

**Mississippi State Hospital
Forensic Psychology Postdoctoral Fellowship**



**Program Brochure
2021-2022 Training Year**

Table of Contents

| | |
|---|----|
| Mississippi State Hospital Forensic Services..... | 3 |
| Types of Forensic Services..... | 3 |
| Types of Forensic Evaluations..... | 4 |
| Types of Wards on Forensic Services | 4 |
| Forensic Psychology Postdoctoral Fellowship Training Experiences..... | 6 |
| Court-ordered Forensic Evaluations..... | 6 |
| Psychological Testing..... | 6 |
| Forensic Report Writing..... | 7 |
| Observing or Providing Expert Witness Testimony..... | 7 |
| Supervision and Professional Development..... | 7 |
| Other Optional Training Opportunities..... | 8 |
| Position, Stipend, and Other Benefits..... | 10 |
| Application and Selection Procedures..... | 11 |

Mississippi State Hospital Forensic Services



Forensic Services at Mississippi State Hospital (MSH) have the only public sector, inpatient forensic psychiatric units in the state. The forensic evaluation staff conduct pretrial and post-trial criminal forensic evaluations of male and female adult criminal defendants who are ordered to undergo a forensic evaluation by the Mississippi Circuit Courts. Occasionally, a juvenile criminal defendant is evaluated if the case has been waived

to the adult Circuit Court. As the only forensic service in the state, defendants from all 82 counties across the state who are court-ordered for an inpatient forensic mental health evaluation and/or competence restoration treatment are transported to Forensic Service at Mississippi State Hospital.

Building 43 is home to the original 35-bed, maximum-security, all male unit. The patient population includes pre-trial criminal defendants with violent offenses (e.g., murder, aggravated assault) and/or behavioral/elopement issues, as well as long-term patients (i.e., Not Guilty by Reason of Insanity (NGRI) acquittees, and civilly committed irrestorably incompetent (IST.NR)). Other non-forensic (i.e., civilly committed) patients are sometimes treated on Building 43 due to their aggressive behavior and need for treatment within a more secure environment.

In December 2018, Forensic Services began expanding and now includes a 21-bed, medium-security, all male unit on Building 201, Ward 2. This ward exclusively houses pre-trial defendants undergoing forensic evaluation and competence restoration treatment.

Female pre-trial criminal defendants are evaluated on Building 43. If they require inpatient evaluation/treatment, they are admitted to the female forensic unit on Building 203, Ward 4, which is an 8-bed, medium-security unit. This unit also houses female NGRI acquittees and civilly committed IST.NR patients.

Types of Forensic Services

Forensic Services is comprised of the Forensic Evaluation Service (FES) and the Forensic Treatment Service (FTS). Forensic Services provide several different types of services:

Forensic Evaluation Service (FES)

- Outpatient forensic evaluations (both in-person and telehealth)
- Inpatient forensic evaluations
- Psychological Testing

Forensic Treatment Service (FTS)

- Competence restoration treatment (group and individual)
- Behavioral Health Services (BHS) group programming
- Individual therapy/supportive counseling/case management
- Treatment for long-term patients adjudicated NGRI or IST.NR

- Interdisciplinary treatment team (i.e., psychiatry, nursing, BHS, social work, recreation)

Additional services are provided by members of the interdisciplinary treatment team, such as recreational therapy, medication management, case management, discharge planning, etc.

Types of Forensic Evaluations

FES regularly conducts a number of different types of pretrial, and rarely post-conviction, criminal forensic evaluations. The most frequently referred issues include evaluations of:

- Competence to Stand Trial
- Criminal Responsibility (insanity defense evaluations)
- Competence to Waive or Assert Constitutional Rights (including *Miranda* Rights)
- Capital Sentencing/Mitigation (statutory and non-statutory mitigation)

Less commonly referred issues include evaluations of: Competence to Assist in Post-Conviction Appeals, Competence to be Executed (rarely), Pretrial and Post-conviction Evaluations of Intellectual Disability in Capital Murder Defendants (“*Atkins* evaluations”), and Violence Risk Assessments.

Types of Wards on Forensic Services

Building 43 (male, maximum-security):

There are three wards on the Building 43 forensic unit, each of which contains a different population of patients. The **Diagnostic and Evaluation Ward** (D&E or Observation) primarily houses newly admitted patients and pretrial patients. The other two wards, **Extended Care** and **Community Living**, contain patients who are no longer undergoing forensic evaluation but are committed to Forensic Services for long-term care and treatment (e.g., NGRI acquittees) and those civilly committed patients who require treatment in a secure unit. The difference between these two wards corresponds to the patients’ individual treatment needs, level status, and their respective privileges.

