

Frank O. Byndloss Jr., Psy D
Licensed Psychologist HSP #3570

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EDUCATIONAL BACKGROUND

American School of Professional Psychology 01/2010- 08/2015
Argosy University, San Francisco Bay Area, Alameda, CA
Psy D. (08/2015)
MA in Clinical Psychology (07/2013)

University of Nevada Las Vegas, Las Vegas, NV 08/2000- 05/2005
B.A in Psychology (2005)

CLINICAL EXPERIENCE

Frank Byndloss, PsyD (private practice), *Nashville TN* 09/2019- *present*
Licensed Clinical Psychologist, HSP

Private practitioner providing individual and family therapy. My practice specializes on preteens (9-12), teens (13-19), young adults (20-23) and their families, I also have extensive experience supporting individual adults as well. I provide treatment for a broad range of clinical concerns, including, but not limited to: Issues of Preadolescence and Adolescence; African American Cultural Issues; Trauma and PTSD; Substance Abuse; Educational Challenges; Parenting and Family Conflicts; Anxiety; Depression and Mood Issues; Attention Deficit Hyperactivity Disorder (ADHD); Stress; Social Difficulties; Life Transitions; Grief/Loss

Vanderbilt University Medical Center (VUMC), *Nashville TN* 09/2018- 09/2019
Licensed Clinical Psychologist, HSP
Supervisors: Jon Ebert, PsyD; Stephan Heckers, MD; Cheryl Cobb, MD

Responsibilities: Work at VUMC is focused on three specific areas:

- 1) *VUMC Center of Excellence*: As a psychologist at the COE, I participate in multidisciplinary, comprehensive evaluations and consultations for youth in the foster care system. Populations consist of children aged birth to 18 years who are in or at risk of entering state custody (e.g. foster care, juvenile justice) with a history of complex trauma exposure, which has compromised their social, emotional, behavioral, cognitive, and/or developmental functioning.
- 2) *Vanderbilt Psychiatric Hospital, Psychotic Disorders Program*: In this capacity I work as a part of multidisciplinary team comprised of clinical psychologists, psychiatrists, counselors, and social workers who assess, treat, and study patients with

- a psychotic disorder. I am responsible for diagnostic assessment, brief intervention and treatment on patients on the inpatient unit. In this role I also provide supervision of the inpatient clinical work of psychology intern.
- 3) *Child and Adolescent Psychiatry Outpatient Clinic*: In this role I provide individual and family psychotherapy for adolescent clients in an outpatient setting. Treatment specialization in family therapy, childhood trauma, anxiety and mood disorders.

California Department of Corrections and Rehabilitation (CDCR)

California Medical Facility, Vacaville, CA

08/2016- 07/2018

Staff Psychologist, Mental Health Crisis Bed

Supervisor: Rhonda Heldt, Psy D

Responsibilities: As a staff psychologist in the Mental Health Crisis Bed I was responsible for conducting crisis intervention treatment in the CDCR's inpatient mental health emergency room. Treatment consisted of short-term crisis interventions, suicide assessment and intervention, and case management of acutely psychotic or suicidal inmates within the correctional system. As the primary clinician on the unit I was also responsible for the coordination of treatment and patient care within an interdisciplinary treatment team and indicating appropriate treatment and placement referrals.

WestCoast Children's Clinic, Oakland, CA

9/2015- 08/2016

Postdoctoral Residency, APA-Accredited

Supervisors: Katja Mohr, PsyD.; Barbara Mercer, Ph.D.

Responsibilities: Conducted therapy and comprehensive psychological testing with children and families living in the greater Oakland area. All clients' had some involvement with the foster care system and all had intensive trauma histories. During residency I conducted therapy from and received supervision on trauma theories and their application to work with children and families who have experienced intense trauma. Therapy and testing was primarily conducted from a community-based model and took place in the community or in the homes of client's. Psychological testing was done using the collaborative therapeutic model and included intensive work with clients and their support networks to develop an overarching snapshot of the child's psychological functioning as well as treatment and placement recommendations.

