

PSYCHOLOGY INTERNSHIP PROGRAM VA NORTHERN CALIFORNIA HEALTH CARE SYSTEM- EAST BAY

150 Muir Road Martinez California, 94553 (925) 372-2521 http://www.northerncalifornia.va.gov/

PROGRAM OVERVIEW

Thank you for your interest in our APA-accredited doctoral psychology internship program. On behalf of our training staff, I want to emphasize how much we enjoy training psychology practicum students, interns, and post-doctoral residents. Teaching and learning with those who will soon be our colleagues is a highlight of our professional work. We are committed to training psychologists who will provide excellent care to our Veterans and be prepared to work in VA and other complex health care systems.

We have four General Track positions and one Neuropsychology Track position. Interns complete rotations at our Martinez campus and at the David Grant Medical Center at Travis Air Force Base in Fairfield. Working on interdisciplinary teams in these diverse settings provides a rich and comprehensive training experience that serves as the capstone for doctoral education in Clinical or Counseling psychology and prepares graduates for post-doctoral specialization or employment.

Our training settings are described in this brochure and include rotations in PTSD, Neuropsychology, Cognitive Rehabilitation, Behavioral Medicine, Primary Care-Mental Health Integration, Inpatient Psychiatry, Consultation and Liaison, Behavioral Health Interdisciplinary Program, Substance Use Disorders, Psychosocial Rehabilitation, and Diversity, Equity, and Inclusion. Interns complete 4 rotations (each is 2 days per week for 6 months). Additionally, interns meet weekly for a variety of didactic training seminars, including a range of topics in diversity, ethics, clinical service delivery, and professional development. Seminars are led by training staff and outside speakers. Interns also participate in an intensive year-long psychotherapy training experience and obtain considerable experience supervising practicum students.

Diversity in its many forms is a central value and focus of our training program. Individual and cultural diversity is emphasized during orientation, seminars, supervision, and case consultation. In addition, interns and residents participate in and help develop programming for our monthly Diversity, Equity, and Inclusion meeting, which includes didactics, journal club, large and small group experiential exercises, and case presentations. Our staff and trainees participate in Tri-VA DEI meetings along with those from VA Palo Alto and VA San Francisco, fostering regional collaboration and networking. In 2021, our training program was competitively awarded an APPIC "Call to Action on Equity, Inclusion, Justice, and Social Responsivity" grant to develop training tools for combatting systemic racism, inequality, and health disparities. Led by then postdoctoral fellow Dr. Delmira Monteiro and Mental Health DEI Lead and Behavioral Medicine Psychologist Dr. Larry Burrell II, we designed and implemented a four-part experiential didactic series, "Dialogues About Race", with our trainees; this training continues to serve as a foundation at the start our training year. These written and video-recorded materials have been disseminated nationally to support other training programs in this essential work.

Our supervisory staff is committed to excellence in training and is made up of diverse professionals with an impressive list of accomplishments. Many faculty members are involved in national professional activities and organizations, and several are trainers and consultants in VA rollout trainings in various evidence-based practices (e.g., CBT-I, CBT-CP, CPT, MI, IPT). Graduates consistently accept competitive post-doctoral residencies, including the five residencies located within VANCHCS. Two of these residencies are in Neuropsychology, two are in Integrated Care and Behavioral Medicine, and one is in PTSD. It is telling that several supervisory staff were once trainees in our program! We take great pride in the professional development of our interns, who have consistently reported high satisfaction with their training experiences and the support they received during their internship.

Regarding COVID-19, VA Northern California and our training program continue to be guided by several principles: employee/trainee safety, maintaining accessible and cutting-edge care for Veterans, excellence in training, and flexibility. Like staff, our trainees have access to vaccinations, boosters, testing, and appropriate personal protective equipment through our system. At the time of this writing, VA Northern California does not require staff or Veterans to wear masks outside of care settings where Veterans may be immuno-compromised (e.g., inpatient Community Living Center, certain medical clinics); staff/trainees wear masks when asked to do so by Veterans, when working with medically at-risk patients, if they have had a recent exposure but are asymptomatic, or based on personal health/choice. Policies and practices are subject to change based on guidance/decisions by national and local public health officials.

Given expansions in telehealth care delivery and telework career options, we support some telework by our trainees. These decisions are based on clinical setting, patient preferences and care needs, and trainee competence and readiness. We believe that face-to-face training and care continue to be the foundation of our profession and highly value the skills, professional socialization, and community-building that inperson training facilitates. Our trainees are assigned VA laptop computers and receive training in software and best practices for tele-health and tele-supervision. Our 2023-2024 trainees started the year fully onsite and, depending on their rotations, will blend in up to a few days per week of telework as the year progresses. We will continue to collaborate to balance face-to-face and virtual treatment-delivery and training modalities in a way that maximizes quality clinical services and training, while adhering to national accreditation standards and state Board of Psychology supervision requirements.

While we cannot describe with precision how public health considerations will impact the 2024-2025 training year, we are certain of several things. First, the physical and emotional well-being, safety, and professional development of our trainees will continue to be a top priority. Second, we understand that the pandemic may have impacted many applicants' accrual of hours and research productivity and will take this into account as we evaluate applications. Third, all interview activities will be conducted virtually, with the goal of giving applicants as much of an "in-person" feel of our site as possible. Fourth, although the populations we treat and the services we provide will not change, there will continue to be significant use of tele-health in our clinical care and training experiences. Finally, we will continue to foster the same transparent, accessible, responsive, and cohesive (with supervisors, trainees, and providers from other disciplines) learning environment that has been the hallmark of our training program.

Thanks again for considering our internship program. We hope this brochure is helpful as you make decisions about the internship application process. Please let us know if we can answer any additional questions.

Matt Cordina

Matthew Cordova, Ph.D. Psychology Training Director (925) 372-2521, <u>Matthew.Cordova@va.gov</u>

ACCREDITATION STATUS

The doctoral internship at the VA Northern California Health Care System is accredited by the Commission on Accreditation of the American Psychological Association. Our next site visit will be in 2031.

The APA Office of Program Consultation and Accreditation can be reached at:

American Psychological Association 750 First St. NE, Washington DC 20002-4242 Phone number (202) 336-5979

INTERNSHIP POSITIONS, BENEFITS, AND ELIGIBILITY

We anticipate five internship positions (four General Track, one Neuropsychology Track) for the 2024-2025 training year. Each intern receives an annual stipend of \$41,113. Our interns are provided the option to elect health insurance coverage through the VA's benefit program. Health benefits are also available to interns' dependents and married spouses, including to legally married same-sex spouses. Unmarried partners are not eligible for health benefits, even those in legal civil unions or domestic partnerships. Insurance programs can be selected from a wide array of options.

All information about VA eligibility requirements is available at <u>https://www.va.gov/oaa/hpt-eligibility.asp</u>; please read these eligibility requirements carefully prior to applying to make sure you are eligible for a VA internship, including U.S. citizenship, health requirements, background investigations, and Selective Service registration. Individuals who are born male should check their Selective Service registration status at this website prior to applying to VA internship sites: <u>Verify Selective Service</u> <u>Registration</u>. The training program may be released from a Match with a candidate not meeting all pre-employment requirements for hiring.

In addition, please note that all Psychology interns are considered temporary employees of the Department of Veterans Affairs and, as such, are subject to laws, policies, and guidelines posted for VA staff members, including for required vaccinations (e.g., influenza, COVID-19) and random drug testing (see this <u>document</u> for more details). There are infrequent times in which this guidance can change during a training year which may create new requirements or responsibilities for Psychology interns. If employment requirements change during the course of a training year, interns will be notified of the change and impact as soon as possible and options provided. The Director of Training will provide you with the information you need to understand the requirement and reasons for the requirement in timely manner.

Please note: Non-funded internship positions are not offered.

MATCH NUMBERS

For our General Track (four positions) our APPIC match number is: **114112** For our Neuropsychology Track (one position) our APPIC match number is: **114113**

APPLICATION DEADLINE: Applications must be completed by November 1, 2023.

Please review the "Additional Important Application and Placement Information" section below for specific instructions on our application process. Please review the "Internship Admissions, Support, And

Initial Placement Data" section for more information about admission requirements, stipend and benefits, and graduate placements.

PROGRAM DESCRIPTION AND TRAINING SITE INFORMATION

There are currently 24 core members of the Psychology Training Committee and many ancillary staff members from several different disciplines actively involved in the training program.

The Clinical Psychology Internship Program sponsored by VA Northern California Health Care System (VANCHCS) is a full-time APA-accredited clinical internship providing 2080 hours of clinical experience. We offer training in a wide variety of clinical settings with diverse patient populations. The program is designed to train psychologists to effectively respond to the challenges and changes in the modern health care environment. VANCHCS has had an APA-accredited predoctoral psychology internship program since 1977. Currently, we have five full-time permanently funded intern slots.

The primary training site for the internship program is in Martinez, in the East Bay region of the San Francisco Bay Area. The Martinez campus sits on the traditional territory of several tribes, including the Miwok, Karkin, Me-Wuk (Bay Miwok), Muwekma, and the Confederated Villages of Lisjan. A rotation is also offered at the David Grant Medical Center (DGMC) which is on Travis Air Force Base in Fairfield (about 35 minutes away from Martinez), traditional territory of the Miwok and Patwin tribes.

MARTINEZ OUTPATIENT CLINIC AND EXTENDED CARE FACILITY



The <u>Martinez Outpatient Clinic</u> is a multiple building campus that offers a full range of medical, surgical, and diagnostic services in addition to mental health care. It is also home to the Center for Rehabilitation and Extended Care (CREC), also known as the Community Living Center (CLC). The CLC/CREC is a 120-bed nursing care facility that provides sub-acute medical care, rehabilitation, short term custodial/respite care, and inpatient hospice care. Due

to the breadth of speciality services offered across the campus, opportunities for close collaboration and consulation with interprofessonal teams are abundant. The Martinez campus is home to the internship program which was the first VA program in California to obtain APA accreditation. Martinez has long had a leading Neuropsychology service and there are a number of ongoing grant-funded research programs in affiliation with UC Davis, UC Berkeley, and UC San Francisco. The Martinez Behavioral Health Clinic moved into a new building in 2016; the Psychology Training Program is located in this building. The Psychosocial Rehabilitation and Recovery Center (PRRC), which hosts one of our internship rotations, moved into a new building in 2022. These spaces include additional office and meeting space, group therapy rooms, and state-of-the-art technology to aid clinical practice.

The facilty is located in a surburban neighborhood, not far from the shops and restaurants that make up historic downtown Martinez. Martinez is 27 miles from Oakland and 35 miles from downtown San Francisco. Topographically, Martinez runs from hill country to the waterfront and was the home to the famous environmentalist John Muir and the birthplace of legendary baseball great Joe DiMaggio. The martini was invented here in a tavern on the ferry docks, at a time before highways and bridges, when Martinez was the main gateway between the Bay Area and gold country.

