

Psychology Internship Program



VA Sierra Nevada Health Care System
Mental Health Service (116)
975 Kirman Avenue
Reno, NV 89502
(775) 786-7200
<http://www.reno.va.gov/>



MATCH Number Program Code: 143911
Applications Due: Wednesday, November 1, 2023, 7:59 p.m. Pacific

Table of Contents

[Accreditation Status](#)
[Application and Selection Procedures](#)
[Psychology Setting](#)
[Training Model & Program Philosophy](#)
[Program Aims & Required Competencies](#)
[Compensation and Benefits](#)
[Program Structure](#)
[Rotations & Training Experiences](#)
[Requirements for Completion](#)
[Facility & Training Resources](#)
[Administrative Policies & Procedures](#)
[Training Staff](#)
[Current and Past Trainees](#)
[Local Information](#)
[Internship Program Tables](#)



Emerald Bay, Lake Tahoe

The information provided in this brochure is designed to provide a general description of our program and medical center setting. We look forward to answering any specific questions you might have by e-mail or telephone. The program Training Director is John Wyma, Ph.D., and his contact information is as follows: Email john.wyma@va.gov; phone (775) 786-7200, ext 6581.

Accreditation Status

Application & Selection Procedures

OUR APPIC INTERNSHIP MATCHING PROGRAM CODE # IS 143911.

Our program utilizes the APPIC Application for Psychology Internship (AAPI) process. This means students only need to complete one application for all APPIC registered sites. The AAPI is available through the APPIC web site, www.appic.org. Please go to the APPIC web site for more information on accessing and completing the online application, as well as application deadlines.

Please be aware that the “**Academic Program’s Verification of Internship Eligibility and Readiness**” form is to be submitted ELECTRONICALLY to the internship site by your graduate training director. Instructions regarding this part of the application process are contained in the online AAPI.

Completed applications are initially reviewed by the Training Director to screen for basic eligibility. Enrollment in an APA-approved doctoral program in clinical or counseling psychology and completion of the dissertation or project proposal are required. Applicants must be students in an APA-, CPA, or PCSAS-accredited or provisionally-accredited PhD or PsyD program in Clinical or Counseling Psychology and be approved for internship by their program's Director of Clinical Training. Other eligibility requirements are listed below.



Wingfield Park, Truckee River, downtown Reno



Springtime on the Hunter Creek Trail, west of Reno

After initial review by the Training Director, applications meeting basic eligibility requirements are reviewed by two staff psychologists and then ranked according to a number of criteria, including number of practicum hours, assessment and intervention experience; variety and quality of practicum placements; and letters of recommendation. Applicants' introduction letters and responses to essay questions on the AAPI are also reviewed to gauge the "goodness of fit" between the student and our training site. We seek applicants who have a strong academic foundation from their university program and who have mastered basic skills in standard assessment and intervention techniques from their practicum experience.

The majority of our patients are middle-aged or older adults who present with combined medical and psychiatric symptoms, and we prefer applicants who demonstrate an interest in this population through their past exposure to similar training experiences and articulation of such interest in terms of future career goals. See the section below, [***Internship Program Tables***](#), for more information.

As part of the application process, we hold interviews by invitation only. Due to ongoing health concerns presented by the COVID-19 pandemic, as well as the wide variability of financial resources available to well-qualified applicants, all our interviews will be conducted online. If you cannot make arrangements for videoconference-based interviews, we will attempt to schedule telephone interviews. Instructions for interviews will be sent when applicants are notified of interview invitations. Please note that due to the changing landscape surrounding possible resurgence of the COVID-19 pandemic, we may find it necessary to change dates or interview processes. Interviewees will be notified of any such changes at the earliest opportunity. If interviewees desire a visit to our facility, we will make every effort to make arrangements for this, although in-person visits will not factor into our ranking strategy for applicants.

We greatly value 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) ethnicity, race, 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, he/she is encouraged to discuss this with the Training Director and/or follow the grievance processes which are outlined in our program handbook and/or VA Equal Employment Opportunity policies.

The program seeks to obtain a diverse intern class while selecting the most qualified candidates, and 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. Information regarding VA's commitment to diversity awareness and education can be found at the website for the Office of Diversity and Inclusion (<https://www.diversity.va.gov/>).

Our agency provides reasonable accommodation to applicants with disabilities where appropriate. If you need reasonable accommodation for any part of the application and hiring process, please notify Dr. Wyma, the internship Training Director, by telephone or email. Determinations on requests for reasonable accommodation will be made on a case-by-case basis.

NOTIFICATION AND INTERVIEWS

Applicants will be notified regarding invitations to interview with us by **Friday, December 1, 2023** via e-mail. If you do not have an e-mail address, you will need to phone the Training Director to inquire as to your status. Dr. Wyma's phone is 775-786-7200, x6581.

We will **only be conducting virtual interviews via videoconference or, when requested, telephone** this year. If you are invited for an interview, **we will ask that you make a firm commitment to one of the dates listed below**. If neither date is possible, limited alternative dates may be considered on a case-by-case basis. Interview slots are limited on those days and will be arranged on a first-come, first-served basis. Many applicants and interviewers at our own and other VAs have found videoconference interviews to be preferable to telephone interviews. If you are invited to interview with us, we will ask which of these options you would like. Failure to take part in a scheduled video or telephone interview will result in your application being withdrawn from further consideration.

Plan on being connected in for your selected interview date from 8:00 AM until approximately 4:00 PM. You will be joining other applicants in a group format during the morning hours in meetings with the Training Director and current Psychology Interns, as well as meeting many of our rotation supervisors. Interviewees will be given the opportunity to hear from supervisors regarding each rotation and opportunities provided through the training year. During the afternoon, invitees will meet with staff psychologists for two individual interviews. The interviews are evaluated according to several factors, including your responses to questions about difficult situations you've handled in the past, questions about difficult diagnostic dilemmas and treatment challenges you've faced, and how well our site aligns with your training needs and interests. You will be presented with a case description so that you can respond to structured questions about diagnostic impressions, assessment strategies you might consider using to assist with diagnosis, and possible treatment modalities or further referral you might recommend.

INTERVIEW DATES FOR 2024-2025 TRAINING YEAR:

- **Thursday, January 4, 2024**
- **Thursday, January 11, 2024**

Our program is participating in the APPIC Match Program, so you will need to obtain an Applicant Agreement Package from National Matching Services, Inc in order to register for the Match. You can download the Applicant Agreement form at <https://natmatch.com/psychint/>. If you do not register, you will not be eligible to match with any APPIC programs. We recommend that you carefully review the official

APPIC Match Policies and the Internship Matching Program Schedule of Dates, which are also available at <https://www.appic.org/>.

If you have questions regarding APPIC procedures, their telephone number is (202) 347-0022. The number for National Matching Services is (416) 977-3431.

For your application to be complete we must receive the following materials by November 1, 2023:

- Online APPIC Application for Psychology Internship (AAPI).
- Your Curriculum Vitae – to be submitted as part of online AAPI.
- Three letters of recommendation – to be submitted as part of online AAPI.
- Graduate school transcripts – to be submitted as part of online AAPI.
- Your Academic Program Verification of Internship Eligibility and Readiness form – to be submitted by your academic program's Director of Training as part of the online AAPI.

Any inquiries about our application process can be submitted to:

John G. Wyma, PhD, ABPP
Mental Health Service (116)
VA Sierra Nevada Health Care System
975 Kirman Avenue
Reno, NV 89502
(775) 786-7200, x6581

All application materials must be submitted electronically, as part of the online AAPI. **Please read all relevant instructions carefully to assure that transcripts, letters of recommendation, and the Academic Program Verification of Internship Eligibility and Readiness forms are submitted in a timely manner. Applications that are not completed by 11:59 pm EST (8:59 pm PST) on November 1, 2023 will not be considered, even if portions of the application have been submitted prior to that date and time.**

As a member of the Association of Psychology Postdoctoral and Predoctoral Internship Centers (APPIC), our program follows all APPIC policies regarding the intern selection process. This internship site strictly abides by the APPIC policy that no person at this training facility will solicit, accept, or use any ranking related information from any applicant. You are encouraged to read or download the complete text of their regulations governing program membership and the match process from APPIC's Website. Our privacy policy is clear: We will not collect personal information about you when you visit our website. We do not require self-disclosure of sensitive personal information during our interviews.

ELIGIBILITY REQUIREMENTS FOR ALL VA PSYCHOLOGY INTERNSHIP PROGRAMS

The Department of Veterans Affairs (VA) adheres to all Equal Employment Opportunity and Affirmative Action policies. As a Veterans Health Administration (VHA) Health Professions Trainee (HPT), you will receive a Federal appointment, and the following requirements will apply prior to that appointment:

1. **U.S. Citizenship.** HPTs who receive a direct stipend (pay) must be U.S. citizens. Trainees who are not VA paid (without compensation-WOC) who are not U.S. citizens may be appointed and must provide current immigrant, non-immigrant or exchange visitor documents.

