Dr. Inzinna Psychological Services PLLC

Doctoral Internship in Health Service Psychology

2026-27 Program Brochure

Department of Clinical Training and Supervision
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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.

Introduction

Dr. Inzinna Psychological Services PLLC (DIPS) is a multidisciplinary outpatient psychology practice dedicated to providing **accessible, evidence-based, and compassionate mental health care** to adults, adolescents, couples, and families across New York State. The practice operates through both **telehealth and in-person modalities**, allowing flexibility for working individuals, caregivers, and those living in under-resourced or geographically distant areas. Because DIPS accepts insurance, our clinicians serve a **culturally, linguistically, and socioeconomically diverse population**, expanding access to care for clients who might otherwise face financial or systemic barriers to treatment.

Our approach is founded on the belief that psychological wellness requires **integrated attention to emotion, cognition, behavior, and context**. Clinicians emphasize collaborative treatment planning, outcome monitoring, and trauma-informed, culturally responsive practice. The team employs an **integrative model of psychotherapy** that synthesizes cognitive-behavioral, psychodynamic, and systemic theories within a unified framework centered on **exposure to avoidance**. At its core, the model holds that all effective therapy involves helping clients face and process what has been avoided—behaviorally, emotionally, or relationally—and that therapeutic tools serve to identify, approach, and work through these avoidances. This includes the exploration of **unconscious thoughts, feelings, and relational patterns** that maintain avoidance and psychological distress. The **therapeutic alliance** is viewed as the primary vehicle for this process, providing a safe context in which new emotional learning, behavioral flexibility, and insight can emerge.

Beyond direct clinical care, DIPS is deeply committed to **training, mentorship, and professional development** as part of its aim to strengthen the behavioral health workforce and expand access to high-quality mental health services statewide.

The **Doctoral Internship in Health Service Psychology** at DIPS provides advanced clinical training within a thriving, team-based private-practice environment. Interns gain supervised experience in psychotherapy, diagnostic and psychological assessment, consultation, and professional practice management while working closely with licensed psychologists and an

interdisciplinary clinical team. The program's developmental and relational training model supports interns in integrating scientific knowledge with reflective practice. Graduates of the internship are well prepared for **postdoctoral training and licensure** as health service psychologists capable of delivering ethical, effective, and accessible psychological care in today's evolving healthcare landscape.

Training Philosophy

The training program at **Dr. Inzinna Psychological Services PLLC (DIPS)** is grounded in the **Practitioner–Scholar Model** and informed by a **Developmental–Relational orientation**. Training emphasizes reflective clinical practice, the thoughtful application of scientific knowledge, and the gradual development of professional autonomy. Interns are viewed as emerging colleagues who grow through guided experience, feedback, and self-examination within a supportive and collaborative learning community.

The program is additionally informed by the field of **implementation science**, which emphasizes bridging the gap between research and clinical practice through training that occurs in real-world service environments. This approach enhances the **ecological validity** of the internship experience and ensures that interns learn to apply evidence-based principles in authentic clinical contexts.

The program's philosophy is organized around **six core principles:**

1. **Integration of Science and Practice:** Clinical decision-making is guided by empirical research, case data, and outcome monitoring. Interns learn to translate theory and research findings into individualized, evidence-informed interventions and to evaluate the effectiveness of their work through ongoing assessment and supervision.
2. **Developmental Progression:** Training is sequential, cumulative, and graded in complexity. Early in the year, supervision focuses on foundational skills—assessment, documentation, treatment planning, and ethical decision-making. As competence grows, interns assume greater responsibility for conceptualization, intervention, and

collaboration, culminating in the ability to function with increased independence and professional judgment.

3. **Relational and Experiential Learning:** The supervisory relationship serves as the central context for professional growth. Supervisors model authenticity, curiosity, empathy, and ethical awareness, encouraging interns to reflect on their emotional responses and relational patterns in clinical work. Training emphasizes that effective psychotherapy depends on the therapist's capacity for self-reflection and relational attunement.
4. **Integrative Understanding of Psychotherapy:** Training is informed by an integrative model that views avoidance—behavioral, emotional, and relational—as a key maintaining factor in psychological distress. Interns learn that all effective therapy involves helping clients confront and process what has been avoided, both consciously and unconsciously. The **therapeutic alliance** and other clinical tools are understood as mechanisms that facilitate this exposure and new learning, allowing clients to achieve greater flexibility, emotional tolerance, and insight.
5. **Cultural Humility and Diversity:** The program recognizes that competence in health service psychology requires ongoing self-examination and openness to difference. Interns engage in training experiences that enhance cultural awareness and responsiveness, considering how social identity, privilege, systemic oppression, and lived experience shape the therapeutic process.
6. **Professional Stewardship:** Beyond clinical proficiency, interns are trained to understand how sustainable, ethical practice functions within the broader healthcare system. Training includes exposure to the realities of private practice operations, interdisciplinary collaboration, risk management, and systems of care.

Through these six guiding principles, DIPS fosters the growth of competent, ethical, and reflective practitioners who are capable of integrating science, theory, and self-awareness into effective clinical practice.

Program Overview

The **Doctoral Internship in Health Service Psychology** at **Dr. Inzinna Psychological Services PLLC (DIPS)** provides comprehensive, generalist training in psychotherapy, psychological assessment, consultation, and professional practice within a hybrid private-practice setting. The internship prepares emerging psychologists for competent, ethical, and reflective practice across diverse clinical populations and service modalities. The program follows a **Practitioner–Scholar Model** and a **Developmental–Relational orientation**, emphasizing the integration of science and practice, progressive autonomy, and reflective supervision. Interns are viewed as emerging professionals who learn through guided experience, mentorship, and collaboration within a multidisciplinary team.

Program Details

- **Dates:** September 2026 – August 2027
- **Duration:** 12 months (≈ 2,000 hours)
- **Positions:** 2 full-time Doctoral Psychology Interns
- **Setting:** Hybrid — in-person and HIPAA-secure telehealth (interns must reside in New York State)
- **Stipend:** $35,000 for the training year
- **Leave:** 10 days personal leave + state and federal holidays + up to 3 professional development days
- **Supervision:** ≥ 4 hours weekly (≥ 2 individual + 2 group/case)
- **Didactics:** ≥ 2 hours weekly (≈ 100 hours annually)

Training Faculty

- **Greg Inzinna, PsyD** — *Director of Clinical Training and Supervising Psychologist* (NY Licensed)

- **Bret Boatwright, PsyD** — *Director of Assessment and Supervising Psychologist* (NY Licensed)
- **Juan Carlos Espina, LMSW** — *Director of Youth Development and Operations*

The training faculty provides individualized supervision and mentorship to ensure that interns meet or exceed the competencies outlined in the **APA Standards of Accreditation in Health Service Psychology**. Faculty supervisors hold clinical responsibility for all cases and coordinate the internship's clinical, didactic, and evaluative components, while administrative leadership oversees systems, HR, and operational supports essential to the program's quality and stability.

