



THE UNIVERSITY OF  
**TENNESSEE**  
HEALTH SCIENCE CENTER.

Center of Excellence for Children in State Custody

# **PSYCHOLOGY POSTDOCTORAL FELLOWSHIP IN CHILD WELFARE AND TRAUMA-INFORMED CARE**



The University of Tennessee Health Science Center  
Professional Psychology Internship Consortium

**2025–2026 TRAINING YEAR**



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# INTRODUCTION

The University of Tennessee Professional Psychology Internship Consortium (UTPPIC), in Memphis, TN, is one of the oldest psychology internship sites in the U.S., in existence since 1956. In addition to providing predoctoral internship training, UTPPIC also coordinates all Psychology Postdoctoral Fellowships offered by consortium sites within the University of Tennessee Health Sciences Center.

UTPPIC currently offers a postdoctoral fellowship specializing in Child Welfare and Trauma-Informed Care, which is housed within the Center of Excellence for Children in State Custody (COE). The COE is a multidisciplinary organization dedicated to clinical innovation, educational excellence, community engagement and commitment, and professionalism and leadership development.

Liz Paiml, Ph.D., is the Program Director of the postdoctoral fellowship in Child Welfare and Trauma-Informed care. The UTPPIC Administrative Committee provides consistency in the standards for, and administration of, selection, evaluation, and due process procedures to ensure high quality experiences.

The Administrative Committee is headed by Melissa Hoffmann, Ph.D., Director of the Consortium. In this role, Dr. Hoffmann also serves as the Training Director of the fellowship program, providing oversight for administrative issues including grievance and due process procedures, communication with APPIC, and maintenance of fellowship files.

The UTPPIC currently has an opening for a one-year postdoctoral fellow for the 2024-2025 training year.

Clinical and didactic experiences based on current empirical literature are required as part of the fellowship program, and opportunities for supervision, seminars, staff meetings, and additional selected learning experiences (e.g., workshops) are available. Postdoctoral fellows have opportunities to work with predoctoral psychology interns as well. This training program meets the postdoctoral experience requirements for licensure in the state of Tennessee.



## PHILOSOPHY AND AIMS

The central aim of the Psychology Postdoctoral Fellowship in Child Welfare and Trauma-Informed Care is to provide advanced specialty education and training in the assessment and treatment of traumatized children and families. The Fellowship follows a scholar-practitioner model with a focus on direct clinical practice supported by current psychological literature. The overarching goal of the program is to prepare advanced postdoctoral practitioners to provide evidence-based, culturally sensitive psychological services to diverse populations. This goal is achieved by providing high quality, culturally relevant, consumer-driven comprehensive services, for individuals and their families affected by or at risk for psychological trauma. The Fellowship aims for fellows to practice and expand on previously held knowledge and skills, develop nuanced knowledge and skills, and experience personal and professional growth that contributes to the development of a competent, independent psychologist.

Fellows are provided in-depth training experiences to ensure the development of core competencies. To achieve these goals and aims, fellows are expected to achieve the following competencies by the end of the training year:

1. Professional Values and Attitudes
2. Individual and Cultural Diversity
3. Communication and Interpersonal Skills
4. Psychological Assessment
5. Consultation and Interprofessional/Interdisciplinary Skills
6. Scientific Knowledge and Research Evaluation
7. Ethical and Legal Standards

# PROGRAM OVERVIEW

The UTHSC Center of Excellence for Children in State Custody (COE) is one of a network of 5 pediatric referral centers across the state established in coordination with Tennessee's Department of Children's Services (DCS) and TennCare (Tennessee's Medicaid program) to serve children in state custody and those at risk of entering state custody. The UTHSC COE is comprised of an interdisciplinary clinical staff, including psychology, psychiatry, developmental pediatrics, social work, speech pathology, and education advocacy. Staff assist DCS and community providers in West Tennessee by improving health and behavioral services for children with DCS involvement through direct and consultative means.

