Washington State
Office of Forensic Mental Health Services

PSYCHOLOGY INTERNSHIP PROGRAM

(Formerly the Western State Hospital Clinical Psychology Internship Program)

2026-2027

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OFFICE OF FORENSIC MENTAL HEALTH SERVICES

The Office of Forensic Mental Health Services (OFMHS—pronounced "OFF-uhms") is a division of the Department of Social and Health Services' (DSHS) Behavioral Health Administration (BHA) that oversees the state's adult forensic mental health system, working at the intersection of psychology and the law. OFMHS strives to transform forensic mental health throughout Washington State by partnering with communities and law enforcement to better support people living with mental illnesses who come into contact with the criminal justice system. Specific forensic services provided include competency evaluations, care and treatment for competency restoration, forensic navigator services, diversion work, and more.

Much of the Office's efforts are aimed at coming into substantial compliance with orders in the *Trueblood v. DSHS* lawsuit, which focuses on ensuring jail-based competency evaluations and inpatient competency restoration services occur in a timely manner. This includes the work of forensic evaluators, who evaluate *Trueblood* class members in jails and inpatient facilities (as well as defendants in the community) and report to the court on their findings. Forensic evaluators deliver opinions to the courts regarding the mental state and psychological functioning of defendants who have been charged with criminal offenses. Forensic evaluators employed by OFMHS are doctoral-level psychologists with additional training and expertise in applying psychological principles to the courtroom. They assist in the delivery of services that help ensure that the rights afforded to defendants by our Constitution are maintained while also recognizing the need for public safety. The Centennial Building, located near downtown Tacoma, is the centralized workplace for a majority of OFMHS forensic evaluators in Western Washington.

The OFMHS Psychology Internship Program (formerly the Western State Hospital Clinical Psychology Internship Program) was provisionally accredited by APA in 1986 and fully accredited in 1989. It has maintained this accreditation for over 35 years. The most recent site visit by APA was conducted in summer of 2016, and the next site visit is scheduled for the 2025-2026 training year. The Internship Program follows the Practitioner-Scholar model. The APA Commission on Accreditation can be reached at 750 First St. NE, Washington, DC 20002, (202) 336-5979.

The internship runs from August 1 through July 31. Each intern is expected to complete three 4-month rotations, as well as various other projects and activities (see *Requirements for Completion of Internship Program* section, page 19). OFMHS doctoral psychology interns are able to work with a diverse array of populations across several rotations. Available settings include the Centennial Building in Tacoma (which houses the rotations for competency and forensic risk assessment and also serves as interns' "home base"), Western State Hospital (WSH), the Behavioral Health and Treatment Center - Steilacoom Unit (BHTC – SU), Child Study and Treatment Center (CSTC), and the Special Commitment Center (SCC). Rotation selections are intended to balance individual intern interests and training needs.

PHILOSOPHY

The OFMHS Internship seeks to train interns for independent psychological practice by exposing them to a wide spectrum of patients with severe psychiatric disorders, promoting a mentoring relationship with

senior professionals, and combining psychological practice with didactic learning. Because many rotations involve work with forensic populations, there is a forensic focus to the internship; however, the internship is nevertheless a generalist program, designed to solidify an intern's knowledge acquisition and practice more generally and in a way not exclusive to a forensic practice.

GOALS AND OBJECTIVES

The primary goal of our program is to provide interns with the knowledge and skills required for independent practice as psychologists. We aim to achieve this goal by providing a breadth and depth of core training opportunities, including treating individuals with a wide variety of complex psychological problems; conducting empirically-based psychological assessments (both for the courts as well as part of patient treatment); engaging in collaborative, multi-disciplinary consultation; and arranging supervision experiences through our practicum program. Additionally, we strive to engender in our interns those core professional attitudes and abilities that will facilitate their future practice as ethical psychologists and instill an appreciation and respect for the role of individual and cultural differences within the field of psychology.

2023-2024 Intern Cohort

STATEMENT OF DIVERSITY AND NONDISCRIMINATION

OFMHS and BHA more broadly are committed to respecting and understanding cultural and individual diversity. BHA provides regular educational events and opportunities through the Office of Equity, Diversity, Access, & Inclusion (OEDAI). As noted on their website, "OEDAI works to create an environment of mutual respect, equity, and acceptance of the persons we serve." Diversity includes but is not limited to age, disabilities, ethnicity, gender, gender identity, language, national origin, race, religion, culture, sexual orientation, and socioeconomic status. In the OFMHS Internship Program, we welcome and

embrace diversity and strongly encourage individuals of all ages, nationalities, sexual orientations, ethnicities, religious backgrounds, genders, and disabilities to apply.

The internship has a strong commitment to promoting respect for and understanding of cultural and individual diversity. Internship training requirements include attendance at didactic presentations on various aspects of diversity, participation in activities encouraging examination of personal biases, and delivery of services to diverse clients. Attention to diversity is integrated into all aspects of the internship, and interns are assessed by supervisors on their progress in this area. Additionally, interns are required to complete a diversity presentation in which they discuss work with a client whose racial, ethnic, cultural, or other characteristics differ markedly from their own. This allows interns to consider value conflicts or other tensions that may arise in working with clients of diverse backgrounds. Interns have the opportunity to work with foreign language interpreters when evaluating or treating patients for whom English is not a first language. In addition, interns may have the opportunity to work with American Sign Language interpreters to help communicate with patients who are Deaf or hard of hearing.

