



Psychology Internship Program

Martinsburg VA Medical Center

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Accreditation Status

The program is not accredited by the American Psychological Association. Questions related to the program's accredited status should be directed to the Commission on Accreditation: Office of Program Consultation and Accreditation; American Psychological Association; 750 1st Street, NE; Washington, DC 20002; Phone – (202) 336-5979; Email: apaacred@apa.org ; Web: www.apa.org/ed/accreditation.

The Martinsburg VA Medical Center Psychology Internship Program is an APPIC member in good standing.

Applicants should note that individuals who complete VA psychology internships, even if from a not yet accredited internship, are eligible for VA Postdoctoral Fellowships and VA employment. The following is an excerpt from the VHA policy regarding hiring of psychologists from non-accredited VA psychology internships.

“(1) new VHA psychology internship programs that are in the process of applying for APA accreditation are acceptable in fulfillment of the internship requirement, provided that such programs were sanctioned by the VHA Central Office Program Director for Psychology and the VHA Central Office of Academic Affiliations at the time that the individual was an intern,”

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Medical Center Setting

The Martinsburg VA Medical Center is located on 175 scenic acres in the Shenandoah Valley. Situated in the heart of West Virginia's Eastern Panhandle in historic Berkeley County, the medical center has a service area of more than 126,000 veterans in West Virginia, Maryland, Virginia, and Pennsylvania. The medical center was originally established in 1944 and known as the Newton D. Baker General Hospital for the US Army. Newton D. Baker was a native to Martinsburg, WV and served as the Secretary of War in World War I. The hospital became part of the Veterans Administration Center in 1946. The facility includes seven Community Based Outpatient Clinics (CBOCs): Cumberland, Maryland; Hagerstown, Maryland; Fort Detrick, Maryland; Petersburg, West Virginia; Stephens City, Virginia; and Harrisonburg, Virginia. The Martinsburg VAMC anticipates a continued increase in the number of new Veterans from prior and current operations in Iraq and Afghanistan. This is coupled with the population growth in the eastern panhandle of West Virginia. Many Veterans seek out treatment specifically through our facility as it captures the rural warmth and open environment of the area, yet provides high quality and dedicated service that is unsurpassed at any other facility.

Medical services available include internal medicine, ambulatory surgery, audiology and speech pathology, dental, nursing home, nutrition, podiatry, prosthetics, women's health and rehabilitation medicine. Within this setting, the Mental Health Service holds a prominent position in terms of both size (largest in terms of staffing) and specialty care.

Our Mental Health staff include 33 psychologists, 19 psychiatrists, 70 social workers, 5 licensed professional counselors; 6 addictions specialists, 10 peer support assistants, 9 vocational rehabilitation positions, and various other clinical personnel. Psychologists are located in either a newly constructed building for Outpatient Mental Health Services (Hope Center), specialty care units within the facility, at a CBOC, or in the field with Home Based Primary Care.



Surrounding Area

The towns surrounding Martinsburg are steeped with history and stunning outdoors rich with recreational opportunities. There are close ties to the Revolutionary War and were the sites of some of the most vital and bloodiest battles in the Civil War. The surrounding towns of Harpers Ferry, Shepherdstown, and Charles Town are growing sophisticated communities that each have unique attractions to offer. The Appalachian Trail is nearby offering miles of scenic hiking and biking trails to explore. The Potomac and Shenandoah Rivers flow through the area offering opportunities for fishing, kayaking, whitewater rafting and tubing. During the winter months there are opportunities to ski and snowboard less than 45 minutes away at the Whitetail Resort in Mercersburg, PA. Shepherdstown, the oldest town in WV (founded in 1762), is home to Shepherd University and many pre-Revolutionary buildings the house cool shops, bars, and restaurants. Additionally, there are many golf courses in the region at affordable rates.

The cost of living in this region is very reasonable. Staff are available to give ideas and guidance on questions you may have on residence selection and locations. Overall, the eastern panhandle of West Virginia is a small, friendly community environment with beautiful scenery to enjoy numerous outdoor activities, yet still within a 90 minute drive to the Nation's Capital.



Training Model and Program Philosophy

The Psychology Internship Program is grounded in the practitioner-scholar model, which emphasizes that through the training experience clinical practice is guided by scientific theory and research. Based on this model, the development of knowledge and skills related to evidence based treatments are considered critical to competent and ethical professional practice. Interns are trained in evidence based practices and learn how to incorporate these practices in their clinical work across all rotations. The practitioner-scholar model also acknowledges the complexity of real patients and limitations of the empirical base. Thus, science and research are constantly evolving and informed from the delivery of clinical care while respecting our patients as unique people, accounting for individual, cultural, and societal considerations.

All interns' experiences are designed to meet our educational model by ensuring the program's foundations are based upon the following:

- high quality supervision
- training in empirically based assessment and treatments
- a broad range of clinical experiences and didactics
- specialized training and experience in an intern's specific interest area
- individualized intern experience based upon intern's goals and level of prior experience/skills/professional development
- research/scholarly activity/quality improvement opportunities.

The training model is competency-based within the practitioner-scholar framework. The internship year is designed to be sequential, cumulative, and graduated in complexity. There will be increased expectations for the interns' performance in the core competencies as their knowledge, experience, and expertise grow and develop. As the year progresses, interns will be assigned more difficult and complex tasks based upon their level of competency. Initially working under close supervision of experienced and skilled staff members, students will be expected to work with increasing independence as they develop individual competencies. Training will be conducted in a format that encourages growth of the student clinically and professionally throughout his/her time in the program. Supervision is expected to match the needs of the intern in a way that facilitates professional development and progression. Thus, the intensity of supervision diminishes over the course of the rotation and internship as the intern matures into the role of a colleague, rather than a student. It is during this internship program that future psychologists should receive their final formal year of educational and clinical training experience. The program is dedicated to providing interns with a supportive and collegial environment in which they receive direct supervision to guide them through their journey of personal and professional development.

