

Coatesville Veterans Affairs Medical Center

DOCTORAL INTERNSHIP PROGRAM IN HEALTH SERVICES PSYCHOLOGY



***Department of Veterans Affairs Medical Center
1400 Blackhorse Hill Road, Psychology Services, 116B
Coatesville, PA 19320-2096
VISN 4***

2024-2025

Psychology Internship Program

Coatesville VA Medical Center

Psychology Services (116)

1400 Blackhorse Hill Rd.

Coatesville, PA 19320

(610)384-7711

<https://www.coatesville.va.gov/>



APPIC Match Number:

General Track: 152911

Neuropsychology Track: 152912

Applications due: November 1, 2023

Accreditation Status

The doctoral internship at the Coatesville VA Medical Center (CVAMC) is accredited by the Commission on Accreditation of the American Psychological Association. Our most recent accreditation site visit was in 2016, and the next accreditation site visit will be held in 2025 (due to COVID delays). Questions regarding the accreditation process and status may be addressed to:

American Psychological Association
Office of Program Consultation and Accreditation
750 First Street, NE
Washington, DC 20002-4242
Phone Number: (202) 336-5979

Application & Selection Procedures

Eligibility

Doctoral students in APA or CPA accredited Clinical or Counseling Psychology programs are eligible to apply. All coursework required for the doctoral degree must be completed prior to the start of the internship year, as well as any qualifying, comprehensive, or preliminary doctoral examinations. We prefer candidates whose doctoral dissertations have been proposed. Persons with a PhD in another area of psychology who meet the APA criteria for re-specialization training in Clinical or Counseling Psychology are also eligible.

VA requirements specify that eligible applicants must be U.S. citizens and have fulfilled departmental requirements for internship as certified by their Directors of Clinical Training. The Coatesville VA Medical Center is an Equal Opportunity Employer; we are committed to ensuring a range of diversity among our training classes. We welcome and strive to select candidates representing different kinds of programs and theoretical orientations, geographic areas, ages, racial and ethnic backgrounds, sexual orientations, disabilities, and life experiences.

If selected to be an intern at this or another VA site, a Certification of Registration Status, Certification of U.S. Citizenship, and drug screening are required as part of onboarding. We cannot consider applications from anyone who is not currently a U.S. citizen. Thus, all interns must complete a Certification of Citizenship in the United States and the Federal Government also requires that male applicants to VA positions who were born after 12/31/59 must sign a Pre-Appointment Certification Statement for Selective Service Registration, prior to beginning the internship. The VA conducts drug screening exams on randomly selected personnel as well as new employees. Interns are not required to

be tested prior to beginning work, but once on site they are subject to random selection in the same manner as other staff. Additionally, the TQCVL confirms that interns are fit to perform the essential functions (physical and mental) of the training program and immunized following current Center for Disease Control (CDC) guidelines and VHA policy. This protects the intern, other employees and patients while working in a healthcare facility.

Please note: Interns are appointed as temporary employees of the Department of Veterans Affairs. As such, interns are subject to laws, policies, and guidelines posted for VA staff members. There are infrequent times in which this guidance can change during a training year which may create new requirements or responsibilities for 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.

Application Procedure and Requirements

All applications should be submitted through the APPIC portal by midnight EST **November 1, 2023**.

Clinical Psychology Major Area of Emphasis/General Track (3 positions): 152911

1. A completed online APPIC Application for Psychology Internship (AAPI) <http://www.appic.org>
2. A cover letter indicating the track for which you are applying and your preferred rotations
3. A detailed curriculum vitae or résumé
4. Three letters of recommendation
5. Official transcripts of all graduate work

Neuropsychology Major Area of Emphasis/Track (2 positions): 152912

1. A completed online APPIC Application for Psychology Internship (AAPI) <http://www.appic.org>
2. A cover letter indicating the track for which you are applying
3. A detailed curriculum vitae or résumé
4. Three letters of recommendation
5. Official transcripts of all graduate work
6. A sample neuropsychological test battery report, with identifying information removed

Historically, individuals who have been invited to interview for the neuropsychology track in the past have usually participated in multiple neuropsychological practicum training experiences.

Applications are only accepted for one training track. Applications to both tracks or identifying both tracks in application materials will not be considered or reviewed.

Candidate Interviews

Candidates will be informed via email by **November 30, 2023** if they have been invited to interview. Interviews are typically held in December and January and last most of the day. Dates and times for interviews are established at the time the interview offers are extended to applicants. We intend to have two dates in December and two dates in early January.

Questions regarding application or additional information should be forwarded to:

Jessica Reinhard, Psy.D.
Director of Psychology Training
Coatesville VA Medical Center (116) OR
1400 Blackhorse Hill Road
Coatesville, PA 19320
Jessica.Reinhard@va.gov

Christy Rothermel, Ph.D.
Assistant Director of Training
Coatesville VA Medical Center (116)
1400 Blackhorse Hill Road
Coatesville, PA 19320
Christy.Rothermel@va.gov

The Training Setting

The Coatesville Veterans Affairs Medical Center (CVAMC) is located one mile south of the U.S. Route 30 Bypass, in the town of Coatesville in Chester County, PA. Coatesville is approximately 20 minutes west of West Chester, the county seat of Chester County and home to West Chester University. West Chester uniquely combines small-town charm with metropolitan flair. Downtown West Chester has been listed on the National Register of Historic Places and recognized as a Distinctive Destination by the National Trust for Historic Preservation. The main streets of West Chester have more than 120 shops, boutiques, and eateries which fill the storefronts of Gay, Market, and High Streets. Many previous interns have chosen West Chester for their home during internship year because of its proximity to the Coatesville VA Medical Center, the multitude of short-term housing options, and the desirability of the location.

Approximately 40 miles east of Coatesville is Philadelphia, the 5th largest city in the United States. Philadelphia, referred to as "the city of brotherly love" is the birthplace of American democracy and the nation's first capital. Both New York City and Washington DC are within driving distance from Philadelphia and easily accessible via Amtrak. For beach lovers, most New Jersey shore points are within a two-hour drive. For a contrast to the big city, one can travel to Lancaster (part of Pennsylvania Dutch Country) which is 30 miles west of Coatesville. The Pennsylvania Amish of Lancaster County are America's oldest Amish settlement, where thousands still live a traditional Amish lifestyle (while driving in Lancaster you will surely pass a horse and buggy). Visit markets and farm stores for a homemade shoofly pie or hand-made Amish crafts or enjoy the famous hiking and biking trails. You will also find the famous Hershey Chocolate factory and amusement park in this area.

Coatesville VAMC opened in November 1930 and is one in a network of 152 hospitals operated by the Department of Veterans Affairs to provide health care to the veteran population, on both an inpatient and outpatient basis. In addition, CVAMC serves veterans at two Community Based Outpatient Clinics (CBOC) in Spring City PA, and Delco, PA. Both service-connected and non-service-connected veterans are eligible for services at the Medical Center and its community-based outpatient clinics. The patient population is diverse, encompassing veterans recently discharged from the service as well as those who served in Vietnam. Presenting problems and diagnoses vary greatly among the patients. Many psychologists work as members of mental health interdisciplinary teams, as well as hold additional leadership responsibilities. Besides the training conducted by the Psychology Service, the Medical Center offers training programs for psychiatry and podiatry residents, social work, nursing, primary care, pharmacy and a variety of other health-related professions.

Compensation and Benefits

The Psychology Internship Program is funded by the Office of Academic Affairs of the Department of Veterans Affairs Central Office as an annual training program. The stipend as of August 2023 is \$36,565. Interns also are eligible for health insurance. As with staff psychologists, professional liability coverage for all mandated intern activity is provided by the Federal Tort Claims Act. Benefits include 11 Federal holidays and accrual of 13 days of annual (vacation) leave, and 13 days of sick leave. Authorized absence may be requested for reasonable educational purposes (i.e., conference, dissertation defense, postdoc interviews) and is granted at the discretion of the Director of Training in consultation with the rotation supervisor.

COVID-19

The COVID-19 pandemic has created numerous personal and professional challenges for all of us. Amidst multiple challenges that come with ambiguity and not knowing what the future will bring, Coatesville VA Medical Center staff have worked diligently to find ways to effectively and competently provide training opportunities.

The Coatesville VA Medical Center psychology training program provides transparent and effective communication regarding our program and training opportunities. As such, we cannot definitively predict rotation availability or if telework will be available for the 2024/2025 training year as this is dependent on local, state, and federal guidance and permission of those governing bodies to allow telesupervision. We remain committed to having the physical and emotional well-being, safety, and professional development of our trainees as a top priority. We also understand that COVID-19 has impacted many applicants' accrual of hours and research productivity and will take this into account as we evaluate applications.

We can say with confidence that there will likely be an increase in telehealth opportunities and tailoring treatment intervention and assessment to this platform. Additionally, we do not expect that there will be any significant changes to our base clinical services or populations served through rotations and adjunct experiences.