Training Faculty Biographies

Greg Inzinna, PsyD — Director of Clinical Training and Supervising Psychologist
Dr. Gregory Inzinna is a licensed clinical psychologist (NY #025958) and the founder of Dr. Inzinna Psychological Services PLLC. He serves as the Director of Clinical Training, leading all aspects of intern education, supervision, and program development. Dr. Inzinna's clinical and teaching work integrates cognitive-behavioral, psychodynamic, and systemic approaches within an overarching model that views psychological health as the capacity to face what is avoided—emotionally, behaviorally, and relationally. His integrative, process-based framework emphasizes exposure to avoidance and the therapeutic alliance as mechanisms for new learning and change.

Dr. Inzinna completed his doctoral internship at Southwest Behavioral & Health Services in Phoenix, AZ, and his postdoctoral fellowship at the Parnes Clinic of Yeshiva University, in the Bronx, NY. He later served as the Assistant Director of the Parnes Clinic until he left the position to dedicate his time to building his practice and this internship.

Dr. Inzinna served as an Adjunct Professor at Yeshiva University's Ferkauf Graduate School of Psychology through Spring 2025, where he taught Lifespan Psychopathology, Group Therapy, Child and Adolescent Therapy, and Supervision & Consultation. His previous experience includes directing training and supervision at the Parnes Clinic, conducting research on evidence-based treatment implementation, and presenting on topics related to emotion

regulation, mindfulness, and psychotherapy process. He is deeply committed to mentorship and to advancing accessible, evidence-based, and reflective clinical practice.

Bret Boatwright, PsyD — Director of Assessment and Supervising Psychologist

Dr. Bret Boatwright is a licensed clinical psychologist (NY #027170) and serves as the Director of Assessment at Dr. Inzinna Psychological Services PLLC. He oversees all training related to diagnostic and psychological testing for doctoral interns. Dr. Boatwright completed his PsyD in Clinical Psychology at Yeshiva University, where his training emphasized psychodynamic and integrative approaches to clinical work. His assessment specialization includes neurodivergent populations—particularly adults and young adults with ADHD and Autism Spectrum Disorder—as well as cognitive, personality, and emotional functioning evaluations. Dr. Boatwright's clinical style is grounded in psychodynamic and mind-body integration, incorporating mindfulness and somatic techniques to support clients' insight and regulation. He trains interns in evidence-based assessment practices using tools such as the WAIS-V and personality inventories, emphasizing humanizing interpretation, integrated conceptualization, and culturally responsive feedback. His prior clinical experience includes placements at Creedmoor Psychiatric Center, Gouverneur Hospital, and the National Institute for the Psychotherapies, where he worked with adults with complex and labile emotional presentations.

Juan Carlos Espinal, LMSW — Director of Youth Development and Operations

Juan Carlos Espinal, LMSW, is a licensed master social worker (NY #127626) and serves as the Director of Youth Development and Operations at Dr. Inzinna Psychological Services PLLC. In this dual role, he coordinates practice-wide systems for training, HR, and operations while overseeing community-based and youth development initiatives. His work bridges clinical, administrative, and outreach functions, ensuring the internship's alignment with the organization's aim of accessible, inclusive care. Mr. Espinal also holds a Program Liaison role with Cornell University Cooperative Extension, where he develops and leads Positive Youth Development (PYD) programming citywide, with a focus on executive functioning, social-emotional learning, and college readiness for diverse and neurodiverse youth

populations. At DIPS, he contributes to trauma-informed, developmentally grounded interventions for adolescents and families, and supports the integration of youth services into the clinical training curriculum. His background in crisis intervention, leadership training, and community engagement enhances the internship's multidisciplinary framework and organizational capacity

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Organizational Context

The internship is housed within the **Department of Clinical Training and Supervision**, the educational division of **Dr. Inzinna Psychological Services PLLC**. This department oversees all clinical training activities, including practicum students, externs, and doctoral interns, ensuring that training experiences align with ethical, legal, and professional standards of care.

Interns work as integral members of a collaborative clinical team that includes licensed psychologists, administrative staff, and behavioral health professionals. Within this framework, interns participate in both **telehealth and in-person clinical services**, gaining experience in hybrid service delivery, interdisciplinary communication, and private-practice operations.

The internship meets all APPIC and APA requirements for organized training, including a minimum of **25 percent face-to-face clinical contact**, at least **two hours of weekly didactic instruction**, and **four hours of supervision** each week.

Program Aim

The primary Aim of the DIPS Doctoral Internship in Health Service Psychology is to train emerging psychologists to become competent, ethical, and reflective practitioners who integrate scientific knowledge, theoretical understanding, and clinical skill in providing evidence-based care within diverse, real-world practice settings.

Program Goals and Objectives

The **Doctoral Internship in Health Service Psychology at Dr. Inzinna Psychological Services PLLC (DIPS)** prepares emerging psychologists for competent, ethical, and independent practice in health service psychology. Guided by a **Practitioner–Scholar Model** and a **Developmental–Relational orientation**, the program emphasizes integration of science and practice, reflective self-awareness, and progressive autonomy.

Interns develop proficiency across APA's nine Profession-Wide Competencies through structured experiences in psychotherapy, psychological assessment, supervision, consultation, and professional development. The training model is grounded in an **integrative theory of psychotherapy** that views avoidance—behavioral, emotional, and relational—as central to psychological distress. Interns learn to help clients face and process avoided experiences through evidence-based interventions and the therapeutic alliance as a vehicle for new learning and change.

By the end of training, interns demonstrate clinical competence, ethical integrity, and professional adaptability—ready to enter postdoctoral training or licensure-track positions as reflective, research-informed health service psychologists.

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1. Research and Evidence-Based Practice

Interns will integrate current research, outcome data, and theory into clinical decision-making. They will demonstrate the ability to critically evaluate scientific literature, apply evidence-based practices, and participate in outcome monitoring or program evaluation efforts. Optional

participation in the **Inzinna Research Lab** allows for engagement in applied research on integrative psychotherapy processes.

2. Ethical and Legal Standards

Interns will demonstrate understanding and application of ethical principles, legal standards, and professional guidelines in all aspects of their work. Supervision and didactics emphasize risk management, confidentiality, boundaries, informed consent, and ethical decision-making in telehealth and private practice contexts.

3. Individual and Cultural Diversity

Interns will develop competence in delivering culturally responsive care that reflects awareness of their own identities, biases, and values. Training emphasizes cultural humility, intersectionality, and social determinants of mental health, with attention to serving marginalized and underserved populations within an insurance-based outpatient model.

4. Professional Values and Attitudes

Interns will cultivate professionalism, accountability, and reflective self-awareness. They will demonstrate openness to feedback, responsible time management, and a commitment to lifelong learning. Training encourages self-reflection as a means of identifying personal values, countertransference, and emotional avoidance that may affect therapeutic effectiveness.

