

VA



U.S. Department of Veterans Affairs

VA Long Beach Healthcare System

Psychology Practicum Program



VA Long Beach Healthcare System
Tibor Rubin Medical Center
5901 East 7th Street (06/116B)
Long Beach, CA 90822
(562) 826-5604

<http://www.longbeach.va.gov/>

<https://www.va.gov/long-beach-health-care/work-with-us/internships-and-fellowships/psychology-training/>

Accreditation Status

The psychology internship and postdoctoral residency programs at the VA Long Beach Healthcare System are accredited by the Commission on Accreditation of the American Psychological Association. Questions related to the program's accredited status should be directed to the Commission on Accreditation:

Updated September 14, 2023

Office of Program Consultation and Accreditation
American Psychological Association
750 1st Street, NE, Washington, DC 2002
Phone: (202) 336-5979 e-mail: apaaccred@apa.org
Internet: <http://www.apa.org/ed/accreditation>

Accreditation does not have bearing on practicum students, although does reflect the high quality of training our program will provide.

Application and Selection Procedures

The Psychology Practicum Program at VA Long Beach Healthcare System accepts applications from psychology doctoral students from the following programs:

- (1) Fuller Theological Seminary, School of Psychology
- (2) Loma Linda University (LLU)
- (3) Pepperdine University
- (4) Rosemead School of Psychology/Biola University
- (5) University of California, Los Angeles (UCLA)
- (6) University of Southern California (USC)
- (7) Azusa Pacific University (APU)

We will offer 3 practicum student positions across all of the doctoral programs for the 2024-2025 training year.

Practicum Start Date: July 29, 2024

Mandatory Orientation Week: August 12-16, 2024 (Orientation may be in-person)

Practicum End Date: July 25, 2025

Practicum students are expected to be on-site (in-person or telehealth, depending on the rotation) for 16 hours per week under the clinical supervision of their primary rotation supervisor, which is typically divided across two days. These days are determined during orientation week based on practicum student availability and clinical training opportunities. For more information regarding clinical training opportunities, please see "Program Structure" section below.

Practicum students will complete a full 52-weeks of training, beginning on Aug 5, 2024 and ending on Aug 1, 2025. Accommodations can be made for practicum students who need to travel for internship interviews, complete practicum early, or dissertation defense.

Application deadlines and interview notification dates are listed below.

Application Deadline: By January 19, 2024 @ 11:59pm

Interview Notification Date: By January 29, 2024 @5:00pm

Offer Notification Date: By February 8, 2024 @5:00pm

Application procedures vary by doctoral program; however, all applicants must submit:

1. Cover letter
2. CV
3. Two letters of recommendation, at least one letter from a prior/current clinical supervisor.

Please consult with your program for more details regarding the application process. All application materials should be emailed directly to the Associate Director of Predoctoral Training, Grace Kim, Ph.D., at grace.kim8@va.gov.

Candidate Interviews

All application materials will be reviewed by the Associate Director of Predoctoral Training, Dr. Grace Kim, as well as the Director of Psychology Training, Dr. Leela Farina. Candidates will be informed via email by January 29, 2024 as to whether or not they have been invited for a personal interview. Exact interview dates and times are TBD, but will occur during the first week of February 2024. Interviews will all be virtual this year. They will be 30 mins in duration and conducted by Drs. Kim and Farina.

Please contact the Associate Director of Predoctoral Training and/or the Director of Psychology Training if you have any questions.

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VA Eligibility Requirements

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 following the selection process, and the following requirements will apply prior to that appointment

1. **U.S. Citizenship.** HPTs must be U.S. citizens.
2. **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, however 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.
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/agreements.asp> (see section on psychology internships).
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 must complete and sign this letter. Your VA appointment cannot happen until the TQCVL is submitted and signed by senior leadership from the VA facility. For more information about this document, please visit <https://www.va.gov/OAA/TQCVL.asp>
 - 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 protects you, other employees and patients while working in a healthcare facility. Required are annual tuberculosis screening, Hepatitis B vaccine as well as annual influenza vaccine and the COVID-19 vaccine. The flu vaccine and COVID-19 vaccine are mandatory for all VA trainees and staff, except in the rare case of a documented medical exemption or deeply held religious beliefs that precludes being vaccinated.
 - 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 <https://www.va.gov/oaa/app-forms.asp>. 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.oit.va.gov/programs/piv/_media/docs/IDMatrix.pdf

Additional information regarding eligibility requirements for appointment as a VA psychology HPT can be found at the following links:

- <https://www.psychologytraining.va.gov/eligibility.asp>
- <https://www.psychologytraining.va.gov/docs/Trainee-Eligibility.pdf>

Psychology Setting

Our VA Long Beach Healthcare System includes the main medical center complex in Long Beach, as well as five community-based outpatient clinics (CBOCs) located in West Long Beach (Villages at Cabrillo), Anaheim, Laguna Hills, Santa Ana, and Santa Fe Springs. VA Long Beach is a part of the Veteran's Integrated Service Network (VISN) 22, which also includes the New Mexico VA, Northern Arizona VA, Phoenix VA, Southern Arizona VA, San Diego VA, Loma Linda VA, and the Greater Los Angeles Healthcare System consisting of the West Los Angeles VA, the Sepulveda VA Ambulatory Care and Nursing Home, the Los Angeles Ambulatory Care Center, and outlying clinics. Our medical center has been undergoing extensive renovation with two large new buildings, and it is located adjacent to California State University Long Beach. Residents from the University of California at Irvine (UCI) Medical School rotate through Long Beach Memorial Medical Center, VA Long Beach, and UCI Medical Center, which is 13 miles east of us.

Established in 1947, the Psychology Training Program has always been considered a significant component of mental health services and it has been fully integrated into the VA Long Beach Healthcare System. Since 1980, we have trained 322 doctoral interns, representing over 100 graduate programs from around the country. The internship program was initially granted accreditation by the American Psychological Association in February 1980. Also, for many years we have been training practicum students (please see "Current and Former Practicum student" section below), typically from local universities, as well as postdoctoral residents.