Telework

Should telework and telesupervision be granted, the privilege is contingent on appropriate telework set-up, trainee needs, and compliance with the telework and telesupervision expectations that we have created for both trainees and staff (available upon request). This option has been historically exercised during a declared state of emergency and when considered necessary to keep staff safe by our leadership. All trainees will be issued VA laptops and will be provided with card readers to ensure that any transitions to and from the hospital are as seamless as possible.

Personal Protective Gear

Trainees will be supplied with any necessary personal protective equipment as well as hand sanitizer and disinfectant wipes.

Training Model and Program Philosophy

The internship program adheres to the **Practitioner–Scholar Model**, emphasizing the mutuality of science and practice and the practical application of scholarly knowledge. The model promotes clinical practice guided by theory and research. Students are trained to be psychologists who think critically and engage in disciplined inquiry. The primary goal of training a practitioner-scholar is the delivery of human services that considers individual, cultural, and societal variables, consistent with the principles of evidence-based psychological practices.

The staff psychologists involved in intern training represent various theoretical orientations, assuring exposure to diverse training experiences. Integral to the internship is the application of clinical research to patient care, while under close supervision. Skill-building seminars, role-modeling, observation, professional education, and consultative guidance are used as supplementary learning methods. Diversity issues are considered in all settings throughout the internship.

The program takes a developmental view of training, transitioning interns from their graduate student status to that of independently functioning entry-level psychologists. Upon completion of the internship, interns will have demonstrated competencies derived from supervised experience in research integration and science practice, ethical and legal standards, individual and cultural diversity, professional values and attitudes, communication and interpersonal skills, assessment, intervention, and supervision. Interns will also have access to specialized techniques such as immersive training in a particular evidence-based psychotherapy, as well as neuropsychological or geropsychological assessment, depending on the interests of the intern. The interns will have extensive exposure to the operation of a large inpatient psychiatric setting and to the psychologists' many roles as administrators, clinicians, teachers, researchers, and consultants. Interns will also have direct experience with the multidisciplinary team approach to the treatment of mental health problems, common to many treatment facilities.

Program Goals and Objectives

The primary aim of the CVAMC internship is to prepare diverse doctoral-level psychology trainees to function competently and ethically in professional roles in the field of psychology that combine both clinical service and scholarly inquiry. Within the Practitioner-Scholar model, we aspire to prepare interns to transition successfully to postdoctoral training programs or to secure entry-level employment in psychology at the GS-11 or equivalent level, according to their prior experiences and future career goals.

The program emphasizes training in clinical skills, with the recognition that competent clinical work is informed by science. Supervision and didactics are grounded in the current evidence base and strong efforts are made to expose interns to current research and scholarship. The training program is a sequential, competency-based model leading to the development of Practitioner-Scholar psychologists. Competency evaluation occurs at the midpoint, and end of each rotation.

The underlying philosophy, goals, and objectives profoundly affect the interaction between staff and interns. Interns are trained and encouraged to move toward autonomous functioning as professional psychologists within a Practitioner-Scholar model. The training program emphasizes the active involvement of the intern in choosing training assignments, participating in training seminars and workshops, and in providing input into the internship program. Interns are provided ongoing evaluation and feedback to assist them with self-monitoring their progress toward autonomy.

In accordance with this primary aim, the CVAMC internship program strives to promote interns' development of the profession-wide competencies identified by the APA's Standards of Accreditation in Health Service Psychology:

Research/Integration of Science and Practice

Ability to demonstrate critical evaluation and disseminate research or other scholarly activities (e.g., case conference, presentation, publications) at the local, regional, or national level.
Integrates current research into clinical practice in relevant ways.

Ethical and Legal Standards

Ability to demonstrate knowledge and acts in accordance with current version of APA ethical principles of psychologist and code of conduct. Demonstrates knowledge of and acts in accordance with relevant laws, regulations, rules, professional standards at the organizational, local, state, regional and federal levels. Ability to recognize ethical dilemmas as they arise and applies ethical decision-making processes in order to resolve the dilemmas and conducting oneself in an ethical manner.

Individual and Cultural Diversity

Demonstrates an understanding of how one's own persona/cultural history, attitudes, and biases may affect how they understand and interact with people different from themselves. Using awareness and knowledge of individual and cultural differences in the conduct of professional roles, including the ability to work effectively with an individual whose group membership, demographic characteristics, or worldviews create conflict with their own. Demonstrates knowledge of current theoretical and empirical knowledge as it related to addressing diversity in all professional activities including research training supervision/consultation and service.

Professional Values and Attitudes

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 and

engage in activities to maintain and improve performance, well-being, and effectiveness. Actively seeks and demonstrate responsiveness to feedback and supervision and respond professionally in increasingly complex situations with greater degree of independence while progressing across levels of training.

Communication and Interpersonal Skills

Develops and maintains effective relationships with a wide range of individuals, including colleagues, communities, organizations, supervisors, peers, and Veterans and their families. Produces and comprehends verbal, non-verbal 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.

Assessment

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

Intervention

Establishes and maintains effective relationships with recipients of psychological services. Develops evidence-based intervention plans specific to the service delivery goals. Implements intervention informed by the current scientific literature, assessment findings, diversity characteristics, and contextual variables. Demonstrates the ability to apply the relevant research and literature to clinical decision-making. Modifies and adapts evidence-based approaches effectively when clinical indicated or when clear evidence base is lacking. Evaluates intervention effectiveness and adapts the intervention goals and methods consistent with ongoing evaluation.

Supervision

Applies knowledge of supervision models and practices in direct or simulated practice with peers or with other health professionals.

Consultation and Interprofessional/Interdisciplinary Skills

Demonstrates knowledge of and respect for the roles and perspectives of other professionals. Applies this knowledge in a direct or simulated consultation with individuals and their families, other health care professionals, interprofessional groups, or systems related to health and behavior.

Evaluation

Evaluation of progress

Interns are continuously evaluated throughout the training year, with formal evaluation completed at mid-rotation and end of rotations by all supervisors. Evaluation focuses on the successful demonstration of profession-wide competencies and site-specific competencies (i.e., patient-centered practices and

program development and evaluation). All competency areas will be rated at a level of competence level of 3 or higher. Items rated as level 1 or 2 require implementation of a remediation plan. By end of training, intern will have achieved a rating of 4 or higher on all profession-wide competencies and 3 or higher on all relevant site-specific competencies.

Interns' Evaluation of Training Program

Throughout the internship, interns evaluate aspects of the training program in various ways:

- It is hoped that interns will engage in ongoing informal dialogue with their training supervisors and with the Director of Training about their experiences, concerns, and suggestions.
- Each rotation represents an opportunity to evaluate both that portion of the internship and the supervisor on specific dimensions, and to write a critique of the rotation as a training experience.
- In the final weeks of the internship, the interns are also given a group task of writing a free-text document incorporating their collective evaluation and recommendations for the internship program as a whole.

Program Structure

The internship year is divided into four-month trimesters (rotations), at least one of which will provide core training experiences in the intern's area of concentration. Note, however, that no intern may spend more than 50% of their rotations in a single specialty area. All interns must complete a half-time rotation in the behavioral health interdisciplinary program (BHIP) and complete at least 6 psychological assessments throughout the year.

Interns matched to the Neuropsychology Major Area of Emphasis/Track receive concentrated training in that area. They are required to complete the Neuropsychology I (half-time) and II (full-time) rotations. The remaining training experiences are drawn from the electives below.

Interns matched to the Clinical Psychology Major Area of Emphasis/Track have considerable flexibility in tailoring the training to their interests. Experiences are required in psychological assessment and outpatient psychotherapy as mentioned above. The remaining training experiences are drawn from the electives below.

Psychology Interns typically spend approximately 8 hours per week in other training program requirements (i.e., didactics, meetings, etc.), which leaves 32 hours per week for clinical training rotations. This number may vary depending on rotations that require more frequent inter/multidisciplinary meetings. Thursdays are structured to allow times for didactics, journal club, meeting with the DOT, and group case consultation. Interns will also attend scheduled CE presentations provided by our local CE committee. Presentations vary in frequency and span an afternoon. Topics range from updates on assessment, to ethical considerations, to diversity, to nuances in evidence-based practice. Occasionally, interns may also have the opportunity to participate in a day long or multiple day long workshop. These workshops are not guaranteed and are approved by the Director of Training if they match the goals of the intern for their internship year. Finally, when interns are teleworking or when deemed appropriate by the DOT, interns attend 30-minute huddles each day. This is protected time in which the interns can meet, informally consult, share information, or do activities to pr

Professional Presentations

All interns are required to conduct two professional presentations over the course of the year. During the first or second rotation, interns will each provide one clinic presentation to a clinic of their choice. Clinic presentations need to be completed prior to the mid-point of the internship year. Toward the end of the training year, each intern will prepare a formal psychology continuing education (CE) presentation of 45 minutes to 1 hour duration, prepared/presented independently. The psychology continuing education (CE) presentation must undergo the formal process of applying through the hospital's CE committee, which

reviews proposals and accompanying materials to enable attendees of the presentation to obtain APA CE credits.