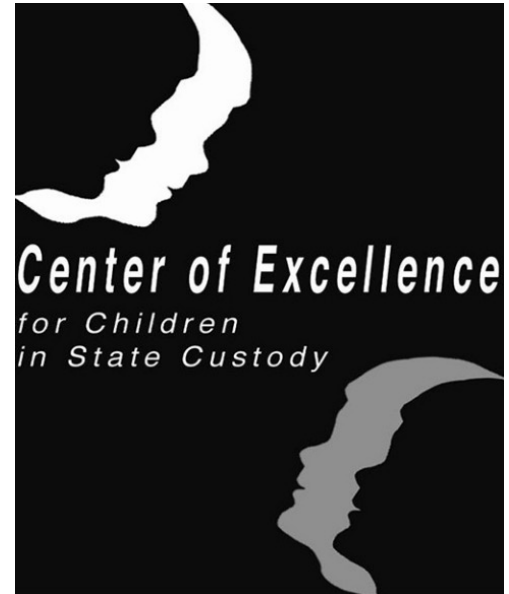
Referrals to the UTHSC COE are primarily submitted by DCS case managers or juvenile courts. Referrals are typically made for the following reasons:

- When a case is complex and there are diagnostic and mental health concerns.
- When there are conflicting diagnoses among health service providers.
- When a comprehensive review of the child's history (e.g., trauma experiences, behavior, treatment, placement, etc.) would assist in determining the child's current needs.
- When an evaluation or examination would add information needed for placement and treatment recommendations.
- When there is concern about intellectual and developmental delays.
- When there is concern about psychoactive medications.

Cases referred to the COE typically receive an intensive case review, involving review of various records (e.g., educational, mental health, medical, DCS involvement, etc.), and consultation with service providers. Following the intensive case review, most cases are seen at the center for a comprehensive evaluation completed by various members of the multidisciplinary team. Each COE evaluation is unique; evaluation and assessment procedures are generated for each child based on the referral questions. Following evaluation, a report is developed that includes a detailed case conceptualization, as well as specific treatment and placement recommendations. Recommendations are discussed with the referrer, and others as appropriate, and consultative assistance is offered in implementing the recommended services. Members of the COE staff conduct monthly follow-up calls with each DCS region the UTHSC COE serves to discuss implementation of the recommendations made in the evaluations and to address any barriers.

The UTHSC COE accepts referrals for children ages 0-18. Evaluations typically assess for the presence of: Trauma- and Stressor-Related Disorders (e.g., PTSD), Intellectual Developmental Disorder, Borderline Intellectual Functioning, Global Developmental Delay, Attention-Deficit/Hyperactivity Disorder, Learning Disorders, Autism Spectrum Disorder, Disruptive Behavior Disorders, and Internalizing Disorders. Although intermittent, other possible assessments in multidisciplinary evaluations include Problematic Sexual Behaviors and Psychosis.

In addition to direct services, across the state of Tennessee, the network of the five COEs coordinate dissemination of evidenced-based treatments (EBTs) for the treatment of child trauma. Training is completed with community providers using the Learning Collaborative Methodology. Thus far, training for community providers has focused on trauma-based treatments [Trauma-Focused Cognitive Behavioral Therapy (TF-CBT) and Attachment, Self-Regulation, and Competency (ARC)], Parent-Child Interaction Therapy (PCIT), and treatment for children (age 12 and under) with sexual behavior problems (CSBP). In addition, the COE provides training for DCS workers and foster parents using National Child Traumatic Stress Network (NCTSN) curriculums as affiliates of the NCTSN.



# CLINICAL TRAINING

The experiences provided to postdoctoral fellows at the COE are consistent with competencies deemed important in the field of child maltreatment (Damashek, Balachova, & Bonner, 2011). At the completion of the training year, fellows will have an advanced understanding of issues related to child abuse and neglect, foster care, juvenile courts, and systems of care for children and adolescents. Emphasis is placed on assessment, multidisciplinary collaboration, consultation, and ethics. The fellowship is approximately 40 hours per week, Monday through Friday, 8:00 am – 5:00 pm. Fellows may work over 40 hours if additional training opportunities (i.e., intervention) are selected.