Most staff psychologists are members of the Mental Health Care Group and our Chief of Mental Health is psychiatrist, Lawrence Albers, M.D. Our Chief Psychologist is Vanessa Hurwitz, Ph.D. Our Director of Psychology Doctoral Internship Training Programs is Leela Farina, Ph.D., and our Director of Psychology Post-Doctoral Training Programs is Spring Johnson, Ph.D. Christine Kim, Ph.D. and Grace Kim, Ph.D. are the Associate Directors of Psychology Training, coordinating the Neuropsychology Clerkship practicum program and the Psychology practicum program respectively. The Directors of Training are advised by the Executive Training Committee. Over half of our training psychologists have been hired in the past 10 years. We also have one psychology technician who manages our psychological testing lab.

We provide generalist training within the context of a VA healthcare facility. Like all VA training programs we primarily serve adult veterans and some active military service members, the majority of whom are male, although an increasing percentage of younger veterans and active duty service members are women. Because we are also a general medical and surgical facility

as well as a broad provider of psychological and psychiatric services, we have many opportunities for a health psychology focus.

Training Model and Program Philosophy

Our Psychology Training Program at the VA Long Beach Healthcare System is committed to close supervision and competency-based training in a highly collegial setting. We endorse the scientist-practitioner model of psychology, and the practicum training experience is organized accordingly. We are guided by both the original Boulder Model (Raimy, 1950) and the update of the scientist-practitioner model as articulated at the 1991 Gainesville conference (Belar & Perry, 1992).

Practicum students are expected to be developing a solid grounding in the science of psychology. We can teach generalist psychology and empirically supported treatments, but we have to assume that our trainees come with the underlying scientific rigor that can only be provided by their undergraduate and graduate programs. Although our psychology staff provides a number of specialized services, we believe that training in clinical and counseling psychology at the doctoral level should be broadly based rather than narrowly focused so trainees can immerse themselves in new areas of clinical endeavor to prepare them for practicum and beyond. Primary areas of skills are in clinical assessment and intervention, consultation, research and other scholarly inquiry, and awareness of and sensitivity to professional, ethical, legal, and diversity issues. The degree of responsibility given the practicum student and the amount of structure provided depends on his or her level of prior experience and grasp of the particular rotation.

Our psychology training program, staff, and leadership are committed to increasing multicultural competence as a major objective of training. We benefit from the rich diversity of our staff, trainees, veterans, and our local Long Beach community, and we are committed to infusing diversity discussions and training into every aspect of our program, including individual and group supervision, didactics, grand rounds, and seminars. We expect that trainees will be committed to increasing their own multicultural competence through a variety of means, including tailoring treatment interventions and assessment approaches through an intersectional lens, genuine and at times potentially uncomfortable self-reflection in supervision and seminars, engaging in local and national VA diversity and inclusion training opportunities, and consultation with our diverse interprofessional staff.

Program Structure

***For information on the adjustments we have made to training during COVID-19 pandemic restrictions, please see the addendum at the end of this brochure. We have no way of knowing whether or how the pandemic will impact training during the 2024-2025 training year, but please know we are prioritizing trainee and veteran health and safety during this time and have been flexible in adapting to changes as they are needed while maintaining a high quality training program that addresses trainee goals and needs. We plan to continue to be flexible as the situation evolves and appreciate the flexibility of our potential applicants, interviewees, and trainees as we navigate this together.**

Training Schedule and Rotations

After hearing presentations by all the staff psychologists describing their rotations (entire list of available rotations is listed below in "Training Experiences" section) and associated training experiences during orientation week in August, practicum students will meet with Dr. Grace Kim to discuss preferred rotations and supervisors for the training year. Rotation schedules will ultimately be determined by Dr. Grace Kim at the end of the orientation week. Practicum student preferences, availability, and areas of specialization are strongly considered when determining these rotation schedules. However, if practicum students have gaps in their training, it is important to fill those gaps throughout the training year. Practicum students' rotations will also be assigned after the psychology interns' rotation schedules have been determined, thus potentially limiting the number of available rotations. Please note that while Dr. Grace Kim will do her best to accommodate practicum student preferences, no specific supervisor or rotation is guaranteed.

Practicum students will complete two consecutive 6-month rotations. A visual depiction of the training year schedule is listed below:

First 6-months (August – February)	Second 6-months (February – August)
Rotation 1	Rotation 2

Supervision

Supervision of clinical rotations: Each practicum student will have two primary licensed staff psychologist supervisors throughout the year (one on each rotation) who are each responsible for the training experiences on their specific rotations. Supervisors assist in selecting patients and making referrals, representing Psychology with the practicum student in team meetings, and scheduling individual face-to-face and perhaps some group supervision sessions. Practicum students can expect at least 1 scheduled hour of face-to-face individual supervision from their primary rotation supervisor per week. Practicum students may also receive additional supervision from delegated supervisors within their rotations, and there are opportunities for informal training with interns and postdoctoral residents in group formats.

Supervision from psychology intern/postdoctoral residents: Practicum students will also be supervised on a general psychotherapy case by a psychology intern/postdoctoral resident during both rotations throughout the training year (1 case each 6-month period). 2.5 hours per week (out of the 16 hours) will be allocated to this training experience: 1 hour for the provision of therapy for a general psychotherapy case, 1 hour to meet with intern/resident for 1:1 supervision, and 0.5 hour for administrative duties related to the therapy case. Audiotapes/Digital Recordings of the psychotherapy session as well as of the supervision meetings may be reviewed during the intern/resident group supervision of supervision seminar to facilitate best practices in clinical patient care and supervision.

Practicum Program Seminar

Practicum students will also participate in the practicum program seminar, facilitated by Dr. Grace Kim. The day and time of the seminar will be determined during the 2nd week of the training year based on practicum students' scheduling availability. During the first 4-6 weeks of each rotation, the seminar may be held on a weekly basis to help promote orientation to VA Long Beach's policies and services and address any practicum student questions. Afterwards, the seminar will be held on a biweekly basis. The seminar will include a combination of topics

relevant to the VA clinical setting, address innovations and trends in psychology, encourage development of intersectional multicultural competence, as well as professional development.

Workload/Time Allocation

As noted above, practicum students are expected to work 16 hours per week, over the course of two days. The training program can also include rotation-specific educational opportunities such as seminars and case conferences, depending on the practicum student's rotation schedule.