DAVID GRANT MEDICAL CENTER



<u>David Grant Medical Center</u> (DGMC) is a teaching hospital and the Air Force's largest medical facility on the West coast. Under a unique joint sharing agreement between the Department of Defense (DoD) and the VA, DGMC has an inpatient psychiatric facility designed to provide state-of-theart psychiatric treatment for Veterans and active duty military personnel. This facility offers the distinctive opportunity to observe cross-agency collaboration in caring for both patient populations and to develop appreciation for the similarities and differences in Veteran and active duty behavioral health needs.

Located on the <u>Travis Air Force Base</u>, DGMC is a fully accredited hospital with a National Quality Approval gold seal by the <u>Joint Commission</u>. Travis Air Force base is the West Coast terminal for aeromedical evacuation aircraft returning sick or injured patients from the entire Pacific Rim.

LOCATION INFORMATION



Situated in the San Francisco Bay Area, our trainees are offered a vast array of world class cultural and recreational opportunities, comfortable weather, and a rich multicultural environment. Northern California is home to Yosemite National Park, Lake Tahoe, the Sierra Nevada Mountain Range, Pacific beaches, and the wine country of Sonoma and Napa Counties. Psychology training in our region is enhanced by the close proximity to major research universities (UC Berkeley, UC San Francisco, Stanford, UC Davis)

and the VA facilities in San Francisco and Palo Alto. Trainees typically have the opportunity to attend training workshops at the neighboring VA facilities.

While the cost of living in the San Francisco Bay Area is high, the East Bay is relatively more affordable and interns have been able to find affordable housing in communities convenient to VANCHCS training sites. Interns have often elected to live in the Oakland/Berkeley area or the Walnut Creek/Martinez/Pleasant Hill/Concord area. Several interns have also lived in San Francisco and some have commuted from the San Francisco Peninsula (e.g., Palo Alto), although the latter is more challenging due to distance and traffic.



TRAINING IN THE VA

The VA is the largest health care system in the nation and is the largest training site for physicians, psychologists, and many other health care professionals. Mental Health services are a primary focus of attention in the VA, in large part due to concern about PTSD, Traumatic Brain Injury, and other issues among service members who served in Iraq and Afghanistan. In addition, the VA's commitment to providing state-of-the-art Mental Health care for all enrolled Veterans, across all diagnoses and issues and across the life-span, led to a rapid expansion of employees and many new training initiatives. Tele-health modalities are well-established and provide services to Veterans across our system.

The VA has put significant resources into training its mental health clinicians in specific evidence-based psychotherapies (EBT), including Cognitive-Behavioral Therapy (for Depression, Chronic Pain, and Insomnia), Acceptance and Commitment Therapy, Cognitive Processing Therapy, Prolonged Exposure, Motivational Interviewing, Interpersonal Therapy, Couples therapies, and many other approaches. Several members of our internship training faculty have completed these intensive trainings (which include supervision and review of session recordings) and these particular EBTs are emphasized during internship training.

OTHER PSYCHOLOGY TRAINING IN VANCHCS

Sacramento Psychology Internship

VA Northern California also has an VA Central Office-funded internship at the medical center in Sacramento. The first class started in July 2018 and the program achieved full APA Accreditation in 2020. The program has four interns who participate in multiple rotations throughout the facility. Themis Yiaslas, Psy.D., is the Training Director of the Sacramento program.

Clinical Neuropsychology Postdoctoral Residency

The VANCHCS two-year Clinical Neuropsychology Postdoctoral Residency Program has been in existence for over 20 years and received APA accreditation in 2009. There are four postdoctoral residents funded through VA Central Office. Two residents are based at the Sacramento (Mather) campus, and two are based in Martinez. Training also occurs at David Grant Medical Center on the Travis Air Force Base, UC Davis Department of Neurology, and the UC Davis Alzheimer's Disease Center. The program has a unique strength in neurocognitive rehabilitation training. Brigid Rose, Ph.D., ABPP, is the Director of the Clinical Neuropsychology Postdoctoral Residency Program.

Clinical Psychology Postdoctoral Residency

VANCHCS has two postdoctoral residents in Clinical Psychology with a focus in Integrated Care and Behavioral Medicine and one with a focus in PTSD. This program is APA-accredited and has been in existence since 2011. These residents work at the Martinez facility.

Student Practicum Programs

There are graduate student practicum programs at the Martinez and Sacramento facilities. These programs are based on formal training agreements with local Psychology graduate programs. The students work in several different settings, including Behavioral Health Interdisciplinary Program, Psychosocial Rehabilitation, Cognitive Rehabilitation, inpatient psychiatry, and Substance Abuse. Interns and postdoctoral residents have the full array of supervisory experiences with the practicum students at Martinez, including individual supervision, didactic and professional development presentations, and evaluation.

TRAINING MODEL AND PROGRAM PHILOSOPHY

The program is designed to facilitate the transition from advanced graduate student to entry-level psychologist. While internship is primarily an intensive clinical training experience, the program exposes interns to the wide range of activities typical of psychologists in complex health care settings. For example, training faculty across the various settings and clinical programs are in program leadership positions. Thus, in addition to the faculty members' clinical activites, the program provides opportunity for exposure to administrative roles that build on graduate training in empirical methodology, scientific literature, and quantitative reasoning. Some faculty members serve as training consultants for the VA evidence-based psychotherapy trainining initiatives.

The training model reflects our adherence to the philosophy that psychological practice is based on the science of psychology which, in turn, is influenced by the professional practice of psychology. We expect that our graduates will have a broad range of clinical and consultation skills that are informed by the scientific literature and will have the ability to apply scientific principles and techniques in addressing clinical and administrative responsibilities. The uniquely broad range of clinical and demographic

diversity across our training settings provides an exceptional environment for developing these competencies.

PROGRAM AIM AND COMPETENCIES

The aim of the Psychology Internship program at VA Northern California Health Care System is to provide training that will allow for successful entry into post-doctoral fellowships or entry level positions in health service psychology, with a particular emphasis on VA or other complex health care systems. The program trains for competency acquisition in nine domains and emphasizes broad and general practice in multiple clinical settings. Our Neuropsychology track provides the opportunity to emphasize training consistent with the sub-field's standards for preparation for advanced post-doctoral training (the Houston Conference Guidelines) while maintaining a broad and general training focus.

Internship training competencies are designed to build upon the basic clinical competencies acquired in graduate training. The internship program utilizes the nine profession-wide competencies identified in APA's Standards of Accreditation:

- 1. Research
- 2. Ethical and legal standards
- 3. Individual and cultural diversity
- 4. Professional values, attitudes, and behaviors
- 5. Communication and interpersonal skills
- 6. Assessment
- 7. Intervention
- 8. Supervision
- 9. Consultation and interprofessional/interdisciplinary skills

Competency Area One: Research

Demonstrates the substantially independent ability to critically evaluate and disseminate research or other scholarly activities (e.g., case conference, presentation, publications) at the local (including the host institution), regional, or national level.

Integrates current research and literature into clinical practice.

Competency Area Two: Ethical and Legal Standards

Is knowledgeable of and acts in accordance with each of the following:

The current version of the APA Ethical Principles of Psychologists and Code of Conduct.

Relevant laws, regulations, rules, and policies governing health service psychology at the organizational, local, state, regional, and federal levels.

Relevant professional standards and guidelines (e.g., patients' rights, release of information, informed consent, limits to confidentiality, management of suicidal behavior, and child/elder abuse reporting policies).

Recognizes ethical dilemmas as they arise, and applies ethical decision-making processes in order to resolve the dilemmas.

Conducts self in an ethical manner in all professional activities.

Competency Area Three: Individual and Cultural Diversity

Understands how personal/cultural history, attitudes, and biases may affect personal understanding and interaction with people different from oneself.

Demonstrates knowledge of the current theoretical and empirical knowledge base as it relates to addressing diversity in all professional activities including research, training, supervision/ consultation, and service.

Demonstrates the ability to integrate awareness and knowledge of individual and cultural differences in the conduct of professional roles (e.g., research, services, and other professional activities).

Demonstrates the ability to independently apply their knowledge and approach in working effectively with the range of diverse individuals and groups encountered during internship.

Competency Area Four: Professional Values, Attitudes, and Behaviors

Behaves in ways that reflect the values and attitudes of psychology, including integrity, deportment, professional identity, accountability, lifelong learning, and concern for the welfare of others.

Engages in self-reflection regarding one's personal and professional functioning; engages in activities to maintain and improve performance, well-being, and professional effectiveness.

Actively seeks and demonstrate openness and responsiveness to feedback and supervision.

Responds professionally in increasingly complex situations with a greater degree of independence as they progress across levels of training.

Competency Area Five: Communication and Interpersonal Skills

Develops and maintains effective relationships with a wide range of individuals, including colleagues, communities, organizations, supervisors, supervisees, and those receiving professional services.

Produces and comprehends oral, nonverbal, and written communications that are informative and well-integrated; demonstrates a thorough grasp of professional language and concepts.

Demonstrates effective interpersonal skills and the ability to manage difficult communication well.

Competency Area Six: Assessment

Demonstrates current knowledge of diagnostic classification systems, functional and dysfunctional behaviors, including consideration of client strengths and psychopathology.

Demonstrates understanding of human behavior within its context (e.g., family, social, societal, and cultural).

Demonstrates the ability to apply the knowledge of functional and dysfunctional behaviors including context to the assessment and/or diagnostic process.

Selects and applies assessment methods that draw from the best available empirical literature and that reflect the science of measurement and psychometrics; collects relevant data using multiple sources and methods appropriate to the identified goals and questions of the assessment as well as relevant diversity characteristics of the service recipient.

Interprets assessment results, following current research and professional standards and guidelines, to inform case conceptualization, classification, and recommendations, while guarding against decision-making biases, distinguishing the aspects of assessment that are subjective from those that are objective.

Communicates orally and in written documents the findings and implications of the assessment in an accurate and effective manner sensitive to a range of audiences.

Competency Area Seven: Intervention

Establishes and maintains effective relationships with the recipients of psychological services.

Develops evidence-based intervention plans specific to the service delivery goals.

Implements interventions informed by the current scientific literature, assessment findings, diversity characteristics, and contextual variables.

Demonstrates the ability to apply the relevant research literature to clinical decision making. Modifies and adapts evidence-based approaches effectively when a clear evidence-base is lacking.

Evaluates intervention effectiveness, and adapts intervention goals and methods consistent with ongoing evaluation.