INTERNSHIP PROGRAM

Applicant Requirements

OFMHS is committed to providing high-quality training experiences for interns. **Only those applicants from APA-accredited clinical or counseling psychology programs are considered for the four available internship positions**. Applicants from stand-alone forensic psychology programs will **not** be considered, as these programs are not APA-accredited. Three years of graduate work and at least 500 hours of practicum experience are required prior to the internship year, with a minimum of 300 intervention hours and 100 assessment hours. Applications from graduate programs outside the United States who do not have U.S. citizenship will not be considered at this time, due to the limitations for retention beyond the internship year posed by the J-1 visa for non-US students. Applicants who are not U.S. citizens but are currently attending graduate school in the United States are welcome to apply. Application materials include the APPIC application form, a current curriculum vita, graduate school transcript(s), the Verification of Internship Eligibility and Readiness section of the application signed by the Director of Training, three letters of recommendation, and one de-identified integrative psychological evaluation.

Conditions of Employment

A DSHS background check is required after interns have been matched with our site. This form includes information regarding prior criminal convictions and any pending criminal charges; history of perpetrating physical abuse, sexual abuse, abandonment, or neglect of any person; termination or revocation of contracts or licenses to provide care; and any court-issued orders of protection. **No intern will be accepted into the program who does not pass the background check**. Interns wishing to complete rotations at the Child Study and Treatment Center (CSTC) or outpatient competency evaluations will require additional background checks. Outpatient competency evaluation background checks relate to entry into jails; interns will be required to provide information as to whether they have ever been charged with any crime, ever had a relationship with anyone who has been incarcerated, or ever bought, used, or

distributed illegal substances. Please note that a previous arrest or conviction for a misdemeanor offense will not necessarily preclude an intern from employment at our site. Depending on the nature of the offense, applicants may still be eligible for internship at OFMHS; this will be considered on a case-by-case basis.

As a condition of employment, interns are required during the onboarding process at WSH to 1.) Have had a negative TST (tuberculin skin test) or IGRA (Interferon Gamma Release Assay) within the past 12 months, *or* 2.) Have a current chest x-ray/documentation of completed TB treatment and documentation of a TB Symptom Assessment (if positive TST or IGRA), and agree to have TB Symptom Assessment documentation performed annually thereafter. Additionally, interns must have current immunizations, titers evidencing immunity, or a signed declination for vaccination against hepatitis B, MMR, varicella (chickenpox), and Tdap (tetanus with whooping cough). While these vaccinations are not mandatory, they are highly recommended.

2022-2023 Intern Cohort & DCTs

Salary and Benefits

Interns receive a twelve-month salary of **$76,798.** Interns completing treatment rotations in a 24-hour facility (e.g., WSH, CSTC, SCC) may also be eligible for a 5% premium pay increase for those hours worked at the facility. Interns are state employees and receive standard vacation days (accrued at a rate of 9.33 hours per month) and sick leave (accrued at a rate of 8 hours per month), as well as one personal leave day and one personal holiday per year. Interns are also allowed two additional days to attend an approved professional conference of their choosing, and one additional day for their dissertation defense, *if defending in person*. There may be some time periods during which interns are not permitted to take vacation, due to programmatic training requirements (e.g., mock trial). Leave must be coordinated ahead of time with rotation supervisors, approved by the DCTs and unit supervisor, and entered into the state's Leave Tracker system. Interns may only work beyond 40 hours per week and earn overtime pay with pre-approval from

the unit supervisor. In general, interns working more than 40 hours in a given week are encouraged to use flextime. Notably, the use of flex time must be coordinated with their supervisor, communicated to the DCTs, and used as soon as reasonably possible (typically within one week). Interns may work more than 40 hours per week/accrue flex time only when working those extra hours is necessary to fulfill their responsibilities.

Per chapter 357-31 WAC, the following days are designated as state holidays:

(1) New Year's Day
(2) Martin Luther King, Jr. Day
(3) Presidents' Day
(4) Memorial Day
(5) Juneteenth
(6) Independence Day
(7) Labor Day
(8) Veterans Day
(9) Thanksgiving Day
(10) Native American Heritage Day (day after Thanksgiving)
(11) Christmas Day

Telework Policy

Please note that this is an **in-person** program; while interns may be afforded occasional opportunities to work from home due to unique or extenuating circumstances (e.g., finishing a jail-based evaluation near the end of the work day, caring for a sick family member), it is generally expected that interns will work from their respective rotation sites or the Centennial Building. Each intern is provided a designated workspace within the Centennial Building.

Experiences

The program provides opportunities to work with unique populations, including seriously mentally ill individuals who have been charged with or convicted of criminal offenses, children with severe psychiatric and behavioral problems, and sexually violent predators. Interns are allowed some flexibility in structuring their activities during the year. Opportunities can be unique, varied, and adapted to suit different interests and training needs. Interns may obtain experience in the following areas:

Evaluation of social, cognitive, psychological, behavioral, and organic factors in psychopathology. Interns receive training in clinical interviewing and the use of structured and unstructured psychological assessment. Interns are responsible throughout the training year for administering and interpreting psychological test batteries and preparing written reports. These test batteries may be related to forensic evaluations or treatment. Evaluations focus on a wide variety of issues, including diagnosis, response style, suicide risk, trauma, amenability to treatment, dangerousness, need for involuntary commitment, potential for recidivism.

Report writing and communication skills. Effective written and verbal skills are essential in communicating information and recommendations to colleagues, other professionals (e.g., court), and patients. Interns may receive training in forensic and clinical writing in a variety of scenarios (e.g.,

competency to stand trial evaluations, forensic risk assessments, individual and group treatment notes, diagnostic evaluations, etc.).

Individual and group psychotherapy. Therapeutic approaches used by treatment staff include behavior modification, cognitive-behavioral methods (e.g., dialectical behavior therapy, motivational interviewing, illness management and recovery), crisis intervention, trauma resolution, and skill-building. Interns are expected to use these and other evidence-based treatments, as appropriate, to facilitate patient growth and recovery.

Consultation. Interns will be provided opportunities to collaborate with multidisciplinary treatment teams. Intern responsibilities as a team member will include consultation regarding diagnosis, treatment plan formulation and implementation, management of difficult behaviors, and discharge planning.

