



Dartmouth Psychology Internship Handbook

Training Year 2026-2027

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Orientation Schedule

June 30, 2026
9:00am-12:00pm

- I. Introductions, Welcome by Robert Brady, Training Director
- II. Internship overview
 - A. Handbook Structure
 - B. Area Overview and Training Sites
 - C. Dartmouth Health, Dartmouth-Hitchcock and Department Organization
 - D. Professional Code of Conduct – Dartmouth Health
 - E. Supervisor Assignments
 - F. Training Plans
 - G. Seminars
 - H. Due Process
 - I. Grievance Policy
- III. Procedures and Details
 - A. Tracking Hours (direct service, supervision, seminars)
 - B. Vacation/Sick/Professional Leave (review form)
 - C. Benefits
 - D. Mental Health Referrals
 - E. Site Orientations

Other site orientations will be completed in the first two weeks of training year.

*Note that this handbook and a variety of other resources are available on our SharePoint site accessible through the Dartmouth Health network at [Psychology Training Programs - Home](#). View Trainee Documents from that site for more information.

Internship Setting

Lebanon, New Hampshire is situated in the Connecticut Valley region along the border of New Hampshire and Vermont. It is a quintessential New England town, characterized by a small town feel, but with all of the amenities that you would expect from a city that is home to the largest medical center in the state. The population estimate of Lebanon is 13,500, with a daytime population of approximately 30,000 people. Lebanon is the largest city in Grafton County, which combines with neighboring Orange and Windsor Counties to form the Lebanon Micropolitan Statistical Area, with an estimated area population of 218,000. Founded in 1761, Lebanon has a rich history and serves as a cultural hub for residents living in the surrounding cities along the Connecticut River, known as the Upper Valley.



As home to Dartmouth-Hitchcock Medical Center, the Dartmouth Cancer Center, and several high-profile companies, Lebanon's business community is dynamic and diverse. Lebanon offers an extremely active and accessible recreation program that stretches from preschool aged children to senior citizens. Lebanon has the distinction of being ranked 3rd in the *"100 Best Small Towns in America."* Lebanon is a full-service community and serves as the central service center for the Upper Valley. Lebanon is characterized by ridgelines, surrounding the bottomlands of the Mascoma and Connecticut Rivers, which are accented by a number of prominences giving Lebanon's terrain a strong, undulating form. The Mascoma River serves a dual role of linking the eastern and western ends of the city and of partitioning the north from the south. The city is approximately 60 miles from Concord, the state capital; 120 miles from Boston; and 120 miles from Burlington, Vermont. The climate consists predominantly of mild, sunny summers and cold, snowy winters, perfect for afternoon hikes and outings in the summer, and exciting ski and snowshoe adventures in the winter.

Dartmouth College is located in the neighboring town of Hanover, NH, which is a 15 minute drive from the heart of Lebanon. Geisel School of Medicine is the medical school of Dartmouth College and is housed on the Dartmouth College campus. Geisel School of Medicine was founded in 1797 and is one of the nation's oldest medical schools. It is one of seven Ivy League medical schools and is consistently ranked as among the best medical school in the United States. Geisel School of Medicine is home to approximately 700 students, including those from medical and other graduate programs. Medical residents and students obtain their basic medical education and training on the Dartmouth College campus, as well as at clinical sites located within Dartmouth-Hitchcock Medical Center, White River Junction Veterans Administration Medical Center, California Pacific Medical Center, and Indian Health Service medical centers.



A full listing of community and area resources and attractions is included in Appendix D at the conclusion of this handbook.

Training Sites

Dartmouth-Hitchcock Medical Center (DHMC)

DHMC is located in Lebanon, New Hampshire and is the flagship facility of Dartmouth Health. DHMC is the regional academic medical center where faculty and trainees of Geisel School of Medicine at Dartmouth provide direct care to patients from throughout New England.



The Department of Psychiatry at DHMC maintains an outpatient practice in child and adult services and manages the hospital's psychiatric inpatient and partial hospitalization units. Psychiatric emergency services are provided to the hospital's emergency department. The Department of Psychiatry also runs the neuropsychology service. Approximately 10,000 patients per year receive some type of service from one of the Department's units at the Medical Center. Approximately 4,000 adults and 1,300 children receive outpatient medication management and psychotherapy per year. Approximately 650 patients are seen per year within the Department's Neuropsychology service. All interns in the Dartmouth Psychology Internship Program spend a significant amount of the training year in the outpatient clinics of the Department of Psychiatry. Additionally, interns may complete services through other specialty medicine outpatient clinics of DHMC where psychologists play an integral role in multidisciplinary teams. Beginning in 2025, the Child & Pediatric Track intern spends up to one day per week in the new child and adolescent inpatient unit.

Hanover Psychiatry

Hanover Psychiatry, located in Hanover, NH, is a community-based psychiatric and psychological practice offering evidence-based treatment and evaluation, and is a division of the Department of Psychiatry. The practice frequently provides services to Dartmouth College students and faculty, as well as members of the surrounding communities. All clinicians practicing and supervising at Hanover Psychiatry are faculty of the Department of Psychiatry at Geisel School of Medicine at Dartmouth. This has produced a team of highly skilled professionals who remain abreast of best practices in mental health services. In addition to offering clinical services, Hanover Psychiatry staff clinicians are also involved in research projects, teaching and supervising junior faculty, residents, and interns. Treatment approaches utilized at Hanover Psychiatry include cognitive-behavioral therapy (CBT), dialectical behavior therapy (DBT), exposure and response prevention (ERP), mindfulness-based interventions, and trauma-focused interventions (e.g., CPT). One Adult Psychology Track intern spends one day per week at Hanover Psychiatry. Hanover Psychiatry operates on a self-pay model of service, such that patients pay out-of-pocket for their services, and then request reimbursement from their insurer. This process allows for a more flexible scheduling and service delivery model for the patients utilizing these services.

New Hampshire Hospital (NHH)

Located in Concord, NH the New Hampshire Hospital (NHH) was established in 1842 as the only state hospital for NH. NHH is the State psychiatric facility providing acute stay services, neuropsychology services, and transitional housing services to adult populations. Numerous inpatient units and facilities are located on this 120 acre campus. On their NHH rotation, neuropsychology track interns are able to care for patients in the inpatient setting, where the majority of patients have been committed on an involuntary basis, and typically represent the most acutely ill patients in the state. Services are designed to address



the acute symptoms of patients who are hospitalized for a brief length of stay. These services are an integral part of the treatment program at NHH and include neuropsychological testing and consultations with attending psychiatrists and treatment teams. NHH works closely with the community mental health programs across New Hampshire to optimize the continuity of care for psychiatric patients. NHH treats approximately 2,000 admissions annually. The hospital has bed capacity for 160 adults and 20 children for a total daily capacity of 180 patients. Interns in the Adult Neuropsychology Track position conduct neuropsychological assessment for inpatients of NHH.

Sununu Youth Services Center

The Sununu Youth Services Center (SYSC) is a 144-bed inpatient treatment facility in Manchester, NH for youth (ages 13-17) interacting with the justice system who benefit from intensive psychiatric care. SYSC is a primarily forensic setting, providing the intern with an experience delivering mental health services to a complex youth patient population. The goal at SYSC is to provide youth with ongoing assessment of their needs and strengths, as well as comprehensive mental health treatment. Treatment focuses on stabilization, mitigation of risk, and preparing youth for a successful return to the community, with reunification as a primary goal. Treatment services include individual and group therapy as well as diagnostic evaluation and assessment. The Pediatric Neuropsychology Track intern provides therapy and evaluation services at SYSC.

Overview of Internship Organization and Governance

This internship program is sponsored by Dartmouth Health and is housed within the Department of Psychiatry at Dartmouth-Hitchcock Medical Center. Dr. Robert Brady is the Training Director of the internship program. Dr. James Craig is the Associate Director of the internship program. Dr. Will Torrey is the Chair of the Department of Psychiatry. Dr. Julie Frew is the Vice Chairman of Education and Training within the Department and is the Chair of the Psychiatry Education Committee, which oversees all educational training experiences within the Department's functions. Dr. Kay Jankowski is the Discipline Lead for Psychology. Dr. Brady is the Director of Psychology Postdoctoral Training and Dr. Robert Roth is the Director of Neuropsychology Postdoctoral Training.

Each intern is assigned a Professional Development Supervisor based on fit between the intern's career goals and supervisor's career trajectory. The Professional Development Supervisor is responsible for guiding the intern throughout the training year and ensuring a consistent fit between training activities and career goals. This includes consultation regarding management of day-to-day activities, schedule management, and case assignment. They also work with the intern to ensure that the training year is progressing along the intern's stated training plan. Most importantly, the Professional Development Supervisors serve as professional mentors and advocates for the interns.

Didactic learning is a critical component of a thorough training experience. A didactic is a seminar-style lecture, often structured with a guiding theme. All didactics feature a formal presentation provided by a faculty member with expertise in the topic that they present. These are most often held in-person and on-site, though remote learning may also occur. The goal of didactic training is to expose interns to special topics in psychology to broaden their knowledge base, or to further their knowledge in a specific domain. Our didactics are structured according to the training competencies stipulated by the American Psychological Association and reflect the strengths of the Department of Psychiatry at Dartmouth-Hitchcock Medical Center and the educational mission of Geisel School of Medicine. These include an emphasis on clinical practice, research, and professional development. All interns attend three common didactics: Psychiatry Grand Rounds, Research Seminar, and Professional Development Seminar. Interns in the Adult and Child & Pediatric Psychology Tracks attend the Clinical Practice Didactic and the Adult and Pediatric Neuropsychology Track interns attend the Neuropsychology Didactic. Both of these occur on Fridays 8:30-10:00am (schedules located in Appendices).

The Training Director is responsible for the development and steering of the program, as well as resolution of any administrative problems (i.e., at the departmental level). The Training Director also resolves any problems that may arise between an intern and their Professional Development Supervisor, and acts as an advocate for the interns' training and career development needs. The interns meet as a group with the Training Director monthly for the first six months of the training year, with an office hours held on the first Friday of the month from 10am-12pm each subsequent month, to resolve any issues that have arisen for the intern or program. *But really, the Training Director is always available.* Interns are strongly encouraged to bring any issues to the attention of the Training Director, Professional Development Supervisor, or any clinical supervisor at any time.

Employment and Benefits

Interns are employed as staff of Dartmouth Health and receive the standard benefits package for Health Professionals staff. This provides the intern with health insurance benefits and vacation, just as would be provided to all regular hospital staff. You can receive your medical care through Dartmouth-Hitchcock Primary Care or through a covered provider of your choosing. Please note that your insurance benefits do not begin until your *30th day of employment*. You may elect to extend your own insurance through your graduate school. You will also have access to Dartmouth College libraries through your Dartmouth Health computer.

