



Health Service Psychology Internship Training Program
Program Manual 2026-2027

Rev. 8/2026

Waypoint Wellness Center

Annapolis, Severna Park, and Linthicum, Maryland
Established 2015

Tana Clarke, Ph.D.

Waypoint Wellness Center
Co-founder, CEO
Licensed Psychologist
Clinical Director
Clinical Supervisor, Assessment Supervisor

Allyson Kett Psy.D.

Waypoint Wellness Center
Co-Founder, COO
Licensed Psychologist
Director of Training
Clinical Supervisor

Suzanne Linkroum, Ph.D.

Waypoint Wellness Center
Licensed Psychologist
Clinical Supervisor & Didactics Supervisor

Adjunct Supervisors

Nadia Maghsadi, PsyD, Licensed Psychologist, Clinical Supervisor
Katherine Smith, PsyD, Licensed Psychologist, Clinical Supervisor
Elana Leibovitch, PsyD, Licensed Psychologist, Clinical Supervisor
Louisa Flynn, PsyD, Licensed Psychologist, Clinical Supervisor
Danielle Mitsch, PMHNP-BC, Director of Psychiatry Training
Rigo Lupercio, PsyD, Psychology Associate, Director of Testing & Assessment Training
Micala Anderson, PsyD, Psychology Associate, Intern Process Group Supervisor
Charlene Van Nest, LCSW-C, Training Coordinator
Samantha Straub, LCPC, On-Site Supervisor for School Mental Health Consultation

Introduction to Waypoint Wellness Center

Waypoint Wellness Center is a multi-disciplinary, outpatient behavioral health practice serving ages two and up in Anne Arundel County, Maryland. We have offices in Annapolis, Severna Park, and Linthicum, Maryland, with therapists and prescribers at each location. Our over 40 clinicians include psychiatrists, psychiatric nurse practitioners, health service psychologists, school psychologists, social workers, and counselors. Our staff is highly skilled and enjoys a great deal of collaboration with interns, as it is important for trainees to be exposed to a range of quality, evidence-based care.

Waypoint was established in 2015 by Drs. Tana Clarke and Allyson Kett. It started with a simple mission to provide consistent and effective evidence-based, multi-disciplinary mental health treatment to our surrounding community. Our goals were to create a positive and supportive physical, social, and professional work environment. We have found that this provides a crucial element of care, for both our clients and clinicians, to make the most of their time together. Waypoint has a strong foundation in the value of increasing access to care for all populations. For this reason, we are committed to providing insurance-based care and have a range of programs to create access in underserved communities.

The community we serve and the populations we access are diverse. Anne Arundel County is a region along the Chesapeake Bay in Maryland that is diverse in landscape, socio-economic range, and has a rich immigrant population that makes for a culturally and racially diverse referral base. With the US Naval Academy, Fort Meade, and Andrew's Air Force Base located close, we also serve a large population of service members, veterans, and their families.

Clinically, Waypoint serves some of the most complex and high need psychiatric cases due to our multidisciplinary team based approach. Many of Waypoint clinicians have trained in hospital settings, and it is important to us to utilize the collaborative and innovative products of team based care. We receive referrals for the full range of psychiatric concerns and have clinicians with expertise to treat most issues. We refer out cases involving active substance abuse and active primary eating disorders, but can effectively treat most other concerns. We have strong relationships with local providers and agencies and do our best to model a collaborative, team-based approach across our community outside of Waypoint.

Training Program Aim:

To train, support, prepare, and empower interns to be skilled and adept clinicians in the science and practice of psychology to be applied in a variety of settings. This aim is accomplished by providing a diverse clinical experience for interns, surrounded with supervision, consultation, and case coordination opportunities with a diverse range of mental health professionals both within and outside of Waypoint. All services provided at Waypoint, as well as all clinical approaches addressed during training, have a proven evidence base.

Vision:

Waypoint Wellness Center will transform mental health access to care with the goal of leaving no community underserved. Increasing access to evidence-based, collaborative treatment through innovative delivery models will improve overall community mental health in Maryland.

Guiding Values

- Dedication to the mental health industry, practice, and community
- Support of mental health colleagues
- Collaboration with all professional colleagues
- If we can't help, find someone who can
- Creativity, challenging of norms, and innovation are necessary to improve care
- Clinician well being is everyone's well being
- Ethical understanding, competence, consistency, and self-reflection as a foundation
- Weekly supervision is a lifetime part of a clinical career
- Provide access to the best possible treatments for all
- Our diversity can be a source of strength and pain, and must be embraced and nurtured

Clinical and Community Services

Outpatient Services

Outpatient services involve traditional assessment and treatment in an outpatient private practice setting. Interns are provided a private office to conduct individual, family, or couples therapy. Caseloads are established jointly between intern and supervisor to address clinical areas of growth. Interns will have access to prescribers and other mental health professionals to consult with at each setting and are encouraged to learn as much as they can from all of their colleagues. Caseloads typically include both in-person and virtual treatment, but can be adjusted for clinical preferences and need.

Psychological and Psycho-educational Testing

Waypoint provides a range of comprehensive psychological and psycho-educational testing. Within this clinic, screening evaluations, educational advocacy, and coaching to assist with 504 and IEP planning is also provided.

Group Therapy and Programming

Waypoint runs a variety of skills groups and process groups. Interns are encouraged to co-lead these groups with an experienced clinician and this is a valuable opportunity for clinicians to develop at their own pace. More experienced interns will have the opportunity to run their own group with the assistance of a doctoral extern allowing for further professional development and advancement of supervisory skills. Below are groups that have run or are currently running at Waypoint.

- Social Empowerment for Neurodivergent Youth and Young Adults
- Executive Functioning Skills Training for Teens and Middle-schoolers
- Coping Creatively with Art
- Between Generations: Support for Adult Caregivers

School Mental Health Consultation

Waypoint works with local private schools to provide onsite mental health and learning support, structured to each organization's unique needs. Interns have opportunities to provide more direct care in school settings or to assist with programmatic implementation if desired. A licensed provider from Waypoint will be present onsite with the intern at all times. Opportunities include:

- Psychoeducation and/or training of school staff
- Psychological screening and assessment and outcome monitoring
- Workshops, groups, or psychoeducation of enrolled students and/or their families
- Mental health safety assessment services
- Individual support services provided to students during specified hours
- Consultation for program development, implementation, and/or modification.
- Collection and analysis of behavioral information and related data as necessary to initiate and deliver appropriate services
- Report-writing, including consolidation of observations, recommendations, and/or related information.
- Feedback/delivery of impressions, recommendations, and/or results of testing, observations, and/or program evaluation.