Forensic psychology. The interface between psychology and the legal system is prominent in the OFMHS internship, as most patients are involuntarily committed under civil or criminal statutes. Psychologists serve as expert witnesses to the court for determining patients' risk of future violence, competency to stand trial, and criminal responsibility (i.e., insanity or diminished capacity at the time of the offense). Psychologists working in treatment settings provide services to individuals found incompetent to stand trial or not guilty by reason of insanity, as well as those who have been civilly committed. Interns assist staff psychologists in various methods of evaluation, including interviewing defendants/patients and administering psychological assessments. They also assist in preparing reports for the court.

Clinical research. Up to 10% of the intern's time is available for research (typically, Monday afternoons). This time is used primarily for the internship program evaluation project and dissertation work. Other research opportunities may also be available through the OFMHS research committee, depending on intern interest.

(2015-2016 Intern Emily Mackelprang)

AVAILABLE INTERN TRAINING ROTATIONS

OFMHS Centennial Building

The Centennial Building is the centralized workplace of a majority of forensic evaluators in Western Washington. There are two training rotations available at this setting: competency to stand trial evaluations and violence risk assessment.

***Competency Evaluation Rotation*:** Interns have the opportunity to work with evaluators conducting competency evaluations with outpatient or inpatient populations. Outpatient forensic evaluators conduct adult pre-trial competency evaluations from Western Washington courts, typically in local correctional facilities. However, these evaluations may also be conducted in hospital settings, attorney offices, or courthouses, depending on specific circumstances. Inpatient-based forensic evaluators primarily conduct pre-trial evaluations of patients who have been ordered to undergo competency restoration services or who require clinical observation in a hospital setting. Evaluations take place primarily at Western State Hospital (WSH), which houses approximately 400 competency patients at any given time.

While interns' primary focus at both the community- and inpatient-based rotations is on competency evaluation, they also have the opportunity to participate in the following:

- Evaluations of mental state at the time of the alleged offense (e.g., sanity, diminished capacity)
- Evaluations of dangerousness (a required component of mental state evaluations and some competency evaluations)
- Administration/interpretation of psychological tests
- Observation of involuntary commitment hearings
- Observation of expert testimony in court trials

Forensic Risk Assessment Rotation: Interns on this rotation work directly with evaluators to conduct forensic risk assessments (FRAs) of patients who have been adjudicated Not Guilty by Reason of Insanity (NGRI) and committed to DSHS custody. There are approximately 190 of these patients residing in the state hospitals and the Behavioral Health and Treatment Center at Maple Lane (BHTC-ML; a satellite facility in Centralia, Washington), and approximately 85 patients residing in the community on court-ordered conditional releases. Evaluations assess for risk of future violence and provide recommendations for treatment and risk management. Interns gain experience with actuarial and structured professional judgment assessments as well as other risk-relevant measures (e.g., VRAG-R, HCR-20^{v3}, PCL-R). They also conduct interviews of patient treatment team members (e.g., therapists, social workers, psychiatrists, physicians). Interns are expected to write a minimum of three to four forensic risk assessments, under supervision.

Other opportunities available in this rotation may include:

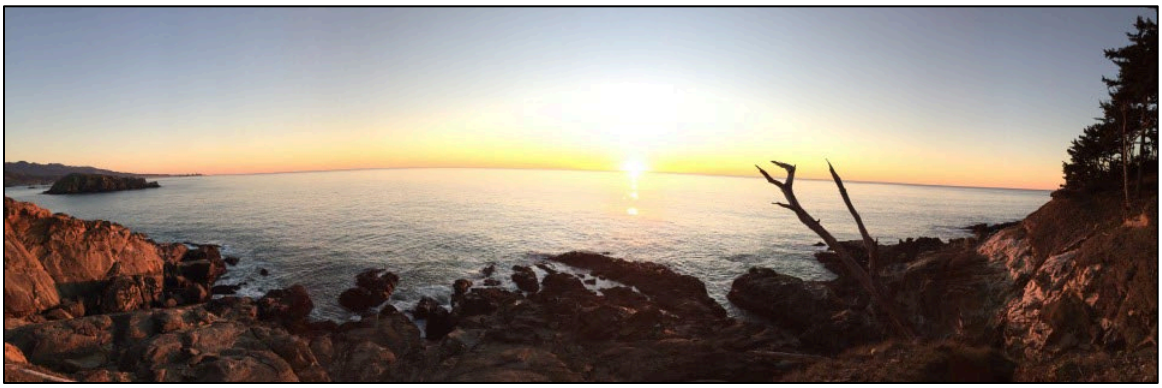
- Attending a meeting of the Risk Review Board, a group of hospital personnel who review patient cases for advancement to higher privileges, conditional release from the hospital, and/or final discharge

- Attending monthly FRA consultation group meetings and presenting one case during the rotation
- Observing expert testimony/depositions
- Conducting additional testing (e.g., diagnostic, personality, etc.)
- Being involved in policy-making processes
- Attending court hearings related to patient petitions for increased privileges and/or discharge

Behavioral Health and Treatment Center - Steilacoom Unit

Competency Restoration Rotation: The Behavioral Health and Treatment Center - Steilacoom Unit (BHTC-SU)[1] is a residential treatment facility located on the grounds of WSH and operated by OFMHS. BHTC-SU serves up to 30 male defendants adjudicated not competent to stand trial and ordered to undergo competency restoration treatment. Interns in this setting work directly with psychologists, psychology associates, social workers, recreation and athletic specialists, psychiatric prescribers, and other members of a multidisciplinary team to monitor and treat the barriers to competency identified in patients' most recent competency evaluations. While the primary focus of the rotation is to learn and facilitate competency restoration treatment groups, other opportunities during the rotation may include:

- Observing outpatient competency restoration treatment services
- Shadowing forensic navigators
- Supervising a practicum or undergraduate student
- Providing competency restoration training to staff
- Providing secondary supervision to master's level clinicians
- Collaborating with clinical staff and OFMHS Quality Assurance to develop additional competency restoration treatment activities and programming
- Meeting with *Trueblood vs. DSHS* court monitors (at the monitors' request)



Cape Sebastian
Photo by 2015-2016 Intern Krystine Jackson

[1] Formerly known as the Fort Steilacoom Competency Restoration Program, or FSCRP.