Program Aims & Objectives

The overarching aim of the Martinsburg VAMC Psychology Internship Program is to prepare diverse doctoral-level psychology interns to function as highly competent, ethical, generalist entry-level psychologists. By the end of the training year, interns should be equipped to provide well-rounded care to adults in a health care setting, especially to a Veteran population. It is impressed upon interns that they have the duty and privilege to serve as representatives for their own professional identity, the psychology internship program, and the field of psychology.

The aims of the of the program are achieved through a focus on interns accomplishing the following core competencies: integration of science and practice/research; ethical and legal standards; individual and cultural diversity; professional values, attitudes, and behaviors; communications and interpersonal skills; assessment; intervention; supervision; and consultation and interprofessional/interdisciplinary skills. Overall, the growth of professional identity, along with the attainment of these core competencies, prepare interns for successful entry in to the profession.

Interns receive education in a variety of formats, through a broad scope of didactic trainings that are based upon scholarly research. Additionally, trainees take on the responsibility for exploring research on their own and present their findings to their peers, psychologists, and other disciplinary staff. Trainees receive direct clinical experiences in multiple settings within the medical center working in collaboration/consultation with a diverse multi-disciplinary staff. The clinical experience is guided in supervision with well-trained psychologists who understand the role and importance of being an ethical supervisor.

The VAMC Martinsburg Psychology Internship Program is sponsored and viewed as an integral part of Martinsburg VA Medical Center, whose mission is to provide excellence in care to Veterans, military retirees and dependents. The Training Program is dedicated to providing professional growth opportunities for interns while simultaneously enhancing the quality of patient care. VAMC Martinsburg is strongly invested in preparing interns for psychologist roles throughout VHA and especially within this medical center, having hired over 40% of the interns who completed our Internship Program and several others working as psychologists at other VA medical centers nationwide.

Ethical Standards

Supervision, clinical seminars, and other didactics are just some of the opportunities through which interns will gain an understanding of ethical standards: clinically, professionally and personally. The goal is for interns to appropriately apply ethical standards in situations where there are no clear answers. Acquiring this ability evidences an interns' preparedness for functioning autonomously as a psychologist. Through direct experience, didactics, and supervision, our program encourages the development of a strong professional identity that incorporates critical thinking, ethical practice, and cultural sensitivity.

Diversity

There are several areas in which interns must demonstrate a solid understanding of diversity related issues to show competency. Interns are expected to reflect upon issues of diversity in their conceptualization and treatment of Veterans, and are expected to incorporate diversity considerations into all case presentations. Interns are expected to attend all didactic seminars, which will incorporate diversity related issues, and are guided in supervision to reflect on their own individual diversity and how it may impact their provision of care.

Recovery Model

Adherence to the recovery model encourages patients to take an active role in their treatment. Interns will facilitate this process by routinely using a variety of assessment tools throughout treatment episodes. Interns will be instructed on the importance and value of incorporating brief objective measures during the course of care. Specific assessments to include measurement based care will vary depending on the presenting issues, but typical assessments will include the PHQ-9, GAD-7, BDI-II, BAI, PCL-S, PDQ, PAI, MMPI-2 and the RBANS. These assessment/outcome tools will be actively drawn in to the session in order to help guide the course of care. Interns will gain comfort in regularly providing feedback to their patients on progress made using these objective measures. Utilization of these assessment measures will be used throughout all rotations.

All aspects of mental health treatment at the Martinsburg VAMC are based upon the recovery model. The 10 guiding principles of recovery by SAMHSA are applied throughout the medical center. The Local Recovery Coordinator (LRC) regularly provides trainings to departments within the mental health service, as well as, other services within the medical center. The LRC also works closely with the five peer support assistants (PSAs), who are embedded in many different areas in mental health including: psychosocial rehabilitation and recover center (PRRC), domiciliary care and the PTSD Center. Students will learn to promote hope and autonomy to their patients and reduce the stigma associated with mental illness. A priority is placed on Veterans' cultural background and social support, as both play a key role in long term recovery. There is an understanding that one can achieve their goals through many avenues and at a varying pace that is often not linear.

Program Structure

The Psychology Internship Program is a one-year internship and the intern is expected to complete a total of 2080 hours over the course of the internship year (minimum of 2000 hours). Interns will work a "tour of duty" Monday-Friday from 8:00a to 4:30p. We emphasize a need for balance in interns' lives as part of their development of personal and professional identities. Thus Interns are to keep to a 40-hour work week to pursue interests outside of the field of psychology.

Interns will complete three major rotations of four months in duration and two to three minor rotations of four to six months in duration. Major rotations include Primary Care Mental Health Behavioral Health Integration (PCMHI), Posttraumatic Stress Disorder/Evidence Based Therapy, and Behavioral Health Interdisciplinary Program (BHIP)/Outpatient Mental Health. Thus, a typical week for an intern would be broken down as follows: 60% - Major Rotation, 20% - Minor Rotation, 10% didactic training, 5% administrative duties, and 5% group supervision. Approximately 25-35% percent of the intern's time is devoted to the provision of direct clinical care. ***DUE TO COVID-19 PROTOCOLS IN PLACE PERCENTAGE BREAKDOWN MAY BE ALTERED, BUT WILL CONTINUE TO BE A MINIMUM OF 25% TIME DEDICATION TO DIRECT CLINICAL CARE.