Community partnership with Charting Careers

Waypoint has treatment teams working within highly underserved communities to provide mental health services and access to care. We partner with a local non-profit agency called Charting Careers as their community impact teams help to refer and engage the community in our services. Interns can work in specific roles, such as individual or group therapist, clinical team lead, or community program development and implementation. The Waypoint treatment team works closely with one another throughout this rotation.

Internship Overview

Our 12-month, 2000 hour psychology internship program is designed to facilitate each individual trainee's formal academic training and clinical experience with a more complete and sophisticated clinical program. Our goal is to provide opportunities for a variety of unique clinical training experiences that will be valuable to the community we serve as a whole.

The training model of our program emphasizes supervised clinical experience based in graduated exposure to advanced clinical applications. Our model aims to utilize our vast array of practitioners from multiple disciplines to facilitate the intern's identified training goals and to develop them as competent clinicians and leaders in the field of psychology. Each intern will have a primary supervisor who is a licensed doctoral health service psychologist and will meet for 1 hour weekly. Interns will be assigned supervisors that align with their individual training goals in assessment and therapy and are located at the same office site. The second hour of weekly individual supervision will be with a different adjunct supervisor, who is also a licensed doctoral health service psychologist and aligns with intern training goals. Didactic experiences will be provided focusing on advanced clinical skills, case formulation, delivery of evidence-based treatment, ethical challenges, professional consultation and application of psychological principles across disciplines, implementation of psychology into private practice setting, the business of private practice, as well as process and boundary work to address the challenges of a career in mental health.

Training Goals and Objectives

To develop health service psychologists who are competent and adept at administering and disseminating evidence-based psychological assessment and intervention

- Interns will demonstrate competence in diagnostic and psychological assessment of individuals with a range of clinical concerns and age
- Interns will obtain proficiency and skill in administering a range of evidence-based psychological interventions

- Interns will demonstrate sensitivity, understanding, awareness, and skill when working with diverse individuals and communities
- Interns will become adept at selecting appropriate modes of treatment and treatment plans to meet the client where they are

To develop the unique skill sets possessed by health service psychologists, and to promote health service psychologists working in impactful, effective, and innovative career settings and structures.

- Assessment of individual cognitive, emotional, social, developmental, adaptive, psychiatric, achievement, motivation, personality, etc.
- Assessment of structures and processes in groups and organizations that promote or impair individual and group mental health
- Gathering, synthesizing, and analyzing information to create novel solutions to client problems
- Ability to communicate to disciplines across educational, medical, scientific, and legal professions to create and lead comprehensive treatment teams
- Adaptable skills for roles in cross-disciplinary settings such as forensic, school, organizational mental health, community clinical programs, and technology and policy
- Ability to access funding structures and approaches, when appropriate, to enhance and expand the delivery of clinical care

For new health service psychologists to emerge from our training as exceptionally responsible to both themselves and their clients through using boundaries and effective therapeutic relationships.

- Interns will have the opportunity to experience a variety of professional roles and experiences
- Foundational skills surrounding ethics and standards will be established
- Interns will be encouraged to identify the roles that are restorative and the roles that are challenging, to allow them to structure their career to manage burnout
- Regular opportunities to discuss and develop boundaries and self-care through supervision and consultation
- Intern well being, adjustment, and training and career satisfaction will be discussed and prioritized by supervisors and the Waypoint team

Our goal is to facilitate emerging health service psychologists and their discovery of their own unique identity and direction in their clinical career, as we believe that the best clinicians function in their ideal role. As an organization, COVID helped us all see how close burnout can be for any of us, and we are more determined than ever to help the next generation of health service psychologists to establish effective clinical habits and healthy personal boundaries to promote long and fulfilling careers.

All training and care delivered at Waypoint is evidence-based and well documented as such. Within that framework, we encourage a diverse range of approaches amongst our clinicians. Our health service psychologists have specialties in the following areas. Trainees are required to participate in twice weekly lunch group supervisions. Trainees can observe and participate in any of the care offered throughout Waypoint, and opportunities are listed below. Interns are encouraged to interact with trainees from other disciplines, including psychiatry, nursing, social work, and counseling and formal opportunities to do so will be offered regularly.

Clinical Modalities	Clinical Conditions
Cognitive Behavioral Therapy	Depression
Dialectical Behavioral Therapy	Anxiety

Interpersonal Therapy	Trauma/PTSD
Acceptance and Commitment Therapy	Bipolar spectrum disorders
Cognitive Processing Therapy	Psychosis
Psychodynamic Therapy	ADHD
Behavioral Parent Training	Learning disorders
Exposure and Response Prevention	Autism spectrum disorder
Psychological and psychoeducational assessment	Obsessive compulsive disorder
Health Psychology	Personality disorders
Family Therapy	Child behavior disorders
Group Therapy	Panic disorders
	Other anxiety disorders

Primary Rotation

General outpatient year long clinical rotation (child/adolescent or adult track)

- Primarily outpatient brief assessment and treatment
- Implementation of evidence-based treatment
- Consultation with internal and external providers, as well as outside agencies including higher level of care, educational institutions, community supports, and legal professionals
- 15-20 hours of individual, family, or couples therapy per week
- Option of 1-2 ongoing group-based interventions
- Caseload tailored to trainee experience and interests
- Primary supervision provided by licensed health service psychologist that aligns with the training needs and located at the same office site.