(1) D&E. The 15-bed D&E Ward is our most secure ward and is primarily for pretrial patients who are undergoing forensic evaluation and for other patients who require increased security/observation. Patients who reside on this ward, as the name implies, are those defendants who require inpatient observation and treatment in order to complete their forensic evaluation as ordered by the court. Privileges are limited for patients who reside on the D&E Ward (e.g., they may not have grounds privileges) because these patients are more likely than others to require constant observation due to active symptoms of a major mental disorder and/or because they require a more secure and structured environment. It is not uncommon for patients who reside on the less restrictive wards to sometimes be transferred to the D&E Ward when on restriction status for various violations of ward rules on the less secure wards.

(2) Extended Care. The Extended Care Ward is for those patients who are committed for long-term treatment but still require a certain amount of observation and structure due to the

severity of their illness and/or risk of harm to themselves or others. There are 11 beds on this ward, plus two additional beds for special needs patients.

(3) Community Living. The Community Living Ward consists of long-term patients who have responded well to treatment, have become more stable in terms of their current mental functioning, present less risk of harm to themselves and/or others, and have the most independence and privileges (e.g., unescorted grounds privileges, work release). There are 20 beds on Community Living, but only 9 of these beds are presently used as functional patient beds.

Building 201, Ward 2 (male, medium-security): Forensic Services on Building 201, Ward 2 has a 21-bed capacity, but all beds are not currently in use (due to COVID-19 precautions). The population on this unit consists of adult, male defendants who are behaviorally appropriate to not require a maximum-security unit. Most patients on this unit are charged with non-violent offenses. BHS staff provide competence restoration services, as well as other behavioral health groups/activities.

Building 203, Ward 4 (female, medium-security): Forensic Services has approximately 8 beds on Building 203, Ward 4 for pre-trial female defendants. Female patients participate in competence restoration services provided by FTS BHS staff. Until recently, all other programming and services were provided by Female Receiving staff. As of Fall 2020, FTS is reshaping the female forensic program so that all clinical treatment, behavioral health services, social work services, and recreational therapy will be provided by the interdisciplinary FTS team. The female forensic ward is an area in which fellows may be able to assist with program development, if this is an area of interest.

Forensic Psychology Postdoctoral Fellowship Training Experiences

The majority of the Fellow's time is spent in the following activities:

- Court-ordered forensic evaluations, including forensic clinical interviews
- Psychological testing (including the use of specialized forensic assessment instruments)
- Forensic report writing
- Observation of and/or providing expert testimony
- Supervision and professional development

Court-ordered Forensic Evaluations

As previously mentioned, the most frequently referred issues include evaluations of competence to stand trial, competence to waive or assert constitutional rights (including competence to waive *Miranda* rights), and criminal responsibility/mental state at the time of the alleged offense(s). Additional evaluation referrals include: capital sentencing/mitigation, pretrial evaluations of intellectual disability in capital murder cases (“*Atkins* evaluations”), and violence/sexual violence risk assessments.

In our forensic evaluations, we use a semi-structured interview questionnaire form with questions designed to assess psychosocial history, current mental state, competence-related abilities, and criminal responsibility.

Psychological Testing

Throughout the training year, the Fellow will receive training in the administration, scoring, and interpretation of several clinical standardized psychological assessments and specialized forensic assessment instruments. The following are the most commonly used measures:

- Cognitive/Intellectual Functioning
 - Mini Mental State Examination, Second Edition (MMSE-2); The Repeatable Battery for Assessment of Neuropsychological Status (RBANS); Wechsler Memory Scale, 4th Edition (WMS-IV); Montreal Cognitive Assessment (MoCA); Wechsler Adult Intelligence Scale, 4th Edition (WAIS-IV); Stanford Binet Intelligence Scales, 5th Edition (SB5); Kaufman Brief Intelligence Test (K-BIT); Kaplan Baycrest Neurocognitive Assessment
- Personality Functioning:
 - Minnesota Multiphasic Personality Inventory-2, Restructured Format (MMPI-2 & MMPI-2-RF); Millon Clinical Multiaxial Inventory, 4th Edition (MCMI-IV); Personality Assessment Inventory (PAI)
- Feigned Psychosis and Cognitive Deficits:
 - Test of Memory Malingering (TOMM); Rey 15-Item Memory Test (RMT); Green Word Memory Test (WMT); Validity Indicator Profile (VIP); Miller Forensic Assessment of Symptoms Test (M-FAST); Structured Inventory of Malingered Symptomatology (SIMS); Structured Interview of Reported Symptoms- Second Edition (SIRS-2)