Administrative Structure

From an administrative standpoint, the internship program is supervised by the Director of Clinical Training, who oversees and implements intern recruitment and selection, matching of interns to faculty preceptors, and coordination of clinical and research experiences. The Director of Clinical Training is responsible to the Chief of Psychology, for productive operation of the training program. The Director of Clinical Training, in coordination with the Internship Training Committee and collaboration with the intern, ensures that internship experiences successfully meet an intern's training needs.

Training Year

Graduate students accepted for psychology internship training arrive at VAMC Martinsburg for a full year beginning in August. Incoming interns will receive orientation during the first week of the training year, including opportunities to meet with staff, review training options, and begin to gain working understanding of the facility and program. A working plan specifying three four-month rotations begins prior to interns' arrival to the facility. During this first week, interns' initial rotations are formalized with a plan for successive rotations. Interns formally begin working within their rotations during the second week of the internship year.

Training Experiences

Clinical Rotations – Majors (4-6 months) ***DUE TO IMPACT OF COVID-19 ON DELIVERY OF CLINICAL CARE, MAJOR ROTATIONS ARE CURRENTLY 6 MONTHS IN DURATION. INTERNS WILL CHOOSE TWO OF THE THREE MAJOR ROTATIONS OFFERED. OPPORTUNITY WILL BE AVAILABLE TO GAIN CLINICAL EXPERIENCE FROM THE THIRD MAJOR ROTATION AS A MINOR ROTATION.

Primary Care Mental Health Integration (PCMHI)

The PCMHI rotation is an interdisciplinary experience designed to prepare interns for new and evolving roles as psychologists in a medical setting. Effective communication among interdisciplinary staff and attention to medical conditions as they relate to psychological functioning is critical. Interns will work directly with medical providers in a team environment, to include rapid psychological assessment and abbreviated case conceptualization as part of the physician visit. Follow-up services may include crisis intervention, brief problem-focused therapy, supportive counseling, and/or patient education.

While many training activities and professional responsibilities are established as part of the routine program, the rotation is designed with an orientation toward flexibility to meet an intern's specific professional interests. For this rotation referrals are received from (1) Primary Care, (2) Pain Management, (3) Women's Health Clinic, and (4) the Hope Center (Smoking Cessation and Continuous positive airway pressure (CPAP) desensitization therapy programs). Additional opportunities in PCMHI include consultation for bariatric surgery, transplants, amputations, and cancer treatment.

Primary Care teams consist of physicians, nurses, psychologists, physician assistants, dietitians, social workers, pharmacists and program support assistants. Referred Veterans may be seen within minutes of the consult request in this fast-paced and challenging environment, for a variety of issues including mild to moderate mental health issues, smoking cessation, weight loss, sleep problems, CPAP desensitization, and pain management. PCMHI psychologists conduct brief cognitive screenings and intake evaluations for chronic pain to identify nonpharmacological options for managing pain. The psychologists in primary care also facilitate the MOVE! weight loss group, the smoking cessation group, and co-facilitate the Pain School program through the Pain clinic. Interns in this rotation gain exposure evidenced-based psychotherapies, including Cognitive Behavioral Therapy for Chronic Pain (CBT-CP), Problem Solving Therapy, and Cognitive Behavioral Therapy for Insomnia (CBT-I). While supervision is readily available to all interns across all rotations, supervision in Primary Care is in close proximity at all times. Interns will participate in PCMHI Competency Training with the opportunity to receive certification as a PCMHI provider.

Posttraumatic Stress Disorder (PTSD) Rotation

The PTSD major rotation involves clinical work and consultation with the PTSD Residential Rehabilitation Program (PRRP), the PTSD Clinical Team (PCT), and the Military Sexual Trauma Program (MST). Interns gain experience in both residential and outpatient environments, with a heavy focus on empirically supported treatments such as Prolonged Exposure (PE) and Cognitive Processing Therapy (CPT).

Residential: The structured 50-bed PRRP program located in the domiciliary is the largest of its kind in the VHA. It targets combat-related PTSD, and is known for its treatment of more chronic and severe cases of PTSD. Although variable in length, a 45-day length of stay is the norm. Interns will be integrated into the interdisciplinary treatment team, which consists of a psychologist, psychiatrist, nurse, recreational therapist, practicum student, social workers and office support. Interns learn how to collaborate with these other disciplines to provide fully integrated services. As veterans experiencing PTSD often present with comorbid depression, substance abuse and other anxiety disorders, interns learn how to structure an evidence-based comprehensive approach to meet the needs of veterans with complex issues. The PTSD residential program has a strong recovery model focus and will provide interns the opportunity to conduct group psychotherapy, educational groups and life skills practice

Outpatient PTSD Clinical Team: Augmenting this residential program is the PTSD outpatient program or PTSD Clinical Team (PCT), which provides treatment to Veterans from all eras of service. This interdisciplinary team includes psychiatrists, psychologists, social workers and peer support assistants. As part of this team, interns would have opportunities to attend staff meetings, perform assessments, and conduct evidenced based therapy in group and individual formats. Interns have the opportunity to co-lead a group specifically for OEF/OIF veterans. Interns also have the opportunity to work directly with the Military Sexual Trauma (MST) coordinator to conduct individual therapy and co-lead gender specific MST groups. Opportunities selected for interns will be guided by their interests and the clinical care being offered at the time of the rotation. In treating rural Veterans with PTSD, isolation can be one of the most significant obstacles to address in treatment. Interns will learn how to deal with this unique factor as they work with Veterans with PTSD.