Appreciates their stimulus value to patient and effectively addresses this in therapy.

Provide psycho educational group programming consistent with clinical program needs (e.g., PTSD groups, Pain Management, Substance Abuse).

Effectively manage termination of therapy.

Competency Area Eight: Supervision

Applies the knowledge of supervision models and practices in direct or simulated practice with psychology trainees, or other health professionals.

Provides effective constructive feedback and guidance (e.g. direct, behaviorally specific, corrective guidance).

Competency Area Nine: Consultation and Interprofessional/Interdisciplinary Skills

Demonstrates knowledge and respect for the roles and perspectives of other professions.

Applies the knowledge of consultation models and practices in direct or simulated consultation with individuals and their families, other health care professionals, interprofessional groups, or systems related to health and behavior.

Identifies appropriate patient care issues that would benefit from interdisciplinary consultation (e.g., with psychiatry, social work, MOVE! Program).

Communicates information and recommendations to the referral source verbally and in writing that are timely, clear, and useful.

PROGRAM STRUCTURE

The internship starts on a Monday in mid-August and lasts for a full calendar year. Interns work from 8:00 am - 4:30 pm Monday through Friday. Work-life balance is emphasized, and the internship is designed to involve 40 hours per week. Occasionally, additional time might be necessary to respond to clinical emergencies or complete tasks such as assessment reports. Interns may spend parts of the week at the Martinez facility and at David Grant Medical Center in Fairfield, but not on the same day.

Planning the Training Year

Prior to the start of the internship year, interns are sent a preliminary non-binding questionnaire to identify initial training interests. This information helps the Training Committee plan for the training year. At the beginning of internship, interns go through several days of orientation activities, which provide the opportunity to become familiar with the clinical rotations, sites, and prospective supervisors. During orientation, interns also complete a self-assessment to help identify strengths and training targets.

A training plan is developed individually for each intern in conjunction with the Training Director and other faculty input based on individual interests and training needs. The goal is to develop a broad-based training experience that includes exposure to multiple clinical settings and patient populations. Faculty members in addition to the Training Director are available for consultation to help navigate the various training options. Rotations are selected from the options below based on individual training needs and the program requirements for competency acquisition and broad clinical exposure. Interns are *typically* able to participate in the training activities that they desire but the exact structure and timing of various activities must fit with the overall organizational needs of the program. The Training Director, other faculty members, and the interns work together to ensure the training plan includes all requirements listed below.

The program is organized into two six-month segments. Rotations are scheduled for two days per week, so an intern will be working on two different rotations at a time. Interns' interests and priorities sometimes change over the course of the training year and changes in the training plan are permissible provided that they continue to allow for the intern to complete their required training experiences and the program has the capacity to absorb the change. Mondays are reserved for seminars, the year-long psychotherapy experience, supervision of supervision (of practicum students), and group supervision (for long-term psychotherapy cases). Time is scheduled for interns to have lunch together on Mondays and this is prioritized as an important professional socialization experience.

The Neuropsychology Track is designed to meet Houston Conference Guidelines for an internship in Neuropsychology, and this requires that at least 50% of the training year is dedicated to specialized training in Neuropsychology. This is met through assignment to the Neuropsychology consultation service and, typically, to the Cognitive Rehabilitation service. The Neuropsychology Track intern has the opportunity to engage in at least one rotation in an area outside the emphasis area and the intern is guided to develop a training plan that includes sufficiently broad experiences in addition to Neuropsychology specialization. Because Neuropsychology Track interns typically plan to apply for Neuropsychology postdoctoral residencies, the training plan is designed to emphasize specific experiences early in the year so as to maximize competitiveness for the fellowships by the time the selection process takes place.

ROTATIONS

Behavioral Medicine (BMED)

Supervisors: Crystelle Egan, Ph.D., Larry Burrell, Ph.D., Madison Bailey, Psy.D., Matt Cordova, Ph.D.

Integration of behavioral health and medical care is a major emphasis in VA; the BMED rotation involves close collaboration with providers from Pain Clinic, Sleep Clinic, Nutrition, Hematology/Oncology, Audiology, Endocrinology, Speech Pathology, Prosthetics, and other medical specialties. The BMED rotation provides an opportunity to work with patients with a wide range of medical concerns and conditions. A particular emphasis is placed on pain management, behavioral sleep medicine, health behavior management (i.e., disease management, treatment adherence, and weight management), and adjustment to illness/functional limitations. Interns receive experience in individual and psychoeducational group therapy, relaxation training, and biofeedback. Assessment of medical patients, including those being considered for solid organ/stem cell transplant, bariatric surgery, and gender-affirming care may also be part of this rotation.

David Grant Medical Center (DGMC) at Travis Air Force Base

Supervisor: Bill Steh, Ph.D.

This rotation provides the opportunity to work on a 12-bed, locked, inpatient psychiatric unit that is jointly staffed and managed by the Air Force and the VA. This is the only joint (VA/DoD) mental health unit of its kind. Patients served include active duty Air Force (as well as other branches), military retirees, military dependents, and Veterans. DGMC receives active duty members from all over the Pacific Rim and often complicated treatment and disposition decisions must be made. As such, this rotation emphasizes efficient psycho-diagnostic (and occasional neuropsychological) assessment and rapid diagnosis. Interns are also an integral part of the treatment team, conduct psychiatric interviews, psychoeducational groups, and individual sessions. Travis Air Force Base is in Fairfield and is about 35 minutes by car from the Martinez campus. There is also an option to stay on base in a hotel for a reasonable rate.

Behavioral Health Interdisciplinary Program (BHIP)

Supervisors: Danielle Spangler, Ph.D., Sahiba Chowdhary, Psy.D., Neslihan James-Kangal, Ph.D.

The BHIP rotation provides experience with interdisciplinary consultation, through daily huddles and frequent team meetings. BHIP teams consist of prescribers (NPs, Psychiatrists, and Clinical Pharmacists), clinicians (clinical social workers and psychologists), care managers (registered nurses and social workers), and peer support staff. Psychotherapy experience is available for a wide range of presenting problems, including mood and anxiety disorders, trauma, personality disorders, grief, caregiver support, military/life transitions as well as interpersonal distress. Interns on this rotation complete intakes and carry a psychotherapy caseload of individual patients. They also have the opportunity to run groups, provide couples therapy, and/or conduct a range of psychological assessments. Specific evidence-based psychotherapy (EBP) training experiences include: CBT- Depression (CBT-D), Interpersonal Psychotherapy- Depression (IPT-D), Acceptance and Commitment Therapy (ACT), Dialectical Behavior Therapy (DBT), and Skills Training in Affective and Interpersonal Regulation (STAIR).

Diversity, Equity, and Inclusion

Supervisors: Alefiyah Pishori, Ph.D., Larry Burrell II, Ph.D., Maurice Endsley, Ph.D.

The DEI rotation focuses on clinical experiences with people with diverse and marginalized identities as well as administrative experience developing programs to promote DEI initiatives. Interns will have the opportunity to develop culturally responsive and affirming therapeutic skills and enhance their understanding of treatment disparities and cultural barriers experienced by people with marginalized

identities. Clinical opportunities will include both individual and group treatment. Interns will participate in the Behavioral Health DEI Leadership committee and complete an administrative project with the VA NCHCS DEI Program Manager. The rotation offers a unique opportunity to increase cultural humility and gain experience and expertise in addressing DEI concerns at a systemic level.

Mental Health Consultation-Liaison

Supervisor: Melanie Ropelato, Ph.D.

This rotation takes place at the Community Living Center (CLC), also known as the Center for Rehabilitation and Extended Care (CREC). The CLC/CREC is a 120-bed extended care and rehabilitation hospital comprising three units that are organized to provide sub-acute medical care, extended care, and specialized neuro-cognitive rehabilitation. The intern integrates into the CLC/CREC mental health consultation team consisting of a physician, nurse practitioner, nurses, rehabilitation therapists (e.g., physical, occupational, speech, and recreation therapists), chaplains, and other specialty providers. This team provides mental health diagnostic and intervention services to medical patients, and also serves to educate CLC/CREC staff on the inter-relationships among psychological conditions and medical care. The intern on this rotation will engage in a range of activities, including psychodiagnostic assessment, brief problem-focused psychotherapeutic intervention, patient and family psychoeducation (e.g., regarding pain and/or sleep management), brief cognitive screening, and capacity evaluation. On the hospice unit, the intern will provide end of life emotional support. This rotation provides the intern the opportunity to serve as a resource for medical staff by providing behavioral support recommendations when challenging behavior or treatment non-adherence interferes with patient recovery.

Neurocognitive Rehabilitation

Supervisor: Alexis Rosen, Ph.D.

The Neurocognitive Rehabilitation rotation serves veterans across a broad spectrum of neurologic and psychiatric disorders with the goal of helping them to better understand their cognitive challenges and methods to overcome them. Interns will gain experience co-facilitating groups using manualized protocols that focus on brain health and broad-based cognitive compensatory strategies. They will also observe and conduct individual intakes for targeted/time-limited cognitive rehabilitation, including caregivers or family members when needed. Additionally, training will emphasize exposure to different types of referrals (i.e., various etiologies) to facilitate appropriate adaptation of evidence-based interventions. Interns will also have opportunities to observe/participate in interdisciplinary team meetings to gain experience working with other disciplines and exposure to veterans' care across a continuum.

Neuropsychology

Supervisors: Katherine Giles, Psy.D., Kristi Steh, Ph.D., Brigid Rose, Ph.D., ABPP, Leslie Kandel, Psy.D.

The Neuropsychology rotation serves to enhance the intern's working knowledge of brain-behavior relationships and to introduce interns to major neurologic syndromes and their neurobehavioral sequelae. Interns develop preliminary competence in planning and conducting neuropsychological evaluations, interpreting cognitive test results in the context of a patient's unique medical/neurological history and neuroimaging results, and effectively communicating findings and treatment recommendations to referral sources. Interns also participate in the various educational and training activities associated with the neuropsychology training program, including a specialty-area didactic series offered in Martinez in collaboration with UC Davis Medical Center. The neuropsychology didactic series includes lectures by neuropsychology faculty and invited guest lecturers, activities designed to support eventual board certification in clinical neuropsychology (e.g., Fact-Finding exercises), a neuropsychology-specific diversity journal club, and clinical case presentations.

Post-Traumatic Stress Disorder (PTSD)

Supervisors: Olivia Chang, Ph.D., Rebecca Chandler, Psy.D., Lindsey Pepper, Psy.D.