Dental insurance is provided by Northeast Delta Dental. There are two levels, basic and enhanced. Coverage begins on the first day of your agreement. Short-term disability and long-term disability insurance coverage is provided at no cost to you. Professional liability coverage is provided to all trainees. Primary limits are \$1 million each claim and \$3 million aggregate. Trainees are covered by the Dartmouth Health Professional Liability Policy only when practicing within the scope of their hospital employment.

As an intern in the Department of Psychiatry, you have access to the Dartmouth College libraries system, including access to a wide variety of academic journals and other resources. You can access these resources while onsite or through the Citrix remote access app. To access the libraries online, navigate to the biomedical library site at [Medical and Health Sciences Libraries | Dartmouth Libraries](#) and select Dartmouth Health Faculty and Staff log in option. You can also visit the Matthews-Fuller Library at Dartmouth Hitchcock Medical Center on the 5th floor next to the rotunda where library staff are onsite to help with resource use.

Each intern is provided \$300 per training year to be used for items of an educational nature such as textbooks, educational conferences, conference travel and accommodations, subscriptions and membership in educational societies. These should be materials necessary for completion of training activities. "Necessary for completion of training activities" means that an intern needs a resource that is not otherwise available to them to satisfy a clinical or learning objective. These expenses should be preapproved by the Training Director prior to submitting for reimbursement. The submission process for this fund begins with filing the request using the following link:

<https://app.smartsheet.com/b/form/019dbbaffabf769b9186bad1cffe086b>. From there, the funds are approved by the Training Director, after which you will submit Concur reimbursement requests. Failure to request approval may result in denial of reimbursement. When in doubt, ask your Training Director. Funds are available 30 days after the start of the training year, which is July 1. These funds do not roll over from year to year. For the Concur reimbursement process, the "Workflow group" is Manager Approval, the business purpose is Academic Enhancement (221048), the Department is Psychiatry Admin (17110).

The department also sponsors a Travel Award for conference presentations. This is a benefit available to interns and other trainees presenting research as symposia or posters. The application for this award is accessed through the REDCap submission portal at <https://redcap.hitchcock.org/redcap/surveys/?s=NWLEP4NDJYJWCDHL>. Do note that you must apply for a conference sponsored travel award before seeking the department Travel Award. For the Concur reimbursement process, the "Workflow group" is Manager Approval, the business purpose is Academic Enhancement (221048), the Department is Psychiatry Admin

(17110), and the Project Code is PsychTraineeTrv. All receipts must be submitted through the Concur travel reimbursement portal within 30 days of purchase (not within 30 days of the date of travel). Additional funds may be available based on department specific educational resources; for more information, please contact the Training Director.

Finally, trainees required to travel to training sites outside of the Lebanon region are able to file for reimbursement for that travel using the Concur process. For trainees traveling to New Hampshire Hospital, the Concur “Workflow group” is Manager Approval, the business purpose is Business Travel—General, the Department is NH State Contracts (17105) and the Project is NHH Neuro Psych Contract (DGR15693). For trainees traveling to Sununu Youth Services Center, the business purpose is Business Travel—General (731215), the Department is NH State Contracts (17105) and the Project is State of NH Children, Youth & Families (DGR15714).

Vacation and Leave

Interns earn a total of 28 days of annual leave at a rate of 8.61 hours biweekly. This leave rate includes time covering paid holidays (New Year's Day, Memorial Day, Independence Day, Labor Day, Thanksgiving Day, Christmas Day), sick leave, and vacation leave. Any leave time required for extended family and medical leave will be unpaid time consistent with the Family and Medical Leave Act (FMLA), which may require extension of the training year. Interns can take leave for a maximum of five days in the final two weeks of the internship in order to prevent disruption of clinical services. Interns will notify the Training Director of planned leave at least one month in advance of the date of leave. Leave must also be documented in the weekly eTime tracking system to correctly pay for earned time. eTime is the system used to file your work hours for compensation and must be completed to process your paychecks. Failure to log your eTime may result in an inability to disperse your paychecks. See Caitlyn Beaulieu for any questions regarding submission of eTime.

Additional clinical coverage procedures:

1. Verbally sign out patients to the person who will be covering highlighting at-risk patients
2. Communicate the leave and clinical coverage using eD-H.
 - a. In eD-H, choose In Basket, then choose “Out.”
 - b. Choose “New”
 - c. Edit comment (e.g., out of office, vacation, etc.)
 - d. Choose dates.
 - e. Choose delegates (type the name if it is not one you have used before)
 - f. When done, choose accept.
3. Create an e-mail “leave message” that includes clinical coverage.
 - a. In Microsoft Outlook mailbox, click on File.
 - b. Click on Automatic replies.
 - c. Click on “Send Auto Replies” edit dates.
 - d. Click on “Dates” and edit accordingly.
 - e. Click on “Outside My Organization” and edit message accordingly. Click “OK” when done. This will send an automatic reply to any e-mailers both within and outside of the Hitchcock.org email system. These alerts will automatically shut off when the time you set expires.

Clinical coverage requirement in eD-H:

Clinical coverers have to remember that they are covering for someone since eD-H messages.

1. To cover:
 - a. Go to in basket
 - b. At the bottom left hand column along with “my in basket” and “my out basket” it will say “attached in baskets.” That is what you need to check to see the tasks to review.

SUPERVISION ASSIGNMENTS

2026-2027

Intern

Adult Psychology Track

Emily Burr

Professional Development

Krystal Badillo-Regan,
Ph.D./Emily Presseller, Ph.D.

Clinical Supervisors

Jessiy Salwen-Deremer, Ph.D.
Dan Mackin, Ph.D.
Elizabeth Lampe, Ph.D.
(supervised supervision)

Emma Toner

Robert Brady, Ph.D./Nick
Jacobson, Ph.D./Maddy
Frumkin, Ph.D.

Sivan Rotenberg, Ph.D.
Sarah Garnaat, Ph.D.
Chris Spofford, Ph.D.

Child & Pediatric Psychology Track

Allison Green

Katie Ahlers, Ph.D.

James Craig, Ph.D.
Katie Ahlers, Ph.D.
Jennie David, Ph.D.
Kira Alexander,
Ph.D./Caitlin
Courshon, Ph.D.

Adult Neuropsychology Track

Bailey Wagaman

Robert Roth, Ph.D.

Grant Moncrief, Psy.D.
Robert Roth, Ph.D.
Anna Graefe, Ph.D.
Evan Bick, Psy.D. (July-Dec)
Jason Blizzard, Ph.D. (Jan-June)
Felicia DiPietro, Psy.D. (July-Dec)
Grant Moncrief, Psy.D.
Robert Roth, Ph.D.
Anna Graefe, Ph.D.
Evan Bick, Psy.D. (Jan-June)
Jason Blizzard, Ph.D. (July-Dec)
Felicia DiPietro, Psy.D. (Jan-June)

Emily Dudek

Anna Graefe, Ph.D.

Pediatric Neuropsychology Track

Darian Weaver

Jonathan Lichtenstein, Psy.D.

Jonathan Lichtenstein, Psy.D.
Erica Krapf, Ph.D.
Samantha Morin, Ph.D.

Psychology Training Program Administrative Support

Caitlyn Beaulieu

Caitlyn.M.Beaulieu@hitchcock.org

Didactics

Didactic learning experiences are a critical component of a thorough training experience. A didactic is a seminar-style lecture, often structured with a guiding theme. All didactics will feature a formal presentation provided by a faculty member with expertise in the topic that they present. These are most often held in-person and on-site, though special opportunities for distance learning may also occur. Each didactic seminar is facilitated by a faculty member. The goal of the didactic training component is to expose the intern to special topics in psychology in order to broaden their knowledge base, or to further their knowledge in a specific domain. Our didactics are structured according to the training competencies stipulated by the American Psychological Association, and are consistent with the strengths of the Department of Psychiatry at Dartmouth-Hitchcock Medical Center, including clinical interventions, clinical research, and professional development. When didactics are attended remotely, interns will keep their cameras on to facilitate communication and discussion; the exception to this is Grand Rounds where cameras can be left off. Interns attend the following seminars:

Clinical Practice Didactic (Adult and Child & Pediatric Psychology Tracks)

The Clinical Practice Didactic features experts in a variety of clinical domains and areas of practice, including many from the Outpatient Psychiatry Clinic, National Center for PTSD, Hanover Psychiatry, the Dartmouth Trauma Interventions Research Center, and medical and mental health specialties at DHMC. The series typically includes presentations providing an overview of theories of psychopathology and its disorders, case formulation and clinical practice methods, and continues with topics relevant to specific treatment approaches, including cognitive behavioral therapies (exposure-based interventions, cognitive therapy, acceptance and commitment therapy), mindfulness- and acceptance-based interventions, and pharmacotherapies. These provide a nuanced application to specific clinical populations and problems. Post-doctoral fellows and interns are also required to present one presentation at the close of the academic year on a topic of their choosing, in consultation with the seminar facilitator. Flexibility is included in the schedule to allow for addition of topics that interns request at the beginning of the year. Additionally, the Adult and Pediatric Neuropsychology Tracks interns attend the first several weeks of the Clinical Practice Didactic prior to start of the Neuropsychology Didactic. The Clinical Practice Didactic is held on Fridays from 8:30-10am.

Facilitator: James Craig, Ph.D.

Professional Development Seminar

This seminar is designed to provide a forum to discuss issues relevant to the practice of psychology. Issues pertaining to career development, job search and experience, and other matters of relevance to development as an independent clinician and/or scientists are addressed. Interns attend this seminar with the Clinical Psychology and Neuropsychology post-doctoral fellows, as well as faculty members from the psychology services. This seminar takes place on the second Friday of each month from 10-11am. All meetings take place in the Weiss conference room at DHMC room unless otherwise stated.

Facilitator: Anna Graefe, Ph.D. and Robert Brady, Ph.D.

Neuropsychology Seminar (Adult and Pediatric Neuropsychology Tracks)

The weekly neuropsychology seminar is designed to further the Neuropsychology trainees' empirical knowledge base in human clinical neuroscience, build clinical skills, and facilitate progress towards board certification in clinical neuropsychology. This is accomplished via 1) trainee, fellow and guest speaker presentations related to neuropsychological, neuroimaging and other aspects of disorders seen for neuropsychological evaluations (e.g., epilepsy, TBI, dementia); 2) discussion of clinical issues and practices pertinent to functioning as a neuropsychologist; 3) neuropsychology case presentations and group supervision; and 4) exposure to and experience with ABPP neuropsychology case fact finding. Each trainee is expected to present at least once on a topic of interest, in consultation with a faculty member, as well as serving in turn as examinee and examiner for at minimum one fact finding case during the year. The neuropsychology seminar is held on Friday mornings from 8:30-10am and runs from September to June.