Behavioral Health Interdisciplinary Program (BHIP)/Outpatient Mental Health

The Outpatient Mental Health rotation will primarily be located in the newly constructed HOPE Center. This is a centralized location for the majority of outpatient mental health services available. It offers treatment in a relaxing and recovery-oriented setting that is detached from the general medical center. Interns on this rotation work with a group of mental health professionals comprised of psychiatrists, psychologists, nurses, psychiatric nurse practitioners, social workers, clinical pharmacists, case managers, peer support specialists, and program support assistants. The BHIP team promotes proactive, integrated, comprehensive outpatient mental health care, with a focus on evidence based practices such as CBT, ACT, and DBT in both individual and group settings. BHIP also increases Veteran access to mental health care that is patient-centered, recovery-oriented, evidence-based, and collaborative. In this rotation, interns are responsible for the provision of direct psychological patient care, consultation services, and

administrative duties. In addition to individual and group therapy, interns will regularly complete intake interviews and conduct a minimum of two formal psychological assessments throughout the rotation. To refine psychological assessment and diagnostic skills, interns are supervised on the provision of psychological intake interviews, mental status examinations, objective personality tests, and structured diagnostic interviews.

The majority of veterans utilizing the Mental Health Clinic are from rural areas. Trainees will learn how to meet the unique needs of veterans from rural backgrounds. A key training element of this rotation will be developing competence and confidence in modifying practices to a rural care environment. Training within this rotation will include learning and conducting therapy through the use of tele-mental health. Interns will work in collaboration with the Mental Health Integrated Case Management (MHICM) team to ensure all psychosocial needs are successfully addressed. Additionally, interns will have an opportunity to experience the provision of services at the Community Based Outpatient Clinics (CBOCs).

Interns will develop and strengthen skills working with rural veterans who are deemed high risk. This is particularly important as the VA's approach to suicide prevention is among the most intensive in health care, and particularly in an outpatient setting. Students will work collaboratively with the Suicide Prevention Coordinator (SPC) for any Veterans they are treating that have been identified as having an increased risk for suicidal behaviors. Knowing how to provide a high quality of risk prevention will serve an intern well in future settings.

Clinical Rotations – Minors (4-6 months):

Minor rotations that can be selected include: Neuropsychology, Geriatric focus/Community Living Center (CLC), Home Based Primary Care, Serious Mental Illness (SMI), and VISN 5 Administration and Leadership, in addition to other rotations that can be developed upon interns' interests and supervisory availability.

Neuropsychology (6 months): Interns will spend one day per week with a licensed neuropsychologist participating in an outpatient neuropsychological evaluation. The level of responsibility and participation in each case will increase as the rotation progresses. Interns observe and eventually lead a semi-structured clinical interview, learn to administer and score a core battery of tests that cover various cognitive domains, write up portions of the reports, and observe/participate in feedback sessions for testing cases. Interns will also participate in capacity evaluations both in the inpatient and outpatient settings. In addition, interns will learn how to complete neuropsychology e-consults by reviewing test results and medical records for the purposes of triaging and giving recommendations to providers.

*In certain circumstances Neuropsychology can be offered as a Major rotation for interns seeking a Neuropsychology post-doctoral fellowship

Geriatric/Geropsychology (4-6 months): Interns will spend one day a week in the Community Living Center (CLC) under the direction of a licensed psychologist, providing therapy to the geriatric veteran population to include those veterans with chronic/debilitating illnesses. The primary therapeutic modalities in the CLC include Reminiscent and Talk Therapy. Additionally, interns will have the opportunity to receiving training in various capacity evaluations and under

supervision complete capacity evaluations in the CLC as well as other departments within the medical center. ***DUE TO COVID-19 PRECAUTIONS THIS ROTATION MAY BE IMPACTED.

Home-Based Primary Care (4-6 months): Interns will spend one day a week in Home Based Primary Care (HBPC). This program provides home health care for veterans who are severely disabled and/or chronically ill. Services to this typically geriatric population include risk assessment, cognitive assessment, mental health assessment, supportive therapy and psycho-education. Interns will function as part of the HBPC interdisciplinary team, which consists of medical providers, nurses, social workers and psychologists. Interns will accompany a HBPC psychologist in home visits as they experience the challenges of service delivery in the home environment and often within a rural area. ***DUE TO COVID-19 PRECAUTIONS THIS ROTATION MAY BE IMPACTED.

Serious Mental Illness (4-6 months): This minor rotation is designed to offer training in the conceptualization and treatment of veterans with severe mental illness (SMI). This minor will provide interns the opportunity to work with veterans with SMI who are hospitalized on the inpatient psychiatric unit in the main hospital.

The inpatient psychiatric unit is a 23-bed acute care/short-term unit that provides quality psychiatric and substance detox care and treatment to men and women of our veteran population. Care is delivered through a multidisciplinary team approach consisting of psychiatry, psychology, social work, physician assistants, nursing, pharmacy, and chaplain service. Group, individual, and specialized treatment settings are utilized as part of the treatment plan with an emphasis on providing a caring, supportive, and respectful environment to meet the acute care needs of veterans with SMI. Specifically, interns working with SMI veterans who are hospitalized on the inpatient unit may provide individual supportive psychotherapy to help alleviate/manage acute risk factors and enhance coping skills. Interns would also facilitate/co-facilitate psychoeducational and/or skill building groups for veterans on the unit. In addition, they would collaborate with the multidisciplinary team to offer support with treatment facilitation and discharge planning.