- Specialized Forensic Instruments:
 - MacArthur Competence Assessment Tool-Criminal Adjudication (MacCAT-CA); Evaluation of Competence to Stand Trial-Revised (ECST-R); Competence to Stand Trial for Defendants with Mental Retardation (CAST-MR); and Grisso's Instruments for Understanding and Appreciation of *Miranda* Rights (GUAM).
- In rare circumstances, Fellows may have opportunities to gain exposure to several other types of specialized forensic assessment instruments that are designed to assess risk for future violence:
 - Historical, Clinical, and Risk Management-20, Version 3 (HCR-20 V3); Violence Risk Appraisal Guide (VRAG); Sexual Violence Risk Management-20 (SVR-20); Psychopathy Checklist, Revised; PCL-R, 2nd Edition

Forensic Report Writing

The Fellow will be exposed to several different report writing styles, within a similar framework. FES is comprised of six forensic evaluators: four psychologists and two psychiatrists. The Fellow will have the opportunity to conduct forensic evaluations with all team members.

Observing or Providing Expert Witness Testimony

Fellows are expected to accompany forensic evaluators to court and observe expert witness testimony. Although most forensic cases do not require expert testimony, it is reasonable to expect the Fellow will likely be able to observe at least four competency hearings or other trial proceedings that require expert testimony. While we cannot guarantee the Fellow will be called as an expert witness during the postdoctoral fellowship year, this often occurs. Proper courtroom attire is required when observing or providing expert witness testimony.

Expert witness testimony often requires one full day away from the hospital, as we provide this service across the state. Trips to court frequently last longer than the typical 8-hour workday because of the travel involved. You may travel with the forensic evaluators to court. However, since hearings are occasionally continued to the following day, the forensic evaluators sometimes have to stay overnight before they can complete their testimony and be released by the Court. For those who are unable to spend the night out of town, it is recommended they travel to and from court in their own vehicles.

Regardless of whether the Fellow is subpoenaed as an expert witness, the Fellow will participate in at least two mock testimony experiences during the year.

Supervision and Professional Development

Supervision: The Fellow will be provided with at least 2 hours of individual, face-to-face clinical supervision per week by a primary supervisor who is a licensed psychologist. Additional supervision and training experiences are provided by other licensed psychologists and board-certified forensic psychiatrists.

Landmark Case Law Seminar: An additional hour each week will be devoted to continuing professional development and education in forensic psychology, covering topics of case law, ethics, and socio-cultural/ethnic factors in the context of forensic treatment and assessment.

Professional Development Seminar: The Fellow will also participate in and present at weekly, 1-hour seminars covering topics of diagnosis, intervention, professional practice, current research, and ethics.

Difficult Case Conference: Difficult case conferences are held at the request of clinical providers and/or forensic evaluators. The purpose of these meetings is to facilitate forensic evaluation and/or clinical treatment. These meetings follow a 20/20/20 format with 20 minutes for the case presentation, a 20-minute interview of the patient, and 20 minutes of discussion/planning.

Other Optional Training Opportunities

Fellowship training experiences also may include: co-facilitation of court competence restoration groups, individual court competence restoration sessions, group and/or individual psychotherapy, behavior intervention planning, supervision of doctoral-level practicum students, interdisciplinary treatment team, performance improvement projects, and program development/outcome evaluations. Availability of training experiences may vary based on characteristics of the unit's patient population, the Fellow's experience and areas of interest, and other resources. *If the Fellow does not have experience providing court competence restoration services, then this will be a required activity during at least the initial part of the fellowship.*

Fellows may have the opportunity to attend grand rounds at the University of Mississippi Medical Center. There also may be opportunities for the Fellow to observe and/or participate in private contract work with members of the Forensic Evaluation Service (e.g., postconviction forensic psychological evaluations, forensic psychological evaluations in the Federal court system, etc.).

Attendance at MSH Committee Meetings

Fellows are invited to observe meetings of several MSH Committees that may have relevance for their forensic training. Although attendance at committee meetings is not required, observing the meetings of the various MSH committees on which Forensic Services staff members serve can provide a useful adjunct to the forensic fellowship training experience.

Discharge Advisory Committee. The forensic evaluators serve as members of the MSH Discharge Advisory Committee (DAC), which meets several times a year and reviews cases regarding patients who may be considered at elevated risk for violence and are requesting discharge, placement in a less restrictive setting, or an increase in privileges. Patients who are presented to the DAC are often forensic patients (e.g., requesting step-down to a less secure level of care). All patients who go before DAC are interviewed by one of the forensic psychologists or psychiatrists, either in a pre-recorded videotaped interview or in the committee meeting. If interested, the Fellow may have opportunities to assist in or conduct the interview of such patients. These cases are occasionally referred to FES for a formal violence risk assessment consultation,

the results of which are then presented to the DAC. If this occurs, the Fellow will have the opportunity to assist in the risk assessment and in presenting the results to the DAC.