5. Communication and Interpersonal Skills

Interns will develop effective communication skills in clinical, supervisory, and interdisciplinary contexts. Training focuses on therapeutic presence, active listening, empathic attunement, and concise written documentation. Interns will demonstrate the ability to form and maintain professional relationships characterized by respect, authenticity, and collaboration.

6. Assessment

Interns will achieve competence in selecting, administering, scoring, and interpreting psychological assessments. Under the supervision of the **Director of Assessment**, interns will complete diagnostic evaluations integrating cognitive, personality, and symptom data into

cohesive conceptualizations that guide treatment planning. Emphasis is placed on ethical, culturally sensitive, and evidence-based assessment practices.

7. Intervention

Interns will provide evidence-based psychotherapeutic services across individual, couples, and family modalities. Training emphasizes an **integrative model** that views avoidance as central to psychopathology and the therapeutic alliance as the mechanism of new learning and change. Interns develop proficiency in CBT, DBT, ACT, Family Systems, Object Relations, psychodynamic, and integrative interventions.

8. Supervision

Interns will gain foundational understanding and practical experience in the principles of clinical supervision. Through didactic seminars and case conferences, they will learn to provide feedback, conceptualize trainee development, and reflect on the ethical and relational dynamics of supervision.

9. Consultation and Interprofessional/Interdisciplinary Skills

Interns will develop competence in providing psychological consultation to peers, supervisors, and other professionals. Training includes collaboration with external providers, primary care physicians, schools, and community organizations. Interns learn to communicate psychological concepts effectively in interdisciplinary settings and advocate for client well-being within systems of care.

Across all competencies, interns are expected to demonstrate **progressive growth in autonomy, judgment, and reflective capacity** over the course of the training year. Evaluation occurs through continuous supervisory feedback and formal midyear and end-of-year reviews, ensuring that each intern's development is systematically supported and documented.

Structure of the Internship Year

The **Doctoral Internship in Health Service Psychology** at **Dr. Inzinna Psychological Services PLLC (DIPS)** is a full-time, 12-month, 2,000-hour training program that provides sequential, cumulative, and graded learning experiences in psychotherapy, psychological assessment, consultation, and professional development. The internship is designed to ensure that interns develop competence across all APA Profession-Wide Competencies while integrating scientific knowledge, reflective practice, and ethical decision-making.

Although interns typically spend about half their time in direct client care, every service activity is structured as a guided learning experience with clear educational objectives and linked supervision. Client work functions as the vehicle for learning rather than the program's purpose. This design prioritizes supervision, didactic instruction, and reflection, ensuring that the internship remains a training-centered rather than service-driven experience.

Training Format

Training occurs within a **hybrid model** that combines **telehealth** and **in-person services** at the Upper East Side office. Interns are required to reside in New York State and participate in periodic in-person meetings, including quarterly team gatherings, case conferences, and optional client sessions conducted on site. This hybrid structure reflects the realities of modern practice and broadens access to clients across diverse geographic and socioeconomic backgrounds.

Weekly Schedule and Time Allocation

Interns average **37–40 hours per week** of structured training activities, which collectively meet or exceed the 2,000-hour requirement. A typical week includes the following components:

- **Direct Clinical Service:** 22–25 hours per week (1,100–1,250 hours annually; 55–60% of total time). Includes individual, couples, and family psychotherapy; group therapy; diagnostic intake; and consultation. At least 25% of total time (500–600 hours) is spent in direct, face-to-face clinical service.
- **Psychological Assessment:** 3–4 hours per week (150–200 hours annually; 7–10%). Under supervision of the Director of Assessment, interns conduct integrative

psychological evaluations, including cognitive, personality, and emotional measures, using tele-assessment. The opportunity for in-person methods will be available as well. Assessment hours are included within the overall 2,000-hour structure and overlap with direct clinical service and supervision time.

- **Supervision:** 4 hours per week (200 hours annually; 10%). Includes a minimum of 2 hours of individual supervision and 2 hours of group or case-conference supervision with licensed psychologists who maintain clinical responsibility for all cases.
- **Didactic Instruction:** 2 hours per week (100 hours annually; 5%). Weekly seminars and case discussions support development across the nine APA Profession-Wide Competencies and include topics such as evidence-based interventions, ethics, diversity, trauma-informed care, supervision, and professional development.
- **Documentation and Professional Development:** 5–6 hours per week (250–300 hours annually; 12–15%). Includes treatment planning, progress notes, risk management, outcome tracking, and supervision preparation.
- **Optional Research and Scholarly Activity:** Up to 2 hours per week (up to 100 hours annually; ≤5%). Interns may participate in the **Inzinna Research Lab**, contributing to applied research in integrative psychotherapy processes and outcome evaluation.

Supervision and Developmental Progression

Supervision follows a **developmental–relational model**, progressing from structured skill-building to greater autonomy as competence grows. Early in the year, supervision focuses on case formulation, documentation, and basic interventions. As interns demonstrate increased proficiency, supervision emphasizes deeper conceptualization, integration across modalities, and professional identity formation.

Interns receive a **minimum of four hours of supervision each week**, including both individual and group modalities. Supervisors model reflective practice, ethical awareness, and the integration of emotion and cognition in clinical work. The supervisory relationship serves as a cornerstone of professional development, mirroring the same relational and experiential learning process that guides effective therapy.

Evaluation and Feedback

Intern progress is evaluated through ongoing supervision, structured midyear and end-of-year evaluations, and continuous self-assessment. Feedback focuses on growth in autonomy, competence, and reflective functioning across all Profession-Wide Competencies. Evaluations are shared with the intern's doctoral program to ensure transparency and consistency in professional development.

Clinical and Training Experiences

Interns at Dr. Inzinna Psychological Services PLLC (DIPS) gain comprehensive experience providing psychotherapy, psychological assessment, and consultation to a diverse and clinically rich outpatient population. Training occurs within a multidisciplinary, hybrid private-practice environment that emphasizes accessibility, collaboration, and the integration of science and reflective practice.

Psychotherapy and Clinical Practice

Interns provide psychotherapy to adolescents, adults, couples, and families presenting with a wide range of clinical concerns. Common presenting issues include mood and anxiety disorders, trauma and stress-related conditions, personality and relational difficulties, identity development, grief, and adjustment challenges. The clinic also serves individuals with serious mental illness (e.g., schizophrenia spectrum disorders) and clients with complex psychosocial needs, including those involved with multiple family systems or external agencies such as CPS.

