

Argosy University: San Francisco Bay

American School of Professional Psychology Clinical Training Office

999-A Canal Blvd. Point Richmond, CA 94804
Ph: 510-215-0277 Fax: 510-215-0299

Practicum Information Form

I. AGENCY INFORMATION	Youth and Family Service, Inc. (Vallejo)
Date Completed:	10/05/05
Address:	408 Tennessee St.
City, State, Zip:	Vallejo, CA
Phone:	707-554-2397 x107
Fax :	707-554-2634
Agency Website address:	
List multiple agency programs/sites:	
Director of Training:	James Murakami
Director Degree and CA License #:	Ph.D. PSY 17743
Director Phone:	707-554-2397
Director email:	jimm@yfs.org
Other contact person information:	Carol Osmer, MFT Director

II. PRACTICUM TRAINING PROGRAM BASICS	
A. Year Level Openings	Estimated
2 nd Year (Grad School) Practicum Openings	5
3 rd Year (Grad School) Practicum Openings	5
-Total Practicum Openings	10
-Total Pre-Doc Internship Level Openings	
B. Students at Agency	
Number of Practicum Applicants last year	15
Number of Current Argosy Practicum Students	1
Number of All Current Practicum Students	15
Number of Current Argosy Pre-Doc Interns	
Number of All Current Pre-Doc Intern Students	
C. Practicum Dates and Times	
Beginning Date	9/1/05
Ending Date	6/30/06
Number of weeks for practicum	10 mos.
Hours per week for practicum	16
Required days and times at agency	Fridays
D. Stipend: Is there Stipend? If yes, amount per year?	750

***Note:** 2nd year practicum is 16 hours and 3rd year is 16 up to 20 hours per week. Minimum of 38 weeks required with maximum of 52 weeks.

III. AGENCY DESCRIPTION: Please describe below.

Youth and Family Services, Inc. (YFS) is a private, nonprofit, multi-service agency serving children, adolescents, women and families five locations throughout Solano County Our central office in Vallejo is approximately 30-45 minutes from San Francisco or the East Bay. YFS operates a variety of programs ranging from community-based outpatient individual, family and group psychotherapy with children, adolescents and their caregivers to day treatment programs for women in recovery. In every program, emphasis is placed on understanding the “whole” client intraphysically, interpersonally and socioculturally. The work of the clinical staff is informed by principles of psychodynamic, family systems, narrative and cognitive-behavioral theory, as well as chemical dependence treatment models. YFS stresses collaboration, both among programs within the agency as well as with other local service providers. YFS serves primarily an ethnically diverse, low income, and high-risk population.

A. Population: Indicate estimated % of clients in each category.

<u>%</u>	<u>Gender</u>	<u>%</u>	<u>Life Cycle</u>
50	Male	5	Infants (0-4)
50	Female	30	Children (ages 5-12)
<1	Transgender:	50	Adolescents (ages 13-17)
100%	<i>Total</i>	15	Adults (18-64)
		<1	Seniors (ages 65+)
	<u>Ethnic/Cultural Identity</u>	100%	<i>Total</i>
30	African American		
15	Asian American		<u>Other Identified Groups</u>
20	Euro-American	<10	Gay/Lesbian:
35	Hispanic/Latin American	<10	Disabled Population:
	Native American		International:
	<i>Other:</i>		Other:
100%	<i>Total</i>		(Note, above will not total 100%)
	<u>Populations Treated</u>		
55	Individual		<u>Functioning Level of Clients</u>
5	Couples		Severe Dysfunction (i.e., psychotic, severe personality or substance abuse dx)
10	Families	50	Moderate Dysfunction (i.e., moderate personality dx, anxiety, depression)
30	Groups	50	Mild Dysfunction (i.e., adjustment dx, transitions, growth)
100%	<i>Total</i>	100%	<i>Total</i>

► **Others notes about populations:**

B. Specialty Areas: Mark an X next to all specialties that apply at agency.

	Behavioral Medicine		Hospital	X	Psychology of Women
	Health Psychology	X	Community Mental Health Clinic		Disabilities
	Psychopharmacology	X	Forensics	X	Gay/Lesbian
X	Pediatrics		Management/Administration	X	Multicultural Therapy
X	Infant/Parent		Program Evaluation		Spirituality/Psychology Integration
X	Family		Vocational/Career Development	X	Death/Dying/Bereavement
	Geropsychology	X	Psychological Assessment	X	Domestic Violence
X	School Based	X	Neuropsychological Assessment	X	PTSD/Trauma
	College Based		Psychology of Men		Serious Mental Illness