Facilitator: Robert Roth, Ph.D. and Jonathan Lichtenstein, Psy.D.

Business of Psychology

The Business of Psychology seminar is designed to provide exposure to practical aspects of functioning as a psychologist within the larger healthcare system. This seminar series is attended by the psychology interns and postdoctoral fellows on a monthly basis. Presenters include psychologists and administrators with expertise in healthcare operations. Attendees can expect to learn about billing and reimbursement procedures, models of financial sustainment of psychological services, and the ethics of working in a system that balances high quality care with financial stewardship. The seminar is held on the fourth Friday of each month from 11am-12:30pm in the Weiss Conference room or online via Webex.

Facilitator: Sivan Rotenberg, Ph.D.

Other Didactic/Observational Experiences

All interns attend the Grand Rounds hosted by the Department of Psychiatry, in person when scheduled at in person. Grand Rounds are held from 8:00-9:00am on Tuesdays beginning in mid-September and run until mid-June. Location is announced one month in advance, and is held in-person at DHMC and via WebEx. Neuropsychology interns also attend the Epilepsy Case Conference on Fridays from 3:00-4:30pm in the Radiology conference room at DHMC, and the Neurology Grand Rounds held on Fridays. Additional Grand Rounds offerings can be found at <https://www.dartmouth-hitchcock.org/health-care-professionals/online-grand-rounds>. Adult Track Interns attend a monthly psychotherapy case conference and psychology journal club, as well as a weekly Hanover Psychiatry team meeting for those interns placed at Hanover Psychiatry. Child & Pediatric Psychology Interns may attend Child and Adolescent Psychiatry Fellowship Didactics when these meet the intern's training needs. The Psychiatry Research Works in Progress is another optional didactic that can be beneficial for interns interested in research careers and is held monthly on the third Thursday at noon. Finally, the psychiatry residency maintains a weekly journal club held at noon on Fridays that interns are encouraged to attend. Additional didactic training events are routinely added during the year when opportunities arise that would clearly add to the interns' training.

Supervision & Evaluation

Supervision is a central component of the internship training experience. All interns receive four hours of individual supervision per week. Supervision methods include face-to-face supervision with and without video recordings of clinical service delivery, as well as live observation. Specifically, interns in the Neuropsychology Tracks will have a supervisor in the room for patient interviews and feedback sessions for the first two months of each rotation, and as needed for the remainder of the rotation. Test administration will be observed quarterly. Interns in the Adult and Child & Pediatric Psychology Tracks will use video recordings or live observation as a tool during supervision, such that each supervisor will observe directly or review two video recordings per evaluation period.

Evaluations are conducted at three points in the year (October, February, and June). Each evaluation is reviewed by the individual supervisor and intern in a collaborative manner. The evaluation period is not intended to be punitive, but rather, functions as an opportunity for the intern and supervisor to review areas of relative strength and weakness. This is then used to refine the goals and areas of emphasis for the supervisory process. The evaluations cover nine areas of professional competence, and uses quantitative and qualitative ratings. The completed evaluations are reviewed by the Training Director, with consultation from the professional development supervisor as needed. These evaluations are administered via REDCap, a secure electronic data collection platform, and stored in perpetuity. Copies of these evaluations are sent to Directors of Clinical Training of the interns' doctoral programs. Additional copies of these evaluations are provided to interns and doctoral programs upon request. The internship program emphasizes a "no surprises" policy, such that interns receive routine and ongoing feedback about performance throughout the year. In turn, the training faculty expects that interns provide information about satisfaction with training, so that any problems can be addressed in a timely fashion. An electronic copy of the evaluation form is included in the Appendix.

Within the first two weeks of the internship, the intern will complete a Training Plan, in which they will define their Clinical, Research, and Career goals for the internship training year. The Training Director and Professional Development Supervisor will meet with the intern to review the Training Plan before it is finalized. This document will serve as the outline for the intern's training year. Unless otherwise indicated, the Training Director does not have direct supervisory oversight of the interns during the training year; however, he is available for consultation as needed. Additionally, the Training Director works with the interns and their professional development supervisors to ensure timely application for fellowships or other future academic efforts during the year, and to facilitate modifications in an intern's training plan or training methods if needed. The Training Director also meets monthly with all interns as a group to discuss progress during the training year, and to address any programmatic needs.

Remote/Telehealth Services and Work Location

Outpatient telehealth intervention services are often utilized by patients and their providers as the preferred medium for care. Additionally, training in the use of telehealth technology and related intervention is increasingly an expectation for psychologists. The Department of Psychiatry supports delivery of services via telehealth. The Dartmouth Psychology Internship

Program has instituted a policy for telehealth and remote work for trainees. Psychology interns will work onsite for at least the first month of the internship for the dual purpose of developing a

sense of the workplace culture and ensuring comfort with clinical services and related technologies before transitioning to remote work. Some services and clinics have expectations for more onsite services (e.g., neuropsychology) and the timeline or availability of remote work in those locations will vary. Interns are encouraged to discuss readiness for remotely delivered services with the supervisors of those services after the first month of internship. Finally, a condition of remote work at Dartmouth Hitchcock is the availability of a private working space capable of maintaining confidentiality for patients. Interns may also choose to remain onsite for their services if they prefer.

Internship Hours

The intern is responsible for tracking all hours during which they are providing services or participating in academic activities directly related to their internship training. The internship program uses a simple Excel file to record these hours on a monthly basis. Please send completed forms to Dr. Craig at least monthly. The target number of clinical contact hours is 750 for the year, for an average of 15 hours per week (note that this is an average and may increase or decrease during the year). Interns with additional research effort have a modestly reduced clinical expectation to offset the increased research expectations.

Training and Use of AI Technology

The use of generative AI is a rapidly evolving practice where the speed of advances generally outpaces available policies, and for which many psychologists and other healthcare providers feel inadequately prepared. The internship program recognizes that use of AI is a “when, not if” situation and that training in the responsible, ethical, and effective use of these emerging and available technologies is a necessity. Accordingly, the program is adopting an adaptive policy that will inherently change with the availability and understanding of these practices. Currently, the program is using a policy in which use of AI in clinical documentation and other aspects of professional service is explicitly limited to the final four months of internship, beginning following the second evaluation point. The intention of this policy is to ensure that interns have sufficiently demonstrated adequate attainment of profession-wide competencies before using AI technology. Following the second evaluation period, individual supervisors are encouraged to begin supporting integration of AI technology into clinical services. Please speak to supervisors early in the year to understand their philosophy and use of AI in clinical services to begin your plan for accessing these services.

Research

The internship training year is intended to be the capstone clinical training experience for training as a psychologist; however, research is a critical component of the work of psychologists. As such, the Dartmouth Psychology Internship Program strongly encourages and supports an intern’s goal of engaging in research activities throughout the year. During the first two months of the internship year, all interns attend the Research Seminar, which provides an opportunity to learn about ongoing research projects within the department. The Training Director will readily meet with any intern to develop a relationship with those researchers presenting during the seminar, or others working within the department on topics relevant to the

interns' own research career goals. From there, the intern's schedule can be modified to designate time to meet with and collaborate with the researcher on an ongoing project, or begin development of a new project. All interns have the option of receiving up to four hours of protected research time. This time is intended for use to produce a new research product in the form of a published manuscript, symposium, or poster presentation over the course of the year. Interns are not required to use this time for research and may select additional clinical or other training and educational opportunities.

Research Rotation

For those interns planning to pursue a research career, we offer an optional yearlong research training rotation. This rotation is available on the basis on a match between an externally-funded senior research faculty and an incoming intern. The research rotation provides for up to one day of research and protected time during which the intern will receive mentored research training. Interns participating in this rotation attend a weekly mentoring meeting, lab meeting, and other didactic and experiential activities as indicated by their research mentor. The intern and mentor identify a planned project for the year that corresponds to the mentor's research and current funded studies. They participate as active members of the research team. The expected outcome of the research rotation is one or more tangible research products including but not limited to a manuscript for publication, national conference poster or symposium, grant proposal, or other. The intern's performance in their research rotation is included in the overall evaluation of the intern's performance in the program. Interested interns and applicants should contact the Training Director to inquire about the available faculty mentors for their training year.

Sample Schedules

Neuropsychology Track Sample Schedule:

July-Dec	Monday	Tuesday	Wednesday	Thursday	Friday
Dudek	NHH – NP (Moncrief)	DHMC – Clinical (Blizzard)	NHH – NP (Moncrief)	DHMC-NP/Research	DHMC-Didactics
Wagaman	DHMC – Clinical (DiPietro/Bick)	DHMC-NP (Roth)	DHMC – Clinical (DiPietro/Bick)	DHMC-NP (Roth)	DHMC-Didactics
Jan-June	Monday	Tuesday	Wednesday	Thursday	Friday
Wagaman	NHH – NP (Moncrief)	DHMC – Clinical (Blizzard)	NHH – NP (Moncrief)	DHMC-NP/Research	DHMC-Didactics
Dudek	DHMC – Clinical (DiPietro/Bick)	DHMC-NP (Roth)	DHMC – Clinical (DiPietro/Bick)	DHMC-NP (Roth)	DHMC-Didactics

	Monday	Tuesday	Wednesday	Thursday	Friday
8:00	NHH-NP	GR/Seminar	NHH-NP	Research	Didactics (Neuropsych Didactic)
9:00		DHMC-Clinical (5D Therapy)			
10:00					
11:00					
12:00		Lunch		Lunch	Lunch
1:00		DHMC-Clinical (5D Therapy)		Roth Supervision	Writing
2:00				Research	
3:00					
4:00					Writing

Adult Psychology Track Sample Schedule:

<u>Burr</u>	Monday	Tuesday	Wednesday	Thursday	Friday
8:00	WWC	GR/Seminar	MDS (5D)	WWC in person	Didactic

9:00		GI			
10:00					
11:00					
12:00	Psychology Services Meeting	Lunch	Lunch	Lunch	Lunch
1:00	WWC	GI	MDS (5D)	Research	Research
2:00					
3:00					
4:00					

<u>Toner</u>	Monday	Tuesday	Wednesday	Thursday	Friday
8:00	ADS (5D)	GR/Seminar	DCC	HP	Didactic
9:00		Research			
10:00					
11:00					
12:00	Lunch/Psychology Services Meetings 1st & 2nd Mondays	Lunch	Lunch/ADS Team Meeting 3rd Wednesday	HP Staff Meeting	Lunch
1:00	ADS (5D)	Research	DCC	HP	ADS (5D)
2:00					
3:00					
4:00					

Child & Pediatric Psychology Track Sample Schedule:

Child & Pediatric Psychology Track Camps Schedule:					
	Monday	Tuesday	Wednesday	Thursday	Friday
8:00	Outpatient/PANS	GR/Seminar	Outpatient/PANS	GNP	Didactic
9:00		AMP			
10:00					
11:00					
12:00	Lunch	Lunch	Lunch	Lunch	Lunch
1:00	RUBI	AMP	Pediatric GI	Research	Pediatric GI
2:00					
3:00					
4:00					

Pediatric Neuropsychology Sample Schedule:

	Monday	Tuesday	Wednesday	Thursday	Friday	
8:00	DHMC-NP (1 & 3 Mon) Consults Lunch DHMC-NP (1 & 3 Mon) Feedbacks and Supervision	GR/Seminar	DH-NP - PNC	SYSC-Clinical	Didactics (Neuropsych Didactic (8:30-10))	
9:00		Report Writing				Brain Imaging
10:00						
11:00					Lunch	
12:00						
1:00		Research				Writing
2:00					Epilepsy Surg	
3:00						
4:00						

Clinician Communication with Support Staff

Clinicians should communicate to support staff via eD-H Staff Message or email. Messages should be sent to both members of the office (Team A, Team B, Neuropsych, Scheduling). Every effort will be made to ensure that both members are not out of office on the same day, but if this occurs, be aware that email may not be effective at reaching them in a timely fashion.

