

County of Los Angeles Department of Mental Health

Student Professional Development Program 2018-2019 Academic Year

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

 Service Area
8

- | | |
|---|--|
| <input type="checkbox"/> Psychology
<input type="checkbox"/> Practicum
<input type="checkbox"/> Externship
<input type="checkbox"/> Internship
<input checked="" type="checkbox"/> Social Work
<input type="checkbox"/> Specialization _____
<input type="checkbox"/> Macro/Admin | <input type="checkbox"/> Nursing
<input type="checkbox"/> Marriage Family Therapist
<input type="checkbox"/> Occupational Therapy
<input type="checkbox"/> Other (specify): _____ |
|---|--|

DMH Agency:	Long Beach Mental Health-Adult Services
DMH Agency Address:	1975 Long Beach Blvd. Long Beach, CA 90806
DMH Agency Liaison:	Gail Holtan
New or Returning:	<input type="checkbox"/> New <input checked="" type="checkbox"/> Returning
Liaison Email Address:	GHoltan@dmh.lacounty.gov
Liaison Phone Number:	562-256-2934
Liaison Fax Number:	562-290-0074
Agency ADA accessible	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If "No" identify:

Student Requirements:

How many positions will you have?	1
Beginning and ending dates:	September

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.*

Monday	
Tuesday	8:30 – 5:00
Wednesday	8:30 – 5:00
Thursday	8:30 – 5:00
Friday	
Total hours expected to be worked per week:	16
Number of direct client hours per week anticipated:	12
Expected average consumer caseload:	5-8
What cultural groups typically received services at your site?	Caucasian, African American, Latino, Asian,

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English, Spanish

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

LBMH is a large CMHC providing outpatient services to adults who present with a broad spectrum of behavioral health problems on a continuum of severity. The Center specializes in providing prevention and early intervention practices, promoting recovery and community reintegration utilizing a number of evidence-based individual and group approaches. Among the practices offered at this agency are: CBT/individual, DBT, Group CBT for Depression, Prolonged Exposure, Seeking Safety, Mindfulness Based Stress Reduction, and the Unified Protocol for Transdiagnostic Treatment of Emotional Disorders. Crisis stabilization, medication management, housing assistance, and case management are also provided. We have a specialized community partnership with a local chemical dependency treatment provider wherein we meet weekly to coordinate treatment using an integrated behavioral health model for clients with co-occurring mental health and substance-use disorders.

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

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

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

Schizophrenia, Major Depressive Disorder, Anxiety Disorders, Anger Management Disorders, PTSD; Co-morbid current, recent or past substance use disorder(s); persisting psychotic disorders often related to prior substance misuse,

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

Documentation, CORS, Motivational Interviewing, DBT ,

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

CBT, DBT, third-wave approaches (e.g., ACT, Mindfulness-Based Cognitive Therapy, Motivational Enhancement/Trans-theoretical Stages of Change)

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

Psychologists, Addiction Psychiatry Fellow, Staff Psychiatrists, Clinical Social Workers, Chemical Dependency Counselors, Medical Caseworkers, Service Extenders/peer specialists.

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

Students provide services at LBMH, but attend a weekly team meeting

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
Individual:	1	LCSW
Group:	1.5	LCSW

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.*

Prior clinical experience with adults is preferred; familiarity with, and strong interest in CBT approaches.

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: Gail Johnson-Holtan **Title:** MH Clinical Sup.

Signature: _____ **Date:** _____

Program Head: Emilia Ramos **Phone #:** 562-256-2953

District Chief: Denis Mirata **Phone #:** 562-256-7584

Electronic Signature: Gail Johnson-Holtan **Date:** 7/26/2018