Western State Hospital

Western State Hospital (WSH), the first psychiatric facility in the Pacific Northwest, opened in August 1871. The hospital is a state-owned psychiatric facility for the treatment of mentally ill patients and is administered by the Department of Social and Health Services, Behavioral Health Administration. Western State Hospital is situated on a 264-acre campus located a few miles south of Tacoma.

Western State Hospital is an integral part of a comprehensive network of mental health service providers for the State of Washington. Most of the hospital's population consists of individuals with current involvement in the criminal justice system, most commonly those who have been adjudicated not competent to stand trial and ordered to the hospital for restoration services, and those who have been adjudicated not guilty by reason of insanity (NGRI). Additionally, the hospital provides residential treatment for some individuals whose psychiatric conditions are so severe that community treatment is not feasible. The hospital's mission is "To promote recovery and well-being in partnership with the people we serve."

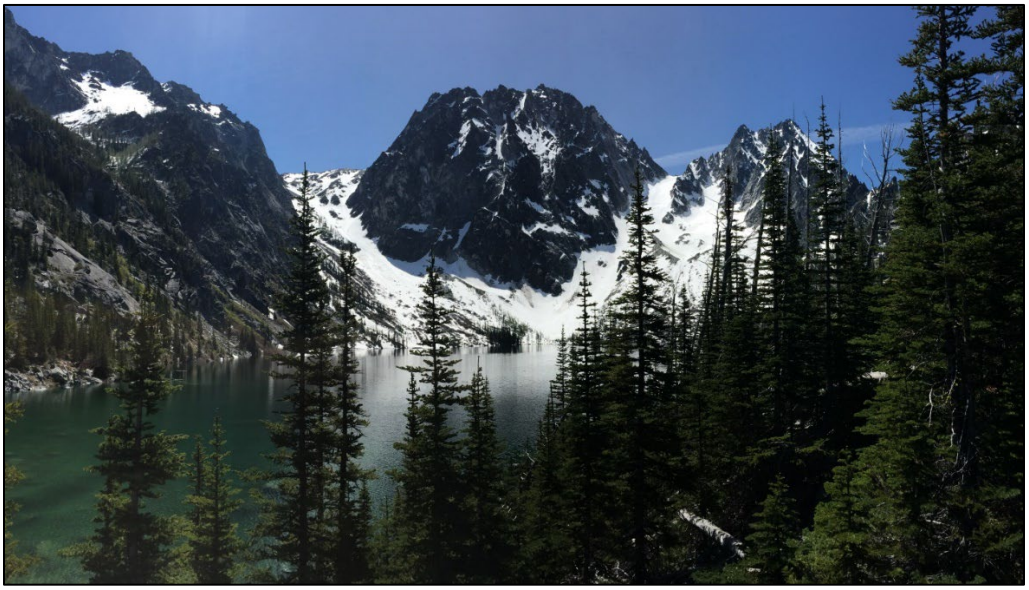
The hospital is organized around two major treatment units: the Gage Center for Forensic Excellence (formerly known as the Center for Forensic Services, or CFS) and the Civil Center of Excellence (formerly known as the Psychiatric Treatment and Recovery Center, or PTRC). Psychologists, physicians, psychiatrists, counselors, social workers, rehabilitation therapists, and nurses are among the staff who provide care and services to a patient population of over 700 adults. Of note, a new therapeutically-designed hospital is currently being constructed on the WSH campus, with plans for an additional 350 beds to care for forensic patients. The new hospital is estimated to be completed between 2027 and 2029.

Civil Center of Excellence (CCE) Treatment Rotation: The Civil Center of Excellence provides inpatient treatment for adults experiencing serious mental illness. It consists of 11 wards, each serving approximately 20-30 patients. Patients on these wards receive treatment under 90- or 180-day civil commitment orders, and most have been transferred from the Gage Center of Forensic Excellence after completing competency restoration/evaluation and being found not competent to stand trial. Some patients residing in CCE were admitted from community hospitals. The Civil Center also encompasses the Habilitative Mental Health unit (HMH), which serves people with developmental disabilities who are enrolled in services with the Developmental Disabilities Administration (DDA). At CCE, the goal is to stabilize and assist patients with transitioning to community settings with mental health support in place.

The CCE offers interns a unique opportunity to work with adults diagnosed with a wide variety of behavioral health disorders. Psychologists at CCE offer a range of services, including group and individual psychotherapy, psychological testing, and treatment planning. In addition to working alongside a licensed psychologist, interns work with multidisciplinary treatment teams consisting of a psychiatrist or psychiatric nurse practitioner, social worker, pharmacist, physician, RNs, LPNs, recreational staff, and occupational staff. Specific rotation experiences can usually be tailored to accommodate interns' interests and educational/experiential needs.