During the first month of the training year, practicum students are expected to identify their training goals and to work with their rotation supervisors to develop a schedule of activities for the year designed to meet these goals. The conceptualization going into the Individualized Training Plan (ITP) should involve self-assessment together with discussions with the supervisors to facilitate personal and professional growth and development.

A breakdown of the encouraged weekly time distribution across programmatic and clinical rotation experiences is listed below:

Programmatic Experiences:	Clinical Rotation Experiences:
General Psychotherapy Case and Supervision by Psychology Intern: 2.5 hours/week	Clinical Time: 8-9 hours/week*
Practicum Program Seminar: 0.5 hours/week	Administrative Time: 4-5 hours/week*
TOTAL = 3 hours	TOTAL = 13 hours

*The time allocation for clinical rotation experiences will differ depending on clinical rotation.

Additional Opportunities

Practicum students are welcome to participate in any of the additional opportunities listed below. Please receive approval from your supervisor prior to attending the non-lunch time meetings.

Evidence-Based Practice (EBP) Seminar: This seminar is held weekly on Tuesdays from 8:00 – 9:00am and is coordinated by Dr. John Huang. Presentations will cover didactics on a wide range of EBPs offered throughout the VA as well as case presentations/consultations demonstrating application of these EBPs on clinical rotations. Practicum students are welcome to attend on a weekly or PRN basis based on EBP topic and availability. Participation is *optional* and contingent upon approval from each practicum student's supervisor(s). Be advised that practicum students are here only two days a week and may want to prioritize clinical casework over formal didactic seminars. However, many rotations have informal, rotation-specific didactics that can satisfy this training opportunity.

Mentorship: In addition to supervision, practicum students have the option of receiving professional mentorship from psychology staff. A list of available mentors will be provided at the beginning of the training year. The role of a mentor is non-evaluative and flexible (CA-licensed is not required) and the mentor does not serve as a supervisor to the practicum student at any point in their training experience.

Other Didactics: There are many other didactic training opportunities, available through TMS at <https://www.tms.va.gov/plateau/user/login.jsp>, neighboring Southern California VA's, and our VA regional network VISN 22. Please request permission from your supervisors and Dr. Grace Kim to attend any day-long workshops/seminars that will take you away from your training.

Training Experiences

Below is a list of clinical rotations that are available for psychology practicum students at the VA Long Beach Healthcare System for the 2024-2025 training year. Please note that this list is subject to change due to changes in staffing or the development of new rotations. More information about the supervisors can be found in the “Psychology Training Staff Credentials and Interests” section below.

1. **Acute Inpatient Psychiatric Unit**
2. **Blind Rehab Center (BRC)**
3. **Couples Therapy**
4. **Outpatient Mental Health – Behavioral Health Interdisciplinary Program (BHIP)**
5. **Outpatient Mental Health – Laguna Hills Community Based Outpatient Clinic (CBOC)**
6. **Primary Care-Mental Health Integration (PC-MHI)**
7. **Program for Traumatic Stress (Combat PTSD)**
8. **Spinal Cord Injury/Dysfunction (SCI/D)**
9. **Suicide Prevention**
10. **Women's Mental Health Clinic (WMHC)**

1. Acute Inpatient Psychiatric Unit

Supervisor: Wes Cook, Ph.D.

Program: The Local Recovery Coordinator (LRC) psychologist will offer supervision on the Acute Inpatient Psychiatric Unit. Trainees will work with an interdisciplinary team in providing care to Veterans hospitalized psychiatrically. Trainees will get an opportunity to work with Veterans with severe mental illness (SMI). Diagnoses treated include schizophrenia spectrum disorders, bipolar disorders, major depressive disorder, PTSD, substance use disorders, and personality disorders. The focal population will be an adult unit, with additional opportunities working on a geriatric unit depending upon need and interest.

Psychology Training Provided: This rotation can be adapted based on the trainee's interests and experiences, but will generally include the following:

- Trainees will obtain experience co-leading and eventually leading process and psychoeducational inpatient groups (e.g., brief integrative approaches).
- Trainees will gain experience with conducting individual therapy with Veterans on the unit (e.g., brief integrative approaches, MI, solution focused, and supportive).
- Trainees will obtain experience being a member of an interdisciplinary team. This includes attending rounds with psychiatrists, psychiatry residents, nursing staff, occupational therapists, social workers, and chaplains. If the team has difficulty with a patient's presenting issues, Psychology may be called upon to help with

consultation, behavior management, assessment, diagnosis, and treatment planning.

- Trainees may have the opportunity to develop administrative knowledge and skills through attending and participating on a variety of committees depending upon need and interest: Disruptive Behavior Committee (DBC) with potential to conduct violence risk assessments, Mental Health Summit Planning Committee, SMI Re-Engage Outreach Program, Inpatient Interdisciplinary Treatment Programming Committee, Mental Health Interdisciplinary Safety Inspection Team, REACH Vet, and National Calls (LRC, DBC, SMI Re-Engage, Inpatient, and Measurement Based Care).

Note: This rotation requires trainees to be on-site and meet with Veterans on the Unit.

2. Blind Rehabilitation Center (BRC)

Supervisor: Ashley A. Vaillancourt, PhD

Program: The Major Charles Robert Soltes, Jr., O.D., Blind Rehabilitation Center (BRC) is a 24-bed residential, inpatient rehabilitation program. Veterans or active duty service members who are legally blind or have functional visual impairments are referred to the center for blind rehabilitation from various VA's. We are one of 13 VA Blind Rehab Centers. Patients range in age from their late teens to their 100s but the majority of patients are older veterans in their 60s to 90s with legal blindness and others health conditions that may or may not be related to their vision loss (e.g., Diabetes, Hypertension, COPD). A smaller subset of returning Veterans with traumatic brain injuries or other neurological conditions and vision loss participate. The comprehensive rehabilitation training program is comprised of a variety of disciplines including Blind Rehabilitation (i.e., Living Skills, Manual Skills, Orientation & Mobility, Visual Skills, and Accessible Technologies), Medicine (i.e., Nurse Practitioner, Attending Physician), Nursing, Optometry, Psychology, Recreation Therapy, and Social Work.