Supplemental Rotations (must choose at least one full year or two half year rotations)

Assessment rotation (full or half year)

- Year long rotation to develop/advance the intern's psychological and psycho-educational assessment skills, including the following:
- Assess full range of psychiatric, cognitive, learning, adaptive, and emotional abilities
- Administer and interpret psychological tests
 - Weschler (WISC-V, WAIS-IV, WMS), Woodcock-Johnson Cognitive and Academic, Feifer Academic Assessments, IVA-2, Rorschach, TAT, Roberts, MMPI-3, ADOS-2.
 - This includes didactics on administration and interpretation of psychological tests.
- Write efficient and effective psychological reports
- Engage in regular meetings with clinical team
- 10-15 hours per testing case
- Supervision provided by Tana Clarke, PhD and Rigo Lupercio, PsyD

School mental health rotation (half year)

- Weekly, twice monthly, or once monthly visits to a Maryland private school for the duration of the academic year or for one academic semester
- Student/staff psycho-education & training
- Individual brief assessment, case management, brief consultative intervention, creation and administration of specialized education accommodations, coordination of multi-disciplinary team
- Implementation of group based interventions including skills groups, support groups, awareness activities, prevention programs

- Regular meetings with clinical team
- 6-8 hours per week
- Supervision provided by Tana Clarke, PhD and Samantha Straub, LCPC, On-Site supervisor

Community mental health rotation (half or full year)

- Individual assessment and treatment of diverse populations with limited resources
- Opportunities to work directly in the community
- Coordination with local agencies including schools, treatment providers, county and state agencies
- Implementation of group based interventions including skills groups, support groups, awareness activities, prevention programs
- Regular meetings with clinical team
- 4-5 hours per week
- Supervision provided by Tana Clarke, PhD

Supplemental Clinical Experiences

- DBT/ACT track under the supervision of Tana Clarke, PhD
- Psychiatric care observation/education under the supervision of Danielle Mitch, PMHNP-BC
- Peer supervision/mentorship with 1-2 doctoral externs during their 9-10 month externship
 - As a means to achieve the competency in Supervision, interns will practice as a senior peer supervisor with psychology externs.
 - The goal of these experiential roles is to prepare the interns to become effective clinical supervisors in the future, utilizing a chosen model of supervision and providing mentorship to trainees in the development of competence and skills in professional practice. This will be done under the supervision of their primary clinical supervisor.
 - Interns are paired with 1-2 psychology externs who they will meet with monthly for 60 minutes

Didactics

- Two weekly 60 minute seminars or one 120 minute seminar focused on various clinical topics, including case formulation, evidence-based treatment of various presenting problems, assessment, etc. with Suzanne Linkroum, PhD, Maggie Watson PsyD, and Rigo Lupercio, PsyD and other special guest speakers. Topics will vary and are listed in Addendum B.
- Weekly virtual process group led by Micala Anderson, PsyD to discuss current cases, case formulation, and treatment.
- Monthly practice-wide “lunch-n-learns” by Waypoint providers of different specialties, social work, psychiatry, psychology, and counseling.

Additional Waypoint-wide Experiences

- Bi-weekly peer consultation with treatment team at assigned site location.
- Bi-annual Waypoint social events, including our annual summer family beach party and winter party
- Optional consult groups with various clinicians specializing in the specific area of focus, such as DBT, Trauma-focused care, Family/Couples Therapy.
- Monthly practice-wide gatherings for consultation and team building. Past events have included group exercise classes, site hosted dinners, pickle ball tournament, happy hours.
- Supplemental supervision with selected Waypoint clinicians based on speciality/experience
- Training library of treatment resources, manuals, educational videos/materials on google drive

Supervision

- Each intern will meet a licensed health service psychologist, for **2 hours per week**. Interns will be assigned a primary supervisor that has experiences with their specific internship goals in therapy and are site specific. For example, if an intern is on the child/adolescent track they will be placed with an child/adolescent health service psychologist. The primary supervisor will be located in the same office location as the intern. Additional supervision will be provided by an adjunct licensed health service psychologist. Supervisor assignments for the year will be determined during our onboarding process prior to beginning the internship.
- Interns will receive weekly clinical supervision from Dr. Clarke during the time frame of each testing case that they are assigned.
- Monthly meetings with the training director to discuss their training progress and provide any additional supervision that is needed.

Locations

Interns will be assigned to office locations based on the convenience and closeness to the interns home residence. Each of our three office locations provide the same multidisciplinary services. There is not one site that only specializes in one specific approach to treatment, age group, or diagnoses. Training for interns **does not differ** based on office location. The program is divided into two, location-based tracks to accommodate interns residing closer to Washington DC (DC Track: Annapolis/Severna Park offices) as well as interns residing closer to Baltimore, MD (Baltimore Track: Linthicum/Severna Park offices). Location details include:

Annapolis

- 7 individual offices (5 windowed) with waiting room and administrative area
- ADA compliant
- Conference/group room
- Primary licensed health service psychologists on site: Tana Clarke, PhD (adult and child track, primary assessment supervisor), Katie Smith, PsyD (adolescent/adult track)

Linthicum

- 5 individual offices (4 windowed) with waiting room and administrative area
- ADA compliant
- Primary licensed health service psychologists on site: Suzanne Linkroum, PhD (adult track), Elana Leibovitch, PsyD (child/adolescent track)

Severna Park

- 13 individual offices (10 windowed) with waiting room
- ADA compliant
- Conference/group room
- Primary licensed health service psychologists on site: Allyson Kett, PsyD (child/adolescent and adult track) Louisa Flynn, PsyD (child/adolescent and adult track)

Sample Schedule

	Monday Home	Tuesday Linthicum	Wednesday Linthicum	Thursday Annapolis	Friday Linthicum
7:00					
8:00					In-person Appointment
9:00					In-person Appointment
10:00	Admin time	Admin time	Admin time	Linthicum -Testing Block / Admin Time	Supervision
11:00	Telehealth Appointment	Admin time	In-person Appointment		In-person Appointment
12:00		Group Consultation/Lunch	Group Consultation/Lunch	Admin time	Monthly Peer consult with extern
1:00	DIDACTICS	In-person Appointment	In-person Appointment	WEEKLY CASE CONSULT/PROCESS GROUP	In-person Appointment
2:00	Telehealth Appointment	In-person Appointment	Supervision	Admin time	Admin time
3:00	Telehealth Appointment	In-person Appointment	In-person Appointment	Admin time	Admin time
4:00	Telehealth Appointment	In-person Appointment	In-person Appointment	COMMUNITY OUTREACH	
5:00	Telehealth Appointment	In-person Appointment	In-person Appointment	Charting Careers	
6:00	Telehealth Appointment	In-person Appointment	In-person Appointment		

Hours and schedule to be determined jointly between program and trainee

Intern Evaluation Process

Each intern will be evaluated on the nine Profession-Wide Competency areas throughout the training year as outlined in the tables in Addendum A. Successful completion of the internship program requires demonstration of expected competencies as well as meeting the minimum specific internship target goals/requirements listed below. Upon successful completion of the internship program, the intern receives a Health Service Psychologist Internship Certificate of Completion.