Reminder – please message **P DHMC PSYCH COVID SUPPORT** for all appointments you have already verbally scheduled with your patient, an appointment that has a specific date and time.

Need something changed/updated URGENTLY – You can also secure chat the Psych Support Team group chat or call the Psychiatry department line at 603-650-7075 and hit option number 2 when you need something fast, and not sure who is onsite or who is on vacation. This will bring you to a secretary who can assist you. **Please note, staff are away from the phones and secure chat during 12:00-1:00 every day for lunch, and on Friday's from 9:30-10:30 for our weekly secretary team meeting.

Schedulers' Office – All clinical schedule edits and established patient appointment requests

- **Office Calls: 5-7075**
- Emails to: PsychiatryExitSchedulers@Hitchcock.org (Charlene Miller and Megan Reineman)
- eD-H staff messages to: P DHMC PSYCH SCHEDULERS

Support Team A – Child Psychiatry faculty, interns and fellows, child therapy providers

- **Office Calls: 5-7075**
- Emails to: PsychiatryTeamASupport@Hitchcock.org
- eD-H staff messages to: P DHMC PSYCH TEAM A

Support Team B – Adult prescribers, residents, interns, fellows, adult therapy providers

- **Office Calls: 5-7075**
- Emails to: PsychiatryTeamBSupport@Hitchcock.org
- eD-H staff messages to: P DHMC PSYCH TEAM B

Neuropsychology – Neuropsychology postdocs and interns, staff providers

- **Office Calls: 5-5824**
- Emails to: NeuropsychologySupport@hitchcock.org
- eD-H staff messages to: P DHMC PSYCH NEURO

Psychiatry Nurse – Adult Services & Child Services

- **Office Calls: 5-0213**

- Emails to: OutPatientPsychRN@Hitchcock.org
- eD-H staff messages to: P DHMC Psych Nurse

Resource Specialists – Adult & Crisis

- Adult Recourse Specialist – Ashley Newcity
 - **Office Calls: 5-6077**
 - Email to: Ashley.M.Newcity@hitchcock.org
 - eD-H Staff Messages to: Ashley M. Newcity
- Crisis Resources Specialist: Kristen Funari
 - **Office Calls: 5-1898**
 - Email to: Kristen.S.Funari@hitchcock.org
 - eD-H Staff Messages to: Kristen S. Funari

Master Scheduler (Kora Pratt)

Kassie Sarantopoulos – Drs. Torrey, Finn, AJ Horvath, Mike Amicangioli's assist

- **Calls: 5-7549**
- Emails to: Kassandra.E.Sarantopoulos@hitchcock.org

Health Information Services – For psychiatry medical records

- **Office Calls: 5-7110**
- Emails to: Lebanon.Release.of.Information@hitchcock.org

Addiction Treatment Program

- **Calls: 3-1860**
- eD-H staff messages to: RVM ADDICTION TREATMENT PROGRAM SECRETARY

TBD – Administrative Supervisor

- **Calls: 5-6150**
- Emails to: [TBD](#)
- eD-H staff Messages to: TBD

Cristan Howard – Practice Manager (Adult, Pediatrics, Geriatrics)

- **Calls: 5-5824**
- Emails to: Cristan.C.Howard@hitchcock.org
- eDH staff messages to Cristan Howard

Stephanie Cameron – Practice Manager (Embedded, Inpatient, Hanover Psychiatry, and Addiction Services)

- **Calls: 3-1822**

- Emails to: Stephanie.A.Cameron@hitchcock.org
- eD-H staff messages to: Stephanie Cameron

General Summary of Support Functions

Clinical Support Teams (Team A, Team B, Neuropsychology) are responsible for completing all administrative support needs. Major components of their positions include phone support to patients (answering questions, relaying messages, transferring calls), new patient preparation (sending packets, scoring returned packets), referral management, scheduling new patient appointments, and no show/cancel less than 48-hour letters.

Schedulers are the responsible for all clinical schedule edits (vacations, meetings, CME, changes to available time) and appointment related tasks (cancelling, rescheduling, bump-list, and wait-list). They schedule all follow-up appointments at our exit-scheduling suite following visits with clinicians at 5D.

Outpatient Psychiatry RN's, major functions include RX refills; medication questions/side effects, etc. They will be the middle person between the patient and doctor for clinical needs. They will follow up with patients on requests and relay information between provider and their patient.

Resource Specialist focuses on connecting patients with other facilities/providers. Each have tasks that are unique to their section, but tasks may consist of obtaining release of information, met with families during or after their appointment about resources, send out welcome packets to adult patients, connect with new patients that are scheduled, etc. They also join triage meetings and will follow up with the patients to go over the recommendations and assist further.

The Administrative Supervisor supervises the support teams for Psychiatry, Team A, Team B, Exit Scheduling, Neuropsych, and Medical Records. She also reviews clinic schedules for utilization and builds clinic templates

Outpatient Psychiatry Clinical Practice Policies & Procedures

Transferring Patients to Emergency Department from 5A, 5C or 5D for Safety Concerns

The Crisis Team is available to provide consultation about whether a patient needs to go to the ED, or whether IEA needs to be filed. The Crisis Team can provide consultation regarding decision making in these instances, though your supervisor is the first line of consultation. In the event that you have emergent safety concerns about a patient, use the following process:

1. Engage with supervisor for additional guidance in the moment. Crisis team pager #3350 can also provide additional guidance
2. If situation is unsafe, call immediately for security support 5555
3. If you cannot leave the office or reach a phone, you can use secure chat support at Psych Support Team
4. Communicate clinical information to the ED and Crisis teams*
 - a. Call the transfer center x55152 to speak to the ED physician taking ED referrals (“expects”)
 - i. Provide brief clinical history
 - ii. Highlight any medical concerns (e.g., suspected overdose)
 - iii. Highlight any safety concerns (e.g., active suicidal ideation)
 - iv. Should state that patient should NOT be left unobserved in ED waiting room
 - b. Page the crisis team #3350 to provide brief clinical history
5. Patient should be escorted to the emergency department to assure arrival there. Depending on the acuity of the situation and cooperativeness of the patient, security presence may be needed. It is preferable if you have time to walk the patient down (bring to waiting room main triage desk) to provide information regarding safety concerns
6. Finish your documentation of the acute issue ASAP. This will be very informative to the ED and crisis teams, especially if late in the day and you will not be available to them for questions. Additionally, it speeds up the process of referrals, and helps to clarify if IEA is warranted were the patient to be refusing care.
7. The need for an IEA petitioner statement may arise. This should be discussed with the crisis team prior to leaving the hospital for the day.

*If situation is too acute, transfer to ED may occur prior to communication. In that situation, walk with patient down to ED, and then ask to speak to an ED clinician to provide clinical and page crisis team as soon as you are able to do so.

Cancellation / No-Show Policy

Late cancellations and missed appointments contribute to inadequate access to services and unfilled provider time. In order to better address the existing demand for services and efficiently manage limited and costly resources, it is essential to minimize late cancellations and missed appointments. A late cancellation or missed appointment is defined as a missed appointment without 48 hours notification. Patients can call and leave a message with support staff 48 hours prior to their scheduled appointment to notify us of the need to cancel an appointment. The patient will receive an appointment letter generated by the scheduling system 7 – 30 days prior to the appointment and an automated appointment reminder call 3 days prior to the appointment giving them the option to confirm or cancel the appointment at the time of the call. When a patient cancels an appointment, support staff will inform the provider of the cancellation via eD-H Staff Message and include the time of the call, the reason for cancellation, and date of rescheduled appointment if applicable. Cancellations made 24 – 72 hours before the

appointment will remain in the appointment history. *Clinicians providing therapy services have the ability to cancel sending of a letter, but should do so only in limited cases to remain consistent with the policy. Established patients who miss or late cancel three appointments in a six-month interval should be terminated, with rare exceptions.*

Additional information regarding the now show policy is provided below:

New Patient_No Show/Late Cancellations (except neuropsychology):

First no show/late cancellation

- Referral returned to work queue
- Support staff will send warning letters automatically and call to reschedule.

Second no show/late cancellation

- Support staff sends termination letter
- Referral is closed out
- New referral accepted after 6 months

Office visits/Follow ups: Psychotherapy appointments (adult and child)-

- support staff notify provider of no show/cancellation via inbox message. Clinician discretion to send warning letter (or termination)

Neuropsychology Clinics

- Patients receive reminder phone calls.

First no show/late cancellation

- Referral returned to work queue
- No show letter sent by support staff automatically
- Support staff will offer rescheduled appointment time.

Second no show/late cancellation

- Referral is closed out
- New referral is accepted, but patient placed at end of wait list

Policy on the Provision of Outpatient Services to Department of Psychiatry Employees

As a general rule, Department of Psychiatry providers will not provide outpatient adult or children's services to Departmental clinicians and staff, Department trainees, or to their spouses and children. Receiving outpatient psychiatric services from one's employer and/or close colleagues is fraught with potential complications that can leave employees with less than optimal care and/or less than optimal work situations. Departmental access services will actively aid employees, Department trainees, and their children or spouses to obtain needed services from skilled providers outside of our system of care. This policy covers adult and child outpatient services. Crisis services, inpatient/partial services, ECT services, psychological testing, and sleep services are not covered by this policy. This policy does not pertain to treatment that is currently actively underway. For extraordinary circumstances, exceptions to this policy can be made by approval of the Vice Chair for Clinical Services (Dr. Finn). Consult with your supervisor regarding this policy.