2. **U.S. Social Security Number.** All VA appointees must have a U.S. social security number (SSN) prior to beginning the pre-employment, on-boarding process at the VA.
3. **Selective Service Registration.** Male applicants born after 12/31/1959 must have registered for the Selective Service by age 26 to be eligible for U.S. government employment, including selection as a paid or WOC VA trainee. For additional information about the Selective Service System, and to register or to check your registration status visit <https://www.sss.gov/>. Anyone who was required to register but did not register before the age of 26 will need to apply for a Status Information Letter (SIL) and request a waiver. Waivers are rare, and requests will be reviewed on a case by case basis by the VA Office of Human Resources Management. This process can take up to six months for a verdict.
4. **Fingerprint Screening and Background Investigation.** All HPTs will be fingerprinted and undergo screenings and background investigations. Additional details about the required background checks can be found at the following website: <http://www.archives.gov/federal-register/codification/executive-order/10450.html>.
5. **Drug Testing.** Per Executive Order 12564, the VA strives to be a Drug-Free Workplace. HPTs are not drug-tested prior to appointment but are subject to random drug testing throughout the entire VA appointment period. You will be asked to sign an acknowledgement form stating you are aware of this practice. See item 8 below. *Please be aware that at the current time and despite changes in many states' laws related to the medical and/or recreational use of marijuana/cannabis, THC, CBD and related products, federal law prohibits the use of such products by federal employees.* Therefore, detection of such use through random drug tests could result in dismissal from the program despite medical need, the presence of a physician prescription, or the fact that the product may have been legally obtained. Please see the following for more information: [VA Drug-Free Workplace Program Guide for Veterans Health Administration Health Professions Trainees](#)
6. **Affiliation Agreement.** To ensure shared responsibility between an academic program and the VA there must be a current and fully executed Academic Affiliation Agreement on file with the VHA Office of Academic Affiliations (OAA). The affiliation agreement delineates the duties of VA and the affiliated institution. Most APA-accredited doctoral programs have an agreement on file. More information about this document can be found at: <https://www.va.gov/oaa/affiliation-agreements.asp#:~:text=Affiliation%20Agreements%20govern%20the%20relationship%20between,a dministration%20of%20its%20health%20care%20system.&text=Affiliation%20Agreements%20govern%20the,its%20health%20care%20system.&text=govern%20the%20relationship%20between,administ ration%20of%20its%20health>. Post-degree programs typically will not have an affiliation agreement, as the HPT is no longer enrolled in an academic program and the program is VA-sponsored.
7. **TQCVL.** To streamline on-boarding of HPTs, VHA Office of Academic Affiliations requires completion of a Trainee Qualifications and Credentials Verification Letter (TQCVL). An Educational Official at the Affiliate (university or professional school) must complete and sign this letter. For post-graduate programs where an affiliate is not the program sponsor, this process must be completed by the VA Training Director. Your VA appointment cannot happen until the TQCVL is submitted by your graduate program's Director of Clinical Training and signed by senior leadership from the VA facility. For more information about this document, please see this template for the TQCVL: https://www.va.gov/OAA/Docs/TQCVL_TemplateFINAL.docx.
 - a. **Health Requirements.** Among other things, the TQCVL confirms that you, the trainee, 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 includes CDC's and VHA's most recent guidance and/or directives regarding vaccination for other communicable diseases such as COVID-19. This protects you, other employees, and patients while working in a healthcare facility. Required are annual

tuberculosis screening, Hepatitis B vaccine, annual influenza vaccine, and COVID-19 vaccine. *Declinations are EXTREMELY rare.* If you decline the flu vaccine you will be required to wear a mask while in patient care areas of the VA.

- b. **Primary source verification of all prior education and training** is certified via the TQCVL. Training and Program Directors will be contacting the appropriate institutions to ensure you have the appropriate qualifications and credentials as required by the admission criteria of the training program in which you are enrolled.
8. **Additional On-boarding Forms.** Additional pre-employment forms include the Application for Health Professions Trainees (VA 10-2850D) and the Declaration for Federal Employment (OF 306). These documents and others are available online for review at [Resources for Health Professions Trainees Coming to VA | Eligibility and Forms - Office of Academic Affiliations](#). Falsifying any answer on these required Federal documents will result in the inability to appoint or immediate dismissal from the training program.
9. **Proof of Identity per VA.** VA on-boarding requires presentation of two source documents (IDs). Documents must be unexpired and names on both documents must match. For more information visit: https://www.va.gov/files/2021-07/1Proof_of_Identity.pdf

Information on eligibility is also available at : <https://www.va.gov/oa/hpt-eligibility.asp>

Additional information regarding eligibility requirements:

- Trainees receive term employee appointments and must meet eligibility requirements for appointment as outlined in VA Handbook 5005 Staffing, Part II, Section B. Appointment Requirements and Determinations. See 5005-112 at the following link for more information: https://www.va.gov/vapubs/search_action.cfm?dType=2
- Selective Service website where the requirements, benefits and penalties of registering vs. not registering are outlined: <https://www.sss.gov/>

(b) Specific factors. In determining whether a person is suitable for Federal employment, only the following factors will be considered a basis for finding a person unsuitable and taking a suitability action:

- (1) Misconduct or negligence in employment;*
- (2) Criminal or dishonest conduct;*
- (3) Material, intentional false statement, or deception or fraud in examination or appointment;*
- (4) Refusal to furnish testimony as required by § 5.4 of this chapter;*
- (5) Alcohol abuse, without evidence of substantial rehabilitation, of a nature and duration that suggests that the applicant or appointee would be prevented from performing the duties of the position in question, or would constitute a direct threat to the property or safety of the applicant or appointee or others;*
- (6) Illegal use of narcotics, drugs, or other controlled substances without evidence of substantial rehabilitation;*
- (7) Knowing and willful engagement in acts or activities designed to overthrow the U.S. Government by force; and*
- (8) Any statutory or regulatory bar which prevents the lawful employment of the person involved in the position in question.*

(c) Additional considerations. OPM and agencies must consider any of the following additional considerations to the extent OPM or the relevant agency, in its sole discretion, deems any of them pertinent to the individual case:

- (1) The nature of the position for which the person is applying or in which the person is employed;*
- (2) The nature and seriousness of the conduct;*
- (3) The circumstances surrounding the conduct;*
- (4) The recency of the conduct;*

- (5) *The age of the person involved at the time of the conduct;*
- (6) *Contributing societal conditions; and*
- (7) *The absence or presence of rehabilitation or efforts toward rehabilitation.*

Health Professions Trainees (HPTs) are appointed as temporary employees of the Department of Veterans Affairs. As such, HPTs 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 HPTs. If employment requirements change during the course of a training year, HPTs will be notified of the change and impact as soon as possible and options provided. The Training Director will provide you with the information you need to understand the requirement and reasons for the requirement in timely manner.

Psychology Setting

Psychologists are an integral part of the Mental Health Service at our medical center. We maintain close interdisciplinary relationships with psychiatrists, psychiatric nursing, social work, and substance abuse specialists in our department. We currently have 26 psychologists in our various programs representing a wide variety of academic backgrounds, clinical interests, and areas of expertise. We are proud that several of our former interns have returned to be part of our wonderful psychology team!



2022-23 Cohort Graduation

Our psychologists serve a wide variety of administrative and clinical roles within our department and throughout the medical center. Psychologists provide services through the Mental Health Clinic (MHC), Behavioral Medicine and Neuropsychology programs, the Psychosocial Rehabilitation and Recovery Program (PRRC), the Addictive Disorders Treatment Program (ADTP), the PTSD Clinical Team (PCT), Integrated Behavioral Health Care (IBHC), our Inpatient Behavior Health Unit, the Community Living Center (CLC) and Home-Based Primary Care (HBPC) programs, and our Healthy Living Team. Our psychologists also serve in important leadership roles throughout the medical center, with memberships on committees and task forces outside of Mental Health including the Palliative Care Team, Pain Management Panel, the facility Ethics Committee, and Wellness/Whole Health programs. Psychologists from our medical center have also been appointed to positions at the regional level (Veterans Integrated Service Network 21) in program development and evaluation positions. Several psychologists hold academic appointments with the School of Medicine and/or the Psychology Department at University of Nevada - Reno.

Our facility also serves as a training site for residents in psychiatry, pharmacy, dentistry, optometry, internal medicine, and surgery, as well as nursing students and social work interns. We offer practicum opportunities students from APA-accredited PhD and PsyD programs on a case-by-case basis.

During the training year, psychology interns provide consultation and treatment to several other health care service departments throughout the medical center, including the inpatient medical, surgical, ICU, and Community Living Center units, the primary care clinics, and the Emergency Department.