The multidisciplinary PTSD Clinical Team (PCT) is responsible for providing specialized treatment for individuals experiencing the after-effects of trauma. Evidence-based assessment and treatment is emphasized. This rotation offers training in the Clinical Administered PTSD Scale (CAPS) for *DSM-5*, Prolonged Exposure (PE), and Cognitive Processing Therapy (CPT). Additional training may involve facilitating Written Exposure Therapy For PTSD, Concurrent Treatment of PTSD and Substance Disorders Using Prolonged Exposure (COPE), Stress Inoculation Training (SIT), Skills Training in Affect and Interpersonal Regulation (STAIR), and Eye Movement Desensitization and Reprocessing (EMDR), depending on the intern's training needs and goals. Interns also develop strong consultation skills by participating in interdisciplinary treatment team meetings and collaborating with mental and physical health practitioners.

Primary Care-Mental Health Integration (PCMHI) Supervisor: Ava Le, Psy.D.

The PCMHI rotation provides an opportunity to gain exposure in brief assessment and intervention models for general mental health as well as behavioral health issues with an emphasis on promoting good health practices, improving adherence to medical regimens, and addressing psychological/behavioral difficulties that contribute to or result from medical illness. Trainees will have the opportunity to engage in same-day, warm handoffs, collaborate closely with Primary Care Providers and staff, co-lead group interventions, and provide short-term individual intervention.

Substance Use Disorder and Co-occurring Conditions

Supervisors: Dylan Athenour, Ph.D., Alefiyah Pishori, Ph.D., Jordan Daylor, Ph.D.

This rotation provides interns with an opportunity to enhance their understanding of substance use disorders and the medical, social, and psychological issues that typically accompany them. Interns on this rotation will assess and treat co-occurring disorders such as depression, PTSD, and other anxiety disorders. Interns function as treatment team members and are responsible for assessment, psychotherapy, and staff consultation. Therapeutic services include individual, group, couples, and family treatment; CBT, ACT, and MI/MET interventions are emphasized. Interns will gain experience with the unique ways psychologists contribute to a multidisciplinary substance abuse treatment team.

Psychosocial Rehabilitation and Recovery Center (PRRC)

Supervisor: Ross Melter, Psy.D.

The PRRC rotation provides an opportunity to gain experience in providing evidence based psychotherapy to Veterans living with Serious Mental Illness (SMI). PRRC utilizes recovery oriented interventions and treatment is focused on restoration of psychosocial functioning. The team is highly interdisciplinary and trainees gain experience in collaborating with peer support, social work, nursing, occupational therapy, psychiatry, and clinical pharmacy staff. Trainees rotating through PRRC have opportunities to facilitate psychotherapy groups, as well as provide individual psychotherapy, recovery coaching, and consultation to other health care providers. Interventions emphasized in PRRC include ACT, CBT-P, SST, IMR, STAIR, and skills for internalized stigma reduction (HOP, ESS).

ADDITIONAL TRAINING ACTIVITIES

Interns provide supervision and training to practicum students at the Martinez facility. This includes

providing individual supervision, professional development mentoring, didactic instruction, and evaluation. Interns are provided weekly group supervision of this process.

To assure a broad and general training experience, several activities are required independent of specific rotation assignments. These include intakes, comprehensive psychological assessments, triage work, group therapy, participation in evidence-based psychotherapy, treatment with veterans from different demographic backgrounds and a project or activity to demonstrate ability to evaluate and disseminate research or other scholarly activities. The program has a process for periodic review of activity completion.

There are additional experiences that may be available based on intern interest and fit with the overall training plan. Such activities are typically decided upon during orientation and incorporated into the training plan. One common example is the opportunity to work with a faculty member in a management position to develop an administrative project. Interns have developed new clinical processes, collected clinic utilization data, and have worked with clinical teams to implement changes based on these findings.

WEEKLY SCHEDULE

Seminars occur on Monday mornings from 8:00 - 10:00 am. There is a rotating schedule of Cultural Diversity, Ethics, Professional Development, and other topics of clinical and professional interest. Interns are provided time to have lunch together for professional socialization and to discuss their experiences at noon on Mondays. From 10:00 - 11:00 am and 1:00 - 2:00 pm, interns conduct sessions for long-term psychotherapy training. From 11:00 am - 12:00 pm there is a Supervision of Supervision meeting. From 2:00 - 2:30 pm, interns write notes and prepare recordings to review in group supervision of their Monday Psychotherapy training cases, which takes place from 2:30 pm - 4:00 pm. From 4:00 - 4:30 pm, interns complete documentation and wrap-up administrative tasks.

In some cases, there may be time on Mondays for additional projects, based on intern interest. Such projects will be discussed by the Training Director, intern, and relevant supervisor and documented on the training plan.

The schedule for the rest of the week involves working on two different rotations (one on Tuesday and Wednesday, the other on Thursday and Friday).

| | Monday | Tuesday | Wednesday | Thursday | Friday |
|------------------------|---------------------------------------|-----------------|------------------|--------------------|----------------|
| 8:00 am – 10:00 am | Intern seminars | | | | |
| 10:00 am – 11:00 am | 1:1 therapy | 1 | | | |
| 11:00 am – 12:00 pm | Supervision of Supervision | | | | |
| 12:00 pm – 1:00 pm | Intern lunch | Individual Rota | tion Assignments | Individual Rotatio | on Assignments |
| 1:00 pm – 2:00 pm | 1:1 therapy | | | | |
| 2:00 pm – 4:30 pm | Group supervision, notes, admin | 1 | | | |

Typical Training Week

Sample schedules are shown below. These are examples and there are several different options for planning your year depending on your preferences and training needs as well as rotation/staff availability. Schedules are in effect for six months and the schedules rotate at the middle of the training year.

#1 General Track Intern: PTSD and CLC/CREC rotations:

| Monday | Tuesday (CLC/CREC) | Wednesday (CLC/CREC) | Thursday (PTSD) | Friday (PTSD) |
|--|-----------------------|-------------------------|-------------------------------|------------------|
| Intern seminars | Chart review | Chart review | PTSD intake | Chart review |
| 1:1 therapy Supervision of Supervision | See CREC patients | See CREC patients | PTSD EBP Consultation Call | 1:1 PTSD EBP |
| Intern lunch | Lunch | Lunch | Lunch | Lunch |
| 1:1 therapy | See CREC patients | Hospice rounds | PTSD Group | 1:1 PTSD EBP |
| Group Supervision | See CREC patients | Supervision | Supervision | 1:1 PTSD EBP |
| Notes/admin | Notes/wrap | Notes/wrap | Notes | Notes |

#2 General Track Intern: Behavioral Medicine and DGMC rotations:

| Monday | Tuesday (BMED) | Wednesday (BMED) | Thursday (DGMC) | Friday (DGMC) |
|-------------------------------|-------------------|---------------------|------------------------------|------------------------------|
| Intern seminars | Supervision | 1:1 patient | Check in | Check in |
| 1:1 therapy | 1:1 patient | MOVE! Group | Grand rounds, tx. | Grand rounds, tx. |
| Supervision of Supervision | Pain Mgt Group | Notes | team rounds | team rounds |
| Intern lunch | Lunch | Lunch | Lunch | Lunch |
| 1:1 therapy | Notes | Stress Mgt Group | 1:1 patients | 1:1 patients |
| Group Supervision | 1:1 patients | 1:1 patients | Discharge planning or H&P | Discharge planning or H&P |
| Notes/admin | Notes | Notes | Notes | Supervision |

#3 – Neuropsychology Track Intern: Neurocognitive Rehabilitation and Neuropsychology rotations:

| Monday | Tuesday (Cog Rehab) | Wednesday (Cog Rehab) | Thursday (Neuro) | Friday (Neuro) |
|--|---|---------------------------|--|----------------------------|
| Intern seminars | Notes | Chart review | Didactics – 2 sessions, all day 1x/month, half day 1x/month | Chart review |
| 1:1 therapy Supervision of supervision | Cog Rehab meeting/ Group supervision | Inpatient TBI group | (if no didactic) Full neuro assessment | Scoring, report writing |
| Intern lunch | Lunch | Lunch | Lunch | Lunch |
| 1:1 therapy | 1:1 patient rehab | 1:1 patient rehab | Full neuro assessment (either morning or afternoon) | Scoring, report writing |
| Group Supervision | 1:1 patient rehab | Cognitive skills group | Supervision | Feedback sessions |
| Notes/admin | Interdisciplinary inpatient meeting | Notes | Notes | Notes |

FACILITY AND TRAINING RESOURCES

Interns are issued VA laptop computers and can also access networked PC workstations for clinical and educational activities. All clinical documentation in the VA is completed on the Computerized Patient Record System (CPRS). All computers have internet access and any use in support of clinical or academic activities is acceptable. All computers have the Microsoft Office programs. The training program has a shared folder on the network that contains a large volume of patient handouts, professional articles, and other resources to which interns are given access. Access to statistical software is available. VA Northern California has an extensive virtual library and interns have access to a broad range of academic resources. In addition to the training faculty, there are several administrative and support staff members available to help with orientation and to provide logistical support. Clerical staff members at are available to help with patient scheduling, computer access, scheduling leave time, and other tasks.



VA NCHCS CLINICAL PSYCHOLOGY INTERNSHIP PROGRAM CORE FACULTY

Below are core internship faculty biographies. Additional staff members also contribute to training and supervision.

Dylan Athenour, Ph.D. (he/him/his)

Staff Psychologist, Addiction Recovery Treatment Services, Martinez Outpatient Clinic Ph.D., Clinical Psychology, Seattle Pacific University, 2015 Internship: Yale University, New Haven, CT Postdoctoral Fellowship: VA Northern California Health Care System, Martinez, CA

Professional Interests: Substance abuse; motivational interviewing; dual diagnosis treatment; CBT; harm reduction and abstinence-based approaches; individual and group Psychotherapy; evaluation for residential and outpatient treatment.

Favorite Pastimes and Bay Area Activities: Hiking, kayaking, skiing in Tahoe (winter), trips to the coast (Monterey, Santa Cruz, Big Sur, and Mendocino are some of my favorites), basically any excuse to get outdoors after work or on the weekends, and live music. I also enjoy traveling into San Francisco or Oakland for the day to explore and eat delicious food with friends/family.

Madison Bailey Psy.D. (she/her/hers)

Staff Psychologist, Behavioral Medicine, Martinez Outpatient Clinic Psy.D., Clinical Psychology, California Lutheran University, 2021 Internship: VA Maine Healthcare System, Togus, Augusta, ME Postdoctoral Fellowship: VA San Francisco Health Care System, San Francisco, CA

Professional Interests: Behavioral medicine; integrated care; health behavior change; transplant psychology; behavioral weight management and bariatric psychology; impacts of trauma on physical health; LGBTQ health; ACT; mindfulness based interventions; biofeedback; telehealth; promoting health equity; teaching; program development and evaluation.