The psychologist and intern work closely with the above interdisciplinary team members to develop individualized rehabilitation treatment plans. Assessments are completed regarding adjustment to vision loss/blindness, cognitive functioning and overall mental and behavioral health. Interventions include: disability affirmative psychotherapy, individual and group psychoeducation, stress reduction/relaxation training, and family education. More comprehensive neuropsychology testing opportunities available as clinically indicated.

Psychology Training Provided: Interns obtain experience in reviewing medical records and observing and evaluating Veterans participating in the blind rehabilitation training program. As part of the assessment, interns will assess the psychological functioning of each patient as well as their adjustment to vision loss/blindness and coping mechanisms, including social support. In addition, during the initial assessment, interns will conduct cognitive screening exams. Training will include use of modified or alternative assessment tools appropriate to visually impaired and blind persons.

Following the initial assessment, interns will be expected to produce a written report that will be shared with interdisciplinary team members working with the Veteran in a timely fashion and written in a manner that is suitable for a rehabilitation setting. Furthermore, interns will have the opportunity to assist Veterans to identify or develop coping strategies and deliver brief, evidence-based interventions focused on promoting rehabilitative gains and self-efficacy. Similarly, interns will have the opportunity to deliver group and family education programming as well as didactics to interdisciplinary team members. Interns also gain considerable experience working with interdisciplinary medical teams utilizing the consultation-liaison framework as well as develop a specialty knowledge base with regard to blindness, rehabilitation psychology, health psychology, and geropsychology. Depending on the interest of intern, there is opportunity to gain experience with neuropsychological testing. The knowledge and skills learned on this rotation are not unique to blind rehabilitation and can be generalized to other medical and rehabilitative populations. As such, this rotation can be particularly valuable in helping increase marketability for individuals hoping to work in a medical or rehabilitation setting.

EBP opportunities: Cognitive Behavioral Therapy; Motivational Interviewing

Assessment opportunities: Neurocognitive screening (MoCA for the Blind, Oral TMT A&B) and more comprehensive neuropsychology evaluations

Cultural Competence Training: Trainees will be provided with the opportunity to learn about disability through a disability affirmative framework and how to adapt evidence-based treatment approaches in the context of this cultural lens. Trainees will become familiar with special considerations in working with Veterans with vision loss/blindness and learn how to advocate from inclusivity and promote disability affirmative competence in VA/medical setting. Majority of our Veterans also present with chronic health conditions, often in the context of aging, that present with unique opportunities to understand the way these factors, in addition to other salient identity variables (race, religion, sexual/gender identity, education, SES, cognitive status) may intersect.

Note: This rotation requires trainees to be on-site and meet with Veterans at bedside. No teleworking/telehealth options available.

3. Couples Therapy

Rotation availability TBD, pending staffing.

Program: This rotation offers training in the specialty area of couples therapy with a minor emphasis on family outreach, support, and education. Couples are referred to this rotation by other providers from throughout the healthcare system, leading to diverse presentations.

Psychology Training Provided: opportunities include Integrative Behavioral Couples Therapy (IBCT) and Cognitive Behavioral Conjoint Therapy (CBCT) for PTSD. Assessment opportunities are on a training-needs basis.

Couples psychologists bring both research and clinical experience working with couples, and approach their work from evidence-based modalities depending on the clinical presentation and case conceptualization. There is a strong emphasis on case conceptualization based in attachment theory with attention to cultural factors in the conceptualization of relational dynamics. Supervisees can expect to focus heavily on learning and/or expanding skills in IBCT with a minor emphasis on CBCT if interested and appropriate (i.e., primarily for trainees with prior exposure to or experience in trauma-focused treatments). Couples psychologists also employ methods emphasized by the Gottman approach, and DBT particularly in her treatment of high-conflict couples. Trainees on this rotation will receive individual supervision, and group supervision if available.

EBP Opportunities: Integrative Behavioral Couples Therapy (IBCT), Cognitive Behavioral Conjoint Therapy (CBCT) for PTSD.

Group Therapy Experiences: Trainees may have opportunities to co-lead the following groups, based on their interest and schedules and group availability.

- **Cognitive Behavioral Conjoint Therapy for PTSD (CBCT-PTSD) Couples Group:** This is a time-limited, evidence-based therapy for couples when at least one partner has a diagnosis of PTSD. CBCT-PTSD focuses on how the couple's interactions maintain individual distress, and aims to reduce the impact of PTSD on the Veteran and the relationship. The treatment involves components that may look similar to IBCT (e.g., time-outs, improving communication), CPT (e.g., stuck points, cognitive restructuring), and PE (e.g., reducing avoidance, increasing engagement). Supervisees will co-facilitate.
- **Secure Foundations: Couples Growing Together (Couples Graduate Group):** Secure Foundations is a part-process, part-psychoeducation group therapy for couples who are no longer in acute distress but desire to continue improving their relationship. Supervisees will co-facilitate to help couples build a deeper understanding of one another, improve communication skills, and give/receive support from other couples. Supervisees will co-facilitate if/when this group is available.

Family Education, Treatment, and Community Outreach: Trainees may have an opportunity to triage and coordinate care for Veterans seeking parenting or family-oriented services.

Cultural Competence Training: As Salvador Minuchin said, "Every relationship is a cross-cultural experience." On this rotation, trainees have the opportunity to work with diverse couples and families. Moreover, we conceptualize relational distress from a multicultural model, and explore the therapeutic process with attention to the intersectionality of identities, perceptions, experiences, and relationship values that are based in cultural values and norms. We view identity as a core aspect of individual and

relational experience, and make space regularly in our supervision for discussion, reflection, and processing around the intersections of these identities with the therapist's own identity and values, as well as the cross-cultural validity of our EBPs and relational theories, including attachment theory.

4. Outpatient Mental Health – Behavioral Health Interdisciplinary Program (BHIP)

Primary Supervisors: Veronica Palad, Ph.D., Marisa Glivings, Psy.D.*

Adjunct Supervisor: Vanessa Hurwitz, Ph.D.