Didactics

In addition to the clinical rotations and individual supervision, further training is provided in core areas through a series of seminars conducted throughout the internship year by members of the training committee and guest speakers. The seminars integrate clinical data, research findings, supervisory input, and group discussion. To increase the number and types of seminars offered to the interns each seminar topic once a month (see table below for schedule). All participants in the didactic seminar complete an evaluation form for each didactic, which is a valuable part of continuous quality improvement.

Week 1	Professional Development (1 hour) Peer Consultation (Supervision Skills) (1 hour)
Week 2	Psychotherapeutic Interventions (2 hours weekly)
Week 3	Ethics & Diversity (2 hours weekly)
Week 4	Psychological Assessment (2 hours weekly)

Psychological Assessment Seminar

Assessment Seminars will provide a broad survey of assessment-related topics spanning from general to specific issues. Broad areas typically addressed include clinical interviewing, mental status exams, diagnostic considerations, cultural formulations, confirmatory bias, and functional behavioral assessments. In the past, specialty topics have included discussion of the MMPI-2RF, Personality Assessment Inventory, Primary Care-Mental Health Integration, CAPS-5, neuropsychology for the non-neuropsychologist, complex differential diagnoses, and traumatic brain injury.

Psychotherapeutic Interventions Seminar

Interns will gain knowledge regarding various models of case conceptualization and associated clinical interventions, including numerous evidence-based practices. EBP's reviewed include CPT, PE, IPT, CBT-I, BFT, IMRT, SST, TLDP, DBT, MI, ACT, IBCT, CBCT, UP, and EMDR, among others. Seminar activities include: 1) discussions of clinical topics; 2) modeling and role-playing of intervention techniques; 3) reading and discussing professional articles; and 4) application of knowledge via clinical vignette exercises.

Diversity and Ethics in the Context of Clinical Practice

The seminar consists primarily of presentations by psychology staff or other select members of the staff at CVAMC. Topics cover a wide range of issues that cover a synthesis of ethics, diversity and professional issues that psychologists may face in their daily practice and discussion is encouraged and required by all present for the seminar. It incorporates a review of the APA ethics code and includes discussion on common ethical dilemmas faced by psychologists, including opportunities for interns to identify and discuss diversity issues and ethical problems they are currently facing or have already faced in the work setting.

Peer Consultation (Supervision Skills) Seminar

The internship program also includes the opportunity to gain experience in skills needed for doing clinical supervision, using a Peer Consultation model. Each intern experiences the roles of both the peer consultee and the peer consultant during the program. The interns' development as clinical consultants will be guided by staff psychologists, during peer consultation groups. Appropriate readings and group discussions on theoretical and process issues also aid in the interns' development as clinical consultants.

Professional Development Seminar

The Professional Development Seminar will provide interns with a space to reflect on their current training experiences (e.g., adjusting to internship, coping with burnout, responding to difficult clinical situations), as well as plan for future training and their careers (e.g., applying to postdoctoral fellowships and jobs, interviewing skills, preparation for EPPP and licensure). Topics will be adjusted to meet the specific needs of the training class and may also incorporate discussions of diversity and ethics as they apply to professional development (e.g., women in leadership, informed consent, navigating the HATCH act).

Neuropsychology Seminar Series

Neuropsychology Seminar is held weekly and includes a combination of training in core areas including article discussions, formal didactic presentations, case discussions, fact finding exercises, and discussion of professional development topics (see table below for schedule). Interns are responsible for presenting at least one case discussion and one didactic presentation, as well as facilitate two journal discussions of personal, clinical interest. When face-to-face meetings are possible, viewing of human brain specimens is available.

Week 1	Intern Presentations
Week 2	Professional Development
Week 3	Didactics
Week 4	Journal Club

Journal Club

Clinical psychology journal club is a weekly seminar that examines recent literature that is picked based upon the interns' clinical interests. Special attention is paid towards discussing the clinical applications of each article and how the information can better inform future treatment decisions.

Group Case Consultation

Case consultation is constructed as a professional, non-evaluative environment in which interns present and provide feedback on current cases they are seeing for therapy or assessment. The focus of case consultation is case conceptualization from a developmental, bio-psycho-social model. Meeting weekly, case consultation also provides structure in-line with the developmental model of supervision. The format of the meeting starts off very structured in which interns are engaged in a round robin providing feedback on a single case. This structure enables all interns the opportunity to provide feedback and aids the individual request feedback time to thinking and process, feedback from his/her peers. By the end of the year, interns will be presenting cases and receiving feedback, naturally, with minimal structure.

Diversity sub-committee

The Coatesville VAMC is dedicated to training culturally sensitive services, supervision, and training. Our diversity sub-committee, chaired by Dr. Ashley Sutton and comprised of both supervisors and interns, have been working to increase awareness of personal bias by engaging in non-defensive self-reflection. We are rolling out Local Reflective Practice created by Dr. Evelyn Sandeen (Sandeen, E., Moore, K.M., & Swanda, R.M., 2018), and interns are required to attend and be actively involved as it has proven to be mutually beneficial for the intern's learning and the program's continued development in the area of diversity.

Typical Thursday Schedule:

8:00-9:00	Neuropsychology Didactics; CPT Supervision
9:00-10:00	Unstructured Time (Note/Report Writing, Readings, Treatment Teams)
10:00-12:00	Didactics (see weekly schedule above)
12:00-12:30	Lunch
12:30-1:00	Note writing/documentation time
1:00-2:00	Journal Club/DOT Check In
2:00-3:00	Unstructured Time
3:00-4:00	Group Case Consultation
4:00-4:30	Unstructured Time

Placement Selection

The first week of the internship is dedicated to a week of orientation. During this week interns are provided with an overview of the medical facility and have the opportunity to meet with and learn more about supervisors and rotations. Upon its conclusion, the interns meet individually with the director and assistant director of training and discuss training goals, long-term goals, and rotations/supervisors that they believe would help them achieve their goals. The DOT and ADOT assist in developing a changeable schedule for the year that would meet their needs based on rotation and supervisor availability.

Training Experiences

Behavioral Health Interdisciplinary Program (BHIP)/Evidence Based Practices (EBP)

Dagmawi Dagneu, PsyD, Gabrielle Sassone, Psy.D., Jeffrey Schweitzer, PhD, Jaimee Hartman, PsyD, Anthony Matteo, PhD

****This is a required half-time rotation for all interns. The requirements of the outpatient psychotherapy rotation can also be fulfilled through the CBOC rotation*****

BHIP is a generalist outpatient mental health clinic that serves a wide array of presenting problems. During this rotation a holistic, recovery-oriented approach to treatment is emphasized. Interns implement case conceptualization that adheres to the specific that is in line with the veteran's goals, needs, and preferences. Interns will gain foundational knowledge with specific EBPs through reading and practice exercises, case conceptualization, role play, and recording of sessions to hone skills in particular interventions that comprise the relevant EBP. Typical EBPs provided may include: CBT, ACT, exposure based therapy, CPT, PE, CBT-I, Unified Protocol, IPT and time-limited dynamic therapy. Assessment opportunities range from a semi-structured interview to a personality assessment, based on the presenting problem of the Veteran. Interns will also collaborate with other members of a treatment team including family or other disciplines from the medical center such as nursing, psychiatry, Suicide Prevention, and peer support.

The BHIP rotation is home to the DBT team, which is a full Linehan model program that includes skills group, individual therapy, phone coaching, and weekly consultation team meeting. The DBT team is made of providers from differing parts of the hospital. We also provide consultation and education to differing teams through the hospital who may be also providing services to one of our DBT patients. The DBT program is young in its creation, so interested interns will have an opportunity to learn and train, but have the opportunity to observe and/or contribute to the development of the program. Interns interested in DBT could elect to do two, back-to-back half rotations or an enrichment experience.

Community Living Center (CLC)

Amy Becker, PsyD

The CLC half time rotation allows interns to become familiar with a geriatric and hospice population. These patients are often older adults with medical and functional problems requiring nursing home level of care, veterans with short-term rehabilitation needs, and/or veterans with terminal illnesses requiring hospice level of care. Interns will focus on the therapeutic role of a psychologist within the CLC. Including engagement in individual therapy, treatment planning, and behavior management consultation for veterans. Therapeutic modalities interns have exposure to include supportive psychotherapy, behavioral activation, motivational interviewing, reminiscence, grief and loss, CBT, and EBPs identified for use within the CLC, namely STAR-VA, MAP-VA, and INSIGHT. Interns will have the opportunity to attend and engage in daily nursing reports, unit huddles, and interdisciplinary treatment team meetings. As collaboration between the intern and CLC staff members of varied disciplines is expected, it provides additional opportunities for the intern in the area of program development and consultation.