Performance goals/requirements

Interns are expected to develop the following core competencies

- Professional interpersonal behavior
- Seeking consultation/supervision
- Professional responsibility and documentation
- Efficiency and time management
- Knowledge of and demonstration of ethical behaviors and MD and federal laws
- Administrative competency
- Patient rapport
- Sensitivity to patient diversity
- Objective awareness of own cultural and ethnic background
- Diagnostic skill
- Psychological test selection and administration
- Psychological test interpretation
- Assessment writing skills
- Feedback regarding assessment
- Patient risk management and confidentiality
- Case conceptualization and treatment goals
- Therapeutic interventions
- Effective use of emotional reactions in therapy
- Group therapy skills and preparation
- Seeking current scientific knowledge
- Consultation assessment
- Consultative guidance
- Supervisory skills

Performance Evaluation

Ongoing feedback in weekly individual and group supervisions and meetings will occur. Interns will also participate in case presentations for additional sources of feedback.

Trainees will be evaluated twice yearly by both direct supervisors, and any adjunct supervisors on a range of clinical and professional competencies documented in the evaluation. See Addendum C for a sample Intern Competency Assessment Form. All supervisors will meet prior to mid-year and end-year feedback to discuss intern development in preparation for feedback. Feedback will be strengths-based and collaborative with a continual focus on the trainee's clinical development.

Interns can request additional meetings with supervisors for feedback or training planning at any time. Interns will also complete a self and program assessment at mid and end of year. Intern's psychology programs will receive relevant evaluation materials.

Rights and Responsibilities

Rights:

1. Access to appropriate supervision and guidance.
2. Opportunities to learn and develop clinical skills.
3. Respectful treatment and protection from discrimination or harassment.
4. Confidentiality of client information.
5. Fair evaluation and feedback on performance.

Responsibilities:

1. Adhering to professional ethics and standards.
2. Maintaining client confidentiality.
3. Engaging in ongoing learning and skill development.
4. Following the policies and procedures of the training site.
5. Seeking and being open to feedback from supervisors and peers.

Grievance and Due Process Procedures

Due process and grievance procedures will attempt to provide balance to power differentials between trainees and staff, as well as to provide a structured, affirming, and supportive forum to give voice to all parties with the shared goal of improving understanding, communication, and functioning of both the training program and the trainees.

Due Process

Due process may be initiated by program training team member in the following examples, and similar such instances.

- Intern exhibits a problematic pattern of behaviors that negatively impacts their development and performance in the intern role. Behavior patterns must include multiple (rather than single or isolated) and associated behaviors that have been observed through multiple information sources.
 - Domains in which impairments may be evident include interns' client retention or clinical care, misalignment of values between program and intern, delayed development in program and professional competencies, or multiple evaluation ratings below expectations.
 - Example intern behaviors that may trigger due process include but are not limited to: poor attendance for training or clinical activities, untimely/improper documentation or communication with training/clinical team, or disrespectful behavior towards colleagues/staff or clients.

In response to identifying trainee concerns, the intern's direct supervisor will verbally address and discuss relevant behavioral observations, along with the supervisor's rationale for concerns during the next scheduled individual supervision. Intern should have the opportunity to reflect and respond to the supervisor. Supervisor will then facilitate the verbal development of a remediation plan that both parties agree to. If the intern progresses in stated goals within two to five weeks, and all parties agree remediation has occurred, no additional documentation or intervention is required.

Grievance

Interns are encouraged to provide any ongoing feedback to training staff as a regular communication format. Students may also elect to initiate grievance procedures if they observe any patterns of program systems/actions that negatively impact intern training/development.

- Examples of concerns that interns may have about the training program include administrative/organizational inefficiency, insufficient or ineffective supervision, failure to

meet intern expectations of training opportunities/experiences, workload challenges, interactions with colleagues, along with similar such instances.

In response to identifying program concerns, intern should verbally address their experiences with supervisor during the next individual supervision. If intern concerns are related to their direct supervisor, they may elect to provide verbal feedback to another supervisor within the program. Intern and supervisor will then develop a verbal remediation plan that both parties agree to. If the program progresses in stated goals within two to five weeks, and all parties agree remediation has occurred, no additional documentation or intervention is required.

Notice and Hearing

If informal/verbal grievance or due processes do not lead to the identified goals within five weeks, either party may provide written notice requesting a hearing between intern and training staff. Therefore, should the program determine informal verbal remediation was ineffective they may trigger a due process hearing. Similarly if an intern determines insufficient benefits from informal efforts they may file a written grievance that will trigger a grievance hearing. Hearing procedures should provide interns the opportunity to express their opinions publicly to program staff in a respectful and affirming engagement. The hearing must occur within 10 business days of receiving written notice, and must involve the training director (or designated representative) along with two additional training staff members. Training director will appropriately record, document, and summarize the events of the hearing. Hearing will aim to clarify and document the specific professional concern at issue, detail steps each party will take to work toward remediation, and include corresponding objective goals and timelines. Documentation of this meeting will be provided by program within five business days after scheduled meeting. All concerns must be directly tied to the trainee and program expectations detailed in the training manual and evaluation indices.

- Potential strategies that may be used in remediation include: increasing or enhancing individual or group supervision, modifying the supervision form, delivery, or modality, referrals to external community supports, or modifying/reducing intern training responsibilities.