**Additional hiring underway.*

Program: This rotation offers experience providing outpatient individual and group psychotherapy for Veterans presenting with a wide range of problems including PTSD, Anxiety Disorders, Mood Disorders, Adjustment Disorders, interpersonal and relational difficulties, pervasive emotion dysregulation, substance abuse, cognitive impairments, gender dysphoria and gender transition issues, and co-morbid medical complications. Patients are referred to this rotation by psychiatrists and nurse practitioners from the BHIP mental health teams, Primary Care-Mental Health Integration program, and the Urgent Mental Health Clinic. Clinically, this rotation highlights the use of well-formulated CBT case conceptualizations to guide treatment and clinical decision making. Given the wide range of presenting concerns, training will emphasize a balance between adherence to evidence-based treatment protocols and the flexible use of evidence-based techniques and case conceptualizations to tailor treatment based on individual differences. Trainees will also develop skills in proactively seeking interdisciplinary consultation within BHIP teams and with providers in other services.

Psychology Training Provided: Trainees on this rotation can select Dr. Palad or Dr. Glivings as rotation supervisors depending on their "goodness of fit" and the specific interests of the supervisors and trainees. Supervision will be individual as well as a monthly group case consultation meeting. Please note that the case consultation meeting encourages conceptualization skills as well as eliciting and providing targeted and concise consultation in a busy hospital setting. Trainees will also participate in the BHIP triage clinic two hours per week where they will hone brief assessment and triage skills within BHIP services.

EBP Opportunities: Cognitive Processing Therapy (CPT) for PTSD, Prolonged Exposure (PE) for PTSD, individual therapy informed by Dialectical Behavior Therapy (DBT) for BPD, Cognitive Behavioral Analysis System of Psychotherapy (CBASP) for chronic depression, Acceptance and Commitment Therapy (ACT), Interpersonal Therapy for Depression (IPT-D), Exposure and Response Prevention Therapy (ERP), and Motivational Interviewing (MI). Group treatments include CBT for Depression and Anxiety, Unified Protocol for Emotional Disorders, Trauma Skills, Anger Management, Mindfulness and ACT, and Managing Emotions (informed by DBT Skills).

Assessment Opportunities: Primarily trainees will conduct brief assessments of presenting problems utilizing the Patient Health Questionnaire (PHQ-9), Generalized Anxiety Disorder 7-item (GAD-7) Scale, Alcohol Use Disorders Identification Test

(AUDIT-10), PTSD Checklist for DSM-5 (PCL-5), and the McLean Screening Instrument for BPD (MSI-BPD) for the purpose of triaging therapy needs and developing initial treatment plans. In addition, trainees are encouraged to use paper-and-pencil symptom measures to track treatment outcome. Occasional opportunities for personality assessment and/or cognitive screens utilizing MMPI, PAI, RBANS, and MoCA are available.

Cultural Competence Training: Outpatient mental health (through BHIP) trainees will primarily work with Veterans spanning from the Vietnam era to the current OEF/OIF/OND conflicts era. In addition to the wide array of patient ages, trainees working on this rotation will also see Veterans with diverse racial, ethnic, educational, and socioeconomic backgrounds. Moreover, occasional opportunities to work with LGBT patients also arise within the rotation. Supervisors on this rotation will strive to expose trainees to an intersectional approach to diversity consideration, whereby relevant background factors are taken into account during assessment, treatment planning, and intervention phases of therapy. Common issues associated with working in the VA setting, such as how to deal with encountering various forms of prejudice, will also be discussed.

5. Outpatient Mental Health – Laguna Hills Community Based Outpatient Clinic (CBOC)

Supervisor: Tammi La Tourette, Ph.D. & Mary Jacob Mathew, Ph.D.

Program: The Laguna Hills CBOC is 27 miles south east of VA Long Beach, which is about a 35-minute drive. The clinic serves a diverse population of Veterans and trainees will be exposed to a variety of presenting problems including depression, anxiety, PTSD, chronic pain, acute and chronic medical conditions, relationship difficulties, and anger management.

Psychology Training Provided: Trainees will participate in the triage clinic, as well as provide individual psychotherapy to a diverse population of Veterans. Additional opportunities include co-facilitating psychotherapy groups such as STAIR, ACT for PTSD, and Men's MST Groups.

Because of the nature of the CBOC, trainees can expect to treat a wide variety of presenting problems and obtain a solid foundation of outpatient psychotherapy experience. Trainees on this rotation will have the opportunity to provide individual and group psychotherapy in an outpatient setting. Trainees can be expected to carry a caseload of individual therapy clients, assist in running time-limited therapy groups or process oriented groups, and participate in outreach efforts to the community. Depending on the clinical interest of the trainee, there may also be limited opportunities for long-term therapy, psychological testing, crisis intervention, and primary care consultation as well as opportunities to interact with the Veteran's court and/or VASH program staff. Additional training opportunities may include Gender Affirming Care (assessment for readiness for gender affirming therapies such as hormone replacement therapy and/or surgery) and marital/family therapy. The clinic offers the opportunity to

be part of an interdisciplinary team of psychologists, social workers, nurses, primary care physicians, and an addiction therapist as well as opportunities to interact with other medical services (e.g., optometry, audiology, pharmacy) housed at the clinic.

EBP opportunities: The staff psychologists are trained in Cognitive Behavioral Therapy (CBT), Dialectical Behavior Therapy (DBT), and Skills Training in Affective and Interpersonal Regulation (STAIR).

6. Primary Care-Mental Health Integration (PC-MHI)

Primary Supervisors at LB: Stacy Hardin, Ph.D. & Katherine Courtney, Psy.D.

Primary Supervisor at Placentia & Santa Ana CBOC: Michael Leibow, Psy.D., DrPH

Program: The mission of Primary Care-Mental Health Integration (PC-MHI) is to detect and address a broad spectrum of behavioral health needs among primary care patients, with the objective of prevention, early identification, and short-term treatment of identified problems. A central goal is to support the primary care provider in identifying and treating patients with mental health diagnoses and/or need for behavioral interventions. The aim is to address problems within the Primary Care service context and collaborate with the Primary Care team. Behavioral health visits are brief (generally 20-40 minutes), limited in number (1-6 visits) and are provided in the Primary Care practice area. This model of co-located, collaborative care with embedded behavioral health providers in Primary Care clinics represents a main entry point in the continuum of care which should include “a range of effective delivery methods that are convenient to Veterans and their families” (VA Strategic Plan, 2010, p. 33).