Substance Use Disorders (SUD) Outpatient Program

Frank Angelini, PhD and Alex Puhalla, PhD

The Outpatient SUD program rotation provides either a half- or full-time rotation for interns to learn about the assessment and treatment of substance use disorders. The program provides services that are accessible and relevant to each veterans' readiness to change and respectful of individual treatment goals. Treatment integrates Motivational Enhancement and CBT model, particularly emphasizing Community Reinforcement (CRA). The program treats both male and female veterans through individual and group psychotherapy (process and psychoeducational). Interns are integrated members of the multidisciplinary treatment team and participate in daily team meetings. Interns can participate in psychological assessment and screening, program development and evaluations, treatment planning, family and system level interventions, caregiver support, staff education and training, and behavior management consultation. If interested, interns will have the opportunity to receive extensive supervision of motivation interviewing, including coding of recordings.

Leadership and MH Administration

Danielle Schade, PsyD and Justin Charles, PsyD

Many psychologists have little formal training or exposure to leadership and program administration practice or literature, and this rotation seeks to address some of these common training or experience gaps. This rotation offers an introduction to leadership and administration for psychologists in the VA setting and is a good fit for interns who may aspire to leadership roles or who may be interested in topics like program development/evaluation. There are three main goals of the rotation. One goal is for interns to understand servant leadership, a model of ethical, evidence-based leadership. This occurs through review of professional literature, participation in leadership meetings and committees, and shadowing of your supervisor. Another primary goal is for interns to understand systems (e.g., functioning, change processes, and indicators). This is accomplished through use of VA handbooks and directives, data dashboards, interactions with mental health leaders, and completion of a rotation project. Significant flexibility is granted to interns in developing the project, and interns are encouraged to choose one that incorporates their own interests while also addressing VA needs. Finally, because clinical skills are vitally important, the intern spends at least 25% of their time either on the Acute Inpatient Psychiatry Unit or working with older adults through BHIP.

Primary Care-Mental Health Integration (PCMHI)

Frank Mirarchi, PsyD, Bernadette Hayburn, PsyD, Eva Leven Olson, PsyD, Fred Kornfiend, PsyD.

Behavioral health services are well integrated into primary care practice following the Patient Centered Medical Home (referred to in the VA as Patient Aligned Care Team (PACT)) model of treatment. Interns will have the opportunity to provide consultation to primary care providers as well as provide scheduled and urgent evaluations of patients with a wide range of mental and behavioral health issues. Interns will

be responsible for evaluating and monitoring patients, providing education and support, and collaboratively making appropriate care decision along with primary care providers. Measurement-based care will be emphasized, and interns will apply this in the context of evidence-based treatment modalities for primary care veterans with depression, anxiety, alcohol misuse, subsyndromal PTSD, chronic pain, and insomnia. Brief psychological care is also emphasized (i.e., 6 sessions or less). Interns may also engaged in psycho-education groups, including Pain University, Pain School, CBT-I, MOVE, Mind-Over Mood, as appropriate and available to intern training goals. Participation in health psychology based psychological evaluations (i.e., Bariatric Surgery, Organ Transplant, Spinal Cord Stimulator) is encouraged as available during the rotation for the intern.

Psychosocial Rehabilitation and Recovery Center (PRRC)

Joseph Reichmann, Psy.D.

The PRRC is an outpatient specialty mental health program designed to support recovery and integration into meaningful self-determined community roles for veterans with severe mental illness and functional impairment. The mission of the PRRC is to assist veterans with learning skills to self-manage their mental illness and define a personal vision for their future based on strengths, personal values, and desired social roles. Available as a half rotation, the intern will partner with a multidisciplinary team (which includes peer support, social work, occupational therapy, recreational therapy, and nursing) to provide individual, group, and community-based services from a recovery-oriented framework. Interns will have a solid understanding of the recovery model and supporting research. Interns will learn how to effectively intervene with veterans and will refine or further develop skills in clinical interviewing/assessment, individual and group therapy, as well as recovery-oriented treatment planning and care coordination. As noted above, the intern will have ample opportunity to gain experience in multiple EBP's, specifically, Social Skills Training (SST), Recovery Oriented Cognitive Therapy (CT-R) and Cognitive Behavioral Therapy for Psychosis (CBT-P). Each intern will gain exposure in program outreach, development, management, and evaluation. The PRRC rotation will provide the intern with the unique opportunity to participate in, or implement, creative and non-traditional interventions with cross-discipline collaboration. Interns who are interested in personality assessment will also have ample opportunity to complete and interpret various measures on this rotation.

Home-Based Primary Care (HBPC)

Christy Rothermel, PhD

Serving Veterans with chronic medical conditions who are home-bound, this half-time rotation provides unique opportunities to integrate behavioral medicine with geropsychology in a veteran's home or via Telehealth. As such, a biopsychosocial approach to treatment is emphasized and importance is placed on understanding the relationship between physical, cognitive/neurological, and emotional and/or psychological problems towards provision of holistic and individualized care. Intern responsibilities will include weekly participation in the HBPC interdisciplinary team meeting, providing brief psychological and/or cognitive assessment (e.g., use of MoCA, SLUMS, BLESSED, RBANS), treatment planning, caregiver consultation/intervention, and staff consultation/education/training. Interns have exposure to interventions ranging from CBT (e.g., Brief CBT for CP) and problem-solving based interventions to supportive/reminiscent/grief therapy. There is also opportunity to provide cognitive (e.g., CogSmart protocol) and therapeutic activity programming through consultation with caregivers (e.g., TAP- Tailored Activity Program) for individuals with mild to severe cognitive impairment. Finally, completion of a rotation presentation that is relevant to HBPC is also required.

PTSD Residential Program

Thomas Bortner, PsyD; Danielle Farabaugh, PsyD; Raquel Johnson-DeVera, PsyD; Rebecca Yeh, PsyD

This inpatient rotation offers training in intensive individual and group psychotherapy, as well as structured and psychoeducational groups for veterans in a residential setting. Interns provide individual psychotherapy and have the opportunity to participate in the co-facilitation/facilitation of trauma-focused psychotherapy and trauma-focused psychoeducational groups including: CPT, Posttraumatic Growth and

Recovery, STAIR, ACT for Depression, Anger Management, Compassion Focused Therapy, CBT-I, and Mindfulness when offered. Trauma work includes issues such as guilt, fear, loss, anger, moral injury, and relationship concerns. Trauma focused evidence-based treatments include Cognitive Processing Therapy (CPT), Prolonged Exposure (PE), Eye Movement Desensitization and Reprocessing (EMDR), Trauma-Focused Cognitive Behavioral Therapy (CBT-TF), Cognitive-Behavioral Therapy for Insomnia (CBT-I), DBT/STAIR skills, Acceptance and Commitment Therapy (ACT), and Seeking Safety for PTSD and Substance Use Disorders. All of above listed EBPs are provided as part of veterans' treatment in the program and are possible training opportunities for interns. The intended treatment population is non-gender specific and includes veterans of all wars and eras, including but not limited to Vietnam, Grenada, Lebanon, Panama, Persian Gulf, Somalia, Bosnia, Iraq, and Afghanistan. Although a majority of veterans admitted to the program will present with combat related traumas, veterans may also be admitted for other trauma sub-types including MST, childhood trauma, work related/recreational related accident, MVA, or sexual abuse. As such, interns will have the opportunity to treat a number of different trauma sub-types and learn the intricacies of EBPs within each of these populations. The therapeutic work environment is often intense but rewarding.

POWER Program

Ashley Sutton, PsyD

One of only two residential dual-diagnosis treatment programs within the entire VA healthcare system, the POWER program serves female veterans with comorbid mental health and substance use disorders. Trauma is often a presenting concern of the female veterans who enter the program, although it is not a requirement. The program's mission is to prepare female veterans for a lifestyle that supports continued recovery of the mind, body, and spirit. POWER is an acronym for the "Power of Women Embracing Recovery". Interns provide individual and group psychotherapy (including process and psychoeducational groups) to residents on the unit. Groups offered on the unit include Seeking Safety, DBT, CBT-SUD, Biofeedback, STAIR, Mindfulness, Spirituality, and Anger Management. Interns will utilize evidence-based treatments including CPT and CBT-SUD. Trauma work includes addressing issues such as guilt, loss, anger, and relationship concerns.

SUD Domiciliary Program

Stephanie Adam, PsyD

This residential rotation offers training in individual and group psychotherapy, crisis intervention, treatment planning, as well as structured and psychoeducational groups for veterans in a residential setting struggling with substance use disorders and co-occurring mental health issues. Group offerings include process-oriented, DBT, CBT, anger management, communication skills, and positive psychology. Interdisciplinary measurement-based treatment planning including recovery-oriented goals, objectives, and interventions are core components of the SUD DOM program. Interns are heavily involved in the multidisciplinary treatment team, including completion of intake and discharge evaluations and assessments, caregiver support, family/system level interventions, and treatment planning for the veterans. Interns will also be able to be involved in research, staff education/training, and behavior management consultation.

Acute Inpatient Psychiatry Unit (59A)

Danielle Schade, PsyD

This rotation is offered only as a full-time rotation due to typically brief length of stay for veterans on this unit.

