



Palm Beach County
Youth Services Department
Residential Treatment and Family Counseling Division

Training Activities

The following is a list of the major training activities that take place at the Youth Services Department. For specific information on the requirements and expectations for each type of Trainee (Postdoctoral Fellow, Doctoral Intern, Practicum Student) and the training location (Outpatient or Residential) please refer to the Requirements and Expectations section of each respective Handbook.

Therapy

Therapy is provided throughout the Division in a variety of treatment modalities, including family therapy, individual therapy, group therapy, and milieu therapy. Therapy takes place in outpatient (Education & Training Center) and residential (Highridge) settings and includes individuals from a diverse range of ages, racial and ethnic groups, and socioeconomic levels. Individual therapy is reserved for youth between the ages of 18-22 in the outpatient office setting. Trainees will develop treatment plans with specific goals and objectives for each of their therapy cases. Telemental health services may be provided when appropriate.

Parent-Child Interaction Therapy (PCIT)

The Education & Training Center offers PCIT, an evidenced-based dyadic treatment, to select families with children between the ages of 2 and 8. Internet (I-PCIT) services may be offered when appropriate.

Parenting

The Youth Services Department offers parenting services that can be provided via an individual or group format. During the outpatient rotation, curriculums developed from evidence-supported programs aimed at helping caregivers raise children in a safe, stable, and healthy environment may be utilized (i.e., STEP, ACT). Parent support groups are also offered depending on need. During the residential rotation, psychoeducation on parenting and parent groups are provided on a monthly basis.

Psychological Evaluation

Referrals for psychological testing come from within the Division. Trainees may also make referrals for their therapy clients to be tested. Full batteries include clinical interviews and assessment of intellectual, behavioral, and personality/social functioning. Psychoeducational testing may also be included in the full assessment batteries. With supervisor approval, less inclusive partial batteries determined by the needs of the family may be completed. The evaluation process involves consultation with referring therapists, administering and scoring measures, obtaining peer review of scoring accuracy, writing integrated reports, and holding feedback sessions in a timely manner.

Intake Assessment

Intake assessments involve developing interviewing skills and gathering pertinent clinical information during intake interviews. All clients are seen for an initial intake interview to assess their eligibility and need for services and/or to make appropriate referrals.

Risk Assessment, Abuse Reporting, Crisis Intervention, and Safety Planning

With close supervision, trainees will facilitate risk assessments and treatment of crisis situations. Safety planning and abuse reports will be implemented when necessary.



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Multidisciplinary Consultation

Consultation takes place on an ongoing basis with staff, administrators, the Division's collaborative organizations, school personnel, case managers, psychiatrists, and/or other collateral sources. During the Residential rotation, multidisciplinary treatment teams meet regularly to discuss client care. Onsite consultation at the Highridge School is also performed regularly.

Case Management

Ongoing case management is provided for all families/clients served, as determined by each family's needs.

Didactic Activities

Didactic activities include attending and presenting at weekly Youth Services Department's formal trainings, primarily attended virtually. Trainings take various forms, including lecture and demonstration, formal continuing education workshops, and presentations from practitioners and agencies that work in collaboration with the Youth Services Department. The goals of these trainings are to maintain awareness of recent empirical literature, to inform clinical practice with evidence based findings, and to develop skills in making professional case presentations. The didactic training schedule is intended to compliment clinical supervision and assist with professional development. A tentative schedule is distributed at the beginning of the training year and updated periodically. Some topics include laws and ethics, professional development, intervention strategies, diagnostic issues, psychological testing, child maltreatment, domestic violence, diversity considerations, and supervision. Many of the trainings offer continuing education units because the Youth Services Department is an approved CEU sponsor of the American Psychological Association (APA), the State of Florida Department of Health's Board of Clinical Social Work, Marriage and Family Therapy, and Mental Health Counseling, and the Florida Department of Health's Board of Nursing. Opportunities to attend and present at local workshops and conferences are also available.

Community Outreach

Opportunities to present trainings on a variety of mental health topics arise and involve developing and providing such presentations at county-sponsored events as well as various community agencies. Developing and recording social media posts and writing articles on mental health topics is also considered an outreach activity. Outreach may also include discussing the services offered at the Youth Services Department at resource events/fairs in the community.

Supervision

Interns may provide mentorship to practicum trainee(s) as needed. Interns will also provide peer supervision to another intern. A psychologist licensed in the state of Florida provides individual supervision to psychology doctoral trainees of all levels. Moreover, a minimum of 2 additional hours is provided weekly in a group supervision format with the clinical team at each office location. Trainees are expected to present and discuss therapy and evaluation cases at group supervision meetings. Trainees are expected to present session audio/video recordings during these presentations and, at times, be observed through a one-way mirror.