Favorite Pastimes and Bay Area Activities: Exploring all of Nor Cal's beautiful outdoor spaces in any season; open water swimming in Tahoe, snowshoeing Yosemite, trail running and mountain biking in the Santa Cruz Mountains are of my favorites at the moment. Discovering new and amazing food from

different cultures, farmers markets, coffee shops, and wineries. Going to the Monterey Bay Aquarium. Watching Chicago Bears and the New York Yankees. Road tripping to National Parks with my partner.

Larry Burrell II, Ph.D. (he/him/his)

Staff Psychologist, Behavioral Medicine, Martinez Outpatient Clinic
Deputy Program Manager, Integrated Care
Ph.D., Clinical and Health Psychology, University of Florida, 2018
Internship: VA Palo Alto Health Care System, Palo Alto, CA
Postdoctoral Fellowship: VA San Francisco Health Care System, San Francisco, CA

Professional Interests: Evidence-Based Practice; integrated care; Behavioral Medicine; health psychology; racial/ethnic miniory mental health; sexual funcitioning; LGBTQ health; DBT; health equity research.

Favorite Pastimes and Bay Area Activities: Brunch at various Bay Area locales, concerts, and spending time with friends. I also enjoy travel, especially internationally. After living in Atlanta, Baltimore, Gainesville, FL and SF proper, I'm very happy to call the East Bay home!

Rebecca Chandler, DPhil, Psy.D. (she/her/hers)

Staff Psychologist, PTSD Clinical Team, Martinez Outpatient Clinic
DPhil, Psychiatry, University of Oxford, 2011
Psy.D., Clinical Psychology, Alliant International University, 2016
Internship: VA Northern California Health Care System, Martinez, CA
Postdoctoral Fellowship: VA Northern California Health Care System, Martinez, CA

Professional Interests: PTSD and traumatic stress; individual psychotherapy; telehealth; mood disorders; anxiety disorders; substance use; evidence-based practice; diagnostic assessment; program development.

Favorite Pastimes and Bay Area Activities: Pilates, hiking, spending time with friends, reading, and discovering new restaurants, coffeeshops, and neighborhoods in the Bay Area.

Olivia Chang, Ph.D. (she/her/hers)

Staff Psychologist, PTSD Clinical Team, Martinez Outpatient Clinic Ph.D., Clinical Psychology, University of Kansas, 2009 Internship: Salem VA Medical Center, Salem, VA

Professional Interests: PTSD and traumatic stress; individual and group psychotherapy; CBT; ACT; evidenced-based practice; interpersonal process in psychotherapy.

Favorite Pastimes and Bay Area Activities: Running, hiking, live music, Kansas basketball, traveling, gardening, and spending time with friends and family. I love the easy access to San Francisco and the wide array of options for food, culture, and outdoor activities.

Sahiba S. Chowdhary, Psy.D. (she/her/hers)

Staff Psychologist, General Mental Health, Martinez Outpatient Clinic Psy.D., Clinical Psychology, Widener Institute of Graduate Clinical Psychology, 2019 Internships: Victim Services Center of Montgomery County, Widener University Counseling Center Postdoctoral Fellowship: Edith Nourse Rogers Memorial VA, Bedford, MA

Professional Interests: Individual and group psychotherapy; CBT, DBT, trauma-focused, and attachmentbased interventions; multicultural assessments and competencies; sexual assault awareness; forensic psychology; coping skills/stress management; psychology training and supervision. Favorite Pastimes and Bay Area Activities: Hiking, kayaking, sticking my feet in the sand; travelling, especially internationally; spending time with loved ones; dancing; reading; discovering new food and music; filling my house with plants.

Matthew Cordova, Ph.D. (he/him/his)

Mental Health Training Program Manager, VA Northern California Health Care System Training Director, VA Northern California Health Care System-East Bay Staff Psychologist, Behavioral Medicine, Martinez Outpatient Clinic Professor, Palo Alto University Ph.D., Clinical Psychology, University of Kentucky, 1999 Internship: VA Palo Alto Health Care System, Palo Alto, CA Postodoctoral Fellowship: Stanford University, Dept Psychiatry and Behavioral Sciences, Stanford, CA

Professional Interests: Behavioral Medicine; primary care psychology; behavioral pain management; psychosocial oncology; traumatic stress; positive psychology; interpersonal process.

Favorite Pastimes and Bay Area Activities: Watching the Warriors, Giants, and 49ers, time with family and our 7-lb morkie (Jumbo), boba tea. Get-aways to Monterey, Yosemite, Davis, and Gold Country.

Jordan Daylor, Ph.D. (she/her/hers)

Staff Psychologist, Addiction Recovery Treatment Services, Martinez Outpatient Clinic Ph.D., Clinical Psychology, George Mason University, 2020 Internship: Metropolitan Detention Center, Los Angeles, CA Postdoctoral Fellowship: VA Greater Los Angeles Healthcare System, Los Angeles, CA

Professional Interests: DBT; motivational interviewing; positive behavior support; treatment of substance use, personality and other co-occurring disorders; diagnostic clarification; forensic assessment; correctional psychology and diversion programs.

Favorite Pastimes and Bay Area Activities: Crumbl Cookies (not specific to the Bay Area but it is a favorite pastime), spending time in nature (some local favorites are Lafayette Reservoir, Grizzly Peak and Lake Merritt), watching live theatre at the Lesher Center for the Arts in Walnut Creek or Broadway San Francisco or San Jose, following local and international water polo.

Crystelle Egan, Ph.D. (she/her/hers)

Staff Psychologist, Behavioral Medicine, Martinez Outpatient Clinic Ph.D., Clinical Psychology, University of Rhode Island, 2010 Internship: VA Northern California Health Care System, Martinez, CA Postdoctoral Fellowship: VA San Francisco Health Care System, VA Connecticut Health Care System

Professional Interests: Behavioral medicine; integrated care; behavioral pain management; health behavior change; CBT-I; chronic kidney disease; older adult substance misuse; program development and evaluation; interpersonal process.

Favorite Pastimes and Bay Area Activities: Listening to live music (there is so much here in the Bay Area!), hiking (from trails close to work and home to Pt. Reyes), yoga, and supporting small local theater. As a Bay Area native, I enjoy the many new surprises this area offers as well as my numerous old favorites.

Katherine Giles, Psy.D. (she/her/hers)

Staff Clinical Neuropsychologist, Neuropsychology, Martinez Outpatient Clinic

Psy.D., Clinical Psychology, PGSP-Stanford Consortium, 2014 Internship: University of Florida, Gainesville, FL Postdoctoral Fellowship: University of Colorado, Aurora, CO

Professional Interests: Neuropsychology; neurocognitive rehabilitation; neurodegenerative disorders; healthy aging; behavioral medicine and holistic approaches to care.

Favorite Pastimes and Bay Area Activities: Travel, day trips to San Francisco, Monterey Bay, local state parks, and Napa, camping in Yosemite, hiking around the East Bay hills and the Bay Trail, and enjoying all the amazing cuisine available in the SF Bay Area.

Ivy Hall, Ph.D. (she/her/hers)

Staff Psychologist, Mare Island Outpatient Clinic Ph.D., Clinical Psychology, Palo Alto University, 2013 Internship: Southern Arizona Psychology Internship Program, Tuscon, AZ Postdoctoral Fellowship: CA Department of State Hospitals, Vacaville, CA

Professional Interests: Race-based stress/trauma & PTSD; racial/ethnic minority mental health; diagnostic assessment; decolonizing therapy.

Favorite Pastimes and Bay Area Activities: SF native, therefore am a Giants/Niners/Warriors fanatic - I love watching my teams, eating, spending time with family, and really, doing all three of those things all at once. Favorite Bay activities - picnicking at Dolores Park, getting burritos in the Mission, seafood on the pier, and the BEST banh mi in the Tenderloin.

Neslihan James-Kangal, Ph.D. (she/her/hers)

EBP Staff Psychologist, General Mental Health, Martinez Outpatient Clinic Ph.D., Clinical Psychology, University of Cincinnati, 2020 Internship: Southwest Consortium, Albuquerque, NM Postdoctoral Fellowship: VA San Francisco Health Care System, San Francisco, CA

Professional Interests: Cognitive-behavioral and third-wave psychotherapies for mood, anxiety, and trauma-related disorders including CBT, ACT, IPT, DBT, and CPT; Couple therapy, relationship education, and partner-assisted interventions; Dissemination and implementation science, culturally sensitive adaptations of evidence-based psychotherapies; Program development and systems improvement

Favorite Pastimes and Bay Area Activities: Finding sea glass and petting dogs at Ocean Beach, camping and snowboarding in Tahoe, exploring new neighborhoods and all their diverse offerings - street fairs and markets, live music, parks galore, amazing food - you name it, the Bay Area has it!

Leslie Kandel, Psy.D. (she/her/hers)

Staff Clinical Neuropsychologist, Neuropsychology-Geriatrics, Martinez Outpatient Clinic Psy.D., Clinical Psychology, California School of Professional Psychology, San Diego, 2019 Internship: Eastern Oklahoma VA, Tulsa, OK Postdoctoral Fellowship: Oklahoma State University Center for Health Sciences, Stillwater, OK

Professional Interests: Neuropsychology and assessment; the neuropsychology of PTSD; mindfulnessbased movement for PTSD; etiologies of dementia.

Favorite Pastimes and Bay Area Activities: Spending quality time with my family, friends, and cats, yoga, walking outside, watching bad reality tv, trying out food from different cultures, and skiing.

Ava Le, PsyD (she/her/hers)

Staff Psychologist, Primary Care Mental Health Integration (PCMHI), Martinez Outpatient Clinic Psy.D., Clinical Psychology, University of Indianapolis, 2018 Internship: Illinois Department of Juvenile Justice, St. Charles, IL

Professional Interests: Correctional psychology; forensic psychology; psychopathy; Acceptance and Commitment Therapy; positive psychology; brief therapy; suicide prevention; mindfulness interventions

Favorite Pastimes and Bay Area Activities: board games, hiking (especially to waterfalls), biking, kayaking, whitewater rafting in summer, snowboarding in winter, painting, tea tasting, weekend farmers' markets, cultural festivals, browsing bookstores, sightseeing and exploring California's beautiful beaches and cities.

Ross Melter, Psy.D. (he/him/his)

Staff Psychologist, Team Lead, Psychosocial Rehabilitation and Recovery Center (PRRC), Martinez Psy.D., Clinical Psychology, The Wright Institute, 2012 Internship: San Bernardino County Department of Behavioral Health, San Bernardino, CA Fellowship: VA Palo Alto Health Care System, Palo Alto, CA

Professional Interests: Evidence based psychotherapy for Veterans living with Serious Mental Illness (SMI); ACT (particularly for Psychosis and Community Integration); Social Skills Training (SST) for Schizophrenia; internalized stigma reduction; concealable disabilities; self-advocacy; recovery model dissemination.