Psychology interns participating in a CCE rotation will have opportunities to engage in both diagnostic and psychotherapeutic activities. Interns are expected to:

- Gain exposure to the inpatient treatment milieu
- Conduct group and individual psychotherapy for selected patients
- Participate in interdisciplinary treatment team meetings and consultation
- Conduct or assist in Mental Status Evaluations and individual diagnostic interviews as part of the civil commitment process
- Observe involuntary commitment hearings
- Complete psychological evaluations (contingent on the availability of referrals), including administration, scoring, interpretation, and report-writing
- Develop specific behavioral treatment plans for selected patients, consulting with treatment team members and nursing staff to ensure consistent approaches to patient care
- Complete clinical documentation on a daily or weekly basis, as indicated



Dragontail Peak

Photo by 2015-2016 Intern Krystine Jackson

NGRI Treatment Rotation: The Gage Center of Forensic Excellence at WSH houses primarily NGRI and competency restoration patients. NGRI patients currently reside on three different wards. Under the supervision of a ward psychologist, interns who select this rotation engage in the treatment of NGRI patients, including group and individual therapy, with the primary goal of helping mitigate the patient's risk of future violent behavior. Interns work within a multidisciplinary team that includes a psychologist, psychiatrist, social worker, physician, RNs, LPNs, pharmacists, recreational and occupational therapists, and other support personnel. They consult with other treatment team members for purposes of identifying treatment needs and placement options, participate in treatment team meetings, and assist in the development of treatment plans. They may also have the opportunity to support patients as they

integrate into the community through staff-escorted community outings. Depending on supervisor availability, interns may have the option of combining the NGRI treatment rotation with the forensic risk assessment rotation (please note, however, that interns are required to complete at least one rotation that is solely treatment-based).

Other potential opportunities on this rotation include:

- Conducting psychological testing
- Assessing for suicide risk
- Developing new groups/curricula
- Attending meetings of the hospital's Risk Review Board
- Attending court hearings related to patient petitions for increased privileges and/or discharge

Child Study and Treatment Center

Child Treatment Rotation & Child Forensic Evaluation Rotation: The Child Study and Treatment Center is a state and federally-funded, TJC-accredited, long-term inpatient psychiatric hospital established to treat children and adolescents who cannot be served in less restrictive settings. Located on the grounds of Western State Hospital, CSTC serves children from throughout the state and is the only state-operated children's psychiatric hospital in Washington. CSTC has a 65-inpatient bed capacity on four cottages (units). On-grounds elementary and secondary schools provided by Clover Park School District are an integral part of the treatment model. Interns are invited to attend monthly seminars and the CSTC Journal Club. Opportunities for individual and group therapy with youth on all cottages are available.

Camano Cottage (ages 5-12): This cottage uses a cognitive behavioral milieu based on a developmental teaching/developmental therapy model. The program emphasizes family involvement (family therapy, multiple family group treatment). Youth are reinforced for demonstrating positive behavior and working towards concrete, measurable goals. All children are assigned an individual therapist and provided with applicable evidence-based therapies. Interns on Camano meet twice weekly with individual clients and co-facilitate treatment groups.

Ketron Cottage (ages 12-14): This cottage uses a cognitive-behavioral model with a focus on a strong community. Ketron youth participate in psychoeducation and recreation therapy groups where they learn and practice skills to be more effective with interpersonal interactions and manage emotions and maintain safe behavior. Much effort is spent helping youth generalize improvement to home environments with home visits and regular passes. Interns on Ketron meet at least once weekly with individual clients and co-facilitate treatment groups.

Orcas Cottage (ages 14-17): This cottage includes two programs. The General Program is for older adolescents who have demonstrated safe behavior and are able to participate in off-cottage programming including school, recreation, and community outings. The Close Attention Program is for older adolescents who, due to their own functioning or legal status, are allowed less access to potentially dangerous items and receive most of their care on-cottage. Dialectical behavior therapy, social skills, and human sexuality

groups are examples of the patient education and patient therapy groups offered. Interns on Orcas meet at least once weekly with individual clients and co-facilitate treatment groups.

San Juan Cottage (ages 15-17): This 18-bed facility has 8 beds for forensic evaluation and restoration patients, while the remaining 10 beds are for youth referred through the state's Children's Long-term Inpatient Programs (CLIP) system. The milieu program is heavily influenced by Dialectical Behavior Therapy strategies. Interns in San Juan meet at least once per week with individual clients and co-facilitate treatment groups.

(Krystine Jackson, 2015 – 2016 Intern)

Forensic Services (ages 8-17): Evaluators at CSTC conduct pretrial forensic evaluations of minors for juvenile and adult courts across the state. Most evaluations produce opinions regarding clinical diagnosis, competence to stand trial, and likelihood of restoration. Interns participate in interviews, evaluations, report-writing for legal personnel, restoration to competence services for court-referred youths, and individual and group supervision. Less frequent types of evaluations (e.g., capacity to commit a crime, mental state at the time of the offense, suitability for adult criminal court, and long-term risk assessment) may also be available for interns to observe. Interns are invited to observe court testimony and attorney consults as time and interest allow. The extent of involvement in cases depends on the intern's interests, experience, and availability.

Intern Activities: Interns at CSTC may choose to have a clinically- or forensically- focused rotation. There are also opportunities for cross-cottage experiences and participation.

The minimum expectations for a clinically-focused rotation include:

- Testing and formal write-up of at least one comprehensive cognitive or educational assessment
- A minimum of two individual therapy cases
- Construction and implementation of at least one behavior management program

- Participation as a co-therapist in at least two psychoeducational groups
- Ongoing participation on a multidisciplinary team, including attending treatment plan meetings
- Participating in case reviews, rounds, family staffing, clinical meetings, intake evaluations, etc.
- Participation in a cottage-wide behavioral management program (milieu)

Minimum expectations for a forensically-focused rotation include:

- Weekly participation in forensic group supervision
- Participation in observing or conducting supervised interviews with referred youth and/or their parents
- As appropriate, providing psychological testing with clinical and/or forensic measures
- Independent research of issues as needed for evaluations (e.g., relevant child and adolescent diagnosis, normal child development, best forensic practices in juvenile forensic evaluations, statutes and case law)
- As available and needed, participation in psycho-educational treatment for one juvenile found incompetent to stand trial and hospitalized at CSTC
- As available, observation of a juvenile court hearing addressing a forensic evaluation

Special Commitment Center

The Special Commitment Center provides evaluation and treatment of nearly 200 civilly committed sexually violent predators (SVPs), all of whom have committed prior acts of sexual violence (e.g., rape, child molestation, incest, indecent liberties by forcible compulsion). Approximately 120 residents currently reside in the total confinement facility on McNeil Island, while approximately 65 live in less restrictive community placements. SCC forensic evaluators conduct legally mandated annual reviews of residents to assess whether they continue to meet statutory criteria as an SVP. SCC psychologists and psychology associates provide treatment services in a secure environment, with close monitoring. The clinical program is housed on McNeil Island in the Puget Sound, while the forensic services unit is housed on the mainland in Steilacoom.