Clinical Documentation Timeliness Standards

Timely completion of clinical documentation is important for a host of reasons including 1) service to referrers, 2) clinical communication, 3) risk management, 4) billing requirements, and 5) the fact that notes are often better and take less time to write when the clinical event is fresh in our mind.

For each major kind of clinical documentation the standard spells out desired, expected and out of bounds timeframes:

- **Desired:** This is the best time to write (or dictate) the note for clinical communication, memory efficiency, and risk management reasons.
- **Expected:** This is the standard expectation
- **Out of bounds:** This marks when the note is significantly overdue and, aside from special exceptions, signals a system or individual performance problem.

<u>Outpatient services:</u>	Desired	Expected	Out of bounds
Initial evaluations	Date of service	Within three days of service	One week after the service
Follow-up visits	Date of service	Within three days of service	One week after the service

Services Provided Off Campus

Patients with anxiety and related disorders often benefit from exposure-based interventions that require direct contact with a feared situation or stimulus. It is frequently infeasible to reproduce these situations in the clinical setting. The standard of care is to provide this service in the situation in which the fear response occurs (e.g., a crowded shopping mall), or in a situation that closely approximates the situation (e.g., a crowded wholesale store). In the event that a service is provided off-campus (e.g., a driving exposure with a panic disordered patient; a home visit with a hoarding patient), the Fellow should notify the supervising clinician at least one week in advance of the planned session. The Fellow and supervisor will review the necessity of the service need and consider any alternatives that would be clinically feasible before granting the request. The Fellow should also notify their support staff, to minimize any missed communication about other patient care. The Fellow will keep their pager in the 'on' position and on their person, just as they would when on the DHMC campus, and will carry their personal cell phone with them for the duration of the service. Interns are prohibited from transporting any patient in their own vehicle, but may arrange to meet the patient by car at predetermined location. Interns may accompany the patient in the patient's own vehicle, but may not operate the patient's vehicle.

Procedures of Due Process

Interns may fail a specific training experience and/or the entire Internship, and/or they may be terminated from the program prior to completion, although it is expected that any of these will be highly unusual events. Failure and/or termination may occur for any of the following reasons; reasons are not limited to this list:

- Incompetence to perform typical services in this setting and inability to attain competence during the Internship.
- Violation of professional ethical standards.
- Failure to meet the minimum standards for patient contact, didactic training, supervision, or maintenance of appropriate professional records.
- Behaviors judged as unsuitable by Internship training committee and Training Director and which hamper the intern's professional performance.
- Inability to meet the minimum competency standards established by the program and consistent with the professional standards designated as such by the American Psychological Association. These may be determined in the course of regular evaluations throughout the course of internship training, or when training faculty are alerted to behavior that substantially deviates from those expected competencies.

Interns have a right to a hearing and opportunity to appeal decisions of the training faculty and Training Director, along with the responsibility to document the reasons for the hearing and/or appeal. Similarly, the program faculty have a right and responsibility to execute corrective actions (e.g., remediation plans) to address unsatisfactory intern behavior up to and including termination from the program. The training program has the responsibility to document these procedures and to inform the intern of those actions as they occur. In the event that a supervisor and Training Director determine that an event or other behavior has met the criteria to initiate Due Process, the Training Director will provide notice within 48 hours.

Notice: A supervisor who becomes aware of a problem area or deficiency should initially work with the intern to resolve the problem, providing timely feedback early in the process. The intern will be provided written notice by the Training Director once initial concerns of problematic behavior are being addressed beyond the supervisor and that further steps need to occur.

If a performance problem persists, or if a performance problem occurs which seems not to be resolvable by the usual supervisory support and intervention, it should be called to the attention of the Training Director, who may choose at this point to involve other supervisors who are working with the intern (e.g., supervisor of another rotation, if any). In many cases, informal discussion among members of this group may result in effective suggestions for resolving the problem.

However, if the situation warrants it, those staff involved in the informal discussions will work to develop a specific, written performance improvement plan to remedy the problem or deficit (i.e., a remediation plan). Such plans include clear behavioral goals and timelines and may include increased observation of cases, decreased case load, specific skill practice, readings, or any other relevant method. In all such cases, the intern must be informed that this is happening and

be given the opportunity to participate in the process of creating the remediation plan (see Hearings below). If the remediation plan is successful, all requirements are met and the process is complete.

Hearing(s): Upon notification of a need to develop a remediation plan, the intern will be invited to participate in a hearing during which they have the opportunity to present concerns about the causes of the perceived performance deficit, as well as potential solutions. This information will be documented by the Training Director and used to guide the remediation plan in collaboration with the intern and other supervisors as needed.

If the remediation plan is not met, the concern is taken to the Training Committee for review and recommendation. A second formal hearing attended by the trainee and faculty will be held to appraise the performance concerns, evaluate the process executed to that point, and determine need for dismissal. This will include documentation and review of trainee and program rights and responsibilities during the process to ensure that these have been appropriately secured. The trainee will have the opportunity to respond to these concerns during the hearing. The hearing occurs within one week of notification that the remediation plan was not successfully completed. Upon determination that recommendation for dismissal from the training program, Dartmouth Health's Human Resources department will initiate formal termination of employment procedures.

Appeal: Should failure or termination be recommended by the Psychology Training Committee, the intern may appeal the decision to the Training Director, with further appeal through the Vice Chair of Education, and finally through the Chair of the Department of Psychiatry. The intern may also initiate an appeal of prior components of due process including initiation of a remediation plan or other corrective action. The intern has 72 hours to appeal each action. The training program will abide by the decision of the appeal process. The trainee may also consult with Dartmouth Health's Human Resources department at any time during this process.

If the issue is a violation of medical center regulations or an ethical breach, the Director of Training will be informed immediately. Depending on severity of the incident, the Training Director will involve the Training Committee, Director of Psychology, Vice Chair for Education, or other appropriate facility or regional entities for immediate action. Upon determination that recommendation for dismissal from the training program, Dartmouth Health's Human Resources department will initiate formal termination of employment procedures.

Intern grievances

The purpose of this policy is to encourage interns to communicate with the Dartmouth Psychology Internship Program faculty and staff about difficulties encountered during the training year. This policy also outlines possible responses to intern concerns.

It is the Dartmouth Psychology Internship Program's intent to provide quality training to its interns. If an intern is dissatisfied with some aspect of training, the intern is encouraged to communicate that concern to faculty or staff of the program in order to identify possible options for improvement. Feedback is sought on each seminar; feedback on supervisor functioning is

sought at the end of the training year during a formal evaluation period. However, there may be times when interns want or need to communicate concerns more promptly.

There may be occasions when an intern has a complaint against a supervisor, or when the intern has a complaint about some other aspect of the training experience, such as the behavior of another intern or staff member, or disagreement with the decision of program faculty. In such cases, we encourage the following sequence of actions.

Efforts to resolve an identified problem within a training experience will be made by supervisory staff and the involved trainee in a timely manner as described here:

Level 1: The intern is encouraged to raise the issue with his/her supervisor or the other party involved, in an effort to resolve the problem. This fits with the approach of professional ethical codes, in which professionals are encouraged to first attempt to deal directly with others when they have concerns before taking the problem to another level. In most instances, a frank, collaborative and assertive discussion can lead to resolution. Supervisors are expected to work in a sensitive and collaborative manner with the intern in addressing any concerns. Supervisors will respond to a written complaint (e.g., email) within one week of receiving the complaint or at the time of the next supervision contact, whichever comes first. If informal efforts at problem resolution are unsuccessful, or the intern has reason to be concerned about retaliation or abuse of authority, a more formal and transparent process will ensue. Efforts to resolve such a problem within a training experience will be made by supervisory staff and the involved trainee.

Level 2: If the problem is not resolved at the supervisory level, the intern and/or supervisor will communicate the problem to the Training Director for assistance within 24 hours of completion of Level 1 resolution. If that step fails to resolve the matter, the Training Director will bring the matter to the Psychology Training Committee within 1 week of notification of the unresolved grievance.

Level 3: If unresolved at this level, or if the concern relates directly to the Training Director, the concern will be referred to the Vice Chair for Education. The grievance will be referred to the Vice Chair within 24 hours of the Psychology Training Committee meeting.

Level 4: The Vice Chair for Education for the Department will be the final level for an unresolved grievance. In the event of an extreme or unusual circumstance, it may be necessary to communicate with the Chair of the Department or with Medical Center administration for resolution. Problem resolution options also can be explored via the Informal Problem Consultation and/or Formal Complaint Process within APPIC designed for this purpose.

Sexual Harassment

D-H is committed to providing a safe and collegial work environment in which all individuals are treated with mutual respect and dignity and that is free of unlawful discrimination and harassment of any kind. In keeping with this commitment, D-H will not tolerate harassment of any employee by any person, including any supervisor, co-worker, patient/client, visitor, or any other third party based on any protected status.

All employees, as well as any member of the D-H community, including but not limited to patients, patients' families, visitors, vendors, and all other persons on D-H property are expected to comply with this policy and all state and federal non-discrimination laws and statutes. Concerns related to violations of this policy should be reported as set forth below.

D-H may require that a person who has violated this policy leave the premises and may report him or her to law enforcement agencies. Conduct alleged to constitute harassment under this policy will be evaluated from the perspective of a reasonable person similarly situated to the complainant and considering all the circumstances.

This policy shall not be interpreted to limit D-H's authority to discipline or take remedial action for workplace conduct which D-H deems unacceptable, regardless of whether that conduct satisfies the definition of unlawful harassment.

Violation of this policy, as determined by D-H, in its sole discretion, may result in disciplinary action up to and including termination.

Reporting Allegations of Harassment

Employees subject to conduct that he or she feels is unwelcome are encouraged to let the person engaging in the conduct know, verbally or in writing, that the conduct is not welcome, is offensive, and must stop. The employee should maintain and provide to his or her supervisor or Employee Relations copies of this documentation or alert them to the incident. If the employee does not want to address the conduct his or herself or is not comfortable with the perpetrator's response, the employee is encouraged to report this conduct to any of the following persons:

His or her supervisor or any other member of management

Human Resources: Employee.Relations@hitchcock.org or (603) 653-1570. If a member of Human Resources is alleged to have engaged in behavior in violation of this policy, employees should report the incident to the Office of General Counsel.

Compliance Hotline: (844) 733-0094

If an employee believes that he or she is in immediate danger, he or she contacts D-H Security (603- 650-7896) or local law enforcement at 911.

Employee and Supervisor Responsibilities Regarding Reporting Harassment

All employees, and particularly members of management, which includes without limitation all administrative and clinical supervisors, are responsible for keeping the work environment free of harassment. This includes complying with all D-H policies with respect to personal and professional conduct. D-H urges the prompt reporting of complaints. If a supervisor receives information regarding harassment, the supervisor is obligated to report the harassment immediately to HR by emailing Employee.Relations@hitchcock.org or calling (603) 653-1570.