This rotation focuses on treatment and assessment for veterans on an inpatient psychiatric unit. The unit is a 28-bed, locked inpatient psychiatric unit for both voluntary and involuntary admissions. Veterans present with acute mental health needs such as psychosis, mania, depression, trauma, substance use, personality disorders as well as complex psychosocial needs and stressors. Interns are responsible for

providing individual therapy and suicide prevention safety planning; psychoeducational group therapy; psychological assessment and/or cognitive screening; multidisciplinary treatment team participation. Commonly used EBPs are supported by shared decision-making and can include CBT, PST, ASPI, and others. Assessment measures typically used include the PAI, MMPI, MCMI, RBANS, MoCA, SLUMS, and various self-report measures (e.g., BDI, BAI).

Neuropsychology I

Benjamin Gliko, PsyD, ABPP; Jessica Reinhard, PsyD; and David Tsai, PhD, ABPP

The Neuropsychology I rotation is a half-time required clinical experience for neuropsychology interns only. It is designed to familiarize the neuropsychology intern with the administration, scoring, and interpretation of neuropsychological test batteries. Interns will assess patients with a wide range of cognitive deficits including TBI, neurodegenerative diseases, neurological disorders (e.g., stroke, seizure disorders), substance use disorders, attention-based disorders, neuropsychiatric disorders (e.g. schizophrenia, PTSD), and learning disabilities. During the rotation, the intern is expected to develop proficiency in administration and scoring a diverse set of neuropsychological tests, clinical interviewing within the context of neuropsychological evaluations, neuropsychological test interpretation, neuropsychological report writing, provision of feedback, and time management. Interns attend a weekly Neuropsychology Seminar that addresses contemporary issues in Neuropsychology throughout the course of the entire internship year. Additionally, the opportunity to view human brain specimens is available.

Neuropsychology II

Benjamin Gliko, PsyD, ABPP; Jessica Reinhard, PsyD; and David Tsai, PhD, ABPP

During this full-time rotation, neuropsychology interns are expected to display a more proficient ability to complete the requirements of Neuropsychology I rotation. Additionally, interns will be expected to participate in neurocognitive rehabilitation therapy (Cog Rehab). Emphasis is placed on the development of compensatory strategies to help individuals reach identified goals or improve functional abilities.

Additional Activities

Enrichment Focus

Interns have the option to elect a enrichment focus to further individualize and augment the clinical training received during the course of the internship year. Enrichment foci are 2-4 hours per week and can be proposed throughout the training year. Time dedicated to the experience is to be navigated with the intern and the intern's rotation supervisors. The intern is responsible for finding supervision, negotiating one's time with rotation supervisors, and providing this plan to the training committee. Interns are further responsible for ensuring all requirements and competencies are met on rotation and for the selected experience. Enrichment foci can be elective or mandatory if needed to fulfill remediation.

Examples of enrichment foci are as follows: research, assessment, continued focus on a particular EBP, couples/family, Telemental health/VVC, Admin/Leadership, 59A, Group therapy, Psychological Assessment, etc.

Interns cannot complete an enrichment experience in a particular specialty area if they are completing 50% of their year in that specialty area (i.e. Neuropsych, SUD).

Mentoring

Interns have the optional opportunity to work with a staff psychologist mentor. This is an optional, minimally structured and non-evaluative professional relationship that offers the opportunity for sharing professional interests beyond the focus of a specific rotation or work unit. Mentoring may assist interns in focusing goals for future work, choosing career paths, or simply enrich the internship. Interns may elect to participate in this at any point during their training year.

Other

Interns share in the activities of staff psychologists and other professional personnel throughout the Medical Center. These programs provide an opportunity for interns to interact with the multidisciplinary personnel. Interns may serve as moderators or resources to aid staff in understanding patients' individual and group behavior or in developing skills so that staff can function better in their assigned responsibilities.

Interns may attend any seminar, lecture, and training activity at the Medical Center, as long as these activities do not interfere with the core internship training activities. CVAMC Psychology Service is an APA-accredited sponsor of Continuing Education and conducts a number of training activities throughout the year.

Requirements for Completion

Interns must complete 2080 professional hours within the 52-week training year in order to graduate from the internship. Interns maintain a record of their hours using Time-2-Track, which the internship provides a subscription to for each intern. Accrued paid leave times and authorized absences for professional development activities are counted toward the 2080 hour requirement. Interns must successfully complete at least 500 hours (25%) of direct patient contact, at least 200 hours of supervision, and at least 100 hours of didactic training. Extensions of the training year may be allowed under appropriate circumstances such as family or medical leave.

As described above, by end of training, interns will have achieved a rating of 4 or higher on all profession-wide competencies and 3 or higher on all relevant site-specific items and competencies.

Facility and Training Resources

Interns have full access to the same level of clerical and technical support as staff psychologists. They are provided computers with access to the hospital network, Microsoft Office, and access to the VA network. Printers and secure fax machines are readily available in all treatment areas. Support staff is available to assist interns in scheduling appointments, administrative tasks, coordination of multimedia equipment, and negotiating the Medical Center's policies and procedures. Interns have access to technical support for their computers and telephone through the Information Technology Service.

Training resources include video, audio and reproduction equipment, along with an excellent library with a wealth of mental health related books, computer literature searches, periodicals and audio/video holdings, and an almost unlimited access to materials available through interlibrary loans. Training resources also comprise of Educational Center facilities for meeting, seminars, and training. Interns are strongly encouraged to complete their dissertations so they may be job-ready and begin documenting hours for licensure immediately following completion of internship and graduation.

The VA network has a number of psychological measures available to be computer-administered. In addition, the department has an extensive bank of tests and materials. Professional journals and other resources are available electronically. Multimedia equipment, including video and audio devices, can be accessed through Medical Media Service.

Interns have dedicated office space in Building 4, which houses outpatient mental health services. Interns have access to docking stations for their VA laptops in their office spaces and/or additional office spaces throughout the building. Landline phones are also located in each individual office space without voicemail and interns have their individual soft phones with voicemail attached to each VA laptop. Additional offices are available on the individual rotations for interns to use. Although offices are always in high demand, interns are consistently provided with sufficient clinical and administrative space. Interns are provided with VA laptops, allowing more flexibility in the intern's ability to work in available office spaces. Interns are also provided with necessary PPE. Conference rooms and group therapy rooms throughout the Medical Center are used for group sessions and training seminars.

Administrative Policies and Procedures

The Coatesville VA Medical Center's policy on Authorized Leave is consistent with the national standard. You are welcome to discuss this with the Director of Training and Chief of Psychology.

Due Process: All trainees are afforded the right to due process in matters of problematic behavior and grievances. A due process document is distributed to every intern during orientation and reviewed with them subsequently. A copy of our due process policy is available on request.

Privacy policy: We collect no personal information from you when you visit our web site.

Self-Disclosure: We do not require interns to disclose personal information to their clinical supervisors except in cases where personal issues may be adversely affecting an intern's performance and such information is necessary to address these difficulties.

No tolerance policy: The Coatesville VA Medical Center strives to maintain a culture of respect for all, and policies are in place that include "no tolerance" for remarks, behavior or other interpersonal conduct that convey disrespect for others.

Training faculty

Stephanie A. Adam, Psy.D.

Doctoral Program: Immaculata University

Doctoral Internship: Reading Hospital and Medical Center, Reading, PA

Postdoctoral Fellowship: Larned State Hospital Forensic Program, Larned, KS

Duties: Clinical psychologist, serve as team leader for the homeless domiciliary program, complete assessments (behavioral, comprehensive suicide risk, mental status), provide individual and group therapy using EBPs (motivational interviewing and problem-solving therapy), supervise RCT staff and interns, and serve on the disruptive behavior committee.

Clinical Interests: Personality assessment, individual and group therapy, positive psychology, forensic assessment, and cognitive behavior therapy.

Personal Interests: Spending time with family and friends, dogs, travel, cars, art, hiking, skiing, music, and living the best life.

Frank Angelini, Ph.D.

Doctoral Program: University of Pittsburgh

Duties: Program manager of the Outpatient Substance Use Disorder (SUD) Treatment Program

Clinical Interests: Constructivist Psychology, Motivational Interviewing

Amy Becker, Psy.D

Doctoral Program: Arizona School of Professional Psychology at Argosy University Phoenix, 2018

Doctoral Internship: Northern Arizona VA Healthcare System (Prescott VA), 2018

Postdoctoral Fellowship: VA Maine Healthcare System (Togus VA), 2019

Duties: CLC and HBPC psychology, including psychotherapy, cognitive and mental health related assessment/evaluations, caregiver support, and consultation to CLC and HBPC treatment teams; supervision of psychology interns; participation in Dementia committee and the implementation of nonpharmacological behavioral interventions among our CLC and HBPC populations (STAR-VA, MAP-VA, TAP, and INSIGHT).

Clinical Interests: Integration of medical and mental health care; Whole Health; behavioral health consultation; end of life issues; mental health related geriatric care; caregiver support

Personal Interests: Spending time with my family and friends; road trips; visiting loved ones around the country; reading for fun; photography

Thomas A. Bortner, Psy.D.