Sexual Offender Treatment Rotation: Interns completing a clinical rotation on the island will co-facilitate sex offender treatment groups and habilitative groups such as dialectical behavior therapy, healthy relationships, social skills, etc. Interns will have the opportunity to perform cognitive, academic achievement, and personality assessments in order to inform treatment. Interns may also have the opportunity to provide brief, solution-focused individual therapy. Interns will be expected to complete all corresponding documentation for their resident interactions and participate in interdisciplinary treatment team meetings to discuss client progress. Interns will also have the opportunity to participate in monthly didactics and case consultations in addition to their individual supervision. **Please note that, due to recent staffing changes, the availability of the SCC Clinical Rotation during the 2026-2027 training year cannot be guaranteed.**

Sexual Offender Evaluation Rotation: Interns participating in the forensic rotation will learn the essential components of assessing sexual offenders, with an emphasis on SVPs. Given the high level of knowledge

that is required of individuals working in this specialized area of the field, this rotation will have a strong didactic component, with an emphasis on becoming familiar with the relevant literature. The intern will have the opportunity to practice scoring actuarial risk assessment measures, participate in case conceptualization, and observe interviews of SCC residents. However, the intern will not complete a formal evaluation of a resident, given the possibility of intense legal scrutiny on any such evaluation. Rather, another option will be chosen, with input from the intern, for the written component of this rotation (this frequently takes the form of a "shadow report" written by the intern). Interns will have the opportunity to observe expert testimony and/or depositions. Interns will also prepare a lecture on a related topic of interest for presentation at the Forensic Services staff meeting.

RESEARCH

Program Evaluation

Interns are required to complete a year-long program evaluation or related research project under the supervision of a licensed psychologist. The focus of the project is expected to be on a subject relevant to OFMHS, BHTCs, the state hospitals, CSTC, or SCC. The goal of the program evaluation is to provide useful feedback to the specific stakeholders. Each intern is responsible for conducting necessary literature review, collecting appropriate data, and presenting results and interpretations to program faculty. The program evaluation projects are of particular interest to senior management at the individual facilities. Opportunities for publication may be available upon completion of the project.

DIDACTICS

Throughout the internship year, Fridays are devoted to meetings with the DCTs (which occur every other week) and the following didactic seminars:

Assessment Seminar: The assessment seminar is a biweekly, one-hour series designed to help interns gain familiarity with and proficiency in using assessment tools in various areas relevant to the practice of clinical and forensic psychology. It aims to improve interns' understanding of considerations for selecting a testing battery as well as their ability to think critically about the measures and how to incorporate testing into forensic case conceptualization.

Case Law Seminar: The case law seminar is a biweekly, 90-minute series that focuses on federal and state case law pertaining to the practice of forensic psychology and psychiatry in the legal system. The seminar is intended to complement the Forensic Seminar (described further below) by focusing on the legal precedents that dictate our interactions with the court. Cases covered include landmark cases in the suggested reading list from the American Academy of Forensic Psychology, as well as Washington State-specific cases. Participants gain practice in reading, summarizing, and presenting case law; learn from professionals with varied experiences in the field; and complete the seminar series with a collection of case briefs that can serve as reference/study materials.

Internship Seminar: The internship seminar is a biweekly, 90-minute series of presentations on topics pertaining to general clinical practice (e.g., psychological disorders, case formulation; treatment

modalities; psychological assessment) and professional development. Presenters consist of WSH and OFMHS staff, as well as outside providers. Topics include ethics, diversity, licensure, private practice, and psychopharmacology.

Forensic Seminar: This weekly 3-hour seminar addresses a wide range of basic to advanced topics related to forensic practice, forensic research, and professional ethics. Topics follow the specialty training of the American Board of Professional Psychology reading and focus list. Seminars provide a deep dive into the historical progression, critical conceptual underpinnings, associated case law, and recent research of each topic. Presentations are given by local as well as national experts. Previous speakers have included Stan Brodsky, Sarah Desmarais, Stephen Hart, and Richard Rogers. In the event Forensic Seminar is cancelled or not scheduled on a given Friday, the Directors may provide alternative didactic materials and/or activities.

Mock Trial

In addition to weekly didactics, interns are able to refine their skills providing expert testimony by taking part in a formal, two-day mock trial, wherein they and OMFHS postdoctoral fellows submit de-identified forensic evaluations and are subject to direct and cross-examination by practicing attorneys. Prior locations for mock trial have included the Lakewood Municipal Courthouse in Lakewood, Washington, as well as the Gonzaga University Law School Barbieri Courtroom and Spokane County Courthouse in Spokane, Washington. As part of this process, interns participate in focused seminars and/or consultation with OFMHS evaluators specifically targeted at preparing for and providing testimony.