WestCoast Children's Clinic, Oakland, CA

07/2014-06/2015

Predoctoral Psychologist Internship, APA-Accredited

Supervisors: Roberto Lascano, Ph.D; Christopher Arrillaga, PsyD

Responsibilities: Conducted psychodynamically oriented therapy and comprehensive psychological testing with children and families living in the greater Oakland area. All client's had involvement with the foster care system and all had intensive trauma

histories. During internship I conducted therapy from and received supervision on trauma theories and their application to work with children and families who have experienced intense trauma. Therapy and testing was primarily conducted from a community-based model and took place in the community or in the homes of client's. Psychological testing was done using the collaborative therapeutic model and included intensive work with clients and their support networks to develop an overarching snapshot of the child's psychological functioning.

**Contra Costa County Health Services
Consultation and Assessment Team (CAT), Concord, CA**

09/2013- 06/2014

Psychological Trainee

Supervisor: Steve Cloutier, Ph.D.

Responsibilities: As a member of the consultation and assessment team I conducted psychological evaluations of children and parents who have been referred from Contra Costa County Child and Family Services. These children were highly traumatized and were been exposed to sexual abuse, physical violence, neglect, community violence, and intergenerational trauma. I also conducted forensic psychological assessments for youth who are currently incarcerated within the juvenile justice system in order to determine best treatment options and assessed adults for the courts in order to help determine whether reunification with their children was a viable option. Within the responsibilities of this position, I consulted with treatment teams, therapists, social workers, family support workers and gathered extensive collateral information in order to write detailed written reports that go to the court and child and family services. The reports were necessary to address treatment recommendations, risk assessment and reunification planning for the children with their caregivers.

San Mateo County Behavioral Health and Recovery Services

Youth Services Center, San Mateo, CA

Psychological Trainee (forensic team)

07/2012- 05/2013

Supervisor: Bruce Bess, Ph.D.

Responsibilities: As a member of the forensic team I was responsible for providing psychological testing, psychotherapy and crisis intervention for youth incarcerated in the Juvenile Hall who are experiencing psychological dysfunction. I was also responsible for providing brief individual therapy and long-term psychodynamically oriented therapy for youth serving extended sentences. In both cases treatment consisted of therapeutic intervention as well as coordinating resources between the client's family, school, correctional officers and probation officers. As a member of the forensic team, I was also responsible for conducting court ordered cognitive and emotional psychological assessments in order to provide treatment, foster home placement and probation plans. Therapeutic services consisted of brief and longer-term individual and family therapy, group therapy, and case management with youth ages 12-18, detained in the County of San Mateo's Juvenile Hall. Client demographics consisted of youth ages 12-17 that reside within San Mateo County and have been convicted of varying degrees of felony and

misdemeanor crimes. Diagnosis seen included: Major Depressive Disorder (with and without psychotic features), Bipolar disorder, Posttraumatic Stress Disorder, Conduct Disorder, Anxiety disorders and substance abuse disorders. As the treating therapist I was consulted to provide input on my client's behalf at the county Resource Review Board (RRB) and Interagency Placement Review Committee hearings. I provided input on possible resources that will assist the youth in their re-entry as well as work with lawyers, judges, parents and probation officers to develop placement recommendations for youth who are going to be released from juvenile hall, but not returned home.

Dr. Christina Villarreal, Ph.D., Oakland, CA

06/2012- 08/2012

Psychological Assistant

Supervisor: Christina Villarreal, Ph.D

Responsibilities: As a psychological assistant I was responsible for taking notes during clinical interviews as well as scoring and interpreting psycho-diagnostic tests conducted as part of disability and social security evaluations. At the conclusion of testing, I was responsible for drafting an integrated report complete with background information, test data interpretation, diagnosis and recommendations.