Training Model and Program Philosophy

The VA Sierra Nevada Health Care System is committed to the training of professional psychologists consistent with a practitioner-scholar training model. Within a supportive and collegial atmosphere, we seek to facilitate development of a reflective approach to practice that integrates empirical knowledge and delivery of clinical services. Interns are viewed as making the transition from the student role to the professional colleague role over the course of the training year, honing clinical and communication skills and competencies ultimately required for effective independent practice. Opportunities are offered for continued training in areas of practice with which interns may already be familiar, as well as introduction to assessment strategies, treatment orientations, and other clinical challenges that may be less familiar.

At the start of the training year, interns undergo two weeks of orientation to the Mental Health Service and to the medical center. They visit rotation sites and meet with potential supervisors to compose a training experience that best fits their interests and needs. Trainings are provided in areas such as risk assessment; the VA electronic medical records system; diversity and multicultural issues; principles and general methodology of cognitive behavior therapy and motivational interviewing; military culture, values, and traditions; and other relevant topics. This is also the opportunity to visit each program within the Mental Health Service, which exposes our new interns to the variety of services we offer as well as helping them better define their rotation interests. The Training Director acts as an advocate for interns and the training program within the medical center and Mental Health Service. The Director meets regularly with interns as a group and individually to hear and respond to their training needs and concerns. Interns receive informal feedback from supervisors throughout the year.

In addition to formal rotation evaluations by rotation supervisors, interns are also evaluated mid-year and at the end of the training year through a comprehensive competency evaluation provided by the Training Director and the Training Council. Evaluations emphasize the intern's strengths and identify areas in need of improvement. In turn, interns evaluate their supervisors and the supervision experience. Evaluations are mutually shared and discussed between intern and supervisor in an atmosphere that fosters personal and professional development. Written summaries of these evaluations are furnished to the intern. The mid- and end-of-year comprehensive competency evaluations are sent to the Director of Clinical Training at the intern's graduate institution, along with a narrative report of progress.

It is expected that interns will differ in the extent to which they require training in the required competencies and that there may be skills that require focused attention in order to meet competency goals and standards. These issues are typically addressed in supervision, but if significant competency gaps are noted in any of these areas, a formal remediation plan may be established to ensure that those areas needing strengthening are addressed. If we determine that required competency deficits cannot be remediated sufficiently during the internship year, provisional completion of the internship and/or termination from the program will be considered. While rare, there may also be instances where an intern's behaviors, attitudes, or other characteristics detrimentally impact the learning process, relationships with others, and/or patient care. Similar to deficits in training, this is initially addressed informally in individual supervision but may also lead to a remediation plan being implemented or, in cases where remediation efforts are unsuccessful, dismissal from the program.

Program Aims & Required Competencies

In alignment with the APA Council on Accreditation's Standards of Accreditation (<http://www.apa.org/ed/accreditation/about/policies/standards-of-accreditation.pdf>), our program has articulated the following Vision Statement, Aims, and required Competencies:

Vision Statement: *“To prepare our psychology interns for long-term success in health service psychology.”*

Aims:

1. To develop in our interns strong core generalist skills in health service psychology through competency-based supervised training.
2. To prepare interns to function competently within an integrated health care system, particularly the Veterans Health Administration.
3. To support our interns in preparing for the next step in their professional careers.

Profession-Wide Required Competencies:

Research: Demonstrating the substantially independent ability to critically evaluate and disseminate research or engage in other scholarly activities (case conference, presentations, publications) at the local (including the host institution), regional, or national level. Program and treatment outcome evaluation projects that involve the analysis of data are considered research.

Ethical and Legal Standards: Responding professionally in increasingly complex situations with progressively greater degrees of independence across levels of training, including knowledge of and conducting self in accordance with APA ethical code and relevant laws, regulations, rules, policies, standards, and guidelines

Individual and Cultural Diversity: Demonstrating the ability to conduct all professional activities with sensitivity to human diversity, including the ability to deliver high quality services to an increasingly diverse population. Evidencing knowledge, awareness, sensitivity and skills when working with diverse individuals and communities who embody a variety of cultural and personal background and characteristics.

Professional Values, Attitudes, and Behaviors: Behaving in ways that reflect the values and attitudes of health service psychology, including integrity, deportment, professional identity, accountability, lifelong learning, and concern for the welfare of others.

Communication and Interpersonal Skills: Developing effective communication skills and demonstrating the ability to form and maintain successful professional relationships.

Assessment: Developing competence in evidence-based psychological assessment with a variety of diagnoses, problems and needs.

Intervention: Demonstrating competence in evidence-based interventions in a consistent manner across a variety of diagnoses, problems and needs and across a range of therapeutic orientations, techniques, and approaches.

Supervision: Applying knowledge of supervision theory and practices in direct or simulated supervision experiences with psychology trainees or other health professionals.

Consultation and Interprofessional/Interdisciplinary Skills: Consultation and interprofessional/interdisciplinary skills are reflected in the intentional collaboration of professionals in health service with other individuals or groups to address a problem, seek or share knowledge, or promote effectiveness in professional activities. Demonstrating knowledge applying these skills in direct or simulated consultation with individuals and their families, other health care professionals, interprofessional groups, or systems related to health and behavior.

Program-Specific Required Competency:

Working With Military Veterans: Demonstrating knowledge and skill in providing psychological services to US military veterans and preparation for a post-doctoral appointment and/or entry level employment as a psychologist within the VA healthcare system.

Compensation and Benefits

The anticipated federal stipend for 2024-25 is \$33,469. Health professions trainees (HPTs) are directly paid by VA, including psychology interns, and as temporary employees (less than or equal to 2080 hours) the term may not exceed one year.

HPTs appointed for 90 days or more and who participate in training a minimum of 130 hours per month meet the eligibility requirements for Federal Employee Health Benefits (FEHB). More information is available at <https://www.opm.gov/healthcare-insurance/fastfacts/fehb/>

HPTs do not, however, meet the eligibility requirements for the following entitlements:

- o Family Medical Leave, including Paid Parental Leave
- o Life Insurance (FEGLI)
- o Flexible Spending Accounts (FSAFEDS)

Program Structure

Our internship offers full-time, generalist training in the practice of professional psychology within a multidisciplinary Veterans Affairs medical center. We accept 4 interns per year. Our program is fully accredited by the American Psychological Association and complies with all standards and regulations of the Association of Psychology Postdoctoral and Internship Centers (APPIC), as well as APPIC Match Policies and Procedures. **The 2024-25 training year begins on Monday, July 29, 2024 and ends on July 25, 2025.**

The internship training year includes **three, 4-month long rotations** in the practice of clinical psychology. Required and optional rotations are described below. We utilize an apprenticeship model of training, where the intern begins each rotation by observing their supervisor and then gradually transitions into more independent functioning. Our program emphasizes training in the practice of clinical psychology, so research activities will generally be limited to those that directly support or are adjunctive to clinical work. Administrative and program evaluation experiences may be possible in various rotations or as a long-term experience, which is described in the following section. One benefit of our smaller program is that all interns have the opportunity to take part in a variety of rotations of their choosing.

We encourage interns to adhere to a 40-hour work week, although fluctuations in workload may sometimes require limited overtime work or use of free time to pursue training related readings. Approximately 32 hours of the 40-hour work week are devoted to patient contact and related administrative duties, with the remaining 8 hours reserved for seminars, supervision meetings, and other miscellaneous duties. Interns receive at least 4 hours of supervision per week, including at least two hours of scheduled individual supervision, 2 hours of weekly group supervision, and numerous impromptu or "hallway" supervision contacts throughout the week. Direct in-room supervision of clinical work is

provided, and some supervisors utilize audiotaping of client sessions to enhance the provision of individual supervision. Consistent with our commitment to graduated levels of responsibility, there are opportunities to co-lead psychoeducational and psychotherapy treatment groups with supervisors or professionals of other disciplines and to observe the administration of psychological tests prior to transitioning into independent test administration. Interns may have the opportunity to provide mentoring and supervision to psychology and/or social work trainees, though availability of this experience cannot be guaranteed at this time.

Wednesdays are devoted to didactics, group supervision and other training activities. The day will include morning **Didactic Seminars** covering topics such as professional development, law and ethics, and a variety of empirically supported treatments. Wednesday afternoons include rotating learning activities, with one week per month devoted to **Assessment Seminar**, **Diversity Seminar**, **Journal Club**, and the interns' **Diversity Project**. **Journal Club** provides interns with an opportunity to present and interact with each other on current research relevant to the work of a psychologist and to consider how the research might be applied to practice, individually and systemically. Two **Group Supervision** meetings are provided each Wednesday, with the morning session focusing on personal and professional growth and the afternoon meeting devoted to clinical casework. In the second half of the year, interns are given the opportunity to engage in peer supervision during this time. The **Diversity Project** is an opportunity for interns to take on a diversity-related topic in depth with the ideal of contributing to the knowledge or improved functioning of our medical center in areas of DEI. In addition, we offer a **Mentor Program**, in which interns select a psychologist with whom they can meet individually throughout the year for ongoing support and encouragement and to discuss concerns and professional development issues in a safe, confidential atmosphere. The mentor will not be in an evaluative role with the intern in most circumstances.