Doctoral Program: La Salle University, 2008

Doctoral Internship: Coatesville VA Medical Center, 2006-2007

Postdoctoral Fellowship: Completed postdoctoral hours as a staff clinician at Mathom House of Edison Court, Inc.

Duties: Staff Psychologist (Residential Combat PTSD Program), CE committee member, Intern training committee member, Caregiver support committee member, DBT consultation team member, Promoting Racial Equity committee member, Diversity sub-committee member

Clinical Interests: Trauma, anxiety disorders, utilization of EBPs when warranted (Certified CPT, PE, ACT-D, and DBT provider)

Personal Interests: Spending time with family, music, running, biking, spending time outdoors, travelling, Philadelphia Eagles

Justin Charles, Psy.D.

Doctoral Program: Wheaton Graduate School, 2012

Doctoral Internship: Coatesville VA Medical Center, 2010-2011

Postdoctoral Fellowship: Completed postdoctoral hours as staff psychologist at Providence Behavioral Health, Lancaster, PA

Duties: Assistant Chief of Psychology Services, including management of BHIP, PCT, Biofeedback, Neuropsychology, and Work Restoration. Clinical duties on Rehabilitation Nursing Home unit, including individual psychological intervention and brief cognitive assessment/screenings, as well as provision of individual therapy with a geriatric population through the BHIP Clinic.

Clinical Interests: Geropsychology, Bereavement, Program Development, Leadership.

Personal Interests: Hiking, attempting to keep up with two energetic sons, podcasts, non-profit advocacy and involvement, Ethiopia.

Dagmawi Dagnev Psy.D.

Doctoral Program: Widener University, 2014

Doctoral Internship: AIDS Care Group (outside of Philadelphia PA) 2013-2014

Postdoctoral Fellowship: AIDS Care Group

Duties: BHIP Psychologist

Clinical Interests: Generalist with interest in outpatient individual therapy, Evidence-based approaches, including CBT for depressions, anxieties, insomnia, and chronic pain; Brief psychodynamic therapies, MI; Culturally-minded application of treatments; Integrative mental health/primary care/social work approach to care; Facilitates the Military Racial Trauma group for veterans who experiences racism while in service.

Personal Interests: Spending time with family, Outdoor running, Community involvement in social justice causes, Spend time with coworkers in and outside of work to build a sense of community at the work place, Co-leading an organization in Philadelphia that provides mental health awareness to immigrant communities

Danielle Farabaugh, Psy.D.

Doctoral Program: La Salle University, 2007

Doctoral Internship: Coatesville VA Medical Center, 2006-2007

Postdoctoral Fellowship: Center for Cognitive Therapy/Psychopathology Research Unit, Dept. of Psychiatry, University of Pennsylvania

Duties: Team Leader/Staff Psychologist in PTSD RRTP. Interview/process veteran referrals; oversee therapeutic programming; facilitate weekly CBT-I sessions, PTSD Transition Group, and monthly Family Day. Member of Clinical Review Board for Comprehensive Caregiver Support Program. Alternate Member of IRB and R&D.

Clinical Interests: PTSD and trauma, anxiety disorders, CBT, effectiveness of EBPs for PTSD, opiate use disorders

Personal Interests: traveling, sea life, snorkeling, animals, spending time with family

Benjamin T. Gliko, Psy.D., ABPP

Doctoral Program: Nova Southeastern University

Doctoral Internship: Coatesville Veterans Affairs Medical Center (CVAMC)

Postdoctoral Fellowship: 2-year postdoctoral fellowship in Neuropsychology at the Neurobehavioral Institute of New Jersey

Duties: clinical assessment services within the CVAMC Neuropsychology Clinic (i.e., neuropsychological, psychological, and personality evaluations)

Clinical Interests: neuropsychological assessment; personality/psychological assessment; functional neuroanatomy; personality theory; PI for the Neuropsychology Database research project

Personal Interests: all things music; playing the drums; following Philadelphia sports teams; reading nonfiction

Jaimee Hartman, Psy.D.

Doctoral Program: Pepperdine University, 2015

Doctoral Internship: Kaiser Permanente, San Diego, 2013

Postdoctoral Training: HealthRIGHT 360 Residential Program for men with Substance Use Disorders and history of incarceration.

Duties: BHIP psychologist, including individual and family psychotherapy, mental health related assessment/evaluations

Previous Experience: 14 years experience working with men and women in residential programs with substance abuse disorders, long-term incarceration, and trauma as Program Manager and Director)

Clinical Interests: Substance use disorders, trauma, and couples and family therapy

Personal Interests: Spending time with family (we just relocated from CA and now are minutes from close family and friends which is great), hiking, playing tennis and reading.

Bernadette Hayburn, Psy.D.

Doctoral Program: La Salle University, 2005

Doctoral Internship: Temple University Hospital, Health Psychology Focus, 2004-2005

Postdoctoral Fellowship: Completed postdoctoral hours at Temple Episcopal Hospital

Duties: PCMHI psychology at the Delaware County CBOC

Clinical Interests: Insomnia, health psychology, and evidence-based psychotherapies. Dr. Hayburn has worked for the VA for 15 years and has obtained certification in various EBPs, including CBT-I, CPT, PE, PE-PC, and ACT. She was involved in starting the CVAMC PCMHI program in 2010. Within the VA, she has been involved in program development and evaluation and assessments for health and disability. She has served on various committees and is currently involved with the local LGBTQ+ Special Emphasis Committee.

Personal Interests: In her free time, Dr. Hayburn enjoys Crossfit, hiking, training her puppy, and traveling internationally.

Laura Hertz, Ph.D.

Doctoral Program: Temple University

Doctoral Internship: Coatesville VA Medical Center

Postdoctoral Fellowship: Coatesville VA Medical Center

Duties: Individual, group, and couple therapy. Diagnostic interviews. Intern Supervision. Psychologist on the PTSD Clinical Team. Member of the Training Committee, Continuing Education Committee, Caregiver Advisory Council, and Visual Impairment Services Team. EAP provider.

Clinical Interests: Trauma, grief/loss, spirituality, relationship issues, vocational issues, and qualitative research.

Personal Interests: Travel! Food! Animals! Generally, meeting new people and having new experiences.

Raquel Johnson-DeVera, Psy.D. "Dr. J-D,"

Doctoral Program: La Salle University, 2021

Doctoral Internship: Lebanon VA Medical Center, 2020-2021

Duties: Staff Psychologist for the PTSD DOM / Residential program- Conducting Behavioral Assessments and providing trauma based psychotherapy / EBPs in both individual (CPT, PE, WET) and group formats (CFT).

Clinical Interests: Trauma/PTSD, moral injury, suicide intervention/prevention, ADHD and neurodiversity, compassion focused therapy, utilizing EBPs with flexibility to meet unique/diverse individual needs.

Personal Interests: spending time with my family, exploring new places and foods, reading, and various nerdy interests.

Drew Kerr, Psy.D.

Doctoral Program: Baylor University, 1995

Doctoral Internship: Gouverneur Hospital, 1994-1995

Postdoctoral Fellowship: None

Duties: BHIP psychologist in outpatient clinics, Chair of Psychology Continuing Education Committee

Clinical Interests: Development across the lifespan, dynamic understanding of the mind, trauma and recovery.

Personal Interests: Reading, film, painting.

Fred Kornfeind, Psy.D.

Doctoral program: Illinois School of Professional Psychology -Chicago Campus, 1996

Doctoral Internship: West Los Angeles VA Medical Center 1996

Postdoctoral Fellowship: UCLA Geriatric Psychiatry Service

Duties: PCMHI Psychology, including individual psychotherapy, brief cognitive assessments, functional assessments and referral to appropriate services/programs, staff consultation, participation in VA Coatesville Training Committee

Clinical Interests: Geriatric mental health and health psychology; time-limited psychotherapy; consultation with healthcare providers

Personal Interests: Spending time with family; playing music: avid sports fan; hiking and other outdoor activities

Eva Leven Olson, Psy.D.

Doctoral Program: Long Island University, 2012

Doctoral Internship: Lackland Air Force Base, San Antonio TX, 2012

Postdoctoral Fellowship: Completed postdoctoral hours at Scott Air Force Base, Chester, IL

Duties: PCMHI psychologist, intern supervisor, including psychotherapy, cognitive and mental health related assessment/evaluations, and consultation to PACT treatment team; supervision of not yet licensed staff and/or psychology interns

Clinical Interests: Integration of primary care and mental health care; behavioral health consultation; trauma-informed care

Personal Interests: spending time with my family and friends; travel; reading for fun; day trips/vacations

Gabriel Longhi, Psy.D.

Doctoral Program: Widener University, Institute for Graduate Clinical Psychology, 1999

Doctoral Internship: 1. Crozer Chester Medical center, Substance Abuse Outpatient Program;

2. Widener University Student and Community Counseling Center

Postdoctoral Fellowship: Completed postdoctoral hours as an Associate Psychologist (Spanish Speaking) at Hutchings Psychiatric Center in Syracuse, NY.