VISN 5 Administration and Leadership (4 months): This rotation is designed to provide interns with greater exposure to the operations of Mental Health services across the geographic area of VISN 5 (West Virginia, Maryland and District of Columbia). Psychologists are committed to promoting and enhancing patient care and well-being. Part of this work involves determining whether Veteran's needs are being met and evaluating whether they are receiving the best quality of care. This rotation provides interested interns with the opportunity to learn about and actively engage in program development, oversight and evaluation from a regional perspective. Moreover, interns will have the opportunity to observe and participate in the activities of leadership staff to better understand health care at the macro level. Finally, this rotation is designed to provide potential methods of preparing for leadership opportunities in areas of clinical health care administration. ***DUE TO COVID-19 PRECAUTIONS THIS ROTATION IS NOT CURRENTLY AVAILABLE.

Long-Term Therapy Patients

Interns will carry a long-term therapy caseload of at least three patients. All three major rotations create the opportunity for interns to develop ongoing treatment. Thus, for the veterans that are receiving this care, change in rotation will not have any impact on their treatment. Additionally, while students are changing rotations they will be encouraged to maintain contact with prior rotation supervisors. Martinsburg VAMC embraces a collegial atmosphere that encourages collaboration amongst staff and students.

Other Learning Activities

Intern Didactic Seminar Series

Weekly seminars are held through the Internship training year. These two hour long seminars are led by a variety of psychologists (and occasionally staff from other healthcare disciplines) and cover a wide array of topics relevant to the role of practicing psychologists and personal/professional development. The presentations cover areas including military culture, cultural competency/diversity, clinical assessment and intervention, evidenced based psychotherapy, health psychology, neuropsychology, and professional development. Other areas are additionally covered utilizing the vast experience amongst the psychology staff and other professionals within the Mental Health Service. ***DUE TO COVID-19 PRECAUTIONS SUPERVISION MAY BE PROVIDED VIA VIDEO CONFERENCING.

Multicultural/Ethics Journal Club

A weekly scheduled one-hour meeting with an Internship Program psychologist will be held to review recent peer-reviewed journal literature pertaining to multicultural and/or ethical issues and the application to the practice of psychology. Each week an intern (or psychologist) will provide the other interns and psychologist recent journal articles pertaining to an area as selected by the intern (or psychologist). The intern will then facilitate a collegial discussion and review of the article's implications for applying informed, ethical, and thoughtful application to the delivery of psychological services. Interns are provided a safe environment to enhance their self-awareness and self-reflection skills.

Intern Scholarly Presentation

Interns are required to give a presentation to the Psychology Department or Mental Health Service that is expected to be scientific in nature and may include original research, program development/evaluation, or quality improvement. Interns have typically used the forum as an opportunity to practice their dissertation presentations before their final defense, or share defended dissertation to this group.

Additional Learning Opportunities

Martinsburg VAMC has forged informal partnerships with other VA training sites within our network to attend selected didactics seminars through skype. Additionally, this has provided for our small internship class to socialize with other VA interns while receiving training from

highly regarded experts. Additionally, virtual learning opportunities are available through the Veterans Health Administration Employee Education System which partners with the Veteran Health Administration and Veterans Integrated Service Networks to provide valuable training opportunities related to current and relevant clinically based care.

Supervision

Supervision is provided by psychologists who are directly associated with the rotation areas selected. Major rotations require a minimum of two hours of face-to-face supervision per week, and minor rotations require a minimum of one hour of supervision per week. Additionally, the interns will attend one hour long, weekly, group supervision with another licensed psychologist. The exposure to another supervising psychologist helps to provide exposure to alternative professional perspectives. During group supervision interns are encouraged to present cases that highlight diversity issues to improve sensitivity to individual/cultural differences. Supervision is conducted through case discussions, live observation, co-therapy, case presentations, audio tape review and seminars. All assessments completed by interns are supervised by a licensed psychologist. Informal supplementary supervision is provided by unlicensed psychologists (have completed initial application to state licensing board and are preparing to take EPPP) and members of other professional disciplines. A psychologist is required to be on-site or in nearby proximity when trainees have contact with any patient. Should the student's primary supervisor be out for any reason, another psychologist in that location is identified as the acting supervisor and assumes all supervisory responsibility. No clinical work is to be done after hours as there will be no covering psychologist available (this includes phone calls to patients). ***DUE TO COVID-19 PRECAUTIONS SUPERVISION MAY BE PROVIDED VIA VIDEO CONFERENCING.

Formal Evaluation

Evaluation is a mutual process among interns, supervisors, and the training program as a whole. It serves important and necessary functions to ensure optimal training and achievement of expected competencies. Interns are formally evaluated on the following profession-wide competencies areas: ethical and legal standards, individual and cultural diversity, professional values and attitudes, communication, interpersonal skills, assessment, intervention, supervision, consultation and interprofessional/interdisciplinary skills and research.

The Psychology Internship Program requires that supervisors provide interns with timely and ongoing verbal feedback as well as formal or written evaluations over the course of the training experience. Formal written evaluations occur at mid-rotation and end-of-rotation for each major and minor clinical rotation. Evaluations are completed by the primary supervisor but will also incorporate feedback from any secondary supervisors. Evaluations are discussed with the intern and the Psychology Internship Training Committee and will be logged/stored by the Director of Clinical Training in a designated secure location. Trainees will also have mid-year and end-of-year evaluations provided to the interns' home doctoral program. They are completed by the Director of Clinical Training through collaboration with rotation supervisors to date, Psychology Internship Training Committee, and other involved training staff. Additional

evaluation periods and additional communication with interns' home doctoral program may be added should there be a need based upon concerns of the interns' performance and/or conduct.