Rotations & Training Experiences

We anticipate the following rotations in the 2024-25 academic year:

- **Mental Health Clinic (full- or half-time):** During this rotation, interns have an opportunity to conduct intake interviews, outpatient group and individual psychotherapy, and complete psychological assessments for referral questions related to personality, ADHD, or Learning Disorder. Interns will continue working on their differential diagnosis skills, building their repertoire of evidence-based treatments in both individual and group modalities, working on formulation of and ongoing case conceptualization, as well as continue fine-tuning their clinical skills through close individual supervision. Given the general mental health nature of MHC, it provides an especially ideal setting for the further development of differential diagnosis and case conceptualization competencies. Examples of some of the current groups include Cognitive Behavioral Therapy for Depression, Anxiety, and Insomnia; Acceptance and Commitment Therapy for Mood Concerns; Anger Management; Mindfulness; and much more. The MHC is comprised of team members from multiple disciplines, including psychologists, social workers, nurse practitioners, and psychiatrists. Interns are encouraged to interact and consult with other disciplines during formal program meetings and as needed.
- **Behavioral Medicine Consultation and Liaison Service (BMed) (full- or half-time):** During this rotation, interns will have the opportunity to work with a variety of staff within this fast-paced medical setting. The psychologists on this team respond to consultation requests from the inpatient Medicine, Surgery, ICU, and Community Living Center units. Interns on this rotation will conduct brief neuropsychological screening evaluations, utilize interview and questionnaire data to evaluate psychiatric symptoms, and generate reports describing their findings to assist physicians, nurses, and other treatment team members in planning for patient discharge and ongoing outpatient care. Interns will also participate in daily rounds where team members discuss current patient status, and there will be ample opportunity to interface with attending physicians and resident physicians, as well as other team members from medicine, surgery, geriatrics, and palliative/hospice care. Interested interns may also work with the

psychologist covering Home Based Primary Care. The intern will also have the opportunity to work with psychologists and social workers covering the Emergency Department, evaluating Veterans who present with suicidal/homicidal ideation and other psychiatric crises. Interns are encouraged to take part in outpatient treatment modalities that relate to the practice of Behavioral Medicine, e.g., pain management group, cancer support group, CBT for insomnia, smoking cessation classes, etc.

- **PTSD Clinical Team (PCT) (full- or half-time):** During this rotation, the intern will be trained in and conduct intake evaluations and psychotherapy with patients who are referred to the PTSD Clinical Team (PCT) for evaluation of PTSD and trauma/stressor-related disorders. Psychotherapy groups which may be open to intern participation and co-facilitation currently include Cognitive Processing Therapy and Skills Training in Affective and Interpersonal Regulation (STAIR). Interns also conduct individual psychotherapy, which often focuses on teaching coping skills for PTSD. Interns who demonstrate strong foundational psychotherapy skills may be approved to provide individual trauma focused psychotherapy (Cognitive Processing Therapy or Prolonged Exposure). The intern will attend our weekly interdisciplinary team meetings. Training focuses on developing strong differential diagnostic and treatment planning skills.
- **Addictive Disorders Treatment Program (ADTP) (full- or half-time):** The ADTP rotation consists of evaluations and interventions for veterans referred for substance use disorders and/or gambling disorder in an outpatient setting. Evaluation experiences will include screening appointments, intakes, and psychological assessment batteries, with particular emphasis on differential diagnostic skills and formulating appropriate treatment recommendations. Intervention experiences will primarily be in the group format, with treatment modalities ranging from CBT, Mindfulness-based, and 12-Step approaches. Individual intervention opportunities may also be available, with particular emphasis on developing Motivational Interviewing skills. Other opportunities may include inpatient consults, inpatient groups, individual and/or group interventions for gambling disorder, and exposure to Suboxone (buprenorphine) treatment for opioid use disorder with medical staff. Interns will attend weekly case conference and staff meetings with the multidisciplinary ADTP team.
- **Integrated Behavioral Health Clinic (full- or half-time):** The Integrated Behavioral Healthcare (IBHC) Program utilizes a blended model, combining a co-located, collaborative care model with care management to address the needs of a diverse patient population presenting in the primary care setting. During this rotation, the IBHC intern collaborates with primary care providers, RNs, and pharmacists on a regular basis. Additionally, other treatment providers (including social work, dietitians, and specialty medical and mental health providers) are consulted on an as-needed basis. It is a busy, relatively fast paced program. Interns who succeed in this rotation learn to quickly assess patient needs via a focused assessment; present the case very concisely to a supervisor or to a physician to inform or to implement immediate plans for change; be available for “curbside” consultations and warm handoffs from medical providers; develop an overall treatment plan for behavioral health intervention, which may include a multidisciplinary approach; and provide brief, evidence-based treatment for a wide variety of both medical and behavioral components of health related issues. Additionally, brief cognitive evaluations are frequently requested and administered by IBHC interns and psychology staff. The intern is included in both IBHC team and Primary Care staff meetings, as well as other team meetings which may align with training goals or interests.
- **Geropsychology (full-time):** Geropsychology, part of the Behavioral Medicine program, offers the opportunity to deliver geriatric services in the Community Living Center and through Home Based Primary Care (HPBC). The CLC is a skilled nursing facility where interns work with veterans, many of whom are older adults undergoing short-stay or long-stay rehabilitation. The CLC also has dedicated beds for veterans admitted for palliative care for chronic illnesses, and hospice care at the end of life. In contrast, HPBC gives interns exposure to home bound older adults living in the community who are adapting to the challenges of disability and aging in place. In these settings, the intern typically works on interprofessional teams and provides conceptualizations from a biopsychosocial perspective while collaborating with providers from a number of disciplines. In addition, the intern may educate other

providers on these teams about psychological and/or aging issues through consultation. The intern performs assessment (e.g., psychological, cognitive, neuropsychological, decision-making and capacity, risk, etc.) and intervention skills commonly used for older adult issues (e.g., grief, end-of-life, caregiving, chronic health problems, role/life transitions, etc.).

- **Neuropsychological Assessment (full- or half-time):** During this rotation, the intern will conduct neuropsychological evaluations on veterans referred for testing for a variety of concerns including effects of traumatic brain injury and possible dementia. The intern will gain exposure to a variety of test batteries depending on the referral question and will also be responsible for writing a comprehensive neuropsychological report for each veteran they evaluate.
- **Psychosocial Rehabilitation and Recovery Program (PRRC) (half-time):** During this rotation, the intern will provide services in our intensive outpatient program for veterans diagnosed with serious mental illness (SMI) such as schizophrenia and bipolar disorder. The intern is fully involved in all aspects of the program and will have opportunity to conduct intakes, complete individual recovery plans, provide individual and group therapy, and complete cognitive and personality screenings. The PRRC team works closely with the RANGE team, which provides community case management; interns will have the opportunity to work with this team in the community as well. Interns will work on a multidisciplinary team including psychologists, social workers, psychiatrists, peer supports, and nurse practitioners. Interns will gain exposure to evidence-based treatments for SMI and will be given the opportunity to create groups of interest for this population.
- **Mental Health Leadership and Administration (half-time):** This rotation provides interns the opportunity to work with Mental Health Service leaders to develop an understanding of the administrative roles of psychologists within the VA system. Interns in this rotation will have the opportunity to participate in program development and process improvement projects as well as the opportunity to understand the collaborative relationship of senior leadership across services through participation in senior level meetings and possibly facility-level projects. Trainees will become familiar with and help examine data to identify opportunities for improvement and the support of best practices. Exploration of leadership styles and approaches will occur through readings, exercises, and discussions.

Additional rotations may be included as staffing and program resources allow.

ASSESSMENT AND PSYCHOTHERAPY REQUIREMENTS

To ensure that all interns meet our basic goals for generalist training, the following requirements have been established for experience in providing psychological assessment and psychotherapy:

a. **Assessment Requirement** – Each intern is required to complete at least six (6) comprehensive integrated psychological assessments during the course of the internship year. This is a minimum requirement, and particular rotations may require more, such as Neuropsychology. These can be provided within the context of the intern's current rotation or through the Assessment Clinic. The assessments will include a review of available patient records, a thorough biopsychosocial interview, a mental status examination, and administration of appropriate symptom inventories and standardized psychological tests, as appropriate to the case and referral questions. Assessment supervision may be provided by a psychologist within the intern's current rotation or another qualified psychologist within the Mental Health Service who will take full supervisory responsibility for this part of the intern's work.

b. **Psychotherapy Requirement** – Interns are expected to carry at least two longer-term individual psychotherapy cases across the course one or more rotations during the training year and, as with the Assessment Requirement, will be assigned a psychologist who will oversee this requirement. This may occur within the context of the intern's current rotation or in conjunction with their rotation activities. The goal is to develop or enhance basic psychotherapy skills through the course of a complete episode of care, i.e. beginning, middle, and end phases of treatment. Cases may be assigned by the primary

supervisor or, in rotations where longer-term psychotherapy is not part of the range of services normally provided, by another psychologist who has agreed to supervise those cases. Therapy modalities may include specific evidence-based treatments such as CBT for Depression, ACT, DBT, PE, CPT, or others, but may also include other modalities (e.g. psychodynamic, interpersonal, and behavior therapies) not necessarily officially considered by VA to be evidence-based.

