner centers.

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Does your agency allow students to videotape and/or audiotape clients for the purpose of presenting cases in their academic classes?     Yes     No

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**Supervision:**

*What types of supervision will be provided for the students and what is the licensure/discipline of the supervisor? Please specify below.*

Type	Hours Per Week	On Site Supervisor Degree/Discipline
<b>Individual:</b>	1	MSW/LCSW: LCS25111, LCS27692, LCS29625, LCSW62671; Ph.D.: PSY18263
<b>Group:</b>	2	MSW/LCSW: LCS25111, LCS27692, LCS29625, LCSW62671; Ph.D.: PSY18263

What is the minimum ratio of supervision to client contact hours? \_\_\_\_\_

Does your agency require a particular range of previous experience or specific prerequisite coursework? *If so please explain.*

No. Yet, we prefer an intern with some experience providing direct clinical services.

**Agency Application Process**

**Mandatory requirements:** *Only students from academic institutions who have a current affiliation agreement with the Los Angeles County Department of Mental Health may be extended a placement opportunity. All students are processed through Human Resources Bureau. All prospective interns must obtain live scan clearance. All interns are required to complete a mandatory HIPAA Compliance and Sexual Harassment Prevention Training (for line staff) as part as the terms of their internship.*

**DMH Staff completing this form:** Anthony Alvarado, LCSW                      **Title:** MHClin.Prog.MgrII

**Signature:** \_\_\_\_\_ **Date:** 2/13/2017

**Program Head:** Anthony Alvarado, LCSW                      **Phone #:** 323-478-8200

**District Chief:** \_\_\_\_\_ **Phone #:** \_\_\_\_\_

**Electronic Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_