Any employee who becomes aware of an incident of harassment or possible harassment, whether by witnessing the incident or being told of it, must promptly report it to the persons identified above. Leaders receiving a complaint must forward the complaint to Employee Relations by emailing or calling Employee.Relations@hitchcock.org or (603) 653-1570.

An employee who knowingly submits a false or frivolous claim of harassment may be subject to disciplinary action up to and including termination.

Investigation

Once D-H becomes aware of an alleged violation of this policy, Human Resources or its designee will promptly investigate the matter, regardless of whether alleged victim or complainant wants D-H to do so. All staff members, whether complainant, witness or the subject of the investigation are required to be truthful, accurate, and cooperative throughout the investigation. D-H seeks to conduct a thorough investigation, refusal to participate in the investigation may result in disciplinary action. Depending on the outcome of the investigation, D-H will take appropriate remedial action. Such action may include, but is not limited to, corrective action, up to and including immediate termination of employment.

Limits to Confidentiality

While D-H strives to share information on a strict need-to-know basis and to conduct the investigation as discretely as possible, the identity of the complainant and nature of the complaint may be revealed to witnesses and the individual who is the subject of the investigation. As a result, D-H cannot guarantee that investigations and the information D-H uncovers will remain confidential.

Non-Retaliation

D-H prohibits retaliation against an individual who reports harassment or is involved in any way with an investigation or resolution of a harassment complaint. Any employee who has had a complaint addressed through this policy or has participated in an investigation must immediately make a further complaint to the persons identified above if the employee is the further subject of retaliation or intimidation, or if the harassment recurs. Retaliation may include, but is not limited to, actions such as:

- Disciplining, changing work assignments of, providing inaccurate work information to, or refusing to cooperate or discuss work-related matters with any employee because that employee has complained about or resisted, or aided in the investigation of harassment, discrimination, or retaliation.
- Intentionally pressuring, falsely denying, lying about, or otherwise covering up or attempting to cover up conduct such as that described in any item above.
- Employee-to-employee isolation, ridicule, intimidation, "silent treatment," or embarrassment.
- Encouraging others to retaliate.

Other Information

Other resources for discussing harassment issues are the New Hampshire Commission for Human Rights at (603) 271-2767 or humanrights@nhsa.state.nh.us, the Vermont Human Rights Commission at (802) 828-2480, or the U.S. Equal Employment Opportunity Commission at (800) 669-4000 or info@eeoc.gov.

Questions regarding this policy should be directed to Employee Relations at (603) 653-1570 or employee.relations@hitchcock.org

Notice of Non-Discrimination

Dartmouth-Hitchcock (D-H) is an Equal Employment Opportunity/Affirmative Action employer and it is D-H's intent to provide a work environment free from all forms of employment

discrimination described below. D-H does not discriminate in the terms or conditions of employment or in the recruitment, hiring, promotion, demotion, training, transfer, discipline, or discharge of any applicant or employee on the basis of race, color, religion, sex, sexual orientation, gender identity or expression, pregnancy, age, genetic information, physical or mental disability, national origin, marital status, veteran status, citizenship, or any other category protected by law. Employment decisions are based on merit, qualifications, and abilities, as well as D-H's business and operational needs. In addition, D-H will not discharge or in any other manner discriminate against employees or applicants because they have inquired about, discussed, or disclosed their own pay or the pay of another employee or applicant. However, employees who have access to the compensation information of other employees or applicants as a part of their essential job functions cannot disclose the pay of other employees or applicants to individuals who do not otherwise have access to compensation information, unless the disclosure is (a) in response to a formal complaint or charge, (b) in furtherance of an investigation, proceeding, hearing, or action, including an investigation conducted by the employer, or (c) consistent with the contractor's legal duty to furnish information.

Reporting Concerns and Retaliation Prohibited

Employees are encouraged to bring to the attention of Employee Relations any incident that he or she believes involves discrimination or situations in which he or she may need a religious or disability accommodation. Any concerns that this policy may be violated may be reported to Employee Relations may be reached by calling at (603) 653-1570 or Employee.Relations@hitchcock.org. Employees concerned that discriminatory activity is occurring with Human Resources may report the matter to the Office of General Counsel. Upon receipt of the concern, D-H will promptly review the concern(s) and take remedial action it deems appropriate under the particular circumstance. To support the reporting concerns, D-H prohibits retaliation against anyone for reporting a claim of discrimination or assisting or cooperating in an investigation. Anyone who feels that they have been retaliated against in violation of this policy may report such concerns to the persons identified above. Any employee found to be engaging in behavior prohibited by this policy will be subject to disciplinary action, up to and including termination of employment. Reports or concerns of discrimination or retaliation also may be submitted to the D-H Equal Employment Opportunity Officer at (603) 653-1570, the New Hampshire Commission for Human Rights at (603) 271- 2767, the Vermont Human Rights Commission at (800) 416-2010, or the Equal Employment Opportunity Commission at (800)669-4000.

**PSYCHOLOGY INTERNSHIP FACULTY
2026-2027**

Supervisor

Phone Number & Email

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Appendix A

Department of Psychiatry
Robert Brady, Ph.D., Director
Dartmouth Psychology Internship Program
Department of Psychiatry
1 Medical Center Drive
Lebanon, NH, 03756

EVALUATION

Trainee's Name: _____ Date of Evaluation: _____

Trainee's Title: _____ Supervisor's Name: _____

Use the four point scale below to describe the trainee's level of performance in each of the areas listed compared to other psychology trainees at this developmental level.

A "1" signifies performance that is inadequate for a psychology trainee at the intern level. During the October and February evaluation periods, performance at this level in an overall rating of a competency area will require a formal remediation plan. During the June evaluation period, performance at this level in an overall rating of a competency area (averaged across all clinical supervisors) will result in failure to graduate from the internship program.

A "2" signifies performance that does not consistently meet the expected standard for a psychology trainee at the intern level. Effort must be made by the trainee to meet the expected standard of performance. Performance at this level during the June evaluation period in an overall rating of a competency area could represent a threat to graduation if the trainee is functioning at a "2" averaged across all clinical supervisors.

A "3" signifies performance that consistently meets the expected standard for a psychology trainee at this developmental level. A "3" represents expected performance and will result in graduation from the program.

A "4" signifies performance that consistently exceeds the expected standard for a psychology trainee at this developmental level. "4"s indicate areas of relative and comparative strength.

We encourage you to complete this form with the trainee in order to maximize collaboration and discussion.

Scale:

1 = Unacceptable

2 = Improvement Needed

3 = Meets Expectations

4 = Exceeds Expectations

N/A = Not Applicable

Psychological Intervention Skills (To be completed by therapy supervisors)

_____ Gathers pertinent data at the beginning of treatment.

_____ Evidences appropriate diagnostic skills.

_____ Formulates case from evidence-based theoretical frameworks.

_____ Develops and maintains effective relationships with the recipients of psychological services.

_____ Develops evidence-based intervention plans specific to the service delivery goals.

_____ Implements interventions informed by the current scientific literature, assessment findings, diversity characteristics, and contextual variables.

_____ Demonstrates the ability to apply the relevant research literature to clinical decision making.

_____ Modifies and adapts evidence-based approaches effectively when a clear evidence-base is lacking.

_____ Evaluates intervention effectiveness, and adapts goals and methods consistent with ongoing evaluation.

_____ Assesses risk factors appropriately.

_____ Discharges clients appropriately.

_____ **Overall Rating**

Comments:

Psychological Assessment Skills (To be completed by psychological and neuropsychological testing supervisors)

_____ Selects and applies assessment methods that draw from the best available empirical literature and reflect the science of measurement and psychometrics.

_____ Collects relevant data using multiple sources and methods appropriate to the referral goals and questions.

_____ Completes test protocols accurately and efficiently.

_____ Accurately interprets assessment results, following current research and professional standards and guidelines, to inform case conceptualization, classification, and recommendations, while guarding against decision-making biases, distinguishing the aspects of assessment that are subjective from those that are objective.

_____ Attends to the relevant diversity characteristics of the service recipient and the effect on assessment results.

_____ Guards against decision-making biases, distinguishing subjective and objective aspects of the assessment.

_____ Demonstrates knowledge of psychometrics in the understanding of results.

_____ Communicates test results and recommendations in oral format in an accurate and effective manner.

_____ Communicates test results and recommendations in written format in an accurate and effective manner.

_____ **Overall Rating**

Comments:

Individual and Cultural Diversity (To be completed by all supervisors)

_____ Demonstrates an understanding of how their own personal/cultural history, attitudes, and biases may affect how they understand and interact with people different from themselves.

_____ Possesses knowledge of the current theoretical and empirical knowledge base as it relates to addressing diversity in all professional activities.

_____ Integrates awareness and knowledge of individual and cultural differences in the conduct of professional roles.

_____ Independently applies knowledge in working effectively with the range of diverse individuals and groups.

_____ **Overall Rating**

Comments:

Research (To be completed by all supervisors)

_____ Demonstrates the ability to critically evaluate and disseminate research or other scholarly activities (e.g., case conference, presentation, publications) at the local, regional, or national level.

_____ Demonstrates ability to appropriately apply information from research into the delivery of psychotherapy services and psychological testing services.

_____ Effectively utilizes the scientific method to evaluate the effectiveness of interventions or programs.

_____ **Overall Rating**

Comments:

Consultation and Interprofessional Skills (To be completed by all supervisors)

_____ Demonstrate knowledge and respect for the roles and perspectives of other professions.

_____ Applies knowledge in direct or simulated consultation with individuals and their families, other health care professionals, interprofessional groups, or systems related to health and behavior.

_____ Consults effectively with other providers (e.g., PCPs, school personnel).

_____ **Overall Rating**

Comments:

Ethical and Legal Standards (To be completed by all supervisors)

_____ Demonstrates knowledge of APA ethical principles and standards.

_____ Acts in accordance with the APA ethical principles and standards.

_____ Demonstrates knowledge of relevant laws, regulations, rules, and policies governing the practice of psychology in the clinical setting.

_____ Recognizes ethical dilemmas and acts quickly to resolve them when they arise by consulting the relevant ethical principles and standards.

_____ Conduct self in an ethical manner in all professional activities.

_____ **Overall Rating**

Comments:

Professional Values, Attitudes, and Behaviors (To be completed by all supervisors)

_____ Actively seeks and demonstrates openness and responsiveness to feedback and supervision.

_____ Responds in a professional manner to increasingly complex situations with a greater degree of independence as they progress across levels of training

_____ Engages in self-reflection regarding one's personal and professional functioning.

_____ Behaves in ways that reflect the values and attitudes of psychology (e.g., integrity, deportment, accountability, professional identity, lifelong learning, and concern for the welfare of others).