LONG-TERM FOCUSED EXPERIENCE (Optional): Psychology interns have the opportunity to participate in one or more long-term supervised experiences to explore specific areas of clinical interest and in which to receive more in-depth training. Interns will be provided with a list of available supervisors and their specialty areas (e.g., PTSD, addictions, DBT, neuropsychology, geropsychology, ACT, eating disorders, Motivational Interviewing, pain management, smoking cessation, MOVE (weight loss program), SMI, personality assessment, etc.). Interns will be allowed to choose a supervisor based on availability, interest, gaps in training, or enhancement of current skills

Requirements for Completion

Evaluation Processes

Rotation Evaluations: Our required competencies were listed in an earlier section of this document. Interns are evaluated at the mid-point and the end of each rotation period utilizing a Rotation Competency Evaluation tool that assesses the degree to which they are meeting the required competencies relevant to that rotation experience. Specific knowledge and skill elements for each competency area are rated across 6 levels:

- 1 = Does not demonstrate basic skill on this element
- 2 = Demonstrates minimal skill on this element
- 3 = Demonstrates basic skill but requires further supervisory instruction
- 4 = Demonstrates intermediate skill
- 5 = Demonstrates an intermediate-to-advanced level of skill on this element
- 6 = Demonstrates an advanced level of skill on this element

It is our experience that most interns will progress from 3 (basic skill) to 5 (intermediate-to-advanced skill) on each required element on rotation evaluations over the course of the training year. Our expectations for progress in each rotation are:

- At the conclusion of the **first rotation**, interns are expected to achieve ratings of “3” or higher on at least 75% of the elements in each competency area, with no ratings below “2”.
- At the conclusion of the **second rotation**, ratings of “4” or higher on at least 75% of elements are expected, with no ratings below “3”.
- By the conclusion of the **third rotation**, interns are expected to achieve a rating of “5” or higher on 75% of all elements in each competency area, with no ratings below “4”.

Performance below the expected levels will trigger a review of the intern’s progress by the rotation supervisor(s) and the Training Council to determine if remediation or other actions are necessary.

Mid- and End-of-Year Comprehensive Competency Evaluations: The Comprehensive Competency Evaluation is the primary tool used by our program to evaluate overall progress as interns move through the training year. After completion by the Training Director, in consultation with the Training Council, it is forwarded to the intern’s university Director of Clinical Training along with a narrative report on intern strengths and areas of anticipated or needed growth. Information from rotation evaluations, ongoing monthly progress reviews by the Training Council, and participation in activities such as Journal Club, didactic seminars, group supervision, and other training activities is integrated into this evaluation of overall performance.

On the Comprehensive Competency Evaluations, interns are rated on each competency dimension using the following scale:

- **1 Remedial-** The intern shows significant deficiencies in this skill area, with little to no autonomous judgment. Intern is substantially below expectations for entry to internship training. Creation of a remediation plan and changes in training plan are indicated.
- **2 Beginning Competence-** The intern requires intensive supervision. This is the expected level of skills, knowledge, and competency for an intern at the start of the training year (i.e., August).
- **3 Intermediate Competence-** The intern needs minimal structure for routine activities with required supervision, but may need additional supervision for more complex situations.
- **4 Full Competence-** The intern is considered prepared and competent for entry-level independent level practice and licensure. The intern has the ability to independently function in a broad range of clinical and professional activities, generalize skills and knowledge to new situations, and to self-assess when to seek additional training, supervision, or consultation. This is the level required for successful completion of the internship training program. An intern who does not meet this level on every applicable item on their final evaluation form will not graduate.
- **5 Advanced Competence-** Skill in this area notably exceeds that expected for doctoral interns at the completion of the training year. Sound thinking and critical judgment are evident overall; the intern has fully mastered this skill area and can handle complex situations independently under the required supervision.

Minimum Levels of Achievement

- For the mid-year Comprehensive Competency Evaluation, interns are expected to achieve ratings of “3” or above on all competencies elements. Performance below the expected levels will trigger a review of the intern’s progress by rotation supervisor(s) and the Training Council to determine if remediation, probation, dismissal, or other actions are necessary.
- On the final, end-of-year Comprehensive Competency Evaluation, ratings of “4” or above are required on all competency elements. If, on the final Comprehensive Competency Evaluation, the intern does not attain ratings of “4” or above on all elements, the intern will not graduate from the program.

Remediation: Should it be determined at any point in the training year by program supervisors that a trainee is not making sufficient progress toward competency goals, a collaborative, written remediation plan may be established by rotation supervisor(s), the Training Council, and the Training Director. Any rating of “1” on Rotation Evaluations will require development of a remediation plan, while ratings of “2” will result in discussions between rotation supervisors, the Training Council, and the Training Director to determine whether a remediation plan is necessary to help the intern progress in the program and attain required competency levels for program completion. Ratings less than “4” at the end of the training year in any competency area may result in requirements for continued internship training and/or a “provisional” recommendation by the Training Director when state licensing boards or employers request verification of experience. As indicated above, ratings falling below the MLAs at mid-year on the Comprehensive Competency Evaluation may also be result in the development of a remediation plan or other action, depending on the nature and seriousness of the competency deficit(s). An intern who is unable to meet the program MLAs by the end of the training year will receive limited recommendations from the Training Director that outline those settings in which the former intern can and cannot function adequately.

Our Internship Handbook includes guidelines for Interns to seek redress when they believe they are not being evaluated fairly or if they believe they have been the target of discrimination or other unfair treatment by supervisors or other staff.



Downtown Reno, looking south toward the Sierra Nevada

Facility and Training Resources

Interns are provided with office space in the medical center equipped with VA networked computers. All computers have access to the VA Computerized Patient Records System (CPRS), the VA VistA system, e-mail, internet, VA intranet, and the internet. Telephones with private voicemail are also provided. Interns will be issued voice recording equipment, as needed, for the purpose of recording and reviewing psychotherapy sessions with their rotation supervisor.

Textbooks on topics such as psychodiagnostics, psychotherapy, cultural and individual diversity, law and ethics, and psychopharmacology are also available to interns. The VA Virtual Library, a web-based resource, provides access to thousands of professional journals and publications for research purposes. The Mental Health Service employs several full-time Medical Service Assistants (MSAs) who provide clerical and administrative support, but professional staff (including interns) are expected to enter their own written notes into CPRS (e.g., typing services are not provided by our clerical staff). Desktop computers include programs such as Word, Excel, Access, and PowerPoint, as well as VA proprietary software programs. Electronic communication between staff and teams occurs primarily through MS Outlook and MS Teams. The Mental Health Service maintains a “shared drive” where important forms and other information are archived and updated as needed. A folder specifically for internship-oriented forms, resources, and information is also accessible to interns.

Administrative Policies and Procedures

Psychology interns are considered temporary employees with the VA. Thus, they are held to the standards of professional conduct and adherence to VA national and local policy the same as any employee. Applicable policy, directives, and procedures are outlined in both online training modules interns are required to review before the training year starts, known as “Mandatory Training for Trainees”, and in the Internship Handbook, which will be distributed electronically to each intern and which is available on the local VA shared drive. We strongly recommend that our interns review the Handbook as the training year begins and thereafter as needed.

Leave Benefits: In addition to Annual Leave and Sick Leave, both of which accrue 4 hours each 2-week pay period, each Intern may be granted up to 5 days of Authorized Absence to attend professional conferences or workshops and/or to attend VA post-doctoral or VA employment interviews. Authorized Absences are granted at the discretion of the Psychology Training Director and approvals are contingent upon satisfactory performance and applicability of the event to psychology training. One day of Authorized Absence may be granted for dissertation defense activities.

Training Staff

Our psychology training staff members include the following psychologists (listed by rotation):

Mental Health Clinic

Emily Artusio, Psy.D.

- Graduate Program: The Wright Institute, Berkeley, CA, 2019
- Internship: VA Sierra Nevada HCS
- Post-doctoral residency/fellowship: VA Northern California HCS
- Current position: Staff Psychologist, Mental Health Clinic; VA Acceptance & Commitment Therapy (ACT) National/Regional Consultant
- Professional interests: trauma treatment, Acceptance and Commitment Therapy, Cognitive Behavioral Therapy for phobias, personality assessment/diagnostic clarification, and TBI/ADHD assessment.
- Personal interests: hiking, yoga, reading literary/historical fiction, baking, camping, picnics, and hanging out at the lake.

Drew Carr, Ph.D.