Treatment Advisory Panel. Fellows are invited to attend Treatment Advisory Panel (TAP) meetings. This committee is a sub-committee of DAC members who meet regarding the transfer of high-risk patients to other buildings on the MSH campus.

Forensic Evaluation Service Meetings. FES holds monthly/bi-monthly meetings in which the director, all evaluators, investigators, and administrative assistants come together to discuss our mission, progress, obstacles, and the list of pending evaluations.

Research

At the time of the writing of this brochure, there are no formal research projects in progress. Given the overall number of demands placed on Fellows during the training year, it is usually not feasible to become involved in research projects that consist of collecting original data (due to the amount of time it takes to propose a study, have it reviewed by the MSH IRB, collect data, conduct the analyses, and complete the project). On the other hand, there may be opportunities available for those who are interested in forensic research based on an archival design, since issues of informed consent are not as cumbersome, and records are readily available for data collection.

Position, Stipend, and Other Benefits

The position offered by the MSH Postdoctoral Training Program in Forensic Psychology is a 12-month (52 week), full-time Fellowship position. The Fellow must accrue 2000 hours of training in no less than 12 months in order to receive a certificate of completion of their Fellowship. At least 25% of the Fellow's time (a minimum of 500 hours) must be spent in the direct provision of professional forensic psychological services. The Fellowship start date is somewhat flexible with a tentative start date of August 23, 2021.

The MSH Forensic Psychology Postdoctoral Fellow is considered a temporary employee for the duration of the Fellowship year. The 12-month stipend during the 2021-2022 training year is \$49,465 annually and is paid on the 15th and 30th of each month. The Fellow is provided with full benefits of MSH employment. Benefits include major medical insurance; options for dental, vision, and life insurance; sick leave; personal leave; access to the MSH Employee Assistance Program (EAP); 10 paid holidays per year; 5 professional development days per year; and contributions to the state retirement fund (payments into the fund may be refunded or rolled over into another retirement account at the end of the fellowship year if the resident does not remain a Mississippi State employee). A complete description of benefits can be found at <http://msh.state.ms.us/employment.htm>.

Application and Selection Procedures

Mississippi State Hospital is an Equal Opportunity Employer and does not discriminate on the basis of race, gender, color, ethnicity, national origin, disability, age, or sexual orientation.

Qualifications:

- Doctoral degree from a program in professional psychology
 - Preference will be given to candidates from programs which at the time the degree was granted were accredited by the APA or CPA or were listed in the publication Doctoral Psychology Programs Meeting Designation Criteria
- Completion of a pre-doctoral psychology internship
 - Preference will be given to candidates who have completed a forensic rotation during an APA or CPA accredited pre-doctoral internship and are eligible for psychology licensure in Mississippi

MSH employment is contingent upon the candidate meeting pre-employment requirements, including:

- Providing copies of a doctoral degree from a professional psychology program and a certificate of completion of a pre-doctoral psychology internship
- Submitting to a tuberculosis (TB) skin test and/or chest x-ray
- Submitting to background checks and fingerprinting for any relevant criminal activity; Negative results of a background check or fingerprinting can result in dismissal or refusal of employment
- Submitting to a drug and alcohol test; Additional random, for cause, post-accident/incident, and follow-up drug and alcohol screenings may be conducted on existing temporary employees; Refusal to submit to a test may result in dismissal or refusal of employment; Persons found to have used illegal drugs or improperly used prescription drugs may have employment refused or terminated; Persons found to be under the influence of alcohol during a pre-employment screening or while at work may have employment refused or terminated

Applications:

Applicants should submit the following materials via e-mail (preferred) or regular mail by January 18, 2021:

- Cover letter including a personal statement regarding the applicant's interest in the field of forensic psychology
- Current curriculum vitae
- Three (3) letters of recommendation with at least one (1) from an internship supervisor
- Graduate school transcripts from doctoral program (official preferred)
- Two (2) de-identified clinical writing samples:
 - Preferably previous forensic evaluations (e.g., competency to stand trial, criminal responsibility, child custody evaluation, etc.). If applicants do not have previous

forensic experience, a thorough psychological evaluation/report (that includes psychological assessment) may be submitted

Contact Information:

For additional information and to submit application materials, please contact:

Amanda L. Gugliano, Psy.D.
Licensed Psychologist II
Director, Forensic Evaluation Service
Office: (601) 351-8606
Email: amanda.gugliano@msh.ms.gov

Mailing address: ATTN: Dr. Amanda L. Gugliano
Mississippi State Hospital
Forensic Services Unit, Building 43
Post Office Box 157-A
Whitfield, MS 39193