Additionally, interns are asked to prepare evaluations of their supervisors and rotations at the end of each rotation, and to provide an overall evaluation of the internship program at the end of the year. One year following completion of the internship, former interns will be requested to complete assessments of how well their internship training prepared them for the residency period. Informal, ongoing verbal feedback is solicited from interns and supervisors throughout each rotation, with necessary adjustments made in accordance with feedback received. This feedback is used by the Psychology Internship Committee to determine the effectiveness of the program in meeting the mission and goals of the training program and the student.

Requirements for Completion

Hours

Interns must complete 2080 professional hours within the 52-week training year in order to graduate from the internship. Interns are encouraged to maintain a personal record of their hours. Accrued and leave time and authorized absences for professional development activities are counted toward the 2080 hour requirement. Extensions of the training year may be allowable under extraordinary circumstances (e.g., cases of unavoidable extended family or medical leave).

Demonstration of Competency

In the Interns' final evaluation, they must demonstrate "High Intermediate" or "Advanced" rating in at least 80% of the competency goals for which they are being rated. There must not be any competency areas for which interns are rated below "Intermediate".

Training Staff

Paul Anders, Ph.D. (Clinical Psychology, George Mason University, 1996). He completed his predoctoral internship at The Alexandria Community Mental Health Center. Joining the VA in 2008, he has worked in geriatrics his entire VA career, beginning in Home Based Primary Care and then transferring to the inpatient CLC's (Community Living Centers). He has a special interest in capacity evaluations (decision making and independent living skills).

Paula K. Barrett, Psy.D. (Clinical Psychology at American School of Professional Psychology at Argosy University-Washington DC, 2015). Currently, she is a BHIP clinical psychologist. She has completed VA trainings in Cognitive Processing Therapy, Moving Forward - A Problem Solving Approach and Collaborative Assessment and Management of Suicidality (CAMS). She previously worked in Acute Mental Health at the Atlanta VA and Outpatient General Mental Health at CBOC's in South Carolina. Her clinical interests include PTSD and trauma focused treatments, addictions, couples therapy and Acceptance and Commitment Therapy.

Michelle Bruce, Psy.D. (Clinical Psychology, Argosy University, 2009). She completed her predoctoral internship at the Tewksbury Hospital in Tewksbury, MA. She serves as a Primary Care psychologist, consulting with primary care physicians, nurses, pharmacists, nutritionists and other clinical professionals to provide same day care to veterans in Primary Care. She has specific interest in health education and conducting brief treatments to help veterans better understand and manage their symptoms. She is the VISN 5 Lead Trainer for PCMHI and enjoys teaching and working with staff and students to develop the specific skills needed as a clinician in a Primary Care setting.

Lauren Chandler, Ph.D. (Clinical Psychology, Loyola University 2009). She completed her predoctoral psychology internship at the Maryland VA Health Care System and University of Maryland Consortium in Baltimore, MD. She also completed a two-year postdoctoral fellowship in neuropsychology in the Neurology Department of the University of Virginia. Dr. Chandler conducts neuropsychological assessments and provides treatment to veterans with a variety of cognitive and neurological deficits and she has particular interest in working with neurodegenerative and memory disorders.

Michele Crisafulli, Ph.D. (Human Services Psychology, clinical and community psychology tracks, University of Maryland, Baltimore County 2016). She completed her internship with the VA Maryland Health Care System/University of Maryland School of Medicine Psychology Internship Consortium. From 2017-2019, she was a staff psychologist in primary care – mental health integration (PCMHI) at the Baltimore VA, where she served as the PCMHI Facility Lead Trainer. She transitioned to her role of PCMHI psychologist at the Ft. Detrick Community-Based Outpatient Clinic in January 2020 and recently took on the Facility Lead Trainer role for the Martinsburg VAMC. In addition to integrated primary care, she has particular interests in program development and evaluation, motivational interviewing, health behavior change, acceptance- and mindfulness-based interventions, and systems-level intervention to decrease stigma.

Jennifer Cohen, Ph.D. (Clinical Psychology, Alliant International University at Los Angeles, 2013) She completed both her internship (Chillicothe VAMC) and post-doctoral training (San Francisco VAMC) within the VA system. She worked at the El Paso VA as a Compensation and Pension evaluation psychologist prior to joining the Martinsburg VA in 2018. Dr. Cohen has special interests in various health related evaluations, such as organ transplant and bariatric surgery evaluations, as well as threat assessments. She is on the Disruptive Behavioral Committee and Employment Threat Assessment Team.

Calandre (Cali) Davis, Psy.D. (Clinical Psychology, Nova Southeastern University, 2019). She completed her Clinical Internship at the Martinsburg VAMC and has stayed on as a Staff Psychologist. Currently, she is a PCMHI psychologist at the Stephens City Community Based Outpatient Care clinic. Special interests include sleep disorders, CPT for trauma survivors, memory assessments and working in a Primary Care setting.

Timothy A. Davis, Psy.D. (Neuropsychology, Philadelphia College of Osteopathic Medicine, 2008). He later went on to complete a postdoctoral fellowship in Neuropsychology at UC Davis Medical Center in 2014. Dr. Davis served on active duty status with the USAF for ten years and deployed to Afghanistan in 2010, where he led a Combat Operational Stress Control mission. Presently, Dr. Davis is working as a Clinical Neuropsychologist and holds interests in working with dementias, movement disorders, and traumatic brain injury.