Psychology Training Provided: The PCMH rotation is an interprofessional outpatient mental health service embedded within Primary Care. A primary function of this rotation is to provide trainees with experience and training in providing patient-centered care while working collaboratively with providers from other professions (e.g., psychiatrists, physicians, nurses, and nurse practitioners). PCMH patient referrals are based upon patient request, primary care provider recommendation, and/or cutoff scores on the VA measures of depression, anxiety, and PTSD. Psychology trainees will have the opportunity to provide same-day access to initial PCMH assessments via warm-handoffs from Primary Care teams. Upon initial referral, patients meet with a co-located mental health provider and complete a brief clinical interview and self-report measures. Based on their level of functioning and interests in treatment, patients may be offered a medication consultation with a PCMH psychiatrist, group psychotherapy, and/or brief individual evidence-based psychotherapy with a PCMH psychologist. Within this program, interns will be trained in a wide range of clinical activities, including brief functional assessment and triage, evidence-based psychotherapy, consultation, and coordination of treatment. Treatment modalities commonly used include psychoeducation, behavioral activation, motivational interviewing, mindfulness-based interventions, cognitive behavioral therapy, behavioral medicine interventions/health promotion, and relaxation training. Patients with more severe psychopathology (e.g., bipolar disorder, personality disorders, and psychotic symptoms) and/or impairment are

referred directly to more intensive interventions in the mental health department on a case-by-case basis. After completing the PCMHI rotation, interns will be able to:

- Conduct brief functional assessments
- Triage patients to appropriate level of care including options within PCMHI or referral to specialty mental health
- Provide brief evidence-based interventions for a variety of mental health concerns, including depression, anxiety, anger management, stress management, grief, sleep disturbances, mild substance abuse and PTSD.
- Provide consultation to providers within the Primary Care and PCMHI programs including communication of assessment findings and collaborative treatment planning.

The following groups **based on EBP**s may be available for trainees in the PCMHI rotation:

- CBT for Depression group
- CBT-Insomnia group
- Sleep Class
- Stress Management Group
- MOVE! (Weight Management) Group
- Tinnitus Group
- Tobacco Cessation Group

Interns may have the opportunity to learn these individual evidence-based interventions:

- Cognitive Behavioral Therapy for Chronic Pain (CBT-CP)
- Cognitive Behavioral Therapy for Insomnia (CBT-i)
- Prolonged Exposure-Primary Care
- Problem-Solving Training

Cultural Competence Training: Trainees will work with Veterans from OEF/OIF, Gulf, Vietnam, and Korean eras spanning a wide range of mental health concerns, physical health concerns, and demographic factors. Trainees will learn to tailor interventions effectively by taking into consideration the influence of diversity factors such as age, race and ethnicity, sexual orientation and gender identity, disability status, and other demographic characteristics. Within PCMHI, trainees also have the opportunity to be the first mental health experience for some Veterans, providing the chance to address mental health stigma and cultural considerations regarding treatment engagement. Rich discussions on the cultural influences on interpersonal dynamics and interdisciplinary teamwork, role of psychology in advocacy for underrepresented populations, and gaps in cultural competence will be provided through supervision.

7. Program for Traumatic Stress (Combat PTSD)

Supervisors: Nathaniel Hawkins, Ph.D., John Huang, Ph.D., Daniel Taule-Nadal, Psy.D., & Melissa Stewart-Buret, Psy.D.

Program: The Combat PTSD Program is an outpatient, specialty mental health clinic serving Veterans with a primary diagnosis of combat-related PTSD. Our mission is to promote recovery from Posttraumatic Stress Disorder. Recovery does not mean forgetting past traumas, it means keeping the memories, but no longer suffering from them. Recovery means that the Veteran accepts and acknowledges the reality of past events, accepts all the feelings evoked by the past, and makes a commitment to a present-day focus and to improving the quality of his/her life.

The Combat PTSD Program consists of an interdisciplinary team including psychologists, psychiatrists, social workers, nurses, and support staff. This program follows a “whole health” model, with a goal of treating the body and mind following traumatic events. Emphasis is placed on evidence-based treatments, while offering flexibility and meeting each Veteran’s unique needs with a phase-based approach. Following intake evaluation and admission to the program, Veterans may participate in a variety of treatment approaches including psychopharmacology, trauma-focused therapy (individual and group formats), supportive group therapy, introductory/coping skills groups, relaxation and stress management groups, and additional adjunctive therapy options on their road to program completion and graduation. The majority of clients are male Veterans from either Vietnam era or post 9/11 (e.g., OEF/OIF/OND), though the program also serves a growing number of female combat veterans as well. While Veterans admitted to the program have a primary diagnosis of PTSD, many present with a variety of comorbid conditions (e.g., depression, alcohol/substance abuse, history of childhood trauma, etc.)

Psychology Training Provided: Trainees working within the Combat PTSD Program provide individual and group psychotherapy to Veterans with combat-related PTSD. We offer a variety of evidence-based treatments including Cognitive Processing Therapy (CPT), Prolonged Exposure (PE), Acceptance and Commitment Therapy (ACT), Cognitive Behavioral Therapy for Alcohol and Substance Use Disorders (CBT-AUD/SUD), and Cognitive Behavioral Therapy for Insomnia (CBT-i). Trainees typically carry a caseload of 3-5 individual clients and co-lead 1-3 groups.

Trauma-focused EBPs are offered by all supervisors; however, some training opportunities will vary based on primary supervisor, training interest, and interest of Veterans. At the beginning of the training year, primary supervisors are assigned with consideration for supervisor availability, trainee preference, and training needs/goals.

