



**DSCYF**  
Department of Services for  
Children, Youth & Their Families

PREVENTION & BEHAVIORAL  
HEALTH SERVICES

# Terry Children's Center

## APA Accredited Doctoral Internship Program



**Erica Burgoon, Ph.D.**  
**Internship Director**

10 Central Avenue  
New Castle, DE 19720

(302) 577-4270  
Terry Center Main Number

(302) 256-5700  
Dr. Burgoon Direct Line

## Overview

Terry Children's Center is a state funded treatment provider for Delaware's Division of Prevention and Behavioral Health Services (DPBHS). Terry Center is just one part of the Division's statewide continuum of mental health and substance abuse treatment and prevention programs for youth and their families. Through Terry Center, DPBHS provides care to underserved youth and families, who are uninsured or who are covered through Medicaid. These services are part of a system of care that is child centered and family focused and have graduated levels of intensity and restrictiveness.

Terry Children's Center (TCC) opened its doors in September 1969 and was among the first children's psychiatric centers accredited by JCAHO. Since its founding, more than 50 years ago, Terry Center has evolved to provide more community-based services, with a goal of providing youth and their families the support and treatment necessary to allow them to return to and remain in the community. Terry Center is now accredited by CARF.

Psychologists, psychiatrists, licensed social workers and professional counselors, nurses, teachers and other educational staff, and direct care staff work together to develop and implement effective treatment interventions. The multidisciplinary teams are noteworthy for the level of collaboration and mutual respect.

## Philosophy of Training

Terry Center has demonstrated its commitment to training students for over 25 years. The Doctoral Psychology Internship, started in 2000, is a member of APPIC and is currently classified as **Accredited by the American Psychological Association\*** through 2023. Terry Center provides clinical training in trauma informed and empirically supported interventions, as well as opportunities for assessment, consultation, and supervision of masters and doctoral level practicum students. TCC accepts three psychology doctoral Interns each year. In addition, TCC serves as a training site for both psychology doctoral and masters level practicum students, as well as for psychiatry residents and advanced practice nursing students. On average, there are 8-10 students throughout the year in training at TCC.

The Internship is committed to training Interns in core competency areas necessary for each Intern to be fully prepared to function in many clinical, supervisory, and consultative roles throughout the Intern's career as a psychologist. Thus, Interns are provided training in diagnostic and psychological assessment, case formulation, treatment planning, and empirically supported and trauma informed treatment interventions. In addition, Interns are trained to provide training and consultation to other professionals and paraprofessionals in a multidisciplinary context and gain experience in providing supervision to practicum students.

The Internship training follows the Practitioner-Scholar model. Interns are trained to use clinical judgment and current research to inform the treatment of youth and

families at Terry Center. In developing their clinical skills, Interns are expected to learn to evaluate their treatment strategies and case conceptualization with significant consideration of scientific support for the treatment they are providing. This encourages the Interns to develop a working understanding of the relationship between science and the practice of psychology.

The Internship at Terry Center provides clinical experiences to Interns in a variety of treatment modalities (e.g., individual, group, and family therapies) with youth and families who present with a wide range of challenges and concerns. Training is designed to provide exposure to the widest array of client populations possible in terms of diagnosis, level of social, emotional, behavioral, and developmental functioning, racial, ethnic, and cultural identification, age, and gender identification.

\*Any questions regarding accreditation can be directed to APA office of Accreditation at 750 First Street, NE Washington, DC20002-4242 or by calling (202) 336-5979.

## **Internship Training Components**

### **Practical Experiences**

All Interns participate in our residential and crisis stabilization programs on-site at Terry Center. This major rotation involves a four-day a week time commitment for 12 months. Interns also participate in two off-site minor rotations throughout the year. Typically, either one full day per week or two half days per week are dedicated to the minor rotation. One minor rotation is with the DPBHS Consultation and Assessment Services unit (CAS), during which time Interns receive assessment experience with child and adolescent populations. The other minor rotation is with the Ferris School, a secure juvenile justice setting, where Interns provide individual and group therapies. At the beginning of each rotation, Interns are oriented to their role in the specific clinical setting through a specific list of expectations discussed with the Intern. Through a combination of instruction, supervision, and modeling, the Intern is gradually introduced to the performance of the clinical activity on the rotation.