Argosy Assessment Clinic, Alameda, CA

01/2012- 08/2013

Psychological Trainee

Supervisor: F. Myron Hays, Ph.D., ABPP

Responsibilities: As a Psychological Trainee I conducted learning disorder, Attention-Deficit/Hyperactivity Disorder (ADHD), emotional, cognitive, and personality assessments for children and adults. Assessments are completed through the administration, scoring and interpretation of the MMPI, MCMI, PAI, PAI-A, Rorschach, TAT, WAIS-IV, WRAT, KBIT, KTEA, CAARS, CPT-II, TOMM, DKEFS, TEA, TEA-CH and Woodcock Johnson-III. At the conclusion of testing I am also responsible for drafting an integrated report and providing feedback in the form of a DSM-IV diagnosis (if appropriate) and treatment/ accommodation recommendations. Within the process of conducting psychological testing I work with client's through a collaborative model in order to help clients better understand themselves and find solutions to their presenting problems. Diagnosis seen included: Bipolar Disorder, Social Phobia, ADHD, and Major Depressive Disorder.

Child Haven, Fairfield, CA

09/2011- 07/2012

Psychological Trainee

Supervisor: Laurence Miller, Ph.D.

Responsibilities: As a practicum trainee I conducted psychoanalytically oriented psychotherapy with youth (infant -13 years old) with emotional and behavioral dysregulation as a result of trauma and neglect. Psychotherapy took place in the forms of individual, parent-child dyadic and family therapy. I was also responsible for

coordinating mental health services with social workers, schools and parents. As the treating therapist I was consulted on my client's parent-child reunification plans, individualized education plans (IEP), School Attendance Review Board (SARB) hearings and foster home placements. My caseload consisted primarily of minority males and females ages 6 months to 13 years. Additional responsibilities included chart audits and medical billing. Diagnosis seen: Reactive Attachment Disorder, Conduct Disorder, Bipolar Disorder, Posttraumatic Stress Disorder.

Aid for AIDS of Nevada, Las Vegas, NV

7/2005 -10/2008

Prevention Education Supervisor

Supervisor:

Responsibilities: As the Prevention Education Supervisor my primary clinical duties were to facilitate psychosocial and psycho-educational support group for HIV positive homosexual and heterosexual men, women and transgender individuals in the Las Vegas Valley. I was also responsible for providing individual therapy services for newly diagnosed HIV positive individuals. Demographics included LGBTQ individuals as well as heterosexual men and women. I was also a part of the Las Vegas Outreach team (funded by HIV Reducing Rates Grant-CDC) conducting harm reduction therapy with populations deemed high risk for HIV infection. Primary clientele consisted of intravenous drug users and prostitutes. Diagnosis seen: Major Depressive Disorder, Post Traumatic Stress Disorder, Adjustment Disorder, Bereavement.

PROFESSIONAL PRESENTATIONS

Byndloss F., (2019). *Developing a Therapeutic Alliance on an Acute Treatment Unit*. Teaching therapeutic interventions and developing therapeutic alliance for first year psychiatry resident in the Vanderbilt University Medical Center inpatient unit. Nashville, TN

Byndloss F., Pollock S. (2015-2017). *Enhancing Trauma Sensitive as a School Team*. Annual one day training for educators and mental health treatment provider within school districts in DUSD, Davis CA; SLUSD, San Lorenzo, CA; Aspire Public Schools, Oakland CA,

Bagnell, N., **Byndloss, F.**, Satre, H., & Hobza, C. (2013). *Learning to Effectively Account for Culture in Psychological Assessment: Case Examples*. Poster presented at the 121st Annual Convention of the American Psychological Association, Honolulu, HI.

Byndloss, F. (2013). *Therapeutic Use of Hip Hop Music in Working With Adolescent Males in the Juvenile Detention Facilities*. Presented at the San Mateo County Behavioral Health Care Services Youth Services Center, San Mateo, CA.

Byndloss, F. (2013). *Psychometrics and Understanding Statistics Within Psychological Assessment Measures*. American School of Professional Psychology at Argosy University, Assessment Clinic, Alameda, CA.