_____ **Overall Rating**

Comments:

Communication and Interpersonal Skills (To be completed by all supervisors)

_____ Demonstrates effective interpersonal skills.

_____ Develops and maintains effective relationships with colleagues, organizations, supervisors, patients/clients.

_____ Effectively and efficiently produces and comprehends oral, nonverbal, and written communications.

_____ **Overall Rating**

Comments:

Supervision (To be completed by all supervisors)

_____ Demonstrates knowledge of supervision models and practices.

_____ Effectively applies this knowledge in direct or simulated practice with peers, or other health professionals.

_____ **Overall Rating**

Comments:

We welcome your summary comments about the trainee's overall performance. Any suggestions regarding areas in need of improvement are greatly appreciated. It is helpful to describe trainee's strengths, as well.

Areas for Improvement:

Strengths:

Trainee's Signature: _____ date _____

Supervisor's Signature _____ date _____

Approved by Training Director: _____ date _____

SUPERVISOR EVALUATION

Name of Supervisor: _____ Date: _____

Name of Supervisee: _____ Frequency of meetings: _____

Methods of Supervision (circle all that apply):

Intern notes Audio tapes Video tapes

1 way mirror Patient interview Other (specify) _____

1. Please rate your supervisor on the following items:
(1= Always; 2=Most of the time; 3= Sometimes; 4= Not Often)

- A. Supervision appointments occurred consistently. _____
- B. Supervision sessions began on time. _____
- C. Supervisor gave relevant feedback on clinical issues. _____
- D. Supervision was a collaborative effort. _____
- E. Supervisor was easily approachable. _____
- F. Supervisor was accessible for emergencies. _____
- G. Supervisor appeared knowledgeable about clinical issues. _____
- H. Supervisor appeared to possess and shared relevant clinical expertise. _____

2. What were the most helpful aspects of supervision with the above supervisor?

3. What were the least helpful aspects of supervision?

SEMINAR EVALUATION FORM

Name of Seminar: _____

Seminar Leader: _____

1. Please rate the seminar leader in the following areas:
(1= Always; 2= Most of the time; 3= Sometimes; 4= Not often)

- A. Seminar leader was affective in leading or coordinating the seminar. _____
- B. Seminar leader was approachable and receptive to feedback. _____
- C. Seminar leader attempted to meet the training needs of the group. _____
- D. Seminar leader seemed very knowledgeable about subject matter. _____
- E. Seminar leader seemed to possess and shared relevant clinical expertise. _____

2. Most helpful aspects of seminar:

3. Least helpful aspects of seminar:

4. Suggestions to improve the seminar for next year:

Appendix B

Dartmouth-Hitchcock Psychology Internship Program Clinical Practice Didactic 2026-2027 Schedule

Facilitator: James T. Craig, Ph.D., Dartmouth-Hitchcock Medical Center

Contact Information:

james.t.craig@hitchcock.org; 785-375-0273

Time/Location:

Fridays 8:30-10:00am, Dartmouth-Hitchcock Medical Center Nemiah Conference Room or Virtual via WebEx

Internship Requirement: Interns are required to attend 80% of clinical practice didactics in order to successfully complete the program (Must attend 35 didactics or more). Please be careful to monitor your attendance to these presentations in order to fully complete internship requirements.

If you are planning to miss didactics for any reason, please e-mail Dr. Craig in advance.

Description: The objective of the Dartmouth-Hitchcock Psychology Clinical Practice Didactic is to increase knowledge in the areas of psychopathology, case conceptualization, assessment methods, and evidence-based treatments. There is a strong emphasis on current research and treating diverse populations across the didactic series. Speakers are experts on each topic area and will provide presentation slides, handouts, and resources to students. Topics may be accompanied by recommended readings provided in advance of or during the presentation.

Date	Topic	Speaker
7/10/26	Orientation: Making the Most of Your Internship	JT Craig, PhD
7/17/26	Case Formulation	Robert Brady, PhD
7/24/26	Case Formulation	Robert Brady, PhD
7/31/26	Motivational Interviewing	Sivan Rotenberg, PhD
8/7/26	Motivational Interviewing	Sivan Rotenberg, PhD
9/11/26	Advanced issues in Diversity	Lauren Szkodny, PhD
9/18/26	Advanced issues in Diversity	Lauren Szkodny, PhD
8/28/26	Moving Patients to Higher Levels of Care	Christine Finn, MD
9/4/26	Assessing Suicide Risk	Alexandra Pappas, PhD
9/11/26	Psychologists working in Healthcare Settings	Mark Detzer, PhD
9/18/26	Psychologists working in Healthcare Settings	Mark Detzer, PhD
9/25/26	Exposure Therapies	Sarah Garnaat, PhD
10/2/26	Exposure Therapies	Sarah Garnaat, PhD
10/9/26	CBASP Seminar	Daniel Mackin, PhD
10/16/26	CBASP Seminar	Daniel Mackin, PhD
10/23/26	CBASP Seminar	Daniel Mackin, PhD
10/30/26	CBASP Seminar	Daniel Mackin, PhD
11/6/26	Advanced Topics in Cognitive Therapy	William Hudenko, PhD
11/13/26	Advanced Topics in Cognitive Therapy	William Hudenko, PhD
11/20/26	Child Sleep Interventions	JT Craig, PhD
11/27/26	No Didactic	
12/4/26	Adult Sleep Interventions	Jessica Salwen-Dermer, PhD
12/11/26	Gender Affirming Care for Adults	Sarah Roane, PhD
12/18/25	Gender Affirming Care for Youth	Kay Jankowski, PhD
12/25/27	No Didactic	
1/1/27	No Didactic	
1/8/27	Parent-Focused Interventions	Christina Moore, PhD
1/15/27	Treating Psychiatric Comorbidity in Autistic Youth	Katie Ahlers, PhD

1/22/27	How Psychiatrists Think	Matthew Rasmussen, MD and Brian Rosen, MD
1/29/27	Introduction to Psychopharmacology	Matthew Rasmussen, MD and Brian Rosen, MD
2/5/27	Problem Solving Therapy	Robert Brady, PhD
2/12/27	Problem Solving Therapy	Robert Brady, PhD
2/19/27	CPT	Lauren Sippel, PhD
2/26/27	CPT	Lauren Sippel, PhD
3/5/27	Trauma-informed medical care	Katrina Hacker, PhD
3/12/27	GI interventions	Jessica Salwen-Dermer, PhD
3/19/27	Mindfulness-based interventions and chronic pain	Jason Blizzard, PhD
3/26/27	Mindfulness-based interventions and chronic pain	Jason Blizzard, PhD
4/2/27	Perinatal Mental Health	Sarah Craig, PhD
4/9/27	Seasonal Depression and its Treatments	Julie Camuso, PhD
4/16/27	Everyday Advocacy in Clinical Settings	Alexandra Pappas, PhD
4/23/27	ACT	Sivan Rotenberg, PhD
4/30/27	ACT	Sivan Rotenberg, PhD
5/7/27	The Psychology of Pain	Mark Detzer, PhD
5/14/27	The Psychology of Pain	Mark Detzer, PhD
5/21/27	Treating Childhood Trauma	Erin Barnett, PhD
5/28/27	Treating Childhood Trauma	Erin Barnett, PhD
6/4/27	Eating Disorders and their Treatments	Elizabeth Lampe, PhD
6/11/26	PANS/PANDAS	Sarah Clark, PhD
6/18/26	Treatment in Aging populations	Renee Pepin, PhD
6/25/27	Treatments using Brain Stimulation	Sarah Garnaat, PhD

Neuropsychology Services Didactic Series

Facilitators: Robert Roth, Ph.D. & Jonathan Lichtenstein, Psy.D.

This seminar series supports foundational knowledge and skill in clinical neuropsychology spanning adult and child and adolescent populations. The series is thoughtfully structured to provide learning through fact-finding sessions, informational didactics, and a diversity and culture series within the larger framework. The schedule begins in September following onboarding of neuropsychology postdoctoral fellows and runs through June. The general schedule is provided below:

1st Friday of the month:

9-10 Fact Finding

10-1030 Case Conference

2nd Friday of the month

9-10 Neuropsychology Topics Seminar

10-11 Professional Development

3rd Friday of the month

9-10 Neuropsychology Topics Seminar

10-11 Sports Neuropsychology Seminar

4th Friday of the Month

9-10 Neurodiversity and Culture Seminar

Professional Development Seminar (PDS) 2026-2027
Psychology & Neuropsychology Interns and Post-Doctoral Fellows
 Department of Psychiatry
 Geisel School of Medicine at Dartmouth

This seminar is designed to provide a forum to discuss issues relevant to the practice of psychology. Issues pertaining to career development, job search and experience, and other matters of relevance to development as an independent clinician and/or scientists are addressed.

This seminar takes place on the first Friday of each month from 10-11 am. All meetings take place in the Weiss at DHMC room unless otherwise indicated by an asterisk. In this case, the seminar is held in Nemiah conference room is near the Weiss room.

Facilitators: Anna Graefe, PhD & Robert Brady, PhD

Date	Topic	Speaker (Facilitator)
8/14	Preparing for the Next Steps (EPPP, Fellowship, Licensure, and everything else)	Emily Pomichter, PhD Christine Bushell, PhD Emma Lape, PhD (RB, AG)
9/11	Navigating the Job Market	Kay Jankowski, PhD & Juli Hamblin (RB, AG)
10/9	Becoming a productive researcher in a clinical job	Jonathan Lichtenstein, PsyD (RB, AG)
11/13	Setting Professional Goals	JT Craig (RB, AG)
12/11	Ethical Decision Making	Ethicist (RB, AG)
1/8	Risk Management	Risk management staff Pam Driscoll
2/12	Work Life Balance	Anna Graefe PhD and Robert Brady, PhD
3/12	AI in your practice	Madelyn Frumkin, PhD (Anna)
4/9	Private practice	David Bradley, PhD and John Randolph, PhD
5/14	Funding your research	Jessica Salwen-Deremer, PhD (RB)
6/11	Mental Health Advocacy	Alexandra Pappas, PsyD (RB, AG)

Local, and Not Quite Local, Activities

Grocery Stores

No lack of places to shop for groceries in the area. There are three Dartmouth Co-Op stores, one in Centera Parkway across from the DHMC entrance off Rt 120, one in Hanover, and one in Vermont across the bridge from NH to VT in White River Junction. There is a Price Chopper on Mechanic Street in Lebanon and one in West Lebanon. West Lebanon also has a Shaw's and a Hannaford's.