Favorite Pastimes and Bay Area Activities: Running, hiking, spending time with family/friends/pets, going to live music and sporting events. My favorite part about living in the bay area is likely the East Bay Regional Parks system. Recent interests that may or may not stick include gardening, paddle boarding, and obscure cooking projects.

James J. Muir, Ph.D. (he/him/his)

Staff Clinical Neuropsychologist, Center for Integrated Brain Health and Wellness, Center for Rehabilitation and Extended Care, Martinez
Ph.D., Clinical Psychology, Georgia State University, 2002
Internship: University of Arizona, Tucson, AZ
Postdoctoral Fellowship: UC Davis Medical Center and VA Northern California Health Care System

Professional Interests: Neuropsychology and assessment; cognitive rehabilitation; psychotherapy and behavioral management; holistic approaches to care; traumatic brain injury; PTSD and polytrauma, adjustment to disability; degenerative disorders of aging; training and supervision; research into mindfulness-based interventions and development of new and novel therapy techniques.

Favorite Pastimes and Bay Area Activities: Water and snow sports; woodworking, construction and period-correct home restoration; music enthusiast in all genres; restoration of vintage guitars.

Lindsey Pepper, Psy.D. (she/her/hers)

Staff Psychologist, PTSD Clinical Team, Martinez Outpatient Clinic Psy.D., Clinical Psychology, La Salle University, 2015 Internship: Louis Stokes Cleveland VA Medical Center, Cleveland, OH Postdoctoral Fellowship: Louis Stokes Cleveland VA Medical Center, Cleveland, OH Professional Interests: Individual and group psychotherapy; PTSD and traumatic stress; substance use disorders; CBT; DBT; evidence-based practice; coping skills; mindfulness; clinical program development; training and supervision.

Favorite Pastimes and Bay Area Activities: Spending time with family and friends, local fairs and festivals, wine tasting, cooking and discovering new restaurants (I am a proclaimed foodie), travelling, and perusing Pinterest with hopes I can create some sort of masterpiece! After living in New Jersey, Baltimore, Philadelphia, and most recently Cleveland, I'm interested in continuing to learn all that the Bay Area Has to offer!

Alefiyah Pishori, Ph.D. (she/her/hers)

Staff Psychologist, Addiction Recovery Treatment Services, Martinez Outpatient Clinic
Ph.D., Clinical Psychology, University of Connecticut, Storrs, 2015
Internship: Greater Hartford Clinical Psychology Internship Consortium, Newington, CT
Postdoctoral Fellowship: Captain James A. Lovell Federal Health Care Center, North Chicago, IL

Professional Interests: Substance abuse/relapse prevention; dual diagnosis treatment; trauma informed care; interpersonal process in psychotherapy; DBT; racial/ethnic minority mental health; diversity, inclusion, and equity

Favorite Pastimes and Bay Area Activities: Outdoor activities, spending time with family and friends, discovering new cuisines, exploring San Francisco and Oakland.

Melanie Ropelato, Ph.D. (she/her/hers)

Staff Psychologist, Center for Rehabilitation and Extended Care, Martinez
Ph.D., Clinical Psychology, Palo Alto University, 2009
Internship: VA North Texas Health Care System, Dallas, TX
Postdoctoral Fellowship: Providence Little Company of Mary Medical Center, San Pedro, CA

Professional Interests: Geriatrics; adjustment to disability; chronic illness; rehabilitation psychology; health psychology; interdisciplinary collaboration; whole person care.

Favorite Pastimes and Bay Area Activities: Family time including going to Six Flags, playing board games and watching my children participate in adorable sports. I am on the PFC board of our local school and am active in volunteering. In the summer, we go to beaches and activities in Santa Cruz and Monterey, as well as hit up the plethora of local fairs and festivals in the East Bay area and beyond. My personal interests include going to the gym and reading, as well as a small addiction to the game Hungry Shark!

Brigid Rose, Ph.D., ABPP-CN (she/her/hers)

Program Manager, Neuropsychology and Cognitive Rehabilitation Program Training Director, Clinical Neuropsychology Postdoctoral Residency Program Staff Clinical Neuropsychologist, Neuropsychology, Martinez Outpatient Clinic Ph.D., Clinical Psychology, Loyola University Chicago, 2005 Internship: VA Palo Alto Health Care System, Palo Alto, CA Postdoctoral Fellowship: VA Northern California Health Care System, Martinez, CA

Professional Interests: Neuropsychological assessment and capacity determination; geriatric and rehabilitation psychology; adjustment to disability; dementia care; hospice/end of life care; management of challenging dementia-related behavior.

Favorite Pastimes and Bay Area Activities: Living here, I most enjoy the quick accessibility to the Sierra Nevada mountain range; every summer I make several trips to the mountains for lakeside camping and hiking. I also love exploring the local beach towns to the west (like Half Moon Bay or Bodega Bay) or taking a beautiful drive in the North Bay wine country. When I'm at home, I enjoy going for runs in the East Bay hills, eating frozen yogurt in the hot Concord sun, and spending time with my family.

Alexis Rosen, Ph.D. (she/her/hers)

Staff Clinical Neuropsychologist, Neurocognitive Rehabilitation, Martinez Outpatient Clinic Ph.D., Clinical Psychology, Palo Alto University, 2019 Internship: Memphis VA Medical Center, Memphis, TN Postdoctoral Fellowship: California Department of State Hospitals – Patton, Patton, CA

Professional Interests: Neuropsychology; neurocognitive rehabilitation; inpatient evaluation; traumatic brain injury; cerebrovascular accident; neurodegenerative diseases; serious mental illness; behavioral management; performance validity assessment.

Favorite Pastimes and Bay Area Activities: Being outdoors, especially exploring mountains and coastal cities; spending time with loved ones and pets; anything that engages my right brain, including painting, crafting, interior design, art festivals, and live music; taking advantage of Bay Area cuisine; true crime documentaries/podcasts.

Danielle Spangler, Ph.D. (she/her/hers)

Staff Psychologist, General Mental Health, Martinez Outpatient Clinic Ph.D., Clinical Psychology, Palo Alto University, 2018 Internship: VA Long Beach Health Care System, Long Beach, CA Postdoctoral Fellowship: VA San Francisco Health Care System, San Francisco, VA

Professional Interests: Clinical- individual and group psychotherapy addressing a range of mental health presentations including depression, anxiety, traumatic stress; geropsychology; CBT, ACT, mindfulness, coping skills/stress management, and values-based interventions; Research- suicide assessment, intervention, and prevention; developing online interventions.

Favorite Pastimes and Bay Area Activities: Eating good food, being outdoors (hiking, camping, going to lakes and beaches, taking my dog to Fort Funston), spending time with family/friends, going to sports games (Giants, Warriors, 49ers!), and taking day/weekend trips in Northern California/Nevada.

Bill D. Steh, Ph.D. (he/him/his)

Staff Psychologist, David Grant Medical Center/Travis Air Force Base Ph.D., Clinical Psychology (Neuropsychology track), California School of Professional Psychology, Fresno, 2000 Internship: Oak Forest Hospital of Cook County, Oak Forest, IL Postdoctoral Fellowship: UCLA Neuropsychiatric Institute & Hospital, Los Angeles, CA

Professional Interests: Neuropsychological and psychodiagnostic assessment; psychology training; inpatient mental health; effects of mood and personality disturbances on cognitive functioning; med-legal and forensic psychology.

Favorite Pastimes and Bay Area Activities: Family time, coaching youth baseball & softball, Giants/Warriors/49ers/Sharks, working out, trail running, reading, melodic rock.

Kristi Steh, Ph.D. (she/her/hers)

Staff Clinical Neuropsychologist, Neuropsychology, Martinez Outpatient Clinic

Ph.D., Clinical Psychology, California School of Professional Psychology, Fresno, 2002 Internship: Federal Medical Center, Rochester, MN Postdoctoral Fellowship: UCLA (Geropsychology-Neuropsychology), Los Angeles, CA

Professional Interests: Neuropsychological assessment; geriatric neuropsychology and issues of aging; dementia; traumatic brain injury; PTSD.

Favorite Pastimes and Bay Area Activities: Spending quality time with my family, friends, and pets, photography, hiking (from Yosemite to local places), going on walks, jigsaw puzzles and crosswords, playing the piano, and listening to music.

ADDITIONAL FACULTY

Maurice Endsley (he/him/his)

Diversity, Equity, and Inclusion Program Manager, VA Northern California Health Care System Ph.D., Clinical Psychology, University of Missouri-St. Louis, 2015 Internship: VA Central Texas, Austin, TX Post-doctoral residency: Edward Hines, Jr. VA Hospital

Professional Interests: Multicultural Psychology; health equity; Behavioral Medicine; addressing racial trauma and race-based stress; enhancing diversity, equity, and inclusion efforts.

Favorite Pastimes and Bay Area Activities: I have 1 dog and 2 cats. I enjoy gaming, seeking out new food places, watching sci-fi movies and TV shows.

Joel Schmidt, Ph.D. (he/him/his)

Associate Director, Advanced Fellowship Program VA Office of Academic Affilations Ph.D., Clinical Psychology, University of Arkansas, 1994 Internship: Amercan Lake VAMC, Tacoma, WA

Professional Interests: National Health Professions Education policy and program management; use of technology in training; supervision training; faciliting professional development.

Favorite Pastimes and Bay Area Activities: Running, kayaking on Lake Chabot, hiking in the East Bay Hills, family bike rides to the Farmer's Market.