Training Opportunities may include:

- Cognitive Processing Therapy (CPT)
- SMART Cognitive Processing Therapy (CPT + CogSMART protocol for TBI)
*Pending staffing and Intern interest
- Prolonged Exposure (PE)
- Acceptance and Commitment Therapy (ACT)
- Cognitive Behavioral Therapy for Alcohol and Substance Use Disorders (CBT-AUD/SUD)

- Seeking Safety for PTSD/SUD
- PTSD Coping Skills
- Skills Training in Affective and Interpersonal Regulation (STAIR)
- Mindfulness
- Moral Injury
- Women's Combat PTSD Group
- Cognitive Behavioral Therapy for Insomnia (CBT-i)
- CBT Skills for Depression and PTSD Group
- Combat PTSD Program intake evaluations
- Interdisciplinary team consultation

EBP Opportunities: Cognitive Processing Therapy (CPT), Prolonged Exposure (PE), Acceptance and Commitment Therapy (ACT), Cognitive Behavioral Therapy for Alcohol and Substance Use Disorders (CBT-AUD/SUD), and Cognitive Behavioral Therapy for Insomnia (CBT-i).

Assessment Opportunities: Interns have the opportunity to observe and also conduct intake assessments for admissions into the program which are modeled after the CAPS. Additional measures used include the combat exposure scale, PTSD checklist-5, CSSRS (suicide risk assessment) and Patient Health Questionnaire-9.

Cultural Competence Training: In the Combat PTSD rotation, trainees will work with Veterans across a large age range, from varied ethnic and racial backgrounds, and from a variety of war eras, with most from the Vietnam and recent OIF/OEF theaters. Trainees on this rotation will become familiar with special considerations in working with combat Veterans, gaining insight into military and “warrior” culture and frequently co-occurring issues with alcohol/substance use difficulties, chronic pain, depression, and complications related to TBI. Trainees will gain competence in understanding the barriers that our Veterans have in seeking and receiving treatment, how diversity considerations are critical to case conceptualizations and treatment, and the ways intersecting identity variables, such as race, religion, sexual orientation, education level, physical ability, SES, and cognitive status may intersect with their experience of PTSD and PTSD treatment.

8. Spinal Cord Injury/Disorder (SCI/D)

Primary Supervisors: Natasha Garcia-Willingham, Ph.D., Judy Su, Ph.D., Jeff Shulze, Ph.D.

Adjunct Supervisors: David Kerner, Ph.D. and Sarah Brindle, Ph.D.

Program: The Spinal Cord Injury/Disorder (SCI/D) Health Care Group is the largest SCI center in the United States. It is a thriving program, with some of the greatest resources in the entire hospital. Patients in this setting present a broad spectrum of SCI/Ds, from the newly injured individual facing a catastrophic life change, to the individual injured many years ago who is now coping with decreased functional ability as a result of the aging process. Five staff psychologists, along with interns, practicum students, and postdoctoral fellows, provide mental health and behavioral health services to Veterans

with SCI/Ds on an inpatient and outpatient basis. The inpatient population includes three SCI/D hospital wards, and one 12-resident long-term care facility that provides SCI/D-specific care.

SCI/Ds can result from traumatic injury such as gunshot wound or motor vehicle accident, or from a variety of non-traumatic causes such as multiple sclerosis. Persons with SCI/Ds are classified as either tetraplegic or paraplegic. The tetraplegic (quadriplegic) individual has experienced a traumatic injury or impairment in one or more cervical segments of his or her spinal cord, resulting in sensory and motor loss in the arms, hands, as well as in all areas below the damaged level. Paraplegics have damaged or diseased spinal cords in the thoracic, lumbar, or sacral segments, causing loss of sensory and motor function (paralysis) at the point of injury and below.

SCI/D rehabilitation and treatment demands a broad interdisciplinary approach, both for acute rehabilitation and for ongoing care. The psychologists and interns work within closely-knit teams that include physicians, pharmacists, social workers, rehabilitation therapists, case managers, dietitians, respiratory therapists, psychiatrists, and especially the nursing staffs of the three SCI units. Psychology staff assesses each patient and provide interventions that address a wide variety of adjustment, mental health, and health behavior concerns. Dr. Kerner works with the acute rehab team, but he is not licensed in California. Hence, he has been a perennial favorite supervisor among practicum students. Drs. Brindle, Garcia-Willingham, Shulze, and Su are all California licensed and work with practicum students, Interns, and Postdoctoral Fellows. Frequently-seen problems include adjustment to disability; depression and anxiety; pain; and compliance/adherence concerns. Intervention approaches include individual counseling, education, and psychotherapy, sex therapy, relaxation training, pain management, social skills training, patient education, couples therapy, and psychosocial support for the injured person's family and other social support systems. There is a small neuropsychological testing service housed within SCI/D and trainees have the opportunity for cognitive testing and report writing during this rotation, depending on the availability of referrals. In addition, close consultation with the SCI/D team forms a central part of the psychologist's role.

Psychology Training Provided: Interns obtain experience in observing, evaluating, and facilitating the adjustment of individuals following a disabling injury. The intern learns to promote coping strategies and assist reintegration into meaningful life activities and roles. Interns gain valuable experience working within interdisciplinary medical teams and also within a consultation-liaison framework. It is expected that the intern will fulfill the behavioral health needs of the unit through assessment, consultation, treatment, and the use of appropriate referrals. Longer-term outpatient work is also available, as are opportunities for staff in-service training. The concepts and strategies learned are not unique to the treatment of SCI/D patients, but can be generalized to other medical populations. It is not expected or necessary for trainees to have specific interest in SCI/D per se. Because many job openings for psychologists now require some background working with physicians and medical teams, this rotation is especially useful for interns seeking to enhance their marketability in that area.

Assessment Opportunities: Flexible-battery neuropsychological testing for a variety of referral questions, including establishing cognitive baseline in aging, diagnostic clarification in cognitive decline, questions of capacity for medical decision-making/independent living, and clarifying strengths and weaknesses to inform treatment planning. Patients are mostly (but not all) older adults, and presenting problems/common diagnoses can include Multiple Sclerosis, Vascular Dementia, Traumatic Brain Injury, psychiatric diagnoses, and cognitive decline related to multiple etiologies. Tests administered are determined on an individual basis, depending on the question and factors unique to the patient (e.g., limited use of hands due to SCI), but include measures of a variety of domains. Please note, this is not an assessment-focused rotation, but there are some opportunities for neuropsychological testing and brief cognitive screening.