### **Major Rotation**

#### **Residential and Crisis Stabilization Unit:**

The current Residential Treatment Center (RTC) is a secure, psychiatrically supervised setting for youth ages 6 to 13, who temporarily cannot live at home due to the severity of their behavioral health problems. The RTC provides a therapeutic milieu where intensive treatment can be provided to 10 youth at a time. Treatment is formulated through a multi-disciplinary team and includes a behavior management program, individual and group therapy, family therapy, psychiatric treatment, and creative, expressive and other complementary therapies, such as dance, art, yoga, martial arts, and animal-assisted therapy. Youth receiving treatment at the RTC attend school at Terry Center and in addition to other clinical activities, Interns may provide classroom observation and support and consultation to the education team.

The Crisis Stabilization Unit (CSU) is a six bed, residential crisis program for youth ages 6 to 17. When youth are identified as being in crisis, an emergency risk assessment is completed which may result in a brief crisis bed admission. Typical referrals are for youth who are in danger of hurting themselves or others, or who need psychiatric monitoring of medication effects. Terry Center staff may provide group, individual, and family therapy to these clients during their admission to a crisis bed. When a youth is placed in a crisis bed, the youth participates in daily psycho-educational and skills-based groups.

Interns have primary therapist responsibilities for a caseload of approximately three to five clients. Caseloads generally consist of a mix of clients in the RTC and Crisis Stabilization programs. In the primary therapist role, Interns are responsible for individual therapy, group therapy, family therapy and case management for the youth and families assigned. Individual therapy is provided in a manner that best meets the clinical and developmental needs of the child, which may include multiple short sessions per week. Group therapy experiences, which are likely to include youth who are not the primary clients of the Intern, include developing and leading psycho-educational group interventions around such areas as emotional and behavioral regulation skills, social skills, communication skills, managing conflict, safety, etc. Terry Center highly values family engagement and recognizes that youth receiving services will eventually return to their homes and communities. Therefore, Interns deliver a portion of their direct intervention hours in their client's homes or other community locations outside of the Terry Center. Interns are also able to offer family therapy via telehealth for families who would benefit from that mode of service delivery. Case management includes paperwork and communication and meetings with other involved agencies and stakeholders. Interns may be required to testify in court cases related to their clients and families and/or to prepare communication for the court.

Multidisciplinary meetings are held weekly during which client case planning and progress is discussed. The Intern is actively involved in these meetings by leading the discussion of the Intern's own primary clients and participating in the discussion of the clients of other members of the clinical staff.

**\*\*Anticipated Program Changes:**

Terry Center is anticipating changes to our current programs that are likely to occur just before or sometime during the 2023-2024 internship year and therefore are likely to impact the clinical training and experiences of the incoming class. Guided by the State of Delaware's response to larger system needs and priorities, Terry Center expects to both increase its bed capacity on the CSU to accommodate 10 youth and to phase out its current residential program for young children while opening a shorter term residential and diagnostic unit for youth ages 12-17. This new unit is intended to serve youth whose treatment and other needs are unclear or for whom it has been difficult to identify appropriate services. The goal of this unit will be to provide each youth with a comprehensive psychological assessment that addresses diagnoses, treatment and other needs, and makes recommendations for appropriate placement setting. It is anticipated

that Interns will both carry a caseload of primary clients on this unit, similar to the current residential unit, and that interns will provide psychological assessment for youth not on their caseloads on this unit. The timeline for these program changes will be determined by the Delaware Department of Children, Youth, and Families and remains under development. Terry Center will endeavor to communicate as transparently as possible to current, prospective, and future interns as it relates to these anticipated program changes and associated impacts on training and clinical experiences.

**Additional Training Activities:**

Groups: Throughout the training year, each Intern leads approximately three to four groups weekly for youth receiving services in the RTC and CSU. Throughout the training year Interns will be given the opportunity to rotate through different groups in order to gain experience working with youth of different ages and developmental stages. Interns may also have opportunities to lead time-limited parent education and support groups, Dialectical Behavior Therapy (DBT) groups, and other groups with a specific focus relevant to the client population at that time.

Program Development and Evaluation: Interns are expected to participate in program development and evaluation activities. Generally, this expectation is met through participation in an interdisciplinary team dedicated to monitoring, reviewing, revising, and developing program wide, milieu based treatment intervention strategies. This activity helps develop programmatic consultation skills along with developing entry level program leadership skills. Interns may also participate in assisting with outcome and satisfaction survey data and reporting.