Program Tables - Admissions, Support, and Placement Data

Date Program Tables are updated: <u>8/25/2023</u>

| Progr | am Disclosures | |
|--|---|----|
| TTORE | | |
| to com affiliat limited | he program or institution require students, trainees, and/or staff (faculty) ply with specific policies or practices related to the institution's ion or purpose? Such policies or practices may include, but are not I to, admissions, hiring, retention policies, and/or requirements for etion that express mission and values? | No |
| • | provide website link (or content from brochure) where this specific ation is presented: | NA |
| Intern | ship Program Admissions | |
| applica must b practic | describe in narrative form important information to assist potential ants in assessing their likely fit with your program. This description e consistent with the program's policies on intern selection and um and academic preparation requirements: cants must meet the following prerequisites to be considered for our | |
| progra | | |
| 1. 2. 3. | Doctoral student in a clinical or counseling psychology program accredited by the American Psychological Association (APA), the Canadian Psychological Association (CPA), or the Psychological Clinical Science Accreditation System (PCSAS). Approval for internship status by the graduate program training director. A minimum of 250 direct intervention and 50 direct assessment hours of supervised graduate level pre- internship practicum experience. There is a clear focus on the quality of training experiences rather than total hours. U.S. citizenship. Male applicants born after 12/31/1959 must have registered for the draft by age 26. Matched interns are subject to fingerprinting, background checks, and urine drug screens. Match results and selection decisions are contingent on passing these screens. | |
| Memb involve for one scienti assessi necess based o interns Northe Opport | ion Process ers of our Internship Training Committee, composed of psychologists ed in training, review applications. Applicants may seek consideration e or both tracks. We seek applicants who have a sound clinical and fic knowledge base from their academic program, strong basic skills in ment, intervention, and research, and the personal characteristics ary to function well in our internship setting. Our selection criteria are on a "goodness–of–fit" with our training program, and we look for whose training goals match the training that we offer. The VA ern California, in which our training program resides, is an Equal tunity Employer; we are committed to ensuring a range of diversity our training classes, and we select candidates representing different | |

| Linds of an end of a second state of a | |
|--|--|
| kinds of programs and theoretical orientations, geographic areas, ages, racial | |
| and ethnic backgrounds, sexual orientations, disabilities, and life experiences. | |
| Please also see "Additional Important Application and Placement Information" | |
| below. | |
| Does the program require that applicants have received a minimum | |
| number of hours of the following at time of application? If Yes, indicate | |
| how many: | |
| Total Direct Contact Intervention Hours | Yes, Amount = 250 |
| Total Direct Contact Assessment Hours | Yes, Amount $= 50$ |
| Describe any other required minimum criteria used to screen applicants: | |
| The program does not have additional screening criteria. | |
| Financial and Other Benefit Support for Upcoming Training Year* | |
| Annual Stipend/Salary for Full-time Interns | 41,113 |
| Annual Stipend/Salary for Half-time Interns | NA |
| Program provides access to medical insurance for intern? | Yes |
| If access to medical insurance is provided: | |
| Trainee contribution to cost required? | Yes |
| Coverage of family member(s) available? | Yes |
| Coverage of legally married partner available? | Yes |
| Coverage of domestic partner available? | No |
| Hours of Annual Paid Personal Time Off (PTO and/or Vacation) | 104 |
| Hours of Annual Paid Sick Leave | 104 |
| In the event of medical conditions and/or family needs that require extended | Yes |
| leave, does the program allow reasonable unpaid leave to interns/residents in | |
| excess of personal time off and sick leave? | |
| Other Benefits (please describe): | NA |
| *Note. Programs are not required by the Commission on Accreditation to | |
| provide all benefits listed in this table | |
| Initial Post-Internship Positions | |
| (Provide an Aggregated Tally for the Preceding 3 Cohorts) | 2019-2022 |
| (110 the an Aggregated Tany for the Heedding 5 Conorts) | 14 |
| Total # of interns who were in the 3 cohorts | 14 |
| Total # of interns who were in the 3 cohorts | 0 |
| Total # of interns who did not seek employment because they returned to their | 0 |
| Total # of interns who did not seek employment because they returned to their doctoral program/are completing doctoral degree | - |
| Total # of interns who did not seek employment because they returned to their doctoral program/are completing doctoral degree Academic teaching | PD=1, EP=0 |
| Total # of interns who did not seek employment because they returned to their doctoral program/are completing doctoral degree Academic teaching Community mental health center | PD=1, EP=0 PD=1, EP=0 |
| Total # of interns who did not seek employment because they returned to their doctoral program/are completing doctoral degree Academic teaching Community mental health center Consortium | PD=1, EP=0 PD=1, EP=0 PD=0, EP=0 |
| Total # of interns who did not seek employment because they returned to their doctoral program/are completing doctoral degree Academic teaching Community mental health center Consortium University Counseling Center | PD=1, EP=0 PD=1, EP=0 PD=0, EP=0 PD=0, EP=0 |
| Total # of interns who did not seek employment because they returned to their doctoral program/are completing doctoral degree Academic teaching Community mental health center Consortium University Counseling Center Hospital/Medical Center | PD=1, EP=0 PD=1, EP=0 PD=0, EP=0 PD=0, EP=0 PD=3, EP=0 |
| Total # of interns who did not seek employment because they returned to their doctoral program/are completing doctoral degree Academic teaching Community mental health center Consortium University Counseling Center Hospital/Medical Center Veterans Affairs Health Care System | PD=1, EP=0 PD=1, EP=0 PD=0, EP=0 PD=3, EP=0 PD=6, EP=0 |
| Total # of interns who did not seek employment because they returned to their doctoral program/are completing doctoral degree Academic teaching Community mental health center Consortium University Counseling Center Hospital/Medical Center Veterans Affairs Health Care System Psychiatric facility | PD=1, EP=0 PD=1, EP=0 PD=0, EP=0 PD=0, EP=0 PD=3, EP=0 PD=6, EP=0 PD=0, EP=0 |
| Total # of interns who did not seek employment because they returned to their doctoral program/are completing doctoral degree Academic teaching Community mental health center Consortium University Counseling Center Hospital/Medical Center Veterans Affairs Health Care System Psychiatric facility Correctional facility | PD=1, EP=0 PD=1, EP=0 PD=0, EP=0 PD=3, EP=0 PD=6, EP=0 PD=0, EP=0 PD=0, EP=0 PD=0, EP=0 PD=0, EP=0 |
| Total # of interns who did not seek employment because they returned to their doctoral program/are completing doctoral degree Academic teaching Community mental health center Consortium University Counseling Center Hospital/Medical Center Veterans Affairs Health Care System Psychiatric facility | PD=1, EP=0 PD=1, EP=0 PD=0, EP=0 PD=0, EP=0 PD=3, EP=0 PD=6, EP=0 PD=0, EP=0 |

| Other | PD=0, EP=0 |
|--|------------|
| Note: "PD" = Post-doctoral residency position; "EP" = Employed Position. | |
| Each individual represented in this table should be counted only one time. For | |
| former trainees working in more than one setting, select the setting that | |
| represents their primary position. | |
| | |

ADDITIONAL IMPORTANT APPLICATION AND PLACEMENT INFORMATION

Application Materials

Our internship program participates in the APPIC match and application must be made through the online AAPI (which can be found at the APPIC website: <u>www.appic.org</u>). No mail or email application materials will be accepted. We have a General Track and a Neuropsychology Track (described above). In your cover letter, please **be sure to specify which track(s) you are applying to in the first sentence.** It is acceptable to apply for both tracks but you must outline your specific interests for each. For applicants who apply for both tracks, we will be interested in how each of the specific tracks would satisfy your training interests.

Please make sure your cover letter indicates your specific interests in our program and lists your potential rotation interests in descending order of preference. In addition, please include your curriculum vita and three letters of recommendation through the online AAPI. Applications must be completed in the AAPI by **November 1.** Applicants are requested to complete the application before the deadline when feasible so that ample time will be available for application review.

Selection Criteria

Applicants are evaluated based on a number of criteria, including breadth and quality of clinical training experience, academic performance and preparation, evidence of commitment to justice, equity, diversity, and inclusion principles and activities, quality of written expression, progress on dissertation or final project, attributes outlined in recommendation letters, and compatibility of training preparation and interests with the program's goals and resources. We recognize that the COVID-19 pandemic has impacted many applicants' accrued hours and research productivity and will take this into consideration in our decision-making.

Selection Procedures

We have a two-part selection procedure. First, application materials are reviewed for basic eligibility, strength of training and experience, and goodness of fit with our program. The selection committee develops a pool of applicants to invite for a formal interview based on these criteria. Interviews are an integral aspect of our selection process. We will notify applicants of their interview status by December 15 (or earlier if possible).

Upon the completion of our interviews, we rank order applicants in terms of their suitability for our program in accordance with APPIC guidelines.

Interview Information and Dates

We schedule interviews for five days in January. The interview provides the opportunity to learn more about our program and meet with the Training Director, the DEI Committee, several training staff members, and current interns. This year, all interview components will be conducted virtually (by video/phone). The interview day will last from approximately 8:30 am to 3:00 pm. Applicant attributes such as organizational skills, communication skills, self-awareness, flexibility, and compatability with the program's training goals will be used in making selection decisions.

Our interview dates for 2024 are listed below:

Please note: There is a cap on the number of applicants per day, but every attempt will be made to accommodate applicants' preferences for interview dates.

- Tuesday, January 2
- Thursday, January 4

- Monday, January 8
- Wednesday, January 10
- Tuesday, January 16

Statement of Nondiscrimination

The Psychology Internship program strongly seeks and values diverse experiences and backgrounds as the building blocks of a rich training environment. As such, the program emphasizes respect for trainees, patients, and staff members representing all forms of diversity, including (but not limited to) race, ethnicity, religion, gender, sexual orientation, disability, marital status, Veteran status, and political affiliation. Interns are entitled to equal treatment in selection decisions and freedom from harassment or unfair treatment. If an intern feels that any form of discrimination is occurring, they are encouraged to discuss this with the Training Director and/or follow the grievance process outlined below. In addition, the intern may elect to utilize the VANCHCS EEO process (see VANCHCS policy). The intern can request confidential assistance in accessing the EEO program from the Training Director, any member of the training committee, or the Program Support Assistant. The program seeks to obtain a diverse intern class while selecting the most qualified candidates. Individuals from diverse backgrounds are particularly encouraged to apply. The VA is an Equal Opportunity Employer and the training program follows institutional guidelines in this regard.

PAST TRAINEES

Interns have come from the following graduate programs over the past several years:

Alliant International University, CSPP San Francisco Arizona State University Bowling Green State University **Brigham Young University** Columbia University Emory University Fuller Theological Seminary George Mason University Georgia State University Idaho State University Kent State University Miami University (Ohio) Northern Illinois University Northwestern University Oklahoma State University Pacific University Palo Alto University Palo Alto U./Stanford Consortium Roosevelt University **Rosalind Franklin**

Rutgers University School of Medicine Saint Johns University Seattle Pacific University Southern Illinios University The Ohio State University University of Alabama, Birmingham University of California, Berkeley University of California, Los Angeles University of Colorado University of Illinois, Chicago University of Iowa University of Kentucky University of Missouri, Kansas City University of Nevada, Las Vegas University of Nevada, Reno University of Rhode Island University of San Francisco University of Southern California University of Tulsa University of Wisconsin - Milwaukee Washington State University

Graduates of the program have primarily gone on to post-doctoral residencies and have completed research or clinical residencies at the following locations in the past several years:

Bedford VA Health Care System (clinical residency) Johns Hopkins (clincal neuropsychology residency) Kaiser Permanente (clinical residencies in multiple Bay Area locations) San Francisco General Hospital (clinical residency) Santa Clara Valley Health and Hospital System (clinical residency) Stanford University School of Medicine (clincal and research residencies) VA Loma Linda Health Care System (clinical residency) VA Greater Los Angeles (clinical residency) VA Northern California (Behavioral Medicine, Neuropsychology, PTSD, research) VA Palo Alto (both clinical and research residencies) VA Puget Sound (clincal residencies at both Seattle and American Lake) VA San Diego Health Care System (clincal residency) VA San Francisco (both clinical and research residencies) UC Berkeley (research residency) UC Davis School of Medicine (clinical residencies) UCLA (clinical and research residencies) UC San Francisco School of Medicine (clincal and research residencies) UN San Francisco School of Medicine (clinical and research residencies) UN San Francisco School of Medicine (clinical and research residencies) UN San Francisco School of Medicine (clinical and research residencies)

Other graduates have entered group practices, university faculty, entry-level psychologist positions, or other less-formal training opportunities. Following post doctoral training, graduates have entered a diverse range of clinical, research, and academic positions. By a substantial margin, the VA is the agency that employs the highest number of graduates.