Therapeutic work is grounded in the program's integrative model of psychotherapy, which views psychological health as the ability to approach and process what has been avoided—emotionally, behaviorally, and relationally. Interns learn to identify patterns of avoidance and employ interventions that facilitate exposure, reflection, and new learning. Treatment integrates Cognitive Behavioral Therapy (CBT), Dialectical Behavior Therapy (DBT), Acceptance and Commitment Therapy (ACT), Family Systems Therapy, Couples Therapy, and psychodynamic and object relations approaches. Supervision and didactic seminars emphasize the flexible, evidence-informed application of these modalities to meet clients' developmental, cultural, and contextual needs. Interns are trained to deliver therapy through both telehealth and in-person formats. The hybrid model provides opportunities to adapt therapeutic presence, boundary management, and risk assessment skills across delivery modes. Interns gain experience in managing realistic caseloads of approximately 20–25 active clients, ensuring both breadth and continuity of care.

Psychological Assessment

Under the supervision of the Director of Assessment, interns conduct integrative psychological evaluations across cognitive, emotional, and personality domains. Assessments typically

include diagnostic evaluations for mood, anxiety, trauma-related, and neurodevelopmental disorders, using tools such as the WAIS-V, personality inventories, and structured diagnostic interviews. Training emphasizes ethical, culturally responsive, and evidence-based assessment, with supervision focusing on conceptualization, feedback delivery, and integration of results into treatment planning. Interns learn to conduct both assessments using HIPAA-compliant technology.

Consultation and Interprofessional Collaboration

Interns gain experience in consulting with schools, primary care physicians, and community organizations as part of coordinated care. They learn to communicate psychological findings and recommendations effectively to multidisciplinary teams while advocating for client needs within broader systems. Collaboration within the DIPS clinical team—comprising licensed psychologists, social workers, and administrative leadership—exposes interns to the operational and ethical dimensions of teamwork in private practice.

Supervision and Professional Development

Supervision at DIPS is grounded in a Developmental–Relational orientation, emphasizing mutual respect, authenticity, and reflection. Interns receive a minimum of four hours of supervision weekly, including individual, group, and case-conference formats. Supervisors model curiosity, empathy, and transparency while helping interns link theory to practice.

Professional development is further supported by didactic seminars, research discussions, and mentorship in ethical practice management. Interns receive guidance in documentation, billing, telehealth compliance, and strategies for maintaining sustainable, balanced clinical work.

Community and Youth Development

Through the leadership of Juan Carlos Espinal, LMSW, Director of Youth Development and Operations, interns may participate in community-based and youth-oriented initiatives that integrate positive youth development principles, social-emotional learning, and family engagement. These experiences reinforce the program's commitment to accessible and developmentally informed care.

Supervision

Supervision is the **cornerstone of training** at **Dr. Inzinna Psychological Services PLLC (DIPS)** and serves as the primary context for professional growth. Each intern receives a **minimum of four hours of supervision per week**, exceeding APPIC and New York State standards for doctoral-level psychology training.

Structure and Frequency

- **Individual Supervision (≥ 2 hours weekly):** Focuses on case conceptualization, treatment planning, transference and countertransference dynamics, ethical decision-making, and professional identity development. Supervisors provide close guidance early in the year and progressively encourage greater autonomy as competence increases. **Each intern also receives approximately one hour per week of dedicated supervision in psychological assessment provided by the Director of Assessment.**
- **Group Supervision / Case Conference (≈ 2 hours weekly):** Offers opportunities for collaborative case discussion, peer consultation, and exposure to diverse theoretical orientations. Interns present cases, receive structured feedback, and learn to communicate clinical formulations clearly and professionally.

Methods and Approach

Supervision follows a **Developmental–Relational model**, emphasizing authenticity, reflective practice, and the integration of emotion and cognition in clinical work. Supervisors employ a variety of teaching methods including **live observation, review of video or audio recordings, role play, and progress note discussion**. These approaches promote experiential learning and the integration of theoretical knowledge into practice.

Supervisors maintain **clinical and legal responsibility** for all client care, co-sign documentation as required by insurance and state regulations, and ensure that all services billed under supervisory provisions meet standards for "supervisory billing." Weekly supervision

times are **protected and fixed**, ensuring that supervision is never compromised by administrative or clinical demands.

Supervisory Team

Interns receive supervision from **licensed psychologists** who are actively involved in the internship program:

- **Greg Inzinna, PsyD** — Director of Clinical Training and Primary Supervisor
- **Bret Boatwright, PsyD** — Director of Assessment and Supervising Psychologist

Supervisors collaborate closely to ensure consistency in feedback, continuity across training experiences, and integration of assessment and intervention skills.

Evaluation of Intern Competence

Evaluation at **Dr. Inzinna Psychological Services PLLC (DIPS)** is designed to ensure that each intern's development is systematically monitored and supported throughout the training year. The evaluation process is competency-based, developmental, and consistent with the **APA Standards of Accreditation in Health Service Psychology**.

Competency Framework

Intern performance is evaluated across the **nine Profession-Wide Competencies (PWCs)** established by the APA:

1. Research and evidence-based practice
2. Ethical and legal standards
3. Individual and cultural diversity
4. Professional values and attitudes
5. Communication and interpersonal skills
6. Assessment
7. Intervention
8. Supervision

9. Consultation and interprofessional/interdisciplinary skills

Each competency area includes specific behavioral anchors that define expected levels of performance. Interns are rated along a developmental continuum that reflects progression from close supervision and skill acquisition to increasing independence and professional autonomy.

Evaluation Procedures

- **Ongoing Formative Feedback:** Supervisors provide regular verbal feedback during weekly supervision sessions. This feedback focuses on strengths, areas for growth, and the intern's ability to integrate supervision into practice.
- **Midyear Evaluation:** A formal written evaluation occurs at the midpoint of the internship year (approximately six months). Supervisors assess progress across all nine competencies, discuss feedback in a joint meeting with the intern, and collaboratively identify developmental goals for the remainder of the year.
- **End-of-Year Evaluation:** A final comprehensive evaluation is completed at the end of the internship year, summarizing the intern's demonstrated competencies, areas of mastery, and readiness for postdoctoral or licensure-track practice.

Written evaluations are reviewed with the intern in supervision and signed by both the intern and the supervisor to acknowledge discussion. Copies are provided to the **Director of Clinical Training**, maintained in the intern's personnel file, and sent to the intern's **Director of Clinical Training (DCT)** at their doctoral program.

Remediation and Support

If an intern demonstrates difficulty achieving expected competence levels, the program follows a structured remediation process. A **Performance Improvement Plan (PIP)** is developed collaboratively between the supervisor, intern, and Director of Clinical Training, outlining specific goals, timelines, and additional support measures. Progress is reviewed regularly to ensure fairness and transparency.

In cases where serious or ongoing concerns arise, the program's **Due Process and Grievance Procedures** (outlined later in this manual) provide formal mechanisms for notice, hearing, and appeal.

Philosophy of Feedback

The evaluation process reflects the program's **developmental–relational model**, emphasizing that supervision and feedback are both evaluative and educational. The goal of evaluation is not only to measure competence but to **facilitate reflection, self-awareness, and professional growth**. Supervisors strive to provide feedback in a manner that is transparent, collaborative, and supportive of the intern's emerging professional identity.