- Graduate Program: Fuller Graduate School, Pasadena, CA
- Internship: Loma Linda University School of Medicine
- Post-doctoral residency/fellowship: VA Greater Los Angeles
- Current position: Staff Psychologist, Mental Health Clinic; Psychology Training Program Executive Team Member
- Professional interests: Acceptance and Commitment Therapy, clinical behavior analysis, holistic approaches to behavioral health care, dysexecutive syndromes and neuropsychological assessment/ neurobehavior.
- Personal interests: snowboarding, hiking, music, good food, nature, climbing and very small rocks.

Jonathan Parker, PsyD

- Graduate Program: Pepperdine University, 2021
- Internship location: Portland VA
- Post-doctoral residency/fellowship location: n/a
- Current position at this VA: Staff Psychologist, Mental Health Clinic
- Professional interests: Self-compassion, ACT, CBT, learning new EBP's, & mentoring
- Personal interests: Spending time with family, fine dining, muscle cars, fantasy football, watching sports

Christine Winter, Ph.D.

- Graduate Program: University of Oregon, 1990
- Internship: Gouverneur Hospital NYC for training in psychodynamic process
- Post-doctoral residency/fellowship: n/a
- Current position: Staff Psychologist, Mental Health Clinic
- Professional interests: Autism spectrum disorder, DBT, couples therapy, and rural MH issues from 25 years practice in Wyoming.
- Personal interests: Fly fishing, snowboarding, soccer refereeing, and visiting wine country.

John G. Wyma, Ph.D., ABPP

- Graduate Program: California School of Professional Psychology, San Diego, 1987
- Internship: Dammasch State Hospital, Wilsonville, Oregon
- Post-doctoral residency/fellowship: n/a

- Current position: Telehealth Psychologist, Mental Health Clinic; Director of Psychology Training; Psychology Training Program; Executive Team Member
- Professional interests: Psychology training; treatment of depression, anxiety, insomnia, and PTSD; couple therapy; program development; and integration of psychology and spirituality/faith.
- Personal interests: Visits with my children and grandchildren; camping, hiking and fishing; astronomy; travel and exploring; music of all kinds; gardening; barbeque; and experimenting with my outdoor pizza oven.

Behavioral Medicine, Liaison and Consultation (BMed)

Samantha “Sam” Schilling, Psy.D.

- Graduate Program: Adler University, Chicago, IL, 2017
- Internship: Iowa City VA Medical Center
- Post-doctoral residency/fellowship: Raymond G. Murphy VA Medical Center (Albuquerque, NM)
- Current position: Home-Based Primary Care (HBPC) Psychologist
- Professional interests: Military psychology, health psychology, several EBPs (MI, CBT, ACT, and PST), death, dying, & bereavement, TBI, and the variety of dementias and neurodegenerative disorders (ALS, Huntington’s Chorea, etc.).
- Personal interests: Cycling, hiking, running, reading, meditation, and bird watching.

Valerie L. Williams, Ph.D.

- Graduate Program: University of Alabama at Birmingham, 1992
- Internship: West Virginia University Medical Center, Charleston, WV
- Post-doctoral residency/fellowship: n/a
- Current position: Staff Psychologist, Behavioral Medicine Program
- Professional interests: Chronic illness, neuropsychology, medical and health psychology, assessment and management of dementia.
- Personal interests: Horseback riding and protecting open lands from development.

Sheila Young, Ph.D.

- Graduate Program: Utah State University, 1990
- Internship: VA Sierra Nevada HCS
- Post-doctoral residency/fellowship: n/a
- Current position: Program Manager, Behavioral Medicine Programs; Chair of the Healthcare Ethics and Research and Development Committees.
- Professional interests: Consultation and liaison with medicine, surgery, and geriatrics; health psychology, neuropsychology, end of life care, professional ethics for psychologists, professional licensure and practice issues.
- Personal interests: Fiber arts, music. Involved in psychology regulation in the US and Canada, currently in 6th year on the ASPPB Board of Directors. Investigator, State of Nevada Board of Psychological Examiners. EPPP item writer in the Ethics domain. On a work group for the International Project on Competence in Psychology.

James A. D’Andrea, Ph.D., ABPP

- Graduate Program: Saint Louis University, 1994
- Internship: Long Beach VA Medical Center, Long Beach, CA
- Post-doctoral residency/fellowship: VA Palo Alto HCS fellowship in Clinical Geropsychology - Palo Alto, CA; Stanford University School of Medicine fellowship in Medicine, Geropsychology, and Caregiver Research - Stanford, CA
- Current position: Staff Psychologist, Community Living Center; EBP Coordinator

- Professional interests: CBT for dementia caregivers, managing challenging behaviors in long-term care settings, ethnogeriatrics, capacity evaluations in cognitively impaired older adults, surrogate decision making under conditions of uncertainty, and aging with a disability.
- Personal interests: Cross country glider flying in the Sierra, skiing, and “I’m a Francophile!”

Carol Randall, Ph.D.

- Graduate Program: University of Nevada, Las Vegas, 2010
- Internship: VA Sierra Nevada HCS
- Post-doctoral residency/fellowship: n/a
- Current position: Staff Psychologist, Behavioral Medicine Program, with concentration on the Mental Health Inpatient Unit (MHU).
- Professional interests include assessment and treatment of severe mental illness, neuropsychology, medical and health psychology, and the integration of spirituality and mental health.
- Personal interests: Spending time with family, camping, traveling, reading, and writing.

Neuropsychological Assessment

Sarah L. Anderson, Psy.D.

- Graduate Program: Pacific University School of Graduate Psychology, Forest Grove, 2018
- Internship: Greenville VA HCC in Greenville, NC
- Post-doctoral residency/fellowship: Cleveland VAMC in Cleveland, OH
- Current position: Neuropsychologist, Behavioral Medicine Program; Psychology Training Program Executive Team Member
- Professional interests: Neuropsychology, assessment and management of dementia, cognitive rehabilitation, and behavioral medicine for chronic medical conditions.
- Personal interests: Hiking, music (including karaoke), theater, games of all sorts, trying new food, and fun times with family.

Melissa Swanson, PhD

- Graduate Program: Palo Alto University, 2009
- Internship: Central Arkansas VA Healthcare System (Little Rock)
- Post-doctoral residency/fellowship: University of Toledo Medical Center, Two Year Lifespan Neuropsychology Fellowship
- Current position: Neuropsychologist, Behavioral Medicine Program
- Professional interests: Neuropsychological assessment, older adults, dementia, movement disorders
- Personal interests: All about the outdoors (hiking, snowshoeing, kayaking, etc.). Also reading and music.

Psychosocial Rehabilitation and Recovery Programs (PRRC)

Michele Steever, Ph.D.

- Graduate Program: University of Nevada, Reno, 2009
- Internship: VA Sierra Nevada HCS
- Post-doctoral residency/fellowship: n/a
- Current position: Program Manager, Psychosocial Rehabilitation and Recovery Program (PRRC)
- Professional interests: SMI, DBT, FAP, resilience, positive psychology
- Personal interests: Knitting, all things Disney, my Siberian cat Lily, and incorporating movie quotes into everyday conversation.

PTSD Clinical Team (PCT)

Kathleen Beckman, Ph.D.

- Graduate Program: California School of Professional Psychology, San Francisco, 2019.
- Internship: Sacramento VA Medical Center, Mather CA
- Post-doctoral residency/fellowship: n/a
- Current Position: Staff Psychologist, PTSD Clinical Team
- Professional interests: EBP for trauma treatment, TBI assessment, family/couples therapy, and research/program evaluation.
- Personal interests: Mountain biking, hiking, and spending time with my 3 dogs and husband.

Adam Bradford, Psy.D.

- Graduate Program: Midwestern University, Glendale, AZ, 2013
- Internship: Wichita Collaborative Psychology Internship Program, Wichita, KS
- Post-doctoral residency/fellowship: Stratton VA Medical Center, Albany, NY
- Current position: PTSD Clinical Team Program Manager; Psychology Training Program Executive Team Member
- Professional interests: PTSD coordination of care, grief and loss, TBI/PTSD psychological assessment/diagnostic clarification, fitness/alternative therapies for PTSD symptom reduction, virtual reality exposure therapy.
- Personal interests: Skiing, boating, kayaking, hiking, camping, weightlifting, home renovation, vlogging, writing, travel.

Katherine (Katie) McKenzie, Psy.D.

- Graduate Program: PGSP-Stanford PsyD Consortium, 2013
- Internship: VA Sierra Nevada HCS
- Post-doctoral residency/fellowship: Kaiser Permanente Dept of Chronic Pain Management, San Francisco, CA
- Current position: Lead Psychologist; Vet Center External Clinical Consultant; Staff Psychologist, PTSD Clinical Team; Psychology Training Program Executive Team Member
- Professional interests: Trained in Prolonged Exposure, ACT, TEAM-CBT, biofeedback, and certified in Cognitive Processing Therapy. Cognitive-behavioral therapies and acceptance-based practices. Advocacy for the profession of psychology and process improvement.
- Personal interests: Hiking, snowshoeing, Pilates, parenting "middle childhood," puppy training.