Training components are described in more detail below:

- **Record Reviews**

- Extensive record reviews are viewed as vital to our understanding of a child's history and prior interventions. They are often presented during multidisciplinary case conferences and considered when developing evaluation plans for each child.

- **Consultation**

- The fellow will often consult with DCS case managers, treatment providers, educators, and caregivers as part of assessment and care coordination.

- **Assessment**

- Evaluations are often multidisciplinary and are individualized to address a particular child's presenting concerns. Often the fellow will be conducting clinical interviews, developmental assessments, psychoeducational evaluations, trauma screenings, and overall socioemotional and behavioral assessments.
- Cases seen for assessment range in age from 0 to 18 and present with a variety of presenting concerns. Cases are complex and often require differential diagnostic skills.

- **Multidisciplinary Case Conferences/Staffings**

- Multidisciplinary case conferences occur each morning and involve discussion of referrals, targets and methods of evaluation, diagnostic considerations, and case recommendations.

- **Treatment\***

- Opportunities exist to attend trainings in Trauma-Focused Cognitive Behavioral Therapy (TF-CBT) and Attachment, Self-Regulation, and Competency (ARC) treatment models. Fellows may carry a small caseload of TF-CBT clients.

- Structured training is provided in Parent-Child Interaction Therapy (PCIT), which includes didactics, group supervision, and direct service delivery with live supervision. The training model used is consistent with PCIT International Therapist Training Guidelines for developing necessary competencies as a PCIT therapist and supports those interested in meeting PCIT International therapist certification criteria.

- \* Treatment opportunities are secondary to core services (record reviews, consultation, and assessment). Fellows may participate in treatment clinics as long as there is no impact on their core work at the COE. Given the priority to core services, the fellow will likely choose only one treatment clinic to join for their training year.

- **Supervision of Psychology Trainees**

- Fellows may have the opportunity to provide supervision in assessment to pre-doctoral interns rotating through the COE. Supervision opportunities are dependent upon the fellow's background and skill level, as well as the skill level of the pre-doctoral intern.

- **Training in Evidence-Based Practices in Trauma-Informed Care**

- Formal training in EBTs is available; however, specific training availability depends on the current dissemination goals of the COEs Best Practices Team. Fellows may have the opportunity to attend community trainings sponsored and coordinated by the COE, such as TF-CBT and ARC training.
- Fellows may have the opportunity to participate in disseminating NCTSN curriculums such as the Resource Parent Curriculum (RPC) and the Trauma Toolkit training curriculum for child welfare workers.

## DIDACTICS

Fellows will attend the Child Welfare and Trauma Didactic series (with Vanderbilt, UT Knoxville and ETSU COE staff and psychology trainees) via teleconference. This series runs monthly, every 2nd Monday of the month. Opportunities will be available for fellows to present during the series.

If joining a treatment clinic, fellows will experience weekly didactic/seminar and group supervision for

the PCIT clinic and/or TF-CBT clinic. Additionally, fellows have the option to attend any pre-doctoral internship didactic of interest. These didactics occur weekly throughout the year. If additional community trainings are offered during the fellowship that would supplement training in trauma, the Program Director will offer for the fellow to attend.

## SUPERVISION

Fellows receive supervision through a variety of modalities, which often includes a combination of group, individual, and live supervision models. Fellows receive at least 2 hours of individual supervision per week and may average of 4 to 5 hours of supervision per week overall.

The exact type and frequency of supervision depends on fellows' prior training and competencies, ideally becoming more consultative in nature as the fellow progresses through the training year. Fellows receive feedback regarding their progress throughout the training year. Formal written evaluations are provided at mid-year and at the end of the training year.

Supervisory Staff:

### **Paiml, Liz, Ph.D.**

University of Alabama, 2018; Assistant Professor, Department of Psychiatry, Department of Pediatrics. Clinical interests: Complex Trauma, Trauma-Informed

Assessment and Care, Problematic Sexual Behavior in Children, Parent-Child Interaction Therapy (PCIT), and Disruptive Behavior Problems.

### **Hoffmann, Melissa, Ph.D.**

Northern Illinois University, 1998; Associate Professor, Department of Psychiatry; UTHSC COE Program Director. Clinical interests: Problematic Sexual Behavior in Children and Trauma-Informed Care.