X	Bilingual in treatment		Others (specify):
---	------------------------	--	-------------------

IV. PRACTICUM TRAINEE RESPONSIBILITIES AND FUNCTIONS

A. Treatment Modalities performed by student: (Mark X in all that apply.)

X	Individual Therapy	X	Crisis Intervention
	Couples Therapy	X	Brief Therapy
X	Family Therapy	X	Long Term Therapy
X	Group Therapy	X	Psychological Assessment
X	Community Intervention	X	Neuropsychological Assessment
X	Consultation/Liaison	X	Case Management
X	Others (specify): Charting Progress		

► **Describe practicum trainee duties and responsibilities:** Direct services: minimum of 7 clients per week (individual, group, family) psych test optional. Must attend all meetings fulfill documentation requirements.

V. ASSESSMENT and PSYCHOLOGICAL TESTING

A. Assessment Overview	
Will trainee have opportunity for assessment/testing experiences?	Yes
Is there additional supervision/training for assessment/testing?	Yes
Percentage of practicum time allotted for providing assessment services:	Depemds
Estimate of average # of Test Batteries completed per year:	2-3

B. Assessment Modalities performed by student: (Mark X next to all that apply.)

X	Projective	X	Intelligence
X	Personality	X	Neuropsychological
X	Academic	X	Vocational
	Other:		

► **Describe the Assessment Program:** Assessment seminar every week 9-11 Fridays. Mostly testing children and adolescents.

VI. TRAINING/SUPERVISION PHILOSOPHY and OBJECTIVES: A. Please describe below.

To compliment information learned at school. To facilitate learning, administration, scoring, interpretation, write-up/integration of "case" test instruments, as well as to learn larger contextual issues in augment (i.e. affect of culture as testing, test bias, definitions of intelligence/personality, test critique, test ethics, etc.

B. Supervisor Licenses: Please note the number of supervisors with the following licenses.

1	*Licensed Psychologists (PsyD/PhD/EdD)	2	MFT
	*Psychiatrists	3	LCSW
15	Other: Paraprofessionals		

**Note:* Primary Supervisor must be a licensed provider at the doctoral level of training. Primary Supervisor may be individual or group supervisor & must sign or co-sign evaluation forms for students.

C. Supervision and Training	Hours per week
Individual Supervision	1-2
Group Case Consultation	2
Didactic Training	2
Other:	
Total hours Training/Supervision	Approx 6

D. Methods of Supervision: (Mark X next to all that apply.)

X	Live Observation	X	Process Notes
	Two Way Mirror		Case Reviews and Discussion
X	Videotapes Review	X	Audiotape Review
	Other:		

E. Theoretical Orientations of the Supervising Staff (check all that apply)

	Biopsychosocial		Jungian
X	Cognitive Behavioral	X	Narrative
X	Family Systems	X	Psychosocial Rehabilitation
X	Feminist	X	Psychodynamic/analytic
X	Humanistic/Existential		Transpersonal
X	Integrative		Recovery Based Model
	Others (specify):		

► **Comments on theoretical orientation:**

F. Training Emphasis Areas: Please fill out the following classifications below to assist us in differentiating practicum placements. Indicate with “X” areas where *substantial* training program and experience exists such that it would qualify for graduate program practicum in these training emphasis areas.

X	Community/Multicultural	X	Cognitive Behavioral
	Health Psychology	X	Assessment
X	Forensic Psychology		Geriatric
	Family/Child		Gender
X	Psychodynamic		Not Applicable
	Others (specify):		
▶ Please add specific information regarding all Emphasis Area(s) you checked:			

VII. PRACTICUM APPLICATION PROCESS FOR STUDENTS

Application Deadline:	2/28
Selection Date Estimate:	Early March
Standard required materials	Vita, Letter of Intent, 3 Letters of Recommendation
Agency specific materials:	Autobio statement
Preferred Experience:	
Preferred Coursework:	
Interview Process: (keep those that apply, erase rest)	Individual Interview, Role Play, Case Presentation, Vignettes
Other application/interview information:	

VIII. Verifying Information: I verify that the above information is current and accurate.

Date:	10/5/05
Directors Name:	James Muakami, Ph.D.
*Directors Signature:	JM

*If emailing, you may add signature through copy and paste or just put in your initials.