Don Yorgason, Ph.D.

- Graduate Program: University of Memphis, 2011
- Internship: Albuquerque, NM VAMC Southwest Consortium
- Post-doctoral residency/fellowship: Jackson, MS VAMC, Substance Use Disorders emphasis
- Current position: Substance Use Disorder Specialist, PTSD Clinical Team
- Professional interests: Addictive behaviors, cultural influences on treatment, PTSD, Motivational Interviewing, and psychotherapy process.
- Personal interests: Reading, playing music, home improvement projects, long-distance running, and family time.

Addiction Disorders Treatment Team (ADTP)

Eric Diddy, Ph.D.

- Graduate Program: Alliant International University-CSPP, Fresno, 2013
- Internship: Northern Arizona VA HCS
- Post-doctoral residency/fellowship: Oklahoma City VA HCS
- Current position: Staff Psychologist, Addictive Disorders Treatment Program

- Professional interests: Substance use disorders, gambling disorder, PTSD, behavioral health, police/law enforcement evaluations, and Jungian psychology.
- Personal interests: Skiing, biking, kayaking, traveling, scuba diving, and fitness.

Healthy Living Team

Deborah Henderson, Ph.D.

- Graduate Program: University of Nevada, Reno, 2006
- Internship: VA Sierra Nevada HCS
- Post-doctoral residency/fellowship: n/a
- Current position: Reno VA Healthy Living Team, operating within the Whole Health framework. I am also the "MOVE!" Weight Management Program behavioral health provider.
- Professional interests: Behavioral health interventions for the prevention and management of chronic illness (with a particular interest in diabetes and weight management); behavioral interventions generally; ACT; and stress management.
- Personal interests: Spending time with my (really big) dogs, gardening, countless DIY home improvement projects, reading good books, and spending time with my husband.

Mental Health Leadership and Administration

Cynthia J. Villaverde, Ph.D.

- Graduate Program: Texas Tech University, 2011
- Internship: Salt Lake City VAMC
- Post-doctoral residency/fellowship: Dallas VAMC, specializing in substance use treatment
- Current position: Deputy Chief, Mental Health Service
- Professional interests: Acceptance & Commitment Therapy, depression, diagnostic assessment, motivational interviewing, addictive behaviors, harm reduction, and anger management.
- Personal interests: Spending quality time with my husband and children, completing home projects, spending time with my dogs, gardening, reading in hammocks, hiking, snowboarding, playing tennis, listening to music, and watching sports.

Jonathan Sills, Ph.D.

- Graduate Program: Pacific Graduate School of Psychology, 2007
- Internship: VA Salt Lake City HCS
- Post-doctoral residency/fellowship: VA Palo Alto HCS, specializing in Geriatric/Rehabilitation psychology
- Current position: Deputy Chief, Mental Health Service
- Professional interests: Interdisciplinary health care team training and development, clinical staff engagement, clinical assessment, evidence-based psychotherapy practices, and the use of technologies to support positive health behaviors, functional independence, coping, and aging in place.
- Personal interests: Spending time with family and friends, hiking, and cooking

Integrated Behavioral Health Clinic (IBHC)

Lucas Broten, Ph.D.,

- Graduate Program: Western Michigan University, Kalamazoo, 2013
- Internship: Boys Town Behavioral Health, Omaha, NE
- Post-doctoral residency/fellowship: Boys Town Behavioral Health, Omaha, NE
- Current position: Program Manager, Integrated Behavioral Health Care (IBHC)
- Professional interests: Acceptance and Commitment Therapy, behavior change in health care settings, brief interventions, and treatment outcome research.

- Personal interests: Travel, camping, hiking, fishing and cooking.

Edwina L. Martin, Ph.D.

- Graduate Program: Sam Houston State University, 2009
- Internship: Federal Bureau of Prisons, Federal Medical Center, Rochester, Minnesota
- Post-doctoral residency/fellowship location: n/a
- Current position: Staff Psychologist, Integrated Behavioral Health Care
- Professional interests: cognitive and behavioral sleep intervention, relationship counseling, communication and boundaries training, Diversity, Equity and Inclusion, sex offender assessment and treatment, Adverse Childhood Experiences (ACEs)
- Personal interests: spending time with family, world travel, eating good food, bowling, watching NFL football, weight training, listening to music, singing alone in my car

Nicola De Paul, Ph.D.

- Graduate Program: Seattle Pacific University, 2014
- Internship: VA New Mexico, Albuquerque, NM
- Post-doctoral residency/fellowship: Seattle VA, Seattle, WA
- Current position: Staff Psychologist, Integrated Behavioral Health Care
- Professional interests: Employee well-being (engagement, psychological safety), behavioral sleep medicine (PAP desensitization, CBT-I), Unified Protocol, mindfulness, adapting evidence-based protocols for under-resourced settings, clinician teaching/development/training, and intern training.
- Personal interests: Time with my pre-schooler, great coffee, walks, being outside, travel

Sarah “SJ” Jutrzonka, Ph.D.

- Graduate Program: Palo Alto University, 2016
- Internship: Martinsburg VA Medical Center, Martinsburg, WV
- Post-doctoral residency/fellowship: Charlie Norwood VA Medical Center, Augusta, GA in the Interprofessional Team-Based Care program
- Current position: Staff Psychologist, Integrated Behavioral Health Clinic; Psychology Training Program Executive Team Member
- Professional interests: Sexual health and sexual medicine, sexual health through the adult lifespan, brief assessment and treatment of neurocognitive disorders, sleep [treatment], health behavior interventions, and LGBT health.
- Personal interests: Intellectual pursuits, (NHL) hockey = happy place. Self-care includes my 2 corgis and indoor and outdoor activities.

Interdisciplinary Pain Management Team

Anahita Kalianivala, Ph.D.

- Graduate Program: University of North Carolina at Greensboro, 2019
- Internship: Memphis VA Medical Center with Clinical Health emphasis
- Post-doctoral residency/fellowship: Stanford University School of Medicine Pain Management Center
- Current position: Clinical Pain Psychologist within Pain Management Team
- Professional interests: holistic, integrative, mind-body practices that support individuals' self-healing in an interdisciplinary setting. Treatment of chronic pain with interventions such as CBT for Chronic Pain, ACT, mindfulness, self-compassion, clinical hypnosis, and biofeedback.
- Personal interests: Eating baked goods, random dancing with my dog, yoga, Reiki, and enjoying the Sierra Nevada landscape.

Current and Past Trainees

Our cohort for 2023-24 consists of trainees from:

- Pacific University
- Cal Northstate University
- Ball State University
- The Wright Institute

From 2022-23:

- The Wright Institute
- University of Indianapolis
- CUNY – City College
- Xavier University

From 2021-22:

- Alliant/CSPP Sacramento
- Alliant/CSPP San Diego
- University of Nevada – Reno
- Pacific University, Portland, OR

From 2020-21:

- Alliant/CSPP San Francisco
- Palo Alto University
- University of Notre Dame
- Fielding University



Rafting down the Truckee River



Reno Rodeo – 104 years and counting

From 2019-20:

- University of Nevada - Las Vegas
- University of Nevada – Reno
- Argosy University
- Alliant/CSPP San Francisco

From 2018-19:

- The Wright Institute
- PGSP – Stanford Consortium
- LaSalle University
- University of Nevada - Reno

Other programs from which we have received interns in past years have included:

- Rosemead School of Psychology
- Jackson (Mississippi) State University
- Alliant University/CSPP Los Angeles
- University of Denver
- Northern Illinois University

After graduation, our interns have moved on to a variety of professional positions. We are proud that six of our current staff psychologists are former interns. The majority of our interns secure either post-doctoral training positions or employment in professional psychology upon completion of our program. For the five cohorts with us between 2019 and 2023, 12 of those 19 who finished our program secured post-

doctoral training positions or immediate employment in VA medical centers (Northern California; San Francisco; Tampa, FL; Houston, TX; Palo Alto, CA; Battle Creek, MI; Albuquerque, NM; Prescott, AZ; and Denver, CO). Other post-doc placements and employment sites for our interns in that 5 year span have included Kaiser Pleasanton, CA; Kaiser Hospital, Union City, CA; University of Nevada – Reno Counseling Center; the Feeling Good Institute, Mountain View, CA; the UCLA Hispanic Neuropsychiatric Center, Dept of