(2022-2023 Mock Trial at the Gonzaga University Law School Barbieri Courtroom)

REQUIREMENTS FOR COMPLETION OF INTERNSHIP PROGRAM

1. Satisfactorily complete three different 4-month rotations, of which at least one must be a treatment-focused rotation.
2. Satisfactorily complete a minimum of 10 psychological and/or forensic assessments for the training year. At least one evaluation must be completed during each rotation.
3. Demonstrate competence in co-leading group psychotherapy.
4. Demonstrate competence in conducting individual therapy.
5. Demonstrate competence in conducting supervision of practicum students.
6. Attend and actively participate in required assessment, internship, case law, and forensic seminars.
7. Conduct at least one case presentation during each rotation per the discretion of the supervisor and the needs of the rotation setting.
8. Develop and present a lecture on a selected topic in the Internship Seminar.
9. Complete a minimum of 2000 hours of internship experience (which includes holiday, vacation, and sick leave hours).
10. Demonstrate ethical conduct at all times. This includes full compliance with the APA's Code of Ethics, the APA Specialty Guidelines for Forensic Psychology, Washington State's Ethics in Public Service Law, and Western State Hospital's Code of Ethics.
11. Complete and present a program evaluation project.
12. Conduct at least one interview or treatment session with an interpreter.
13. Present a case to directors and fellow interns in which you worked with a patient/defendant of a significantly different cultural background. Discuss the cultural nuances of the case.
14. Participate in the internship mock trial.

Cape Flattery

Photo by 2015-2016 Intern Krystine Jackson

RECORDS RETENTION AND MAINTENANCE

All trainee files and records are retained in accordance with Washington State and APA regulations and kept in a filing cabinet in the secured office of one of the Directors.

RECENT INTERNS' UNIVERSITIES AND POST-INTERNSHIP POSITIONS

2024-2025

- Antioch University – Minnesota Forensic Services Post Doc
- Sam Houston State University – OFMHS Post Doc
- Sam Houston State University – Medical University of South Carolina Post Doc
- University of South Dakota – University of New Mexico Post Doc

2023-2024

- Drexel University – OFMHS Forensic Evaluator
- Sam Houston State University – Denver First Post Doc
- University of Memphis – OFMHS Post Doc
- University of Nebraska – Minnesota 4th Judicial District Post Doc

2022-2023

- Sam Houston State University - University of Massachusetts Post Doc
- Sam Houston State University – OFMHS Post Doc
- Simon Fraser University – Denver First Post Doc
- University of Wisconsin - OFMHS Post Doc

2021-2022

- University of Alabama – OFMHS Post Doc
- University of North Texas – OFMHS Post Doc
- Sam Houston State University – University of Massachusetts Post Doc
- Sam Houston State University – Minnesota Forensic Post Doc

2020-2021

- University of Alabama – OFMHS Post Doc
- John Jay University – Psychology Associate position with OFMHS
- University of North Texas – OFMHS Post Doc
- University of North Texas – Denver First Post Doc

THE PACIFIC NORTHWEST

The Seattle-Tacoma area provides a wealth of opportunities for recreation. Shopping, dining, and medical facilities are easily accessible in both cities. Music, theater, and other arts activities are also available, with opportunities for attendance as well as participation. Nearby outdoor recreational opportunities include skiing, boating, fishing, clamming, hiking, and mountain climbing. Mount Rainier and Mount St. Helens are approximately 70 and 130 miles from Tacoma, respectively. The Canadian border and the city of Vancouver, British Columbia are within a 3-hour drive, and the city of Portland, Oregon is just over 2 hours away. The maritime climate is moderate, with temperatures rarely reaching more than 90° in the summer or less than 25° in the winter. Institutions of higher learning in the area include the University of Washington, Seattle Pacific University, Pacific Lutheran University, Seattle University, University of Puget Sound, and several community colleges, including Pierce College, which is located adjacent to Western State Hospital.

SAMPLE PROGRESSIVE LEARNING PLAN

Competency Evaluation Rotation

Overall Objectives of Rotation

- Demonstrate minimum proficiency of competence to stand trial (CST) evaluations by:
    - Completing at least 10 CST evaluations from start to finish (with at least one evaluation following a period of competency restoration treatment);
    - Describing the CST evaluation process, including sources of data to be considered;
    - Verbalizing reasoning of what data is appropriate for inclusion in/exclusion from the report;
    - Distinguishing between data, inferences, and opinions, and;
    - Articulating reasoning for opinions.

- Take part in a mental state at the time of the offense evaluation (after proficiency in CST evaluations is met or largely achieved)
- Observe a contested competency hearing, mental state at the time of the offense hearing, and/or civil commitment hearing

Notes:

- "Taking part" in a mental state evaluation could include a range of possible activities, including observing the evaluation, contacting collaterals, writing portions of the report, being a second author on the report, etc., depending upon the knowledge and experience of the intern
- Interns also have the opportunity to observe and/or work with other evaluators in order to provide a wider breadth of experience
- Supervisors coordinate with other evaluators in order to ensure a variety of experiences are available to the intern

Weekly Progressive Learning Plan

Weeks 1 – 2

Activities/Experiences

- Observe primary supervisor conduct competence to stand trial evaluations
- Review and discuss CST reports for the cases observed
- Attend jail orientations if necessary
- Review readings with supervisor

Readings

- RCW 71.05 – Civil Commitment
    - LaBelle and Beyond: Defining Grave Disability (PowerPoint presentation, Dr. Yocum)
    - Case: *In re LaBelle* (1985)
- RCW 10.77 - Criminal Evaluations
    - Melton et al. (2007): Chapter 1 - Law and the Mental Health Professions: An Uneasy Alliance
    - Therapeutic and Forensic Roles
        - Greenberg, S.A., & Shulman, D.W. (1997). Irreconcilable conflict between therapeutic and forensic roles. *Professional Psychology: Research and Practice*, 28, 50-57.
        - Greenberg, S.A., & Shulman, D.W. (2007). When worlds collide: Therapeutic and forensic roles. *Professional Psychology: Research and Practice*, 39, 129-132.
        - Heltzel, T. (2007). Compatibility of therapeutic and forensic roles. *Professional Psychology: Research and Practice*, 38, 122-128.
        - Morse, J.F. (2008). The ethics of forensic practice: Reclaiming the wasteland.
    - Melton et al. (2007): Chapter 3 - The Nature and Method of Forensic Assessment
    - DeMier, R. (2013). Forensic report writing. In R. K. Otto (Ed.), *Forensic psychology* (2nd ed.)