Assessment: Each Intern has supervised experience in psychological and educational testing throughout the training year. Testing referrals generally involve the assessment of cognitive and academic functioning as well as diagnostic evaluation. Interns are expected to write a full report of their findings and offer feedback to families, schools and agencies as needed. Some basic competency and experience in psychological testing is expected of Interns when they arrive at the Internship, but intensive supervision is provided to the Interns to help the Interns develop more advanced skills in conducting assessments, making appropriate interpretations of test results, and adequately communicating the findings in the psychological assessment report.

Supervision: Each Intern is assigned to a licensed psychologist supervisor at both the major and minor rotation with whom the Intern meets individually for a minimum of 2 hours per week. On the major rotation Interns will change supervisors at the midway point in the training year in order to give Interns experience with supervisors of different professional backgrounds and supervision styles. The supervisor is assigned to provide specific oversight and training related to the rotation in which the Intern is involved. Because various staff have specific areas of expertise and interest, Interns are encouraged to augment their formally scheduled supervision with additional supervision from staff members with specific expertise that might be of benefit towards work with specific youth or families. In addition to individual supervision, Interns participate in group supervision for at least one and a half hours per week and also participate in weekly multidisciplinary team meetings where they receive feedback from other psychologists,

therapists, psychiatrists, nurses, educators, and milieu staff. These meetings provide between 1 and 4 hours per week of additional group supervision.

Provision of Supervision: Interns are given the opportunity to supervise a practicum student for a portion of their training. They are supervised on their supervision by a licensed psychologist, and provided with readings and didactic training on providing supervision.

### **Minor Rotations**

Consultation and Assessment Unit: The Consultation and Assessment Unit provides assessment, consultation, and recommendations for youth open in any of Delaware's Division of Prevention and Behavioral Health's programs as well as youth within the Juvenile Justice programs. Interns will complete psychological, neuropsychological, and educational assessments, receive additional training and supervision in assessment tools and report writing, engage in consultative feedback regarding testing reports, and participate in regular case presentations.

Juvenile Justice: Mental health and substance abuse treatment is provided in the state's four juvenile justice secure care facilities and each facility has at least one licensed psychologist. A minor rotation has been established at the Ferris School, a level-5 secure facility, but additional experience at other juvenile justice sites may be arranged. The Ferris School is a secure post-adjudication placement for adolescent males. Typically, youth are placed at the Ferris School for 6 months to a year through the juvenile justice system. While at Ferris, youth attend a full day of school, receive medical care as needed, and participate in a structured therapeutic milieu. In addition, Ferris residents receive a variety of psychological services. All residents are evaluated by one of the two psychologists upon admission. These assessments result in treatment recommendations that are instituted by the treatment team. Residents who are identified with significant substance abuse issues receive treatment specifically addressing this issue. When additional mental health interventions are required, these services may be provided by psychology staff, including Interns.

The Intern on the juvenile justice rotation is expected to initially shadow the psychologist on site to better understand the expectations of a psychologist in a juvenile justice setting. Then the Intern is mentored and trained to provide therapeutic interventions or conduct assessments in the juvenile justice setting. The Intern may provide individual or group therapy, participate in treatment team meetings and/or complete psychological assessments. Intern training at Ferris includes education and practice in the Seven Challenges model of intervention for adolescent substance abuse.

### **Didactic Experiences**

At least one and a half hours per week are set aside for formal didactic training. The Internship Training Program includes didactic training on issues relevant to the youth and families we serve, such as assessment and treatment of various disorders, empirically supported treatment approaches, family therapy, risk management, culturally responsive

care, psychopharmacology, trauma informed care, and other related topics. The didactic seminars are presented in a lecture and discussion format, with each presentation led by one person, but all persons participating in discussion of the topic. Didactics are led by Terry Center staff, psychologists in the Division of Prevention and Behavioral Health and outside consultants and trainers. Interns are also required to provide two didactic presentations in the second half of the training year. The didactic series includes training on Trauma Focused Cognitive Behavioral Therapy (TFCBT), Parent Child Interaction Therapy (PCIT), Dialectical Behavior Therapy (DBT), Motivational Interviewing, Attachment, Regulation, and Competency Model (ARC), and the Adolescent Community Reinforcement Approach (ACRA). Additional didactic experiences may be a part of the specific rotations in which each Intern participates.

In addition to the trainings available at Terry Center, the Division of Prevention and Behavioral Health recruits nationally known experts to speak throughout the year on various topics related to child mental health and Interns are able to attend these presentations free of charge.