Assessment opportunities outside the neuropsych clinic in SCI include a structured clinical interview in Annual Evaluation clinic, as well as outcome measures (e.g., Satisfaction with Life Scale) in acute rehab (CIIRP).

EBP Opportunities: CBT, ACT

Group Opportunities: Several opportunities to co-facilitate groups are available and trainees can participate in groups even if they not facilitated by their primary supervisor. These include the ROLLS new injury group for acute rehabilitation patients, a spirituality support group, an adaptive yoga/meditation group, a Women with Disabilities, and an interdisciplinary Multiple Sclerosis (MS) Support Group.

Cultural Competence Training: Trainees will be provided with the opportunity to learn about disability through a disability affirmative framework and how to adapt evidence-based treatment approaches in the context of this cultural lens. Trainees will become familiar with special considerations in working with Veterans with spinal cord injury and related conditions and learn how to expand the role of Psychologists to include advocacy and educators in promoting disability affirmative competence in a medical setting. In addition, our SCI population are often dealing with aging and chronic health problems, and trainees will gain competence in understanding the barriers that older adults and people with disabilities face in seeking and receiving treatment, and the ways other identity variables, such as race, religion, sexual orientation, education level, SES, and cognitive status may intersect with aging and disability.

Note: Most responsibilities require the trainee to be on campus for in-person clinical services, although some remote work may be arranged.

9. Suicide Prevention

Primary Supervisors: Audrey Martinez, PhD; Jared Roush, PhD

Program: Suicide is a major public health issue that disproportionately affects Veterans. The VA has since embraced suicide prevention as its top clinical priority.

The Suicide Prevention Program (SPP) is comprised of a multidisciplinary team including Suicide Prevention Coordinators (SPC) and Suicide Prevention Case Managers (SPCM) who act as champions for the VA's public health approach to suicide prevention and supports suicide prevention initiatives throughout the VA Long Beach Healthcare System. SPP is a unique program that offers support to both Veterans and clinical staff. SPP team members engage in consultation with health care providers regarding suicide risk assessment and suicide risk mitigation strategies, and they engage in chart review to assist in making a determination regarding activating High Risk for Suicide Patient Record Flags. The SPP team routinely conducts comprehensive suicide risk evaluations and may provide time-limited, evidence-based psychotherapy for suicide prevention, including safety planning and lethal means safety counseling. Additional emphases in SPP include providing postvention services to staff and family after a death by suicide, responding to referrals from the Veterans Crisis Line, education to staff on topics related to suicide prevention, and community outreach.

On the Suicide Prevention rotation, trainees provide outreach, assessment, monitoring, and psychotherapy services for Veterans at high risk for suicide. The Suicide Prevention rotation offers focused training in suicide risk assessment and mitigation, evidence-based treatment for suicide prevention, and interdisciplinary collaboration in support of suicide prevention initiatives. Training opportunities will primarily occur within the Suicide Prevention Program, but there may also be opportunities to collaborate with providers from other service areas. Over the course of the training rotation, interns will learn to conduct evidence-based comprehensive suicide risk assessments, safety planning, lethal means safety counseling, provide time-limited psychotherapy for patients, and gain exposure to suicide prevention process improvement efforts that occur across the facility.

Psychology Training Provided: The intern on the Suicide Prevention rotation provides psychological assessment, treatment, and consultation services in SPP. Training will focus on recovery-oriented care and suicide prevention across both clinical and administrative domains.

Skills of focus include:

- Interdisciplinary team consultation, staff education, and collaboration
- Learn to quickly build rapport and assess for immediate needs
- Suicide risk screening and comprehensive suicide risk assessments
- Suicide-specific treatments including safety planning intervention and lethal means safety counseling
- Provide brief psychological services to patients, including individual and group psychotherapy
- Adapt psychotherapy interventions for patients in acute distress or at high risk for suicide

EBP Opportunities: CBT, ACT, Safety Planning Intervention.

Cultural Competence Training: Trainees will work with a variety of Veterans as trainees will experience assessment and treatment with Veterans of all races, ethnicities, genders, sexual orientations, religions, SES, education levels, immigration status, cognitive status, mental health histories, physical abilities, and different military experiences. Trainees on this rotation will become familiar with special considerations in working with Veterans of all adult ages. In addition, our acute Veteran population is often dealing with complex presentations while in crisis, and trainees will gain competence in understanding the barriers that Veterans and people with severe mental illness face in seeking and receiving treatment, the role of psychologists as advocates on interdisciplinary teams, and the ways other identity variables, such as race, religion, sexual orientation, education level, SES, and cognitive status may intersect with chronic or acute mental health conditions.

10. Women's Mental Health Clinic (WMHC)

Supervisors: Grace Kim, Ph.D. & Shana Napier, Ph.D.

Founded in January 2005 through a VA Special Needs Grant, the Women's Mental Health Clinic (WMHC) serves women Veterans by providing gender-specific and sensitive services. The WMHC is unique in that 1) it is one of only a few dedicated women's mental health clinics in the VA nationally, 2) it functions independently from BHIP and PCMHI, and 3) it affords the opportunity for training in a wide array of therapies to treat general mental health conditions, as well as specialized focus in learning treatments for PTSD. Our treatment philosophy follows a holistic and evidence-based approach, which influences our conceptualization of patients as well as the types of interventions that we use. The WMHC is currently comprised of licensed staff including three full-time psychologists, Dr. Shana Napier (Clinic Lead and WMH Champion), Dr. Grace Kim (Associate Director of Predoctoral Training), and Dr. Catherine Nash (Women's SUD Psychologist). In addition, Dr. Kayla Moore (Part-Time WMHC psychologist), Jenny Williams, LCSW (full-time clinician), and Sandra Greenman (full-time women's peer support specialist) make up the WMHC team. The team also regularly consults with psychiatry, primary care, and other specialty care staff outside the WMHC when appropriate in the service of patient-centered care.

The Women's Mental Health Clinic provides individual and group psychotherapy to women Veterans who present with a wide range of presenting problems. We offer a variety of evidence-based treatments such as Cognitive Behavioral Therapy, Prolonged Exposure, Cognitive Processing Therapy, Dialectical Behavioral Therapy, Eye