A follow-up meeting including all participants from original hearing will be set within three to six weeks to evaluate progress and/or adjust efforts. The team will continue to meet at regular intervals until the problem is determined by all parties to be remediated. Should adequate progress not be achieved within a six to eight week follow-up window, Waypoint will contact the intern's graduate program to identify additional supports.

Appeal

Intern has the right to appeal any actions taken by the training director within the due process and grievance protocols. Intern can do so through written contact with the practice owner and CEO, Dr. Clarke (drclarke@waypointwellnesscenter.com), as well as their respective academic training program. Intern should include a dated summary of all supporting information and relevant supporting documentation. Dr. Clarke will then coordinate a response in collaboration with Dr. Linkroum, Waypoint compliance officer. Written response to the appeal will be provided within five business days to the intern. Should the intern have remaining concerns regarding the appeal outcome, they may choose to make a complaint outside of the Waypoint training program through contact with the Maryland Board of Psychology at 4201 Patterson Ave #5, Baltimore, Maryland 21215 or (410)764-4787.

2027/2028 Intern Class Application procedure

Qualifications:

- Applicants must be advanced students in good standing in APA-accredited graduate programs in clinical, counseling, or school psychology (Ph.D./Psy.D).
- Must be accepted for doctoral candidacy in accredited psychology program prior to internship
- Must have successfully passed comprehensive exams or milestones and all basic coursework
- Must have a masters in psychology or related field and apply for Maryland Psychology Associate license once accepted.
- Applicants must have a letter of endorsement from the Director of Training certifying eligibility for internship
- Must have education, training, and experience in evidence based assessment and treatment

Selection Process

Waypoint Wellness Center is committed to abiding by APPIC policies, and no individuals associated with this institution will solicit, accept, or use any ranking related information from any intern applicant. Waypoint Wellness Center is an equal opportunity employer and adheres to APPICS's nondiscrimination policies.

Applications must be submitted by December 4 consisting of the following:

- Cover letter that addresses applicant's prior experience, goals for internship, and areas for development
- Curriculum Vitae
- Graduate transcripts (undergraduate and Masters program)
- Sample psychological report if available
- 2-3 letters of reference, at least one from a licensed health service psychologist

Applicants will be notified of interview invitations by December 15. Interviews will occur in early January if selected. Interviews will consist of two to three hours of virtual interviews, scheduled over two to three different time windows. You will meet with at least one training staff member and one current doctoral trainee. In-person interviews are an option, but not required.

All applications and inquiries should be directed to **both**:

Tana Clarke, PhD., Clinical Director
drclarke@waypointwellnesscenter.com
 Waypoint Wellness Center
 166 Defense Hwy, Ste, 203
 Annapolis, MD 21401

Allyson Kett, PsyD, Internship Training Director
drkett@waypointwellnesscenter.com
 Waypoint Wellness Center
 877 Baltimore-Annapolis Blvd. Suite 202
 Severna Park, MD 21146

Internship Benefits

Stipend: \$36,100 paid in 26 bi-weekly payments

- 6 paid holidays
- Two (80 hours) weeks PTO
- 401K match
- Professional liability covered through Waypoint
- Expenses covered for the required MD Psychology Associate license, including application and fee

Addendum A

Profession-Wide Competencies and Program-Specific Competencies		
Competency:	(i) Research	
Elements associated with this competency from IR C-8 I	• Demonstrates the substantially independent ability to critically evaluate and disseminate research or other scholarly activities (e.g., case conference, presentation, publications). • Disseminate research or other scholarly activities (e.g., case conference, presentation, publications at the local (including the host institution), regional, or national level.	
Program-defined elements associated with this competency (if applicable)		
Required training/experiential activities to meet each element.	• Monthly didactics dedicated to developing intern understanding and utilization of scientific information and processes. Integration into all training, supervision, and didactic processes. • Presentation and peer support for intern independent research activities and progress • Evaluation and analysis of individual, group, and organizational data tracking and outcome monitoring • Presenting/discussing current and emerging clinical research	
How outcomes are measured for each training/experiential activity listed above. List where in the self-study all associated evaluation tools are located.	How outcomes are measured: • Competency Assessment Form (CAF) • Goal 5 • Mid-year and year-end (additional assessments utilized as needed throughout training)	Evaluation tool and self-study location: •
Minimum levels of achievement (MLAs) for each outcome measure/evaluation tool listed above.	Mid-year: 3 Year-end: 5	
Competency:	(ii) Ethical and legal standards	

Elements associated with this competency from IR C-8 I	• Be knowledgeable of and act in accordance with each of the following: ○ the current version of the APA Ethical Principles of Psychologists and Code of Conduct; ○ Relevant laws, regulations, rules, and policies governing health service psychology at the organizational, local, state, regional, and federal levels; and ○ Relevant professional standards and guidelines. • Recognize ethical dilemmas as they arise, and apply ethical decision-making processes in order to resolve the dilemmas. • Conduct self in an ethical manner in all professional activities.	
Program-defined elements associated with this competency (if applicable)		
Required training/experiential activities to meet elements	• Weekly supervision with licensed clinical health service psychologist/compliance officer • Weekly case consultation addressing ethical principles • 2 hours weekly optional drop-in consultation for ethical consults	
How outcomes are measured for each training/experiential activity listed above. List where in the self-study all associated evaluation tools are located.	How outcomes are measured: • Competency Assessment Form (CAF) • Goal 1 • Mid-year and year-end (additional assessments utilized as needed throughout training)	Evaluation tool and self-study location: •
Minimum levels of achievement (MLAs) for each outcome measure/evaluation tool listed above.	Mid-year: 3 Year-end: 5	