### **Typical Training Week**

#### Direct Service (Approximately 18 hours per week)

- Providing individual, family and group therapy
- Formal assessment
- Child Observation
- Milieu Support

#### Documentation / Report writing (Approximately 7 hours per week)

- Completing all documentation requirements including: admission summaries, treatment plans, treatment plan reviews, progress notes, and discharge summaries
- Scoring psychological tests and writing psychological evaluation reports

#### Coordination of services (Approximately 5 hours per week)

- Making phone contact with coordinating agencies and participating in interagency meetings
- Providing consultation to teachers, or community agencies regarding clients on their caseload
- Reviewing cases monthly with care coordination and utilization review panels

#### Supervision / Training hours (Approximately 7 hours a week):

- Formal didactic training each week
- Multidisciplinary supervision
- Group supervision
- Individual supervision
- Supervision on assessment and group therapy, scheduled as needed

#### Other (Approximately 3-5 hours per week)

- Planning for services and preparing for individual, family or group therapy

- Participating in peer support/supervision meetings
- Providing supervision to practicum level students
- Participating in Terry Center staff and other meetings
- Travel - Due to the emphasis on providing services within the home and community of our youth and families, some travel will be necessary throughout the week

### **Location**

Terry Center is located in New Castle, Delaware. It is convenient to many metropolitan areas; 10 minutes from Wilmington, 45 minutes from Philadelphia, and 90 minutes from Baltimore. New Castle is close to many Brandywine Valley attractions such as Longwood Gardens, Winterthur Estate and The Delaware Museum of Art. It is also not far from Delaware's many beautiful beaches.

Terry Center is on local bus routes and is close to the Wilmington Train Station, which has rail access to Amtrak and Septa commuter trains.

The Consultation and Assessment Unit and Ferris School are each approximately a 15-minute drive from Terry Center.

### **Stipends/Benefits**

The Internship provides a stipend of \$25,727.08 per year dispersed over 26 pay periods. Interns receive 10 paid sick and 10 paid vacation days. In addition, Interns are entitled to 11 paid state holidays off each year. Intern professional development is supported through work time release for educational experiences (i.e., conferences, professional presentations, and workshops). In addition, time off may be granted for dissertation defense and interviewing for postdoctoral positions.

Terry Center provides Interns with their own office. Each Intern will be provided with an office telephone with voicemail, computer with email and Internet access, and cell phone. For work related transportation, Interns have authorization to use state cars. Interns have access to support personnel including administrative assistants, and computer training/support staff. There is ample space at Terry Center for seeing clients, including: therapy rooms (one with observation mirrors), two conference rooms, a group therapy space, two playgrounds, a gym and a pool. On-site parking is free.

Our graduates have moved on to obtain a variety of positions including clinical and administrative positions at public and private agencies, schools, and hospitals and other medical centers, as well as teaching appointments.

### **Core Training Staff**

**Erica Burgoon, Ph.D.** (Fordham University, 2007) Director of Internship Training, Clinical Director

**Tamara Walker-Gladney, Ph.D.** (Virginia Commonwealth University, 1999) Facility Director

**Amy Diehl Iannetta, PsyD.** (Widener University, 2001) Psychologist, Assessment

**Rebecca Zenkert, Psy.D.** (Widener University, 2012) Psychologist, Assessment

**Katie Freeman, Psy.D.** (Widener University, 2010) Psychologist, Assessment

**Daniel V. Jones, Psy.D.** (Widener University, 2011) Psychologist, Assessment

**Katherine Powers, Psy.D.** (Massachusetts School of Professional Psychology, 2008), Psychologist, Juvenile Justice

### **Eligibility**

Applicants must be candidates for the doctoral degree in Clinical, Counseling, or School Psychology, and must have sufficient (a minimum of 500 supervised intervention hours) and related practicum experience. Required selection criteria include a minimum of three years training in a psychology doctoral program. Additionally, the applicant's Director of Clinical Training must complete a form stating the applicant's readiness for the Internship. To be considered for an interview an applicant must provide all materials required to complete an APPIC application for psychology internships. All Interns must have completed a Master's Degree within the field of behavioral health (Clinical Psychology, School Psychology, Social Work, Community Counseling and Mental Health, etc.) prior to the start of the internship.