Didactic Curriculum

The **Didactic Curriculum** at **Dr. Inzinna Psychological Services PLLC (DIPS)** is designed to complement and deepen the experiential learning that occurs through clinical service and supervision. Didactic seminars occur for a **minimum of two hours weekly (approximately 100 hours annually)** and are an essential component of the 2,000-hour training year.

The curriculum follows a **developmental sequence**, progressing from foundational clinical skills early in the year to advanced conceptualization, integration, and professional identity development later in training. Didactics address all nine **APA Profession-Wide Competencies**, emphasizing both clinical proficiency and reflective, ethical, and culturally responsive practice.

Format and Instruction

Didactics are led by core training faculty and invited professionals, including:

- **Greg Inzinna, PsyD** — Director of Clinical Training and Supervising Psychologist
- **Bret Boatwright, PsyD** — Director of Assessment and Supervising Psychologist
- **Juan Carlos Espinal, LMSW** — Director of Youth Development and Operations
- **Emily Underwood, PsyD** — Clinician and Didactic Instructor (Trauma, Women's Health, Perinatal Psychology)
- **Guest Speakers:** *Bari Smelson, PhD, LCSW*, a senior clinician and supervisor specializing in **Object Relations and Couples Therapy**, provides selected seminars and advanced trainings.

Seminars are delivered in small-group format to encourage participation, discussion, and case-based application. Didactics integrate **lectures, case presentations, readings, role plays, and process discussions** to foster active learning and the integration of theory, research, and practice.

Core Didactic Topics

Didactic content rotates annually and includes the following major domains:

Evidence-Based and Integrative Psychotherapy

- Cognitive Behavioral Therapy (CBT) and Dialectical Behavior Therapy (DBT)
- Acceptance and Commitment Therapy (ACT) and behavioral activation
- Psychodynamic and Object Relations approaches
- Family Systems and Couples Therapy
- Exposure-based and emotion-focused interventions within the integrative framework

Assessment and Diagnosis

- Diagnostic interviewing and case formulation
- Cognitive, personality, and symptom assessment
- Ethical and culturally sensitive testing practices
- Integrating assessment data into treatment planning

Ethics and Professional Practice

- Ethical decision-making and legal standards
- Telehealth best practices and HIPAA compliance
- Risk assessment, documentation, and supervisory billing
- Professional boundaries and therapist self-care

Diversity, Equity, and Inclusion

- Cultural humility and identity in clinical practice
- Working with marginalized and underserved populations
- Social determinants of mental health
- Anti-racism and advocacy within private practice

Specialized Clinical Topics

- Trauma-informed treatment and posttraumatic growth
- Women's mental health and perinatal psychology (led by *Emily Underwood, PsyD*)
- Youth and family development (led by *Juan Carlos Espinal, LMSW*)
- Object Relations and Couples Therapy (guest seminars by *Bari Smelson, PhD, LCSW*)
- Working with serious mental illness and high-acuity presentations

Supervision and Professional Development

- Models and ethics of supervision
- Reflective practice and use of self in therapy
- Integrating clinical science, outcome data, and accountability
- Transition to postdoctoral or early-career practice

Case Conferences and Research Integration

In addition to weekly seminars, interns participate in **monthly case conferences** and **research discussions** led by the **Inzinna Research Lab**. These meetings emphasize the integration of empirical evidence, clinical process, and the program's theoretical foundation—that all effective psychotherapy involves helping clients face what has been avoided and learn new ways of relating to experience.

Sample Didactic Schedule

The following outline represents a **sample rotation of didactic seminars** offered throughout the internship year. Topics are organized to parallel interns' developmental progression—from foundational knowledge early in the year to advanced integration and specialization in later months. Didactic offerings are updated annually to reflect evolving clinical practice standards and trainee feedback.

Month / Period	Primary Focus	Representative Didactic Topics & Instructors
September – October	**Orientation & Foundational Competencies**	• Introduction to the Practitioner–Scholar Model and DIPS Integrative Framework (Dr. Inzinna) • Professional Ethics and Legal Standards in Private Practice • Documentation, Billing, and Supervisory Billing Procedures (Dr. Inzinna, Mr. Espinal) • Introduction to Telehealth Practice and Risk Management • Cultural Humility and Working with Diverse Populations • Clinical Note Writing and Outcome Tracking

November – December	**Core Evidence-Based Practices I**	• Cognitive Behavioral Therapy Foundations (Dr. Inzinna) • Dialectical Behavior Therapy Skills and Structure (Dr. Inzinna) • Acceptance and Commitment Therapy (ACT) (Dr. Inzinna) • Trauma-Informed Treatment & Crisis Intervention (Emily Underwood, PsyD) • Assessment Integration I: Cognitive & Diagnostic Evaluation (Dr. Boatwright)
January – February	**Psychodynamic Integration and Relational Practice**	• Psychodynamic Case Formulation and Object Relations Concepts (Dr. Inzinna) • Working with Transference and Countertransference • The Role of Avoidance and Emotional Exposure in Psychotherapy (Dr. Inzinna) • Couples Therapy and Attachment Processes (Guest Lecturer: *Bari Smelson, PhD, LCSW*) • Assessment Integration II: Personality Assessment and Case Feedback (Dr. Boatwright)

March – April	**Advanced Intervention and Multicultural Applications**	• Integrative Approaches to Complex and High-Acuity Cases • Working with Serious Mental Illness and Schizophrenia Spectrum Disorders (Dr. Inzinna) • Youth and Family Systems Intervention (Juan Carlos Espinal, LMSW) • Perinatal and Women's Mental Health (Emily Underwood, PsyD) • Multicultural Case Conceptualization and Anti-Racist Practice • Peer Consultation and Reflective Practice Workshop
May – June	**Supervision, Assessment, and Professional Identity**	• Models and Ethics of Clinical Supervision • Giving and Receiving Feedback in Supervision • Professional Boundaries and Self-of-the-Therapist Work • Integrating Research, Case Data, and Clinical Judgment • Advanced Assessment: Integrated Report Writing (Dr. Boatwright)

July – August	**Integration, Leadership, and Transition to Practice**	• Private Practice, Insurance Systems, and Sustainable Care (Dr. Inzinna, Mr. Espinal) • Legal and Ethical Issues in Postdoctoral and Independent Practice • Consultation and Interdisciplinary Collaboration • Leadership, Advocacy, and Mentorship in Psychology • Case Presentations and Capstone Seminar (All Faculty)

Supplemental Learning Opportunities

- **Monthly Case Conferences:** Intern-led case presentations with faculty feedback.
- **Quarterly Interdisciplinary Meetings:** Collaboration and systems discussion with the DIPS clinical team.
- **Research and Reflective Practice Seminars:** Monthly integration of outcome data, clinical process, and the DIPS model of avoidance and exposure.