Duties: Assistant Chief of Domiciliary, 25% clinical work specializing in SUD & PTSD, providing evidenced based psychotherapies for dual diagnosis, including EMDR, CPT, PE, CBT-SUD, and MI/MET. Co-facilitator for the Peer Consultation group for Interns, and chair of the Diversity Sub-Committee.

Clinical Interests: PTSD/ trauma work, dissociative disorders, Substance Abuse Counseling, Diversity training, Leadership, Clinical Interviewing and assessment of differential diagnosis, Couples/ Marital

Therapy, Family Therapy, supervision, and domestic violence interventions for victims and perpetrators

Personal Interests: Back-packing, hiking, canoeing/ kayaking, jogging, weight-lifting, spending time with family/ kids, movies.

Anthony Matteo, Ph.D.

Doctoral Program: Long Island University, Brooklyn Campus, 2004

Doctoral Internship: Bronx Psychiatric Center ("open ward" forensic unit in a state hospital setting), 2003

Postdoctoral Training: Completed additional training at Washington School of Psychiatry, ISTDP Certificate Program, 2009-2010

Duties: CBOC psychologist, including individual and family psychotherapy, mental health related assessment/evaluations

Previous Experience: 15 years inpatient experience at MCES (Montgomery County Emergency Service, Inc.); chaired Suicide Prevention and Staff Training committees/supervised interns; Program Director); 3.5 years in Department of Corrections at SCI Phoenix, Program Manager

Clinical Interests: Suicide Prevention; recovery from self-injury; psychotherapy for character defenses/trauma informed care

Personal Interests: Big tennis enthusiast (considering pickleball); hiking; mountain biking (less mountain, more biking lately)

Frank Mirarchi, Psy.D.

Doctoral Program: Philadelphia College of Osteopathic Medicine, 2014 **Doctoral Internship:** Center for Brief Therapy at the Philadelphia College of Osteopathic Medicine, 2013-2014

Postdoctoral Fellowship: Completed postdoctoral hours as a post-doctoral clinician and assistant clinical director of Empowerment Resource Associates, Inc

Duties: PCMH psychology, including Same Day Mental Health Access Evaluations, MOVE! Program, and Whole Health Programming; Health Behavior Coordinator; Pain Management Services, and Motivational Interviewing training

Clinical Interests: Integration of mental health care into primary care medical clinics, behavioral health consultant model of care; Creation of new groups on campus within the WHOLE HEALTH model of care; Cognitive Behavioral Therapy including CBT for Chronic Pain and Depression; Motivational Interviewing and other motivational treatment to promote health behavior change.

Personal Interests: Sports, Movies, Foodie, Fantasy Football, reading fiction especially classics and fantasy novels, outdoor activity (i.e., hiking) and spending time with family

Laura L. Mowery, Psy.D.

Doctoral Program: Ferkauf Graduate School of Psychology, Yeshiva University

Doctoral Internship: NY Harbor Healthcare System, Brooklyn VA Medical Center Campus

Postdoctoral Fellowship: informal- Phoenix House Foundation, Military Services Program, New York

Duties: Staff psychologist on the PTSD Clinical Team, BHIP; EBP Coordinator

Clinical Interests: Trauma, Utilizing EBPs with complex PTSD, relationship between attachment styles and belief systems, beliefs and the mate-selection process, ACT, EBPs via telehealth

Personal Interests: Cooking/eating (especially at new restaurants), spending time with family, violin, music, reading, writing

Alexander Puhalla, Ph.D.

Doctoral Program: Temple University, 2014 to 2020

Doctoral Internship: Coatesville VAMC, 2019 to 2020

Postdoctoral Training: Completed postdoctoral hours at the Cincinnati VAMC.

Duties: PTSD / SUD psychologist, including group and individual psychotherapy for those with various SUDs. This includes, but is not limited to, engaging in CBT for SUD, Community Reinforcement Approach, Motivational Interviewing, Cognitive Processing Therapy, Prolonged Exposure, Cognitive Behavioral Conjoint Therapy for PTSD, and concurrent treatment protocols for PTSD / SUD (e.g., COPE). Additionally, provide consultation to other staff members about PTSD / SUD cases and conduct Drug & Alcohol Evaluations and semi-structured diagnostic interviews (e.g., CAPS-5).

Clinical Interests: Evidence based psychotherapy for PTSD and SUDs (see above for specific treatment protocols), as well as utilizing theoretically driven approaches to enhance EBPs and increase retention and treatment engagement (e.g., Constructivist theory, Cognitive Hope Theory, & etc...).

Personal Interests: Hiking, training my dog, baking, and video games.

Joseph F. Reichmann, Psy.D.

Doctoral Program: Marywood University, 2015

Doctoral Internship: United States Navy, Walter Reed National Military Medical Center, 2014-2015

Postdoctoral Fellowship: Completed postdoctoral hours as a staff psychologist at Naval Medical Center Portsmouth, 2015-2016.

Duties: Program Manager and Psychologist for the Psychosocial Rehabilitation and Recovery Center (PRRC), Employee Assistance Program (EAP) counselor.

Clinical Interests: Substance-Related and Addictive Disorders, Serious Mental Illness, Sleep-Wake Disorders, and creating as many clubs on the CVAMC campus as possible.

Personal Interests: Spending time with family (wife, son, & two doodles), fitness (especially CrossFit), snowboarding, Philadelphia (Eagles – go birds!), food, tattoos, and travel.

Jessica Reinhard, Psy.D.

Doctoral Program: Immaculata University, 2019

Doctoral Internship: Coatesville VA Medical Center

Postdoctoral Fellowship: Corporal Michael J. Crescenz VA Medical Center located in Philadelphia

Duties: Program Director for the Psychology Internship Training; Neuropsychological evaluations within the CVAMC Neuropsychology Clinic.

Clinical Interests: assessment of older adults, particularly cases involving movement disorders; capacity assessments, as well as behavioral interventions for Veteran's with dementia, and providing caregiver support.

Personal Interests: Spending time with family; coaching three kids in youth sports; Philadelphia Phillies; Listening to podcasts

Christy Rothermel, Ph.D.

Doctoral Program: Lehigh University, 2007

Doctoral Internship: Friends Hospital (psychiatric hospital in Philadelphia, PA), 2006

Postdoctoral Fellowship: Completed postdoctoral hours at Graterford State Correctional Institution (now SCI-Phoenix)

Duties: ADOT; HBPC psychology, including psychotherapy, cognitive and mental health related assessment/evaluations, and consultation to HBPC treatment team; supervision of psychology interns; participation in Geriatric Scholars Program/activities and related quality improvement project(s); co-chairing VISN HBPC COP workgroup

Clinical Interests: Integration of medical and mental health care; behavioral health consultation; end of life issues; mental health related geriatric care

Personal Interests: spending time with my family and friends; the Phillies and the Eagles; reading for fun; day trips/vacations

Gabrielle Sassone, Psy.D.

Doctoral Program: Philadelphia College of Osteopathic Medicine, 2015

Doctoral Internship: Orlando Veterans Affairs Medical Center, 2014-2015

Postdoctoral Fellowship: University of Pennsylvania; Aaron T. Beck Schizophrenia Research Center

Duties: Licensed Clinical Psychologist, Local Recovery Coordinator (LRC,) VISN4 LRC Lead

Clinical Interests: Assessment and Treatment of Severe Mental Illness, Assessment and Treatment of PTSD and Trauma on a Continuum, Recovery Oriented Research, Program Development (i.e., Club Model of Care,) and Implementation, Prolonged Exposure Therapy (PE)

Personal Interests: Family, Cooking, Art, Fall/Sweater weather, Dogs, & 90's music

Danielle Schade, Psy.D.

Doctoral Program: Georgia School of Professional Psychology

Doctoral Internship: Coatesville VAMC, 2003-2004

Postdoctoral Fellowship: Completed postdoctoral hours as a staff psychologist at Coatesville VAMC

Duties: Chief of Psychology Service; Staff psychologist for Acute Inpatient Psychiatry Unit; Co-chair Disruptive Behavior Committee; Instructor for Prevention and Management of Disruptive Behavior

Clinical Interests: Severe mental illness; psychosocial rehabilitation and recovery; professional ethics; diversity

Personal Interests: Cooking, learning Arabic, exercise in the form of chasing after and playing with twin sons

Jeffrey Schweitzer, Ph.D.

Doctoral Program: Miami University

Doctoral Internship: SUNY Upstate Medical University

Postdoctoral Fellowship: SUNY Upstate Medical University

Duties: BHIP, clinical assessment, diagnosis, and treatment; DBT team member and assessor; qualitative research of recovery-oriented services.

Clinical Interests: Healing trauma and loss through experiential-depth psychotherapies; imagination and transformational experiences in psychotherapy. EBP proficiencies include DBT/PE/IBCT.

Personal Interests: Family and play with my children, cooking, hiking, running, golf, music, poetry.

Ashley Sutton, Psy.D.