Christopher Hansen, Ph.D. (Clinical Psychology, University of South Dakota, 2007). He completed a predoctoral internship from Tripler Army Medical center in 2004, and a fellowship in neuropsychology through Walter Reed Army Medical Center in 2011. He started his work with the VA in 2013, working in the War Related Illness and Injury Study center as a fellowship director and researcher before transferring to Martinsburg as the psychology executive in 2018. He has a special interest in the assessment of traumatic brain injury, occupational assessment, statistical inference and methodology, and the development of psychometric assessments.

Heidi M. King, Ph.D. (Clinical Psychology, University of South Florida, 2008). She completed her predoctoral internship at the James A. Haley Veterans' Hospital in Tampa, FL. She presently serves as a Primary Care psychologist, consulting with primary care physicians, nurses, pharmacists, nutritionists and other clinical professionals to provide patient-centered care. In addition, Dr. King serves as the Health Behavior Coordinator offering trainings in motivational interviewing and TEACH, and she serves as the psychologist on the MOVE! team.

Daniela Lupu, Psy.D. (Clinical Psychology, Regent University, 2005). She completed her predoctoral internship at the Reading Hospital and Medical Center in Reading, PA. She serves as a Primary Care psychologist, consulting with primary care physicians, nurses, pharmacists, nutritionists and other clinical professionals to provide same day care to veterans in Primary Care. Her area of interest focuses on assisting veterans better understand and manage their symptoms through the application of brief empirically based clinical interventions that integrate mind, body, and spirit perspectives.

Jason A. Malcy, Psy.D. (Clinical Psychology, Nova Southeastern University, 2003). He completed his predoctoral internship at the Salem VAMC and completed a postdoctoral fellowship in the Center of Excellence Substance Abuse Treatment (CESATE) at the Seattle VAMC. He is the Director of Training for the Psychology Training Program and also a BHIP clinical psychologist. He has completed VA trainings in Prolonged Exposure, Cognitive Processing Therapy, Acceptance and Commitment Therapy, and Interpersonal Therapy for Depression. He previously served as a site surveyor for VACO/ Office of Mental Health Operations. His clinical interests include PTSD, addictions, ethical decision making, and administrative operations.

David Marks, Psy.D. (Clinical Psychology, Regent University, 2017). Dr. Marks completed a predoctoral internship from Wilford Hall Ambulatory Surgical Center in 2017. He served on active duty status with the USAF for 4 years total, and mostly worked with PTSD, depression, and substance use disorders. Dr. Marks has been a BHIP clinical psychologist with the Martinsburg VAMC since 2020. His clinical interests include PTSD, clinical supervision, motivational interviewing, health behavior change, and Acceptance and Commitment Therapy.

Sean Negola, Psy.D. (Clinical Psychology, Argosy University, Phoenix, 2006) is a psychologist working in the Tele-Mental Health program. Prior to transferring to the Martinsburg VAMC, he worked at the Beckley, WV VAMC for about seven years as the Local Recovery Coordinator, where he worked with others to develop the Tele-mental Health program at that facility and two years as the Home-Based Primary Care Psychologist. His interests include cognitive testing, personality assessment and Cognitive Behavioral Therapy. He is currently spends the majority of his days conducting individual and couples therapy via Tele-mental Health but he also conducts the psychological evaluations on the police staff at the facility and is a member of the Capacity Team.

Bhusan Neupane, MD: He completed medical school in Nepal. He did research in Alzheimer's disease, dementia and neuropsychiatric disorders before joining residency. Completed psychiatry residency from Rosalind Franklin University School of Medicine, North Chicago, IL. Completed geriatric psychiatry fellowship from Yale School of Medicine, New Haven, CT. Worked at Catawba hospital, Catawba VA with academic affiliation to Virginia Tech Carilion School of Medicine at the level of assistant professor and was preceptor for medical students from West Virginia school of Osteopathic Medicine and Edward Via College of Osteopathic medicine. He was actively involved in teaching medical students, residents and fellows. He is currently working as an outpatient psychiatrist at Martinsburg VA Medical Center, Martinsburg, WV. He is recipient of several awards for teaching, humanism and passion for psychiatry. His interests include neurodegenerative disorders and dementia, neuroplasticity, neurogenesis, mood and psychotic disorders and psychiatric disorders in the elderly. He is board certified in psychiatry, geriatric psychiatry and brain injury medicine.

Donald A. Patchell Psy.D. (Clinical Psychology, Indiana University of Pennsylvania, 2005). He completed his internship at the Syracuse VAMC. He has completed evidenced based training in Prolonged Exposure, Cognitive Processing Therapy, and Cognitive Behavioral Therapy for Insomnia. He serves as the psychologist for the Suboxone Clinic. Additionally, he has expertise

in sex offender treatment, involuntary commitment, and substance abuse treatment as well as psychological first aid and critical incident stress management.

Terry Ruthrauff, Psy.D. (Clinical Psychology, Antioch University, 2003). He completed his internship at the Dwight D. Eisenhower VAMC in Leavenworth, KS. He has held a number of human services and mental health positions in the United States and other countries that range from a tropical Caribbean island to emerging nations in Eastern Europe and Africa and lots of places in-between. He is currently employed as a staff psychologist in the Hope Center at the Martinsburg, WV VAMC. His professional interests include post-trauma healing, conflict resolution and addictions. Outside of work, Dr. Ruthrauff's greatest joy is going on adventures with his preschooler son.