Sample Weekly Schedule – Doctoral Psychology Intern

(Typical Week: September–August; 37–40 hours total)

Day	Time	Activity	Format / Supervisor
Monday	9:00–10:00 AM	Administrative tasks, EMR documentation, session prep	Telehealth
	10:00 AM–12:00 PM	Individual Psychotherapy (2 sessions)	Telehealth/In-person
	12:00–1:00 PM	Lunch	—
	1:00–3:00 PM	Didactic Seminar (Evidence-Based Practice / Ethics / Diversity)	Group – Dr. Inzinna, Dr. Boatwright, or guest lecturer
	3:00–5:00 PM	Group Therapy / Couples or Family Session	Telehealth/In-person
Tuesday	9:00–10:00 AM	Individual Supervision	Dr. Inzinna

	10:00 AM–12:00 PM	Individual Psychotherapy (2 sessions)	Telehealth
	12:00–1:00 PM	Lunch	—
	1:00–3:00 PM	Psychological Assessment – administration, scoring, report writing	Dr. Boatwright
	3:00–4:00 PM	Team consultation and case review	Hybrid
Wednesday	9:00–10:30 AM	Youth and Family Development Meeting	In-person – Juan Carlos Espinal
	10:30 AM–12:30 PM	Individual/Couples Therapy	Telehealth
	12:30–1:30 PM	Lunch	—
	1:30–3:30 PM	Group Supervision / Case Conference	Dr. Inzinna & Peers

	3:30–5:00 PM	Documentation and outcome tracking	Telehealth
Thursday	9:00–11:00 AM	Psychological Assessment Feedback or Intake Evaluations	Dr. Boatwright
	11:00 AM–12:00 PM	Lunch	—
	12:00–2:00 PM	Didactic Seminar (Special Topics: Trauma, Perinatal Mental Health, Object Relations Couples Therapy)	Emily Underwood, PsyD/ Bari Smelson, PhD, LCSW
	2:00–5:00 PM	Individual Psychotherapy / Risk Assessment / Case Documentation	Telehealth
Friday	9:00–10:00 AM	Individual Supervision (Process and Integration)	Dr. Inzinna
	10:00 AM–12:00 PM	Client Sessions (2)	Telehealth/In-person
	12:00–1:00 PM	Lunch	—

	1:00–3:00 PM	Research / Outcome Tracking / Reflective Practice Seminar	Inzinna Research Lab
	3:00–4:00 PM	Weekly Review & Professional Development Planning	Hybrid

Weekly Totals:

- Direct Clinical Service (Individual, Family, Group): **22–25 hours/week**
- Supervision (Individual + Group): **4 hours/week**
- Didactic Seminars: **2 hours/week**
- Assessment: **3–4 hours/week**
- Documentation/Professional Development: **5–6 hours/week**
- Optional Research/Reflective Seminar: **1–2 hours/week**

Notes

- All interns maintain at least **25% face-to-face clinical contact** and receive a **minimum of four hours of supervision** weekly.
- Didactic seminars rotate between evidence-based interventions, ethics, diversity, and specialty topics such as **trauma, perinatal mental health, and couples therapy**.
- Optional in-person meetings are held quarterly at the Upper East Side office for team-building, training, and clinical collaboration.

DUE PROCESS POLICY

Effective Date: September 1, 2026
Approved By: Greg Inzinna, PsyD – Director of Clinical Training
Last Revised: October 21, 2025

The following policy outlines the procedures and standards governing ***Due Process and Remediation*** *for psychology interns enrolled in the* ***Doctoral Internship in Health Service Psychology*** *at* ***Dr. Inzinna Psychological Services PLLC (DIPS)****.*

This document is provided to all interns at the beginning of the training year and is reviewed during orientation. It is intended to ensure fair, consistent, and educational management of intern performance concerns in accordance with the ***APA Ethical Principles of Psychologists****,* ***APPIC Membership Criteria****, and* ***New York State law****.*

All interns must acknowledge receipt and understanding of this policy as part of the internship onboarding process.

Due Process and Remediation Policy

The **Due Process and Remediation Policy** ensures that concerns about intern performance are addressed in a fair, consistent, and educational manner. This policy is designed to protect both the intern and the training program by providing a transparent process for identifying problems, developing remediation plans, and determining outcomes that promote professional growth while safeguarding client welfare and program integrity.

This policy aligns with the **APA Ethical Principles of Psychologists**, the **APPIC Membership Criteria**, and the **APA Standards of Accreditation for Health Service Psychology**.

Guiding Principles

- Interns receive regular, constructive feedback from supervisors throughout the year.
- Concerns are addressed promptly, respectfully, and with clear communication.
- Interns are entitled to notice, explanation of concerns, the opportunity to respond, and the right to appeal decisions.
- All remediation actions are documented and maintained confidentially.
- The goal of due process is educational, not punitive, and supports the intern's professional development.

Rights and Responsibilities

Intern Rights: clear written expectations of performance; timely and specific feedback; written notice of concerns; opportunity to respond; access to remediation; and a fair appeal process.

Intern Responsibilities: maintain professional and ethical conduct; respond to supervision and feedback; and engage actively in remediation when needed.

Program Rights: expect ethical and competent performance; implement remediation when concerns persist; document actions taken; determine administrative outcomes when necessary to protect clients and program integrity.

Program Responsibilities: provide adequate supervision and feedback, apply procedures consistently, and ensure fairness and non-retaliation.

Definition of a Performance Concern

- A performance concern is a behavior, attitude, or skill deficit that significantly interferes with an intern's ability to achieve the program's training aims or provide competent, ethical services.

Examples include but are not limited to:

- Failure to meet competency benchmarks across the nine APA Profession-Wide Competencies;
- Ethical or legal violations;
- Unprofessional or inappropriate conduct;
- Excessive absenteeism or failure to complete assignments;
- Emotional instability or distress that impairs performance.

Identification and Notification

When a supervisor identifies a concern about intern performance, the issue is first discussed informally in supervision. The supervisor documents the concern and outlines specific expectations for improvement. Due process is initiated when a performance concern related to behavior, professional conduct, or competency attainment is identified and either (a) informal supervisory efforts have not resolved it within a reasonable time frame or (b) the concern is sufficiently serious to warrant formal review.

If the issue persists or is serious enough to warrant formal review, the supervisor notifies the **Director of Clinical Training (DCT)**, who determines whether a **formal remediation plan** is necessary.