Doctoral Program: Rutgers Graduate School of Applied and Professional Psychology (GSAPP), 2018

Doctoral Internship: Pittsburgh VA Medical Center, 2017-2018

Postdoctoral Fellowship: Pittsburgh VA Medical Center, Focus in Substance Use Disorders, 2018-2019

Duties: Staff psychologist in the Residential Rehabilitation Treatment Programs (RRTP or Domiciliary/“Dom”), conduct Behavioral Assessments for RRTP, individual and group therapy in RRTP (e.g., CBT-SUD, CPT, DBT, Seeking Safety)

Clinical Interests: Dual diagnosis SUD and PTSD, Cognitive Processing Therapy, working with specific subsets of the military population (e.g., women Veterans, LGBT Veterans), decreasing stigma around SUD, Self-Compassion, MI/MET

Personal Interests: Reading, boxing, yoga, spending time with loved ones (especially her cats)

David Tsai, Ph.D., ABPP

Doctoral Program: Rosemead School of Psychology, Biola University, 1997

Internship: Philhaven Hospital

Duties: Neuropsychological assessment, internship training; Committees: Psychology Continuing Education, Education Development Funds

Clinical Interests: Cultural issues in assessment

Personal Interests: Spending time with my wife, 3 children, and shichon; reading Car & Driver and Consumer Reports magazines

Rebecca Yeh, Psy.D .

Doctoral Program: La Salle University, 2020

Doctoral Internship: Coatesville VAMC

Postdoctoral Fellowship: Stress and Anxiety Services of New Jersey

Duties: BHIP Psychologist, DBT Team Member

Clinical Interests: Evidence-based interventions for PTSD, borderline personality disorder, suicidal and parasuicidal behaviors, OCD, anxiety, and related disorders. Formal EBP training in CPT, EXRP, and PE.

Personal Interests: Hiking and exploring the outdoors, running, watching Philly sports, playing with my dog, napping

Recent Interns Listing

<u>Intern</u>	<u>Doctoral Program</u>
2023-2024	
Morgan Bare	Philadelphia College of Osteopathic Medicine
Caroline Brady	La Salle University
Michelle Hanna Collins	Seton Hall University
Shaina Shagalow	Yeshiva University
Emily Wakschal	La Salle University
Karly Weinreb	Montclair State University
2022-2023	
Jiali Dong	William James College
Marisa Gretz	Philadelphia College of Osteopathic Medicine
Sophia Lall	Montclair University
Casey O'Hara	Immaculata University
Kristi Santiago	University of Denver
Ebru Yucel	Rowan University
2021-2022	
Isabelle Avildsen	CUNY- Queens College
Mackenzie Dody	Loyola University Maryland
Brittni Gettys	West Chester University
Dorothy'e Gott	University of Memphis
Katie Manganello	Philadelphia College of Osteopathic Medicine
Kevin Mazzola	Fairleigh Dickinson University
2020-2021	
Simone Arent	William James College
Nicole Coolbrith	William James College
Rachel Hughes	Palo Alto University
Laura Lesnewich	Rutgers University
Alyssa Minnick	University of North Carolina—Charlotte
Molly St. Denis	Rutgers University- Graduate School of Applied and Professional Psychology
2019-2020	
Cara Genbauffe	Rutgers University- Graduate School of Applied and Professional Psychology
Stephen Maitz	Chestnut Hill College
Alexander Puhalla	Temple University
Marnina Stimmel	Yeshiva University/Ferkhauf
Rebecca Yeh	La Salle University
2018-2019	
Justine Bates-Krakoff	Fairleigh Dickinson University
Joseph De Marco	Loyola University Maryland
Sara Honickman	Yeshiva University/Ferkhauf
Jessica Reinhard	Immaculata University
Rolf Ritchie	Bowling Green State University

Trainee Outcomes, Support and Outcome Data

Date Program Tables are Updated: 7/20/2023

<p>Does the program or institution require students, trainees, and/or staff (faculty) to comply with specific policies or practices related to the institution’s affiliation or purpose? Such policies or practices may include, but are not limited to, admissions, hiring, retention policies, and/or requirements for completion that express mission and values.</p>	<p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>If yes, provide website link (or content from brochure) where this specific information is presented:</p> <p>Included is the VA mission and values that all staff and trainees adhere to: I CARE (va.gov)</p> <p>We have also included excerpts from our brochure regarding our admission and completion policies. We included a link to admission and eligibility criteria for internship training within the VA.</p> <p>Eligibility</p> <p>Doctoral students in APA or CPA accredited Clinical or Counseling Psychology programs are eligible to apply. All coursework required for the doctoral degree must be completed prior to the start of the internship year, as well as any qualifying, comprehensive, or preliminary doctoral examinations. We prefer candidates whose doctoral dissertations have been proposed. Persons with a PhD in another area of psychology who meet the APA criteria for re-specialization training in Clinical or Counseling Psychology are also eligible.</p> <p>VA requirements specify that eligible applicants must be U.S. citizens and have fulfilled departmental requirements for internship as certified by their Directors of Clinical Training. The Coatesville VA Medical Center is an Equal Opportunity Employer; we are committed to ensuring a range of diversity among our training classes. We welcome and strive to select candidates representing different kinds of programs and theoretical orientations, geographic areas, ages, racial and ethnic backgrounds, sexual orientations, disabilities, and life experiences.</p> <p>If selected to be an intern at this or another VA site, a Certification of Registration Status, Certification of U.S. Citizenship, and drug screening are required are part of onboarding. We cannot consider applications from anyone who is not currently a U.S. citizen. Thus, all interns must complete a Certification of Citizenship in the United States and the Federal Government also requires that male applicants to VA positions who were born after 12/31/59 must sign a Pre-appointment Certification Statement for Selective Service Registration, prior to beginning the internship. The VA conducts drug screening exams on randomly selected personnel as well as new employees. Interns are not required to be tested prior to beginning work, but once on site they are subject to random selection in the same manner as other staff. Interns are also required to be fully vaccinated from COVID-19 or provide a religious or medical reason as to why they are not.</p> <p>Please note: Interns are appointed as temporary employees of the Department of Veterans Affairs. As such, interns are subject to laws, policies, and guidelines posted for VA staff members. There are infrequent times in which this guidance can change during a training year which may create new requirements or responsibilities for interns. If employment requirements change during the course of a</p>	

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.

[Eligibility - Psychology Training \(va.gov\)](#)

Evaluation of progress

Interns are continuously evaluated throughout the training year, with formal evaluation completed at mid-rotation and end of rotations by all supervisors. Evaluation focuses on the successful demonstration of profession-wide competencies and site-specific competencies (i.e., patient-centered practices and program development and evaluation). All competency areas will be rated at a level of competence level of 3 or higher. Items rated as level 1 or 2 will require implementation of a remediation plan. By end of training, intern will have achieved a rating of 4 or higher on all profession-wide competencies and 3 or higher on all relevant site-specific competencies.

Internship Program Admission

Briefly describe in narrative form important information to assist potential applicants in assessing their likely fit with your program. This description must be consistent with the program’s policies on intern selection and practicum and academic preparation requirements:

The Coatesville Veterans Affairs Medical Center internship ascribes to the Practitioner-Scholar Model. We offer two major areas of emphasis/training tracks: Clinical Psychology/generalist and neuropsychology. Our patient population is exclusively adults, and predominantly male veterans. Interns work with multidisciplinary teams with a variety of age groups, presenting problems, and diagnoses, and in a wide variety of inpatient, outpatient, and residential settings. Intern duties involve a broad scope of practice including assessment, individual and group therapy, program development/evaluation, and provision of staff education and systems-level interventions.

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	N	Y	Amount: 0
Total Direct Contact Assessment Hours	N	Y	Amount: 0

Describe any other required minimum criteria used to screen applicants:

Applicants are expected to have clinical/practicum experience in working with an adult population.

Financial and Other Benefit Support for Upcoming Training Year

Annual Stipend/Salary for Full-time Interns	\$36,565	
Annual Stipend/Salary for Half-time Interns	NA	
Program provides access to medical insurance for intern?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
If access to medical insurance is provided:		
Trainee contribution to cost required?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Coverage of family member(s) available?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Coverage of legally married partner available?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Coverage of domestic partner available?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> 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 leave, does the program allow reasonable unpaid leave to interns/residents in excess of personal time off and sick leave?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Other Benefits (please describe): As Federal employees, interns receive 11 federal holidays as paid time off. Interns are also granted 5 days of Approved Absence (not deducted from annual or sick leave) for attendance at professional conferences, postdoctoral or job interview, and/or dissertation defense. Interns are not required to carry separate liability/malpractice insurance.		

**Initial Post-Internship
Positions**
(Provide an Aggregated Tally for the
Preceding 3 Cohorts)

	2020-2023	
Total # of interns who were in the 3 cohorts	18	
Total # of interns who remain in training in the internship program	0	
	PD	EP
Academic teaching	0	0
Community mental health center	0	0
Consortium	0	0
University Counseling Center	0	0
Hospital/Medical Center	4	0
Veterans Affairs Health Care System	7	2
Psychiatric facility	0	0
Correctional facility	0	0
Health maintenance organization	0	0
School district/system	0	0
Independent practice setting	4	0
Other	0	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.