Mimi Yorks, Psy.D. (Clinical Psychology, The George Washington University, 2019). She earned a Master of Forensic Psychology from The George Washington University in 2014. She completed her pre-doctoral internship at the Martinsburg VAMC and stayed on as a staff psychologist. She is currently a psychologist in outpatient mental health in the Hope Center and serves as the facility Local Evidence Based Treatment Coordinator. She is a member of the Internship Committee, the Capacity Team, and tracks the depression measures for the facility's Mental Health SAIL metrics. In addition to individual therapy she runs Cognitive Behavioral Therapy for Depression groups. Her clinical interests include PTSD/trauma, psychological assessment, and capacity evaluations.

Rachel T. Ziwich, Ph.D. (Clinical Psychology with Health Emphasis , Yeshiva University, 2013). She completed a predoctoral internship at the Canandaigua VAMC and completed a postdoctoral fellowship in Health Psychology/Geropsychology at the Memphis VAMC. She is the supervisor for the Home-Based Primary Care rotation and the coordinator for the internship didactics seminars. Her clinical interests include mood disorders in older adults, dementia, and the interaction between neurological disorders and mental health.

Previous Martinsburg VAMC Psychology Interns

Below is a list of our trainee classes, the programs they came from, and their professional activities immediately following internship. Our interns have been very successful with obtaining VA employment (especially with our facility) and VA post-doctoral fellowships.

<u>Class Year</u>	<u>Position Following Internship</u>
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2020 graduates

Alliant International University -CSPP- San Diego	VAMC Martinsburg Psychologist
Fielding Graduate University	VAMC Hampton Psychologist

2019 graduates

Nova Southeastern University	VAMC Martinsburg Psychologist
George Washington University	VAMC Martinsburg Psychologist
Chicago School of Professional Psychology – DC	Private Practice – Northern Virginia

2018 graduates

Wright Institute	VAMC Augusta Postdoctoral Fellowship- PCMHI
Alliant International University-CSPP-San Francisco	VAMC Billings (Montana) Psychologist
Divine Mercy University	Personal Sabbatical

2017 graduate

Argosy University – DC	VAMC Martinsburg Psychologist
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2016 graduates

Pacific Graduate School of Psychology	VAMC Augusta Postdoctoral Fellowship- PCMHI
Fairleigh Dickinson University	VAMC Martinsburg Psychologist
Argosy University – DC	VAMC Memphis Postdoctoral Fellowship

Application & Selection Procedures

Eligibility: Applicants for internship must be Ph.D. or Psy.D. degree candidates from APA accredited doctoral programs in clinical or counseling psychology, and have supervised clinical practicum work to include at least 300 hours of direct contact hours in intervention and 50 hours in assessment. VA requirements specify that eligible applicants must be U.S. citizens and have fulfilled departmental requirements for internship as certified by their Directors of Clinical Training. Further details regarding the program are available in the APPIC Directory.

Procedures: Applications must be submitted no later than **December 18, 2020** however, students are urged to complete application requirements as early as possible.

Application requirements:

1. Completed copy of the APPIC online Application for Psychology Internship (AAPI); The AAPI can be obtained at the APPIC Web site, <http://www.appic.org>
2. Cover letter of interest specifically for the Martinsburg Psychology Internship Program
3. Current curriculum vitae
4. Official transcripts of all graduate work
5. The form "Academic Program's Verification of Internship Eligibility and Readiness," certifying that you have met your program's prerequisites for internship. This can be found in the AAPI.
6. At least three letters of recommendation from psychologists familiar with the applicant, preferably one from your academic advisor
7. US Citizenship
8. Verification of Selective Service Registration (Male applicants born after 12/31/1959 must sign a pre-appointment Certification Statement for Selective Service Registration)
9. Dissertation proposal approved prior to start of internship

Interview Process

Interviews are normally scheduled during the first three weeks of January. Interviews are all held through video conferencing. Applicants are welcome to have a guided tour of the facility and can be arranged on an individual basis with the Training Director or identified surrogate. However, applicants will be ranked solely upon application submissions and video conferencing interviews.

Commitment to Diversity in Hiring/Selection

The Psychology Service abides by the Department of Veterans Affairs' commitment to ensuring equal opportunity (EEO), and promoting diversity and inclusion, all applicable Federal EEO laws, regulations, Executive Orders and Management Directives. As provided by the Policy, the VA will not tolerate discrimination or harassment on the basis of race, color, religion, national

origin, sex, pregnancy, gender identity, parental status, sexual orientation, age or disability. Our training program is committed to ensuring a range of diversity among trainees, and we select candidates representing diverse backgrounds. All things being equal, consideration is given to applicants representing elements of diversity, including but not limited to age, disability, ethnicity, gender, gender identity, language, national origin, race, religion, culture, sexual orientation, social economic status, and military service.

Selection and Notification

The Training Committee will meet in early February to make selections and rank candidates. Criteria utilized in ranking candidates include: C.V., essays, clinical experiences, assessment experience, letters of recommendation, and goodness of fit with the Internship Program. The final decision will be made by the Director of Training utilizing rankings from the Training Committee and consultation with Psychology Chief. Selection notification will be implemented in accordance with APPIC guidelines. Acceptance letters will be sent to matched interns and to their directors of training within 72 hours of Intern Notification Day.

Stipends and Benefits

Salary: \$29,330 (for 2020-2021 year)

Fringe benefits: Health insurance, life insurance, federal holidays (10), vacation (13 days), sick leave (13 days), dissertation release time/professional development time/graduation attendance (up to 5 days).

THE DEADLINE FOR RECEIPT OF ALL MATERIALS IS DECEMBER 18, 2020

If there are questions about the internship program or if you need to check the status of your application please contact Dr. Jason Malcy, Director of Psychology Training at (304) 263-0811 ext. 4659 or via email at Jason.Malcy@va.gov.