In Intern selection, we look for applicants from APA-accredited graduate psychology programs with strong clinical skills and experience providing clinical services to youth and/or families, in community, inpatient, and especially residential settings, and to those with experience working with youth with histories of trauma and familiar with trauma informed care. Training and experience in empirically supported treatment models targeting youth is preferred. Prospective interns should have foundational psychological assessment skills and experience. Assessment experience with youth is preferred. Keeping with the Practitioner-Scholar model, we seek Interns whose primary interest is in clinical work and who indicate an appreciation of informing their practice with scholarly inquiry. To assess the fit between applicants and the Terry Center Internship, consideration is given to an applicant's graduate transcripts, letters of recommendation, essays, and strength of the applicant's interviews.

Terry Children's Center actively supports inclusive educational and training opportunity and seeks to recruit applicants with diverse identities. Terry Center values inclusion and does not discriminate on the basis of race, color, ethnicity, national origin, sex, sexual orientation, gender identity or expression, family or marital status, creed, religion, age or disability in admission to or employment in its programs and activities.

This Internship site agrees to abide by the APPIC policy that no person at this training facility will solicit, accept, or use any ranking-related information from any Intern applicant.

A criminal background check, fingerprinting, and drug screen are required within 30 days prior to the start of Internship. Positive outcomes may disqualify a matched applicant from eligibility. Interns are required to obtain documentation from their own medical provider that they are in adequate physical health to work with youth and must either submit proof of negative TB test or chest x-ray from their own medical provider or obtain TB testing at Terry Center during the first week of internship. COVID-19 vaccination is not currently required; however, the State of Delaware reserves the right to resume requiring vaccination of employees if the public health situation warrants.

### **Application**

For application, the following materials must be submitted through the APPIC Online Portal:

1. Cover letter stating your interest and goals in psychology as related to the Internship at Terry Center (2 pages maximum)
2. Completed APPIC application for psychology internships, which can be found on [www.appic.org](http://www.appic.org)
3. Graduate school transcript
4. Curriculum vitae (including descriptions of relevant work, academic, clinical practicum, and research experience)
5. Three letters of recommendation
6. Verification of Internship Eligibility and Readiness Form

**All material must be received by November 11, 2022.** Incomplete applications will not be considered. Interviews will be conducted virtually by invitation only in January and require a commitment of two and a half to three hours. Applicants to be invited for interview will be contacted by the Internship Director or assistant by December 16.

Thank you for your interest in our program. We look forward to receiving your application. If you require additional information, please do not hesitate to contact Dr. Erica Burgoon (302-256-5700, [Erica.Burgoon@delaware.gov](mailto:Erica.Burgoon@delaware.gov)).

**Appendix A**

**Financial and Other Benefit Support for Upcoming Training Year\***

Annual Stipend/Salary for Full-time Interns	<b>\$25,727.08</b>
Annual Stipend/Salary for Half-time Interns	<b>n/a</b>
Program provides access to medical insurance for intern?	<b>No</b>
<b>If access to medical insurance is provided:</b>	<b>n/a</b>
Trainee contribution to cost required?	
Coverage of family member(s) available?	
Coverage of legally married partner available?	
Coverage of domestic partner available?	
Hours of Annual Paid Personal Time Off (PTO and/or Vacation)	<b>10 days</b>
Hours of Annual Paid Sick Leave	<b>10 days</b>
Number of Paid Holidays	<b>11 days</b>
In the event of medical conditions and/or family needs that require extended leave, does the program allow reasonable unpaid leave to interns/residents in excess of personal time off and sick leave?	<b>Yes*</b>
*In the event of extended time off (e.g. parental leave), intern is expected to make up that time at the end of the internship year.	

\*Note. Programs are not required by the Commission on Accreditation to provide all benefits listed in this table

**Appendix B**

**Initial Post-Internship Positions**

(Provide an Aggregated Tally for the Preceding 4 Cohorts)

	<b>July 2018- June 2022</b>	
Total # of interns who were in the 4 cohorts	12	
Total # of interns who did not seek employment because they returned to their doctoral program/are completing doctoral degree		
	<b>PD</b>	<b>EP</b>
Community mental health center		3
Federally qualified health center		
Independent primary care facility/clinic		
University counseling center		
Veterans Affairs medical center		
Military health center		
Academic health center	1	
Other medical center or hospital		
Psychiatric hospital or center	2	
Academic university/department		
Community college or other teaching setting		
Independent research institution		
Correctional facility		
School district/system		
Independent practice setting	3	3
Not currently employed		
Changed to another field		
Other		
Unknown		

Note: "PD" = Post-doctoral residency position; "EP" = Employed Position. Each individual represented in this table should be counted only one time. For former trainees working in more than one setting, select the setting that represents their primary position.