ADMINISTRATIVE POLICIES AND PROCEDURES

Leave

Interns receive 13 paid vacation days and up to 13 paid sick days per year. It should be noted that this leave accumulates over time (four hours per two week pay period for both vacation and sick leave), so interns should not plan on taking an extended leave early in the training year. In addition, up to 10 days per year can be used as "professional leave." This time can be used for dissertation work/research meetings, conference attendance, and post-doc or job interviews but must be approved in advance by the Training Director.

Policy on Psychology Trainee Self Disclosure

Consistent with the Ethical Code of the American Psychological Association, psychology trainees in the VA Northern California Health Care System are generally not required to self-disclose sensitive topics (e.g., sexual history, history of abuse and neglect, psychological treatment or conditions, and relationships with parents/family members, peers, and spouses or significant others) during application to the program or during the course of training. The only exception is in situations in which a trainee's personal problems or condition could reasonably be judged to put patient care, the trainee, or clinical and educational operations at risk. This policy is designed to balance the importance of trust and personal privacy in the supervisory relationship with the supervisor's responsibility for care of the patient and for the safety of all staff members and trainees. In cases when self-disclosure of personal information is necessary, the required disclosure is limited to circumscribed information related to managing the specific clinical, safety, or patient care concern. It should also be noted that disclosure might be included as an optional exercise in a learning experience. For example, trainees might be invited to complete a genogram exercise as part of the Cultural Diversity Seminar.

Privacy Policy: We will not collect any personal information about you when you visit our website.

Intern Evaluation & Minimal Requirements

Interns are evaluated at the beginning of the training year for areas of training need and interest. Throughout the year, evaluation and feedback occurs through the supervisory process to aid the intern in developing the program's competencies. The Psychology Training Committee meets once a month and discusses each intern's progress. A midpoint evaluation is completed halfway through each training experience and is discussed with the intern in order to make any training adjustments needed for successful completion. At the internship midpoint (in February) and again at the end of the internship, a summative review of all training activities for each intern is conducted by the Psychology Training Committee. This process allows for analysis of performance across all supervisors and training experiences. The intern provides input regarding their assessment of performance during this process and receives formal written feedback.

During the summative evaluations, each of the program's nine training competencies are linked to specific behavioral elements on the intern rating form. Acceptable progress by the midyear evaluation is defined as receiving a rating score indicating an "intermediate level of competency" on all of the items on the summative evaluation. In order to successfully complete the program, interns must receive a rating score indicating an "intermediate level of competency" on all of the items in the end of year summative evaluation.

Intern Grievance Policy

The Grievance Policy provides an effective and consistently-applied method for an intern to present their grievances and have those grievances internally resolved at the lowest possible level. At the same time, the process allows for the opportunity to appeal up the chain of command (e.g., supervisor, Training Director, Associate Chief of Staff for Mental Health, Chief of Staff) if needed to ensure due process and help interns feel comfortable that concerns can be addressed without fear of reprisal.

It is the training program's policy to be responsive to the interns and their concerns. Therefore, interns may use the process described below for the resolution or clarification of their grievances. The Director of Training is responsible to the Associate Chief of Staff for Mental Health (ACOS/MH) for carrying out the provisions of this policy.

Process:

- A. All training staff and interns are responsible for attempting to resolve grievances at the lowest possible level to the satisfaction of all parties involved.
- B. Interns should attempt to resolve minor grievances directly with the individual involved utilizing existing program structure (e.g., the supervision process).
- C. In the event that interns do not feel comfortable addressing issues within the supervisory process, they may appeal directly to the Training Director for assistance in resolution. Minor grievances processed in this manner are considered informal.
- D. An intern may choose to file a formal grievance at any point. The grievance must be presented in writing to the Training Director. The submission of the formal grievance should include (if applicable):
 - 1. The grievance and the date when the incident occurred
 - 2. Suggestions on ways to resolve the problem
 - 3. Information regarding any previous meetings to attempt to resolve the grievance
- E. If the grievance is against the Training Director, the intern can file the grievance with the ACOS/MH.

- F. The Program Support Assistant or any of the training faculty members can assist the intern in filing this grievance with the ACOS/MH.
- G. Formal grievances will be presented to the Psychology Training Committee (PTC) for resolution. Interns may present their grievance directly to the PTC. The intern may invite a staff member of their choice to provide advocacy and emotional support. The body to hear the formal grievance will be assembled as soon as possible and in all cases within three weeks from the presentation of the formal grievance. If the grievance is against the Training Director or another individual normally assigned to this body, that individual is not involved in the body's deliberation and may only attend to provide testimony, as indicated. Resolution may involve the Director of Training from the intern's graduate program.
- H. Any formal grievance and its resolution will be documented, and copies forwarded to the Director of Training from the intern's graduate program.
- I. If adequate resolution cannot be achieved through this process, or interns wish to take the grievance outside of the existing training program structure, they may appeal directly to the ACOS/MH for resolution. The ACOS/MH will review the grievance as soon as possible and in all cases within three weeks from the presentation of the formal grievance. The Program Support Assistant or any of the training faculty members can assist the intern in communicating with the ACOS/MH.
- J. An intern may appeal any formal action taken by the Psychology Training Committee (PTC) regarding their program status (see also Due Process policy, below). Interns appeal first to the body itself (see item F above). This appeal is made directly by the intern (in association with any counsel they may choose). The body to hear the appeal will be assembled as soon as possible and in all cases within three weeks from the written notification of appeal.
- K. If the intern is not satisfied with the result of their appeal, the intern may appeal directly to the ACOS/MH. After consideration, the ACOS/MH has the discretion to uphold, or overrule formal action taken by the body. Should the ACOS/MH overrule the decision of the body, the decision is binding, and the Training Director, the intern, and supervisors shall negotiate an acceptable training plan (in consultation with the Director of Training from the intern's graduate program). Should the ACOS/MH uphold the decision of the committee, the intern may appeal this decision to the Chief of Staff, VA Northern California Health Care System who will appoint a board of three psychologists in the system not involved in the training program. The decision of this panel is binding.
- L. Specific questions regarding this policy should be directed to the Training Director.

Remediation, Due Process, and Intern Termination

The aim of the program is to successfully graduate interns into a career in professional psychology, and the program is designed to maximize the prospect for successful completion. The evaluation process mandates early intervention if needed to provide the opportunity for corrective action and ultimately successful mastery of each competency area.

If remediation is required, a formal remediation plan is developed with clear and specific expectations and is agreed upon by the intern, supervisor(s), and Training Director. When necessary, the Director of Training from the intern's graduate program is notified and provides assistance in designing remedial efforts. The Training Director is responsible to the Associate Chief of Staff for Mental Health (ACOS/MH) for carrying out the provisions of this policy as described below.

Process

Supervisors are responsible for monitoring trainee's progress in achieving the specific training objectives, providing timely feedback to interns, and developing and implementing specific training activities for ensuring intern professional growth and development. Supervisors are responsible for communicating about intern's performance to the Training Director.

- A. Interns are responsible for adhering to training plans.
- B. Progress and performance within the internship program are monitored continuously using both informal and formal evaluation processes. Supervisors provide the first line of feedback to interns about performance and identify areas requiring additional growth. Supervisors and interns agree on training opportunities and experiences to meet the program's and intern's objectives.
- C. The intern's progress is tracked monthly by the Training Director during the Psychology Training Committee meeting.
- D. When specific training competencies do not seem to be adequately developing as a result of the routine and ongoing supervisory feedback, the supervisor consults with the Training Director and other training staff to develop a specific remediation plan. This plan includes specific learning tasks and timelines for completion. The timelines are developed such that the adequacy of task completion can be assessed rapidly. The remediation plan is discussed with the intern, who has opportunities for input. The plan is provided in written form to the intern.
- E. Performance on the remedial plan items is assessed frequently. If performance is not adequately improving after one month, the intern may be placed on academic probation for a period of one to three months. During this time, heightened oversight and assessment of the intern's performance occurs and significant effort is made to help the intern remediate. The intern is provided with written feedback regarding whether the remediation plan items have been adequately resolved. The Director of Training from the intern's graduate program will be included in all subsequent decisions regarding the intern.
- F. If the intern has progressed satisfactorily after the probationary period, the intern will be formally reinstated. If performance has not sufficiently improved, but the intern is making progress, the probationary period may be extended. If the intern fails to progress, termination from the program may be considered. The intern is provided with written feedback regarding their performance as it relates to probationary decisions.
- G. Formal actions (academic probation or dismissal) must receive a majority vote by the Psychology Training Committee. Prior to any vote on formal actions, the intern is afforded the opportunity to present his or her case before the training body that will be deciding the intern's status (see also Grievance Policy, section F above). The interns may invite a staff member of their choice to provide advocacy and emotional support.
- H. Concerns of sufficient magnitude to warrant formal action include but are not limited to: incompetence to perform typical psychological services in a clinical setting; violations of the ethical standards for psychologists; illegal acts; or behavior that hampers the intern's professional performance.
- I. Specific questions regarding this policy should be directed to the Training Director.

Maintenance of training files

A record is kept for each intern admitted to the program. This includes formal evaluations (mid-year and end-of-year summative evaluations), mid-rotation evaluations, any additional documentation related to performance during the training year, and a record of successful completion of the program. These records are kept permanently so that the program may verify program completion throughout the trainee's professional career. Graduates are encouraged to contact the Training Director, or the Program Support Assistant as needed to request this verification.

TRAINING PROGRAM CONTACT INFORMATION

Thank you for your interest in our program! Please feel free to send any questions to the Training Director or the Program Support Assistant at the contact information below.

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Annaliza Batt Program Support Assistant Psychology Training Program 925.372.2138 <u>Annaliza.Batt@va.gov</u>