Remediation Process

Remediation is a collaborative, time-limited, and structured process that includes specific goals, timelines, and supports.
Steps may include:

1. **Informal Feedback**
    - Supervisor discusses the concern with the intern and documents the meeting.
2. **Written Warning**
    - If problems persist, the DCT issues a written notice outlining the concern, expected changes, and timeframe for improvement (typically 30–90 days).
3. **Individualized Remediation Plan (IRP)**
    - Developed collaboratively by the intern, supervisor, and DCT.
    - The plan includes:
        - Specific performance issues and measurable objectives;
        - Methods and resources for improvement (e.g., increased supervision, readings, observation);
        - Timelines and review dates;
        - Potential consequences if goals are not met.
4. **Hearing**
    - If concerns persist or the intern disputes the findings, the Training Director convenes a Hearing including the intern, the primary supervisor, and at least one licensed psychologist not previously involved. The intern may submit a written response and may bring a support person (non-advocate). The panel reviews documentation, meets with the intern, and issues a written recommendation within ten business days.
5. **Probation**
    - If the intern does not meet the terms of the IRP, the DCT may place the intern on formal probation.
    - The intern's doctoral program Director of Clinical Training is notified.
    - Probation involves intensified supervision, restricted duties, and clearly defined conditions for return to good standing.

6. **Suspension or Administrative Leave**
   - Used when client welfare or ethical standards are at immediate risk.
   - The intern may be temporarily removed from direct service pending review.
7. **Dismissal from Internship**
   - Considered only when remediation and probation fail or when severe ethical, legal, or professional violations occur.
   - Dismissal decisions are made by the DCT in consultation with supervising psychologists and the intern's doctoral program.

Documentation

All remediation activities and outcomes are documented and signed by the intern, supervisor, and DCT.
Copies are maintained in the intern's confidential training file and shared with the intern's doctoral program when relevant to training status or licensure readiness.

Appeal Process

Interns have the right to appeal any remediation, probation, or dismissal decision.

1. **Written Appeal:**
   The intern submits a written appeal to the **Director of Clinical Training** within **five (5) business days** of the decision.
2. **Review Panel:**
   The DCT convenes a **Review Panel** of two supervisors not involved in the initial decision within **ten (10) business days**. The panel meets with the intern, reviews documentation, and issues a written recommendation.

3. **Final Decision:**

The DCT reviews the recommendation and issues a **final written decision** within **five (5) business days**.

The final decision is communicated to the intern, supervising faculty, and the intern's doctoral program.

Final Appeal (Beyond Training Director)

If the intern disagrees with the decision of the Training Director, they may submit a secondary written appeal within ten business days to the Director of Assessment (or a licensed psychologist not previously involved). A written decision will be issued within fifteen business days and is final.

Records of the appeal are stored in the intern's training file. Retaliation for initiating an appeal is strictly prohibited.

Outcome of Remediation

At the conclusion of the remediation period, one of the following outcomes is determined:

1. Successful completion and return to good standing;
2. Extension of the remediation plan with revised goals; or
3. Escalation to probation or dismissal.

Philosophy

Due process at DIPS is guided by the belief that supervision and feedback are both evaluative and educational. The purpose of remediation is to foster self-awareness, professional competence, and ethical practice, while ensuring client safety and the integrity of the training program.

Acknowledgment of Receipt

I acknowledge that I have received and reviewed the **Due Process and Remediation Policy** for the **Doctoral Internship in Health Service Psychology** at **Dr. Inzinna Psychological Services PLLC (DIPS)**. I understand its contents and agree to comply with the procedures described herein.

Intern Name: _____
Signature: _____
Date: _____

Director of Clinical Training: _____
Signature: _____
Date: _____

INTERN GRIEVANCE POLICY

Intern Grievance Policy

Effective Date: September 1, 2026
Approved By: Greg Inzinna, PsyD – Director of Clinical Training
Last Revised: October 21, 2025

*The following policy outlines the procedures for addressing **intern grievances** within the **Doctoral Internship in Health Service Psychology** at **Dr. Inzinna Psychological Services PLLC (DIPS)**.*

*This policy ensures that all concerns or complaints raised by interns—regarding supervision, program functioning, or the work environment—are handled fairly, promptly, and without retaliation. It is consistent with the **APA Ethical Principles of Psychologists**, **APPIC Membership Criteria**, and **New York State law**.*

The policy is reviewed with all interns during orientation, and interns are required to acknowledge receipt and understanding of the policy as part of the onboarding process.

Intern Grievance Policy

I. Purpose

The **Intern Grievance Policy** provides interns with a formal mechanism for addressing concerns or complaints that arise during the training year. The policy aims to promote transparency, fairness, and accountability, ensuring that interns' voices are heard and their concerns resolved in a professional, non-retaliatory environment.

II. Scope

This policy applies to all psychology interns participating in the Doctoral Internship in Health Service Psychology at DIPS. A grievance may relate to **any aspect of the internship experience**, including but not limited to supervision, evaluation, workload, resources, program policies, working conditions, stipend/benefits, interpersonal concerns, or harassment.

Intern grievances may include, but are not limited to:

- Concerns about supervision, workload, or evaluation;
- Alleged unfair or discriminatory treatment;
- Harassment or hostile work environment;
- Retaliation for reporting ethical or legal violations;
- Disagreement with a remediation plan or performance evaluation;
- Interpersonal conflicts that impair training or professional functioning.

III. Informal Resolution

Interns are encouraged to address concerns directly with the person or supervisor involved, whenever feasible. Many issues can be resolved effectively through direct communication, mediation, and collaboration.

If the intern feels unable to address the concern directly, or if informal resolution does not resolve the issue, the intern may proceed to the **formal grievance procedure** outlined below.

IV. Formal Grievance Procedure

1. **Written Submission:**
   The intern must submit a written grievance to the **Director of Clinical Training (DCT)** within **30 calendar days** of the incident or discovery of the

concern. The written grievance should describe the issue, the steps taken to address it informally (if any), and the requested resolution.

2. **Review and Acknowledgment:**
   The DCT will acknowledge receipt of the grievance within **five (5) business days** and conduct a review that may include interviews, documentation review, and consultation with relevant parties.
3. **Written Response:**
   The DCT will issue a written decision within **30 calendar days**, outlining findings and actions taken.
4. **If the Grievance Involves the DCT:**
   If the grievance involves the DCT or a conflict of interest exists, the intern may submit the grievance to another licensed supervisor or designated training faculty member. That individual will convene a **Grievance Review Panel** of two staff members not directly involved in the issue.
   The panel will review the documentation, meet with the intern, and issue a written recommendation within **45 calendar days**.
5. **Final Review:**
   If the intern disagrees with the panel's outcome, they may request a **final review by an external consultant psychologist** unaffiliated with DIPS. The consultant's recommendation will be reviewed by the DCT for final determination.

All records of grievances and outcomes will be kept confidential and stored securely in the training program's files.

V. Confidentiality and Non-Retaliation

All grievances are handled with the highest degree of confidentiality consistent with ethical and legal obligations.

Retaliation against any intern who raises a concern or grievance in good faith is strictly prohibited and will itself be subject to corrective action under program policy.

VI. Documentation and Recordkeeping

All written grievances, decisions, and related correspondence are stored in a confidential training file maintained by the DCT. Grievance documentation is not included in the intern's evaluation file unless it directly relates to professional conduct or competency.