Restaurants

These are just a selection of your choices. The Dartmouth Engineering website has a great list, although it is not quite up to date. <http://engineering.dartmouth.edu/tic/newcomers/food.htm>

West Lebanon

Plainfield Road (Rte 12A; the main street through West Lebanon) in West Lebanon has fast food (McD's, Burger King, Wendy's, Taco Bell, KFC), as well as Pizza Hut, Subway, D'Angelo's (subs), Chili's, Applebees, Denny's, Friendly's, and Dunkin Donuts (there is another Dunkin' in the Wal-Mart, and another near the Fire Department on North Main Street).

There is a Panera Bread restaurant across from the Denny's. It has decent soup and sandwiches, coffee, as well as a bakery. You can eat in or take out, and I think they have a wireless web connection too. On-line menu at <http://www.panerabread.com/menu/>

The Weathervane, a seafood restaurant, is at the end of the street as you pass by the Denny's off Plainfield Road.

Salt Hill—West Lebanon is located at 100 Plainfield Road Colonial Plaza. You can see it right next to where the main shopping street in West Lebanon (Plainfield Road) and the I-89 intersect.

Men at Wok is a small Chinese food restaurant with just a few tables located in Glen Road Plaza (facing the Powerhouse Mall). Reasonably priced combination platters.

Yama is a Korean/Japanese place located on North Main Street in a small plaza where H&R Block is located; There is a similar restaurant in Hanover on Main street.

Italian: Lui Lui's located on the grounds of the Powerhouse Mall.

Hanover

Dirt Cowboy Café on Main Street near the corner of West Wheelock: Coffees, juices, pastries and desserts. Opens early and closes late, but not very late.

Lou's on Main Street is a Hanover tradition. Great breakfasts, and now lunch, as well as their famous crullers (glazed, cinnamon sugar, jelly, chocolate covered, or maple covered) and cakes. Usually quite crowded.

[The Jewel of India](#): 27 Lebanon St. Hanover, 643-2217. Indian food with a sit-in room or you can get take-out. It is located in a large white house across from the stadium.

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[Murphy's On The Green](http://murphysonthegreen.com/) is on Main Street near West Wheelock and is the other bar in Hanover.
<http://murphysonthegreen.com/>

Molly's: Part of sister restaurants Jesse's and Lui Lui's. A nice bar overlooking downtown Hanover and pleasant back porch for outdoor meals. The menu ranges from burgers and brick oven pizza to steaks and salads. <http://www.mollysrestaurant.com/>

Ramunto's Brick Oven Pizza has a place in Hanover. <http://www.ramuntos.com/>

Salt Hill is a popular pub with food and live entertainment on Lebanon Street in Hanover.
<https://www.salthillpub.com/>

Lebanon

Salt Hill is a popular pub with food and live entertainment on the Lebanon Green.
<https://www.salthillpub.com/>

Pim's Thai Orchid is an authentic Thai restaurant on Hanover Street in Lebanon with convenient, free delivery. <https://www.thaiorchidlebanon.com/>

Three Tomatoes is adjacent to Salt Hill on the Lebanon Green; good Italian food and service.
<http://www.threetomatoestrattoria.com/>

Village Pizza / The Cave is located just off the Lebanon green. Wide range of choices *and* customers.
<http://www.villagepizza.net/Lebanon/index.html>

Jesse's Restaurant has steaks, salad bar, and seafood. A bit more upscale. Located on Route 120 just north of DHMC entrance off Route 120. <http://www.jesses.com/sublevel.aspx?ref=4>

Snax: Appetizers and bar located at [18 Centerra Park \(603\) 643-8800 across from the hospital.](#)

Peking Tokyo (45 Hanover St # 6, Lebanon): Chinese and Japanese food, including sushi. They also deliver to DHMC. [\(http://www.pekingtokyorestaurant.com/\)](http://www.pekingtokyorestaurant.com/).

Nearby Vermont

China Moon Buffet is located in White River Junction VT next to the Greyhound bus station (exit 11 off the I-91). Unlike in many cities, this bus station is not seedy.

Farmer's Diner is located at Quechee Gorge Village: Serves lots of local produce.

Big Fatty's is a small BBQ place. Very little seating, so think take-out. Located at 1547 Maple Street (route 14) in Hartford Vermont (802-295-5513). <http://www.maplestreetcatering.com/piggery.html>

The Simon Pearce glass factory not only sells lovely in-house made glassware, but also has a nice restaurant. Cheaper at lunch than dinner, and has terrace overlooking a waterfall. Nice romantic setting if that is what you are looking for. http://www.simonpearce.com/CSTM_Restaurants.aspx

Ice cream

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The Fore U ice cream shop is located across the parking lot from the Home Depot (usually open until late October).

There is also a gelato place on Main Street in Hanover.

Other

Inn at Danbury located in Danbury New Hampshire serves German food
<http://www.innatdanbury.com/dining.htm>

Elixir Restaurant & Lounge 180 S. Main Street, White River Junction. 802-281-7009
Located across the street from the American Legion and behind New England Kitchen Depot. An old brick freight house featuring two drink specials and munchies on some nights, musicians play, and light dining.

Movie Theatres

There are two main movie theatres in the local area. There is an Entertainment Cinemas on Miracle Mile Road in Lebanon (<http://www.entertainmentcinemas.com/>) and the Nugget Theatre (<http://www.nugget-theaters.com/>) on Main Street in Hanover. The Hopkins center, which faces the Dartmouth Green, also shows movies, usually those that have been out of mainstream theatres for a while or independent or foreign films. Finally, the Fairlee Drive-In is classic drive-in style with a double feature most weekends during the warmer months.

The Arts

The Hopkins Center for the Arts (<http://hop.dartmouth.edu/>) has a museum, movie theatre (see above), frequent art exhibits, as well as hosting performances such as theatre performances, comedians and dance troops. The Lebanon Opera House has a steady stream of music and stage shows in a traditional New England theater setting. Northern Stage in White River Junction is a major area theatre company that hosts traveling Broadway and local productions with high value.

Shopping

Most of the major chain stores are located in West Lebanon (I-89 exit 20) including Wal-Mart, Target, Home Depot, and the like. Big shopping malls are located in Burlington Vermont and Manchester New Hampshire, a smaller one in Concord (the closest Target store).

Health

There is a small gym in DHMC, which you can use free of charge. It is located on the 2nd floor below the east entrance. You will need to fill out a form in the office near the gym. They will then activate your ID card to allow you to access the gym. You are encouraged to sign up beforehand for the time you want to use machines. There are 2 bathrooms next to the gym in which you can change clothes and even shower, but you should bring your own towels.

There are three gyms in the local area. CCBA in Lebanon near the green (www.joinccba.org), River Valley Club in Centerra Park just across from the hospital (<http://www.rivervalleyclub.com/>). Both also

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have swimming pools and fitness classes, but prices are quite different. The Upper Valley Aquatic Center offers swimming and spinning classes (www.uvacswim.org).

Fun for Kids

The Montshire Museum of Science (<http://www.montshire.org/>) in Norwich Vermont, about 10 minutes from DHMC, is a great place for kids to see some kid friendly, hands-on science exhibits. It also has several nature trails.

Billings Farm and Museum located in Woodstock Vermont <http://www.billingsfarm.org/>

Quechee Gorge Village is located in Quechee about 20 minutes from DHMC. Take I-89 North to exit 1, turn left off the exit ramp then just follow the road for about 5 minutes. It will be on your left. It has a diner, gift shop, small toy museum, as well as a small train that kids can ride depending on the season.

Summer and fall usually bring a number of fairs to the area. For example, the Cheshire Fair which takes place in summer, and the Harvest Festival at the Shaker Museum (447 NH Route 4A, Enfield, NH) which happens in October

Poverty Lane Orchards (<http://www.povertylaneorchards.com/>) offers apple picking in the heart of Lebanon (98 Poverty Lane. 603-448-1511).

Edgewater and Riverview Farms: Route 12 (south of West Lebanon on the way to Plainfield). Has stand that sells flowers and fruits, and can also do own picking of flowers and fruit (apples, strawberries, blueberries, depending on season) (turn right just before the farm stand).

[Canobie Lake Park](http://www.canobie.com/) [85 N. Policy Street, (Exit 2 off I-95) Salem, NH 03079; Phone: 603-893-3506]; about 90 minutes from DHMC. It has over 85 rides, games, live shows and attractions.
<http://www.canobie.com/>

Outdoor Activities

Hiking is perhaps the most essential outdoor activity in Northern New England. Your two best options are the White Mountains in New Hampshire and the Green Mountains in Vermont. Your Training Director will gladly provide a nearly endless list and description of hikes in the area if you give him the chance. There are many other outdoor activities in the area, many of which are available through Dartmouth, so check out the college web site.

Mini-Golf: There is a mini-golf located in West Lebanon just south of the Home Depot. Take the entrance to Home Depot and go through parking lot towards your left. The mini-golf is just past the Home Depot building.

Outdoor Swimming: There are a number of beaches in the area including Storrs Pond in Hanover (also has a pool), Lake Sunapee, Mascoma Lake, and Canaan Street Lake. Storrs Pond in Hanover has a pool and beach, as well as picnic and camping areas. (<http://www.storrspond.org/>). Lake Sunapee (about a 25 minute drive from DHMC) has a beach and snack bar, as well as many other outdoor activities. (<http://www.newlondonareanh.com/>)

Skating in local arenas and outdoor at Occom Pond in winter

Appendix C

Cross country skiing is available in Hanover and elsewhere, like the Dartmouth skyway (<http://www.dartmouth.edu/~skiway/>). Downhill skiing is available at several sites within reasonable driving distance in New Hampshire and Vermont.

Rowing Club at Dartmouth and Morton Farm horseback riding

Appendix D

Psychiatry Department Academic Travel Funds

What: Departmental funds that support trainee attendance at academic meetings where he/she is presenting in any format (e.g., poster, talk, panel). Trainee will pay for all costs up front and save receipts for reimbursement.

Who: Psychiatry residents, psychiatry fellows, psychology post-doctoral fellows, psychology interns in good standing in the department of psychiatry

How:

1. If a trainee travel award exists for the meeting, you **MUST** apply for that award and submit a copy of the award application, the submission abstract and your CV for consideration to EPC committee (via program coordinator)
2. If no trainee travel award exists, submit a copy of the meeting submission abstract, and your CV along with the department application form (content below) to EPC committee (via program director)

Name of meeting/conference: _____

Sponsor of meeting/conference: _____

Presentation format (circle): poster plenary presentation workshop presentation panel discussant
other _____

Short description of the content of presentation: _____

Role on
project/submission: _____

How will attending this meeting further your career
goals?: _____

Other funding applied
for?: _____

Other funding
obtained?: _____

Estimated costs:

Travel Hotel Registration Submission cost (e.g. poster) MISC

Deadlines:

Submit application as soon as possible after acceptance of submission.

Appendix E

For academic meetings occurring July-December, submit by September 30th

For academic meetings occurring January-June, submit by March 31st.