Competency:	<i>(iii) Individual and cultural diversity</i>	
Elements associated with this competency from IR C-8 I	• An understanding of how their own personal/cultural history, attitudes, and biases may affect how they understand and interact with people different from themselves. • Knowledge of the current theoretical and empirical knowledge base as it relates to addressing diversity in all professional activities including research, training, supervision/consultation, and service. • The ability to integrate awareness and knowledge of individual and cultural differences in the conduct of professional roles. • The ability to apply a framework for working effectively with areas of individual and cultural diversity. • The ability to work effectively with individuals whose group membership, demographic characteristics, or worldviews create conflict with their own.	
Program-defined elements associated with this competency (if applicable)		
Required training/experiential activities to meet elements	Didactics regularly scheduled throughout training process focused on the individual developmental process of interns in their personal and contextual understanding of diversity, as well as the clinical implications and applications of the interns cultural awareness and competence.	
How outcomes are measured for each training/experiential activity listed above. List where in the self-study all associated evaluation tools are located.	How outcomes are measured: • Competency Assessment Form (CAF) • Goal 2 • Mid-year and year-end (additional assessments utilized as needed throughout training)	Evaluation tool and self-study location: •
Minimum levels of achievement (MLAs) for each outcome measure/evaluation tool listed above.	Mid-year: 3 Year-end: 5	

Competency:	<i>(iv) Professional values, attitudes, and behaviors</i>	
Elements associated with this competency from IR C-8 I	- Behave in ways that reflect the values and attitudes of psychology, including cultural humility, integrity, deportment, professional identity, accountability, lifelong learning, and concern for the welfare of others - Engage in self-reflection regarding one's personal and professional functioning; engage in activities to maintain and improve performance, well-being, and professional effectiveness. - Actively seek and demonstrate openness and responsiveness to feedback and supervision. - Respond professionally in increasingly complex situations with a greater degree of independence as they progress across levels of training.	
Program-defined elements associated with this competency (if applicable)		
Required training/experiential activities to meet elements	Individual and group supervision, peer consultation, case coordination and consultation, participation in didactics	
How outcomes are measured for each training/experiential activity listed above. List where in the self-study all associated evaluation tools are located.	How outcomes are measured: - Competency Assessment Form (CAF) - Emphasis on goals 2, 6 and 7 - Mid-year and year-end (additional assessments utilized as needed throughout training)	Evaluation tool and self-study location:
Minimum levels of achievement (MLAs) for each outcome measure/evaluation tool listed above.	Mid-year: 3 Year-end: 5	

Competency:	<i>(v) Communications and interpersonal skills</i>	
Elements associated with this competency from IR C-8 I	• Develop and maintain effective relationships with a wide range of individuals, including colleagues, communities, organizations, supervisors, supervisees, and those receiving professional services. • Demonstrate a thorough grasp of professional language and concepts; produce, comprehend and engage in communications that are informative and well-integrated. • Demonstrate effective interpersonal skills and the ability to manage difficult communication well.	
Program-defined elements associated with this competency (if applicable)		
Required training/experiential activities to meet elements	Training/didactics in professional and multidisciplinary case coordination and management. Developmental efforts focused on preparing intern for working in multidisciplinary teams in a variety of settings. Regular access to health service psychologists, as well as psychiatrists, psychiatric nurse practitioners, social workers, and licensed counselors will facilitate a comprehensive contextual understanding of the mental health landscape.	
How outcomes are measured for each training/experiential activity listed above. List where in the self-study all associated evaluation tools are located.	How outcomes are measured: • Competency Assessment Form (CAF) • Emphasis on goals 6, 1, and 2 • Mid-year and year-end (additional assessments utilized as needed throughout training)	Evaluation tool and self-study location: •
Minimum levels of achievement (MLAs) for each outcome measure/evaluation tool listed above.	Mid-year: 3 Year-end: 5	

Competency:	<i>(vi) Assessment</i>	
Elements associated with this competency from IR C-8 I	• Demonstrate current knowledge of diagnostic classification systems, functional and dysfunctional behaviors, including consideration of client strengths and psychopathology. • Demonstrate understanding of human behavior within its context (e.g., family, social, societal and cultural). • Demonstrate the ability to apply the knowledge of functional and dysfunctional behaviors including context to the assessment and/or diagnostic process. • Select and apply assessment methods that draw from the best available empirical literature and that reflect the science of measurement and psychometrics; collect relevant data using multiple sources and methods appropriate to the identified goals and questions of the assessment as well as relevant diversity characteristics of the service recipient. • Interpret 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. • Communicate the findings and implications of the assessment in an accurate and effective manner sensitive to a range of audiences.	
Program-defined elements associated with this competency (if applicable)		
Required training/experiential activities to meet elements	Weekly individual supervision targeting intern development in psychological assessment Intern will complete 1-6 psychological assessments depending on individual training goals and experience Intern will learn to incorporate psychological assessment principles into all clinical activities	
How outcomes are measured for each training/experiential activity listed above. List where in the self-study all associated evaluation tools are located.	How outcomes are measured: • Competency Assessment Form (CAF) • Goal 3 • Mid-year and year-end (additional assessments utilized as needed throughout training)	Evaluation tool and self-study location: •

Minimum levels of achievement (MLAs) for each outcome measure/eval tool listed above.	Mid-year: 3 Year-end: 5	
Competency:	(vii) Intervention	
Elements associated with this competency from IR C-8 I	• Establish and maintain effective relationships with the recipients of psychological services. • Develop evidence-based intervention plans specific to the service delivery goals. • Implement interventions informed by the current scientific literature, assessment findings, diversity characteristics, and contextual variables. • Demonstrate the ability to apply the relevant research literature to clinical decision making. • Modify and adapt evidence-based approaches effectively when a clear evidence-base is lacking. • Evaluate intervention effectiveness, and adapt intervention goals and methods consistent with ongoing evaluation.	
Program-defined elements associated with this competency (if applicable)		
Required training/experiential activities to meet elements	Intern will spend approximately 50% of their direct clinical service hours on clinical intervention of individuals, families, or groups. Individual and group supervision will serve to provide live developmental training opportunities. Didactics will be targeted toward clinical experiences the interns will be engaged in	
How outcomes are measured for each training/experiential activity listed above. List where in the self-study all associated evaluation tools are located.	How outcomes are measured: • Competency Assessment Form (CAF) • Goal 4 • Mid-year and year-end (additional assessments utilized as needed throughout training)	Evaluation tool and self-study location: •
Minimum levels of achievement (MLAs) for each outcome measure/evaluation tool listed above.	Mid-year: 3 Year-end: 5	

Competency:	<i>(viii) Supervision</i>	
Elements associated with this competency from IR C-8 I	• Apply supervision knowledge in direct or simulated practice with psychology trainees, or other health professionals. Examples of direct or simulated practice examples of supervision include, but are not limited to, role-played supervision with others, and peer supervision with other trainees. • Apply the supervisory skill of observing in direct or simulated practice. • Apply the supervisory skill of evaluating in direct or simulated practice. • Apply the supervisory skills of giving guidance and feedback in direct or simulated practice.	
Program-defined elements associated with this competency (if applicable)		
Required training/experiential activities to meet elements	Two hours of individual supervision weekly targeting the development of psychological competencies of individual interns, as well as two hours of group supervision/consultation with licensed mental health professionals.	
How outcomes are measured for each training/experiential activity listed above. List where in the self-study all associated evaluation tools are located.	How outcomes are measured: • Competency Assessment Form (CAF) • Goal 7 • Mid-year and year-end (additional assessments utilized as needed throughout training)	Evaluation tool and self-study location: •
Minimum levels of achievement (MLAs) for each outcome measure/evaluation tool listed above.	Mid-year: 3 Year-end: 5	

Competency:	<i>(ix) Consultation and interprofessional/interdisciplinary skills</i>	
Elements associated with this competency from IR C-8 I	• Demonstrate knowledge and respect for the roles and perspectives of other professions. • Apply the knowledge of consultation models and practices in direct or simulated consultation with individuals and their families, other health care professionals, interprofessional groups, or systems related to health and behavior.	
Program-defined elements associated with this competency (if applicable)		
Required training/experiential activities to meet elements	Multidisciplinary consultation and observation opportunities available within organization in the form of weekly lunch/consultation groups, monthly dinners, and weekly learning/didactics that include health service psychologists, psychiatrists, psychiatric nurse practitioners, social workers, and counselors within our organization. Frequent consultation and communication with outside agencies (schools, social services, community organizations, and legal professionals) are built into developmental training.	
How outcomes are measured for each training/experiential activity listed above. List where in the self-study all associated evaluation tools are located.	How outcomes are measured: • Competency Assessment Form (CAF) • Goal 6 • Mid-year and year-end (additional assessments utilized as needed throughout training)	Evaluation tool and self-study location: •
Minimum levels of achievement (MLAs) for each outcome measure/evaluation tool listed above.	Mid-year: 3 Year-end: 5	

Addendum B

2026-2027 Didactic topics

Date	Topic 1	Presenter(s)	Topic 2	Presenter(s)
7/1/26	Full Day Waypoint Orientation			
7/6/26	Introductions/Ice breakers/ Orientation/Suggestions	Rigo Lupercio, PsyD and Maggie Watson, PsyD	CONTINUED	Rigo Lupercio, PsyD and Maggie Watson, PsyD
7/13/26	Electronic Health Records	Suzanne Linkroum, PhD	CONTINUED	Rigo Lupercio, PsyD and Maggie Watson, PsyD
7/20/26	Progress notes/Golden thread	Suzanne Linkroum, PhD	CONTINUED	Rigo Lupercio, PsyD and Maggie Watson, PsyD
7/27/26	Diagnosing	Suzanne Linkroum, PhD	Virtual Reality Therapy	Peter Oykman, Core Partners
8/3/26	Treatment Planning	Suzanne Linkroum, PhD	Child Protective Services and Mandated Reporting	Blake Woodruff, LGSW
8/6/26	Therapeutic Riding - ON SITE	Maryland Therapeutic Riding	CONTINUED	Maryland Therapeutic Riding
8/10/26	Insurance 101	Allyson Kett, PsyD	Insurance - Admin perspective	Waypoint support staff
8/17/26	Crisis risk assessment, intervention and documentation	Suzanne Linkroum, PhD	CONTINUED	Suzanne Linkroum, PhD
8/24/26	Self Care/ Healthy Behaviors Promotion	Rigo Lupercio, PsyD and Maggie Watson, PsyD	CONTINUED	Rigo Lupercio, PsyD and Maggie Watson, PsyD
8/31/26	Trauma informed Care	Maggie Watson, PsyD	CONTINUED	Maggie Watson, PsyD
9/7/26	LABOR DAY			
9/14/26	Business of private practice series: Dos/Donts, Setting up Large Private Practice	Allyson Kett, PsyD	Business of private practice series: Solo private practice	Kristen Keuleman, LCPC
9/21/26	ADOS Testing	Rigo Lupercio, PsyD	2nd hour lab/practice	Rigo Lupercio, PsyD
9/28/26	Multicultural considerations	Rigo Lupercio, PsyD and Maggie Watson, PsyD	CONTINUED	Rigo Lupercio, PsyD and Maggie Watson, PsyD
10/5/26	Educational testing	Scott Brain, MS.Ed., NCSP	2nd hour lab/practice	Scott Brain, MS.Ed., NCSP
10/12/26	Psychological Testing	Maggie Watson, PsyD	2nd hour lab/practice	Maggie Watson, PsyD
10/16/26	Preparation for 10/19 - Watch video on ADHD asseessmentnt	Russell Barkley, PhD		
10/19/26	ADHD Assessment	Tana Clarke, PhD	2nd hour lab/practice	Tana Clarke, PhD
10/26/26	ADHD Treatment	Tana Clarke, PhD	ADHD Psychopharmacology	Danielle Mitsch, PMHNP-BC
11/2/26	Anxiety - Diagnosis and Treatment	Suzanne Linkroum, PhD	Anxiety Psychopharmacology	Danielle Mitsch, PMHNP-BC
11/9/26	Depressive Disorders - Diagnosis and Treatment	Rigo Lupercio, PsyD	Depression Psychopharmacology	Danielle Mitsch, PMHNP-BC

Date	Topic 1	Presenter(s)	Topic 2	Presenter(s)
11/16/26	Bipolar Disorder - Diagnosis and Treatment	Maggie Watson, PsyD	Bipolar Psychopharmacology	Danielle Mitsch, PMHNP-BC
11/23/26	Autism Across the Lifespan	Tom Flis, MS, BCBA, LBA, LCPC, Sheppard Pratt	Discussion/activity/case examples	Rigo Lupercio, PsyD
11/30/26	Affirmative Care with LGBTQ+ community	Darren Freeman-Coppadge, PhD	Business or Private Practice: Social Media Marketing	Jillian Amodio, LCSW
12/7/26	Perinatal and postpartum	Louisa Flynn, PsyD	Perinatal grief and loss	Louisa Flynn, PsyD
12/14/26	Integrating Sex Education into Therapy	Jillan Amodio, LCSW	CONTINUED	Jillan Amodio, LCSW
12/21/26	OCD	Rigo Lupercio, PsyD	CONTINUED	Head of KKI Ped OCD
12/28/26	CHRISTMAS WEEK			
1/4/27	Group Therapy	Rigo Lupercio, PsyD and Maggie Watson, PsyD	Case examples/discussion, "mock" group	Rigo Lupercio, PsyD
1/11/27	Forensic Psychology - Consulting, expert witness, evaluations	Tana Clarke, PhD	CONTINUED	Tana Clarke, PhD
1/18/27	Adverse Childhood Experiences	Maggie Watson, PsyD	Art therapy	Maggie Watson, PsyD
1/25/27	IEP/504 requests and meetings	Scott Brain, MS.Ed., NCSP	Family Reunification Services	Stacey Hagen, LCSW
2/1/27	Trauma Treatment - Somatic techniques	Maggie Watson, PsyD	CONTINUED	Rigo Lupercio, PsyD and Maggie Watson, PsyD
2/8/27	Trauma Treatment -CPT	Charlene VanNest, LCSW-C	CONTINUED	Rigo Lupercio, PsyD and Maggie Watson, PsyD
2/15/27	Nature-based Mindfulness	Maggie Watson, PsyD	Nature mindfulness walk	Rigo Lupercio, PsyD and Maggie Watson, PsyD
2/22/27	Co-parenting	Jill Gasper, PhD	Domestic Violence, IPV	Charlene VanNest, LCSW-C
3/1/27	Eastern-based treatment approaches (holistic)	Maggie Watson, PsyD	Activity for meditation & mindfulness	Rigo Lupercio, PsyD and Maggie Watson, PsyD
3/8/27	Couples Therapy	Suzanne Linkroum, PhD	Law for Mental Health Professionals	Malpractice Attorney (TBD)
3/15/27	Grief Therapy	Maggie Watson, PsyD	CONTINUED	Maggie/Rigo
3/22/27	Eating Disorders	TBD	CONTINUED	Rigo Lupercio, PsyD
3/29/27	Impacts of nutrition on mental health	Jenna Deak?	CONTINUED	Rigo Lupercio, PsyD and Maggie Watson, PsyD
4/5/27	Business of private practice series: Coaching	Samantha Straub, LCPC	Women's Reproductive Health	Lizzie Pierce, MA
4/12/27	Utilizing Psychodynamic Approaches in therapy	Ryan Shea, PsyD and Alex Abramowicz, PsyD	Pediatric psychology	Elana Leibovitch, PsyD
4/19/27	Sexual disorders & Treatment	Nadia Maghsadi, PsyD	CONTINUED	Nadia Maghsadi, PsyD

Date	Topic 1	Presenter(s)	Topic 2	Presenter(s)
4/26/27	Sports Psychology	Scott Brain, MS.Ed., NCSP	CONTINUED	
05/03/27	Personality disorders	Maggie Watson, PsyD	CONTINUED	Rigo Lupercio, PsyD and Maggie Watson, PsyD
5/10/27	Trichotillomania	Rigo Lupercio, PsyD	CONTINUED	Rigo Lupercio, PsyD and Maggie Watson, PsyD
5/17/27	Chronic Illness/ Behavioral Medicine	Suzanne Linkroum, PhD	CONTINUED	Suzanne Linkroum, PhD
5/24/27	Applied Behavior Analysis	Tom Flis, MS, BCBA, LBA, LCPC, Sheppard Pratt	CONTINUED	Tom Flis, MS, BCBA, LBA, LCPC, Sheppard Pratt
5/31/27	MEMORIAL DAY			
6/7/27	Intern 1 -- Presentation on Dissertation (invite all Training staff)	Intern 1	<i>Feedback/ Questions</i>	ALL
6/14/27	Intern 2 -- Presentation on Dissertation (invite all Training staff)	Intern 2	<i>Feedback/ Questions</i>	ALL
6/21/27	Intern 3 -- Presentation on Dissertation (invite all Training staff)	Intern 3	<i>Feedback/ Questions</i>	ALL
6/28/27	Completion of Internship Celebration	Everyone		

Monthly Lunch 'n Learns:

12 total didactic hours

60 minutes, every 4th Tuesday

Varied presenters

July	The mental health needs of inner city youth, specifically Woodside Gardens and other Annapolis neighborhoods
August	-Claire Flynn, Waypoint liaison with Charting Careers (https://chartingcareers.org/) Coordination with schools and school admin: All you need to know to provide the best support to your student/clients -Leslie Eget, LCPC, DEd
September	Affirmative therapy for transgender communities -Carrie Cleveland, LCSW-C
October	Clinical hypnosis and mindfulness meditation -Akira Otani, Ed.D
November	Reproductive-related mood syndromes in women, such as post-partum and peri menopausal depression and the treatment of mood disorders during pregnancy. -Kristina Money, MD, psychiatrist
December	Technology, social media, and mental health -Erin Castleberry, MS, LCPC, NCC
January	Mental health treatment in Emergency Medicine -Danielle Mitsch, PMHNP-BC
February	The importance for relationship and sexual literacy in modern youth -Jillian Amodio, LGSW
March	EMDR & IFS-Informed EMDR therapy -Charlene Van-Nest, LCSW-C
April	Integrated mental health treatment in primary care -Andie Sancarranco, MSN, AGPCNP-BC, PMHNP-BC, CRNP
May	Mental health support in the school setting and coordination of care

June

-Samantha Straub, MS, LCPC
Sport psychology and performance
- Scott Brain, MS.Ed., NCSP