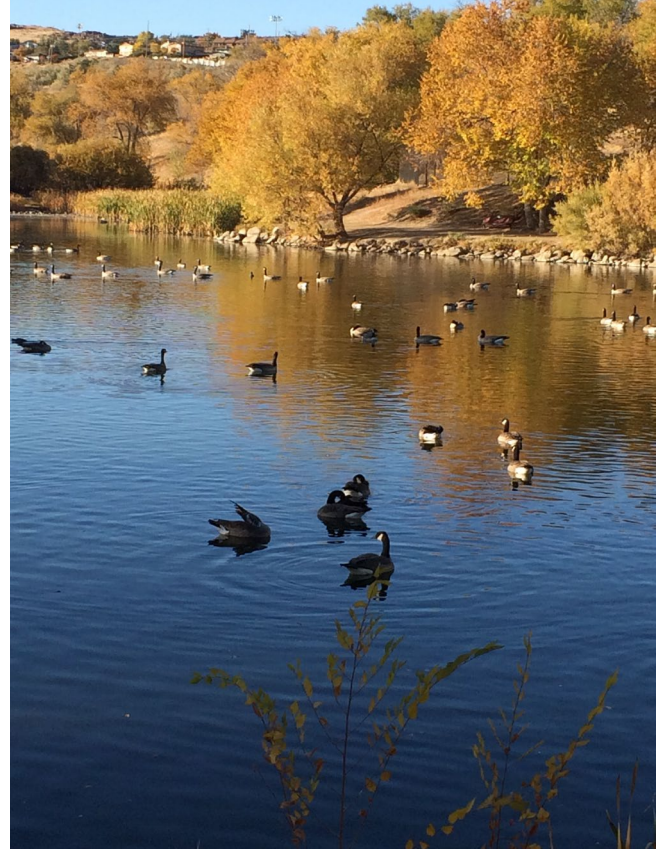
Psychiatry and Biobehavioral Sciences, Los Angeles, CA; and the Rush University “Road Home” Program, Chicago, IL). The types of positions into which our graduates have entered since 2000 have included VA medical centers, medical school faculty positions, various post-doctoral residencies including university counseling center programs, and private practice. Typically, our former interns have become licensed psychologists within a year or two of graduation, many in the states of Nevada and California.



Tahoe Meadows: hike in summer, snowshoe in winter



September - Hot Air Balloon Races



Local Information

The VA Sierra Nevada Health Care System serves one of the largest geographical areas in the VA system. This area includes much of northern Nevada and northeastern California (some 380,000 square miles) with an estimated veteran population of close to 53,000. Our system also includes outpatient VA clinics located in Minden, NV, Fallon, NV, and Susanville, CA.



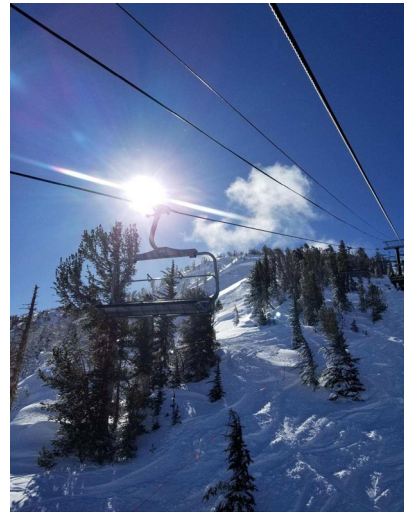
Mt. Rose Ski Resort, looking north toward Reno

The Reno-Sparks area and surrounding Truckee Meadows, located at the base of the eastern slope of the Sierra Nevada, has a population of about 456,000. At an elevation of 4,400 feet, Reno's climate is generally sunny and dry, with wide variations in temperature during a 24-hour period.

Updated August 2023



Half Dome, Yosemite National Park



Mt. Rose Ski Resort

Reno is just minutes away from the majestic Sierra Nevada range, with its lush pine forests and crystal-clear lakes. Beautiful Lake Tahoe, about an hour's drive from Reno, is known around the world for its year-round recreational opportunities. The Reno/Tahoe area contains the world's largest concentration of ski resorts - 19 in all - and has an unusually long ski season most years. Yosemite National Park, an international treasure, is just a 3-hour drive from Reno, and numerous other opportunities for adventure and exploration are all within an easy day's drive as well. There are bountiful high desert areas nearby, too, complete with ghost towns, mining sites, and historical communities such as Virginia City, the location of the Comstock gold strike of the 1850s. Our area offers many exciting opportunities for outdoor recreation, including hiking and backpacking, biking, kayaking and river rafting, boating, fishing, hunting, camping, and, of course, skiing (both downhill and cross-country).



West End Beach at Donner Lake



Sierra Buttes range northwest of Reno

A wide variety of social and cultural activities are offered throughout the year in Reno. These range from big-name entertainment to community theatre, opera, ballet, community concerts, exhibits at Reno's excellent art museum, and activities held on the University of Nevada-Reno campus. Popular annual events include the month-long ArTown festival, the Hot Air Balloon Festival, Hot August Nights, Burning Man, the Italian Festival, September's National Championship Air Races, Best of the West Rib Cookoff,

Street Vibrations, and much more. Many of our former interns from other states have elected to stay in Reno following internship due to the wonderful quality of life here.



Wild horses create a picture of serenity in the Virginia Range



Dog sled races present an exciting winter diversion!

Both Carson City, one of the nation's smallest state capitals, and Virginia City, a mining town founded in 1859 and preserved much the way it was during the great Comstock Lode silver strike days, are just a short drive away. Northern California is also easily accessible, with flight time to San Francisco less than an hour, and driving time to Sacramento only two hours.

We welcome your interest in VA Sierra Nevada Health Care System and look forward to answering any additional questions you may have about our training program, the medical center, and the Reno area!

Some helpful links:

[Visitor's Guide | Reno + Sparks Chamber of Commerce \(thechambernv.org\)](#)

[Reno Tahoe Iconic Events | Visit Reno Tahoe](#)

[Reno Restaurants and Lake Tahoe Restaurants | Food in Reno Tahoe \(visitrenotahoe.com\)](#)

[Top 10 Festivals In Reno, Nevada | Trip101](#)

[Calendar • This Is Reno](#)

[The BEST Reno Summer Activities 2023](#)

[Artown](#)

[Event Schedule | Hot August Nights | Classic Cars and Rock N' Roll](#)

[Street Vibrations Fall Rally](#)

[Virginia City Nevada - Virginia City \(visitvirginiacitynv.com\)](#)

Program Tables - Admissions, Support, and Placement Data

Date Program Tables are updated: 8/9/23

Program Disclosures	
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?	No
If yes, provide website link (or content from brochure) where this specific information is presented:	NA
Internship Program Admissions	
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:	
<p>Applicants must meet the following prerequisites to be considered for our program:</p> <ol style="list-style-type: none"> 1. Doctoral student in a clinical or counseling psychology program accredited by the American Psychological Association (APA) or the Canadian Psychological Association (CPA) 2. Approval for internship status by the graduate program training director 3. A minimum of 400 direct intervention and 100 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. 4. U.S. citizenship 5. Male applicants born after 12/31/1959 must have registered for the draft by age 26 6. Matched interns are subject to fingerprinting, background checks, and urine drug screens. Match results and selection decisions are contingent on passing these screens. 	

<p>Selection Process</p> <p>Completed applications are initially reviewed by the Training Director to screen for basic eligibility. Enrollment in an APA- or CPA-accredited doctoral PhD or PsyD program in Clinical, Counseling, or Combined psychology or a Psychological Clinical Science Accreditation System (PCSAS) accredited program in Clinical Science is required. Persons with a doctorate in another area of psychology who meet the APA or CPA criteria for re-specialization training in Clinical, Counseling, or Combined Psychology are also eligible. Completion of the dissertation/project proposal is required. Applicants must be approved for internship by their program's Director of Clinical Training. After initial review by the Training Director, applications meeting basic eligibility requirements are reviewed by two staff psychologists and then ranked according to a number of specific criteria, including number of practicum hours, assessment and intervention experience; variety and quality of practicum placements; and letters of recommendation. Applicants' introduction letters and responses to essay questions on the AAPI application are also reviewed to gauge the "goodness of fit" between the student and our training site. We seek applicants who have a strong academic foundation from their university program and who have acquired basic skills in evidence-based assessment and intervention techniques through their practicum experiences.</p>	
<p>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:</p>	
<p>Total Direct Contact Intervention Hours</p>	<p>Yes, Amount = 400</p>
<p>Total Direct Contact Assessment Hours</p>	<p>Yes, Amount = 100</p>
<p>Describe any other required minimum criteria used to screen applicants:</p>	
<p>The program does not have additional screening criteria.</p>	
<p>Financial and Other Benefit Support for Upcoming Training Year*</p>	

Annual Stipend/Salary for Full-time Interns	33,469
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?	Yes
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?	Yes
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)	
Total # of interns who were in the 3 cohorts	12
Total # of interns who did not seek employment because they returned to their doctoral program/are completing doctoral degree	0
Academic teaching	PD=0, EP=0
Community mental health center	PD=0, EP=0
Consortium	PD=1, EP=0
University Counseling Center	PD=2, EP=0
Hospital/Medical Center	PD=1, EP=0
Veterans Affairs Health Care System	PD=6, EP =1
Psychiatric facility	PD=0, EP =0

Correctional facility	PD=0, EP =0
Health maintenance organization	PD=0, EP =0
School district/system	PD=0, EP =0
Independent practice setting	PD=0, EP =1
Other	PD=0, EP =0
<p>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.</p>	