RESEARCH EXPERIENCE

Dissertation Title:

Redefining the Black Intellectual: A Study in African American Resiliency “A Comprehensive Review of the Literature, Critical Analysis and Clinical Implications”
Dissertation Chairperson: Heatherlynn Hoffman, Ph.D.

The goal of my dissertation was to gain further understanding of the protective factors that help African American youth navigate the unique risk factors within their environment. Protective factors were conceptualized and operationalized in order to help bolster them within the therapeutic relationship. I am proposing these factors within the concept of “redefining the black intellectual”. This study took a term that has seldom been assigned to African Americans and redefined it to encompass the unique traits necessary for African Americans to overcome their unique societal obstacles. My dissertation provided a new understanding of the subjective experiences of African Americans and the protective factors necessary to help overcome environmental factors that frequently oppressed. This research discussed the cultural and historic components of the subjective experiences of clients, allowing clinicians to develop more culturally relevant treatment methods and increase their efficacy treating this population.

Baby Rebel Lab at UNLV, Las Vegas, NV

05/2004-05/2005

Research Assistant

Supervisor: Jennifer L. Rennels, Ph.D.

Responsibilities: The Baby Rebel Lab at the University of Nevada Las Vegas conducts research that focuses on face perception/processing and development of appearance-based stereotypes (e. g., stereotypes based on masculinity/femininity, attractiveness, sex, and race). This research examined the cues individuals attend to when perceiving faces, how those facial attributes are processed and impact subsequent judgments about an individual, as well as how individual and situational factors influence perception and processing. My primary responsibility was the administration of facial recognition testing to 6 and 12-month infants in order to observe the development of human stereotypes.

TEACHING/ SUPERVISORY EXPERIENCE

Vanderbilt University Medical Center, Nashville, TN

01/2019- present

Clinical Supervisor

Responsibilities: In this role I am responsible for the teaching and oversight of the clinical work of doctoral interns in the APA accredited psychology internship program at VUMC. Clinical work consisted of assessment, diagnostic interviews and supportive psychotherapy for “first break” psychosis patients hospitalized in the inpatient psychiatric hospital.

Argosy University Assessment Clinic, Alameda, CA

01/2012- 06/2013

Teaching Assistant

Supervisor: Christy Hobza, Psy.D.

Responsibilities: As a teaching assistant I provided support to doctoral level Psy.D students conducting testing within the Argosy University Assessment Clinic. I worked closely with new students, helping them adapt to their new role as psychological assessors and navigate these testing experiences within their training. I worked with students teaching test administration and assisting with scoring and interpretation of results. I was also responsible for assisting students with their case conceptualization, interpretation and integration of data in order to write integrated assessment reports. I also attended to the daily tasks and functions of the clinic such as: monitoring charts, ordering test materials, coordinating the intake of new clients, and collecting and collating client demographic data. I was also responsible for teaching an 8-week course on understanding and interpreting psychometric data. In this course, I taught graduate students working in the Argosy Assessment Clinic how to understand and interpret various forms of psychometric test data as well as techniques for integration and report writing.

VOLUNTEER EXPERIENCE

Deputy Sheriffs Activities League

Alameda County Sheriffs Office, San Leandro, CA

10/2008- 07/2018

Youth Mentor

Responsibilities: As a youth mentor I conducted community Alcohol and other Drug (AOD) prevention and public policy workshops with inner city youth ages 12-19 that resided in unincorporated areas of Alameda County. I coordinated the youth's participation in community development, planning and regulation events, such as: Alameda County Planning Commission hearings, Alameda County Board of Supervisors meetings and Castro Valley, San Lorenzo and Hayward Unified School District meetings. As a youth mentor I also provide input on individual and group level crisis intervention, gang intervention and social support groups to the youth in the community. Additionally I consult on program development and assist in grant writing for Deputy Sheriffs Activities League programs.