VII. Acknowledgment and Review

This policy is reviewed with interns at orientation, and all interns are required to acknowledge receipt and understanding of its contents. A signed acknowledgment form is maintained in the intern's training file.

Acknowledgment of Receipt

I acknowledge that I have received and reviewed the **Intern Grievance Policy** for the **Doctoral Internship in Health Service Psychology** at **Dr. Inzinna Psychological Services PLLC (DIPS)**. I understand the procedures for addressing grievances and my rights to confidentiality and protection from retaliation.

Intern Name: _____
Signature: _____
Date: _____

Director of Clinical Training: _____
Signature: _____
Date: _____

Benefits and Resources

The **Doctoral Internship in Health Service Psychology** at **Dr. Inzinna Psychological Services PLLC (DIPS)** offers competitive compensation and professional support consistent with APPIC standards for private-practice–based training sites. The program is committed to providing an equitable, inclusive, and supportive environment that promotes both professional and personal well-being.

Stipend and Schedule

- **Stipend:** $35,000 for the 12-month training year (September–August).
- **Schedule:** Full-time, approximately 37–40 hours per week (≈2,000 hours annually).
- **Setting:** Hybrid — in-person and HIPAA-secure telehealth. Interns must reside in New York State.

Leave and Holidays

- **Personal Leave:** 10 days of paid personal time.
- **Professional Development Leave:** Up to 3 additional days for conferences, dissertation defense, or other approved professional activities.
- **Holidays:** All New York State and federal holidays recognized by the practice.
- **Sick Time:** Provided as needed, consistent with New York State Paid Sick Leave regulations.

Training Resources

- Access to **HIPAA-compliant telehealth platform**, electronic health record (EHR) system, and secure cloud-based file storage.
- In-person office space on the **Upper East Side of Manhattan** for clinical work, supervision, and team meetings.

- Library of **testing materials, scoring programs, and digital assessments** (e.g., WAIS-V, MMPI-3, PAI).
- **Didactic materials, reading lists, and research resources** provided via the DIPS training portal.
- Interns are issued a professional DIPS email address and secure access credentials for all clinical systems.

Supervision and Mentorship

Interns receive a minimum of **four hours of weekly supervision**, combining individual and group formats, with additional access to faculty between meetings as needed. Supervisors and staff foster a culture of openness, collaboration, and mentorship, emphasizing both professional development and personal growth.

Professional Development Opportunities

- Participation in **didactic seminars** and **case conferences** led by DIPS faculty and guest lecturers.
- Optional involvement in the **Inzinna Research Lab** for data collection and applied research experience.
- Ongoing **exposure to private practice management**, including billing, compliance, and marketing systems.
- Opportunities to **present at local and regional professional meetings**.

Workplace Culture and Support

DIPS fosters a supportive and inclusive environment that values curiosity, reflection, and authenticity. Interns are encouraged to balance clinical training with self-care and professional exploration. The small, collaborative nature of the practice allows interns to work closely with supervisors and peers in a community of mutual respect and learning.

Eligibility and Application Information

The **Doctoral Internship in Health Service Psychology at Dr. Inzinna Psychological Services PLLC (DIPS)** welcomes applications from advanced doctoral students seeking generalist training in outpatient clinical practice within an integrative, developmental–relational framework.

Eligibility Criteria

Applicants must:

- Be currently enrolled in an **APA- or CPA-accredited doctoral program in clinical or counseling psychology**;
- Have completed a minimum of **three years of graduate training**, including **at least 500 direct clinical hours** of supervised practicum experience;
- Have passed comprehensive examinations and completed all core coursework prior to the start of internship;
- Be certified as ready for internship by their **Director of Clinical Training (DCT)**; and
- Reside in or relocate to **New York State** by the start of the internship year to meet licensure and telehealth regulations.

Preference is given to applicants who demonstrate:

- A strong interest in **integrative, evidence-based psychotherapy**;
- Experience or coursework in **cognitive-behavioral, psychodynamic, or family systems** approaches;
- Familiarity with **telehealth practice** or hybrid service delivery;
- Commitment to **cultural humility**, **equitable care**, and **reflective supervision**; and
- Clear professional goals aligned with outpatient, community-based, or private-practice settings.

Application Process

Applications are accepted through the **APPIC Application for Psychology Internship (AAPI Online)** portal. A complete application includes:

1. **Completed AAPI Online application form**
2. **Cover letter** tailored to the DIPS internship, describing the applicant's clinical interests, training goals, and fit with the program's model
3. **Curriculum vitae (CV)**
4. **Official graduate transcripts**
5. **Three letters of recommendation**, including at least one from a current or recent clinical supervisor

Applications are reviewed by the **Training Committee**, consisting of core faculty and supervisors. Selected applicants will be invited for **virtual interviews** via HIPAA-secure teleconference.

Important Dates

- **Application Deadline:** December 1, 2025
- **Interview Invitations Sent:** Mid-December 2025
- **Virtual Interviews Conducted:** January 2026
- **Notification and Match Participation:** Dr. Inzinna Psychological Services PLLC (DIPS) has submitted an application for APPIC Membership, which is currently under review by APPIC. Please be advised that there is no assurance that this application will be approved. At present, DIPS is not a member of APPIC and is not approved for participation in the APPIC Match.

Equal Opportunity Statement

Dr. Inzinna Psychological Services PLLC (DIPS) is committed to fostering an inclusive, equitable, and respectful training environment. The program values diversity as essential to clinical competence and the ethical practice of psychology.

DIPS does not discriminate on the basis of **race, color, ethnicity, national origin, religion, gender, gender identity or expression, sexual orientation, age, disability, socioeconomic status, marital status, or veteran status** in any aspect of recruitment, hiring, training, or employment.

The internship actively encourages applications from individuals from **historically underrepresented and marginalized groups** and welcomes trainees whose experiences, backgrounds, and perspectives enrich the profession's collective understanding of human behavior and psychological well-being.

Certificate of Internship Completion

Upon successful completion of the **Doctoral Internship in Health Service Psychology**, interns receive a formal **Certificate of Internship Completion** from **Dr. Inzinna Psychological Services PLLC**.

This certificate verifies that the intern has completed:

- A full-time, **12-month (≈2,000-hour)** training program in health service psychology;
- Supervised experience consistent with the **APA Standards of Accreditation** and **APPIC Membership Criteria**; and
- Demonstrated competence across all **nine Profession-Wide Competencies** identified by the APA.

The certificate is signed by the **Director of Clinical Training** and the **Supervising Psychologists** and includes the start and end dates of the training year. A copy is provided to the intern's doctoral program upon completion.

Contact Information

For questions about the application process or training program, please contact:

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Dr. Inzinna Psychological Services PLLC
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Email: carlos@drinzinna.com | Phone: (914) 817-8755

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