Weeks 3 – 4

Activities/Experiences

- Conduct CST evaluation with primary supervisor
- Supervision of evaluations conducted, review of forensic psychology perspective on evaluations
- Review readings with supervisor

Suggested Readings

- Melton et al. (2007): Chapter 6 – Competency to Stand Trial
- Frederick et al. (2014)
    - Table of Contents
    - Introduction to Volume
    - Section 1: Standards of Competency
        - *Youtsey v. U.S.*
        - *Dusky v. U.S.*
        - *Wieter v. Settle*
        - Appendix A – Legal Citation
        - Appendix B – Relevant Clauses and Amendments of the U.S. Constitution
- Case: *Dusky v. U.S.*, 362 US 402 (1960)
- Frederick et al. (2014): Section 2 – Thresholds for Competency Examinations
    - *Kenner v. U.S.*
    - *Pate v. Robinson*
    - *Drope v. Missouri*
    - *Seidner v. U.S.*

Weeks 5 – 6

Activities/Experiences

- Conduct CST evaluation with primary supervisor and other examiners, as appropriate
- Supervision of evaluations conducted, review of forensic psychology perspective on evaluations
- Observe mental state at the time of offense evaluation conducted by primary or secondary supervisor
- Review/discuss mental state at the time of offense evaluation completed by supervisor
- Review readings with supervisor

Suggested Readings

- Frederick et al. (2014): Section 3 – Constitutional & Judicial Considerations
    - *McDonald v. U.S.*
    - *Medina v. California*
    - *Cooper v. Oklahoma*
    - *Godinez v. Moran*
    - *Indiana v. Edwards*
    - *North Carolina v. Alford*
    - *U.S. v. Greer*
- Case: *Estelle v. Smith*, 451 U.S. 454 (1981)

Weeks 7 – 8

Activities/Experiences

- Conduct CST evaluation with primary supervisor and other examiners, as appropriate
- Supervision of evaluations conducted, review of forensic psychology perspective on evaluations
- Observe and/or conduct mental state at the time of offense evaluation with primary or secondary supervisor
- Review/discuss mental state at the time of offense evaluation completed by supervisor
- Review readings with supervisor

Suggested Readings

- Frederick et al. (2014): Section 4 – Incompetent Defendants
    - *Riggins v. Nevada*
    - *U.S. v. Brandon*
    - *Sell v. U.S.*
    - *U.S. v. White*
    - *U.S. v. Valenzuela-Puentes*
    - *U.S. v. Evans*
    - *Jackson v. Indiana*
    - *U.S. v. Duhon*

Weeks 9 – 10

Activities/Experiences

- Conduct CST evaluation with primary supervisor and other examiners, as appropriate
- Supervision of evaluations conducted, review of forensic psychology perspective on evaluations
- Observe and/or conduct mental state at the time of offense evaluation with primary or secondary supervisor
- Review/discuss mental state at the time of offense evaluation completed by supervisor
- Review readings with supervisor

Suggested Readings

- Frederick et al. (2014): Section 5 – Amnesia & Competency
    - *Wilson v. U.S.*
    - *U.S. v. Swanson*
    - *U.S. v. Borum*
    - *U.S. v. Stevens*
- Frederick et al. (2014): Section 6 – Adjudicative Competency in Juveniles
    - *In re Causey*
    - *G.J.I. v. State of Oklahoma*
    - *In the Interest of S.H.*

Weeks 11 – 12

Activities/Experiences

- Conduct CST evaluation with primary supervisor and other examiners, as appropriate
- Supervision of evaluations conducted, review of forensic psychology perspective on evaluations
- Observe and/or conduct mental state at the time of offense evaluation with primary or secondary supervisor
- Review/discuss mental state at the time of offense evaluation completed by supervisor
- Review readings with supervisor

Suggested Readings

- Mental State at the Time of the Offense: Sanity and Mens Rea
    - Melton et al. (2007): Chapter 8 – Mental State at the Time of the Offense
    - *Daniel M'Naghten's Case* (1843)
    - *State v. Atsbeha*, 142 Wn.2d 904 (2001)

Weeks 13 – 14

Activities/Experiences

- Conduct CST evaluation with primary supervisor and other examiners, as appropriate
- Supervision of evaluations conducted, review of forensic psychology perspective on evaluations
- Observe and/or conduct mental state at the time of offense evaluation with primary or secondary supervisor
- Review/discuss mental state at the time of offense evaluation completed by supervisor
- Review readings with supervisor

Suggested Readings

- Frederick et al. (2007)
    - Table of Contents
    - Introduction to Volume
    - Introductions and Summaries from Sections:
        - State and Federal Statutes in the U.S. Pertaining to Insanity
        - Roots of the Insanity Defense
        - Insanity and the U.S. Constitution
        - The D.C. Experiment
        - What is "Wrongfulness"?
        - What to Do With Insanity Acquittees
        - Prosecuting the Mentally Ill
    - Appendix A – Legal Citation
    - Appendix B – Relevant Clauses and Amendments of the U.S. Constitution

Weeks 15 – 16

Activities/Experiences

- Conduct CST evaluation with primary supervisor and other examiners, as appropriate
- Supervision of evaluations conducted, review of forensic psychology perspective on evaluations
- Observe and/or conduct mental state at the time of offense evaluation with primary or secondary supervisor
- Review/discuss mental state at the time of offense evaluation completed by supervisor
- Review readings with supervisor
- Completion of final intern evaluation.
- Discuss intern recommendations Competency Evaluation Rotation

(2020-2021 Intern Cohort)