### **Maloney, Kelsey Ph.D.**

Texas Tech University 2021; Assistant Professor, Department of Psychiatry, Department of Pediatrics. Clinical interests: Complex Trauma, Trauma-Informed Assessment and Treatment, Trauma-Focused Cognitive Behavioral Therapy, Parent-Child Interaction Therapy (PCIT), Juvenile Justice and Trauma.

## QUALIFICATIONS

Applicants with diverse backgrounds are encouraged to apply. The program accepts applicants graduating from clinical, counseling, and school psychology programs with a variety of internship experiences but gives preference to applicants from APA-accredited schools and internships. Applicants from non-APA-accredited doctoral programs must have attended a regionally accredited institution. Potential fellows must complete all degree requirements, including a predoctoral internship, prior to beginning their fellowship. If the predoctoral internship is not APA-accredited or an APPIC member, the applicant will be required to submit detailed information regarding their internship training experience to ensure that it meets APPIC member standards.

Value is placed on knowledge or training in evidence-based practices as well as interest and experience related to trauma. Ideal candidates would have:

- Strong foundation in evidence-based assessment for cognitive, academic, and adaptive functioning.
- Interest in developing competency in trauma-informed assessment.
- Experience in working with diverse, underserved, and psychologically complicated patient populations who have experienced complex trauma.
- Commitment to expanding and deepening understanding of trauma, differential diagnosis, and tailored recommendations.
- Desire to work with providers of various disciplines to conceptualize psychological presentations.

## BENEFITS

Postdoctoral Fellows are UTHSC employees and have access to library facilities, technical support, etc. The current fellowship stipend is \$47,500, plus health insurance. Fellows receive all scheduled UTHSC holidays and closings and may also take up to 10 days of professional leave during the training year. Fellows are provided with appropriate office space, computer

access, and administrative support. Educational materials related to the Examination for Professional Practice in Psychology (EPPP) are provided.

Due Process and Grievance procedures are provided to fellows at the beginning of the training year. These procedures are available to applicants by request.

## APPLICATION PROCEDURES

The UTPPIC program is a member of the Association of Psychology Postdoctoral and Internship Centers (APPIC) and extends for one calendar year.

The University of Tennessee Professional Psychology Internship Consortium Postdoctoral Fellowship is a member of Association of Psychology Postdoctoral and Internship Centers (APPIC) and follows the APPIC Postdoctoral Selection Guidelines.

Applications may be submitted through the APPA CAS online system. Applications should include CV, letter of interest, transcript, a sample assessment report (must include a non-abbreviated cognitive measure), and three letters of recommendation.

Applications should be submitted by January 15, 2025. Applicants will be informed of the status of their application as soon as possible. Qualified applicants will be offered interviews via Zoom or other videoconference format to decrease costs to applicants. Offers will be made in accordance with the APPIC Postdoctoral Selection Standards and the Common Hold Date.

Completion of a background check will be required by the university before an offer of a position can be finalized. Information regarding due process and other policies will be provided to fellows at the start of their fellowship.

If you have any questions about the postdoctoral fellowship position, please contact:

**Liz Paiml, Ph.D.**  
**eadams28@uthsc.edu**

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The University does not discriminate on the basis of sex or handicap in the education programs and activities which it operates, pursuant to the requirements of Title IX of the Education Amendments of 1972, Pub. L. 92-318, 504 of the Rehabilitation Act of 1973, Pub. L. 93-112 and the Americans with Disabilities Act of 1990, Pub. L. 101-336, respectively. This policy extends to both employment by and admission to the University.

Inquiries concerning Title IX, 504 and the Americans with Disabilities Act should be directed to the Office of Equity and Diversity at 920 Madison Avenue, Suite 420, Memphis, TN 38163, 901-448-2112. Charges of violation of the above policy should also be directed to the Office of Equity and Diversity.

### APPIC Contact Information

**Association of Psychology Postdoctoral  
and Internship Centers**

17225 El Camino Real, Suite #170

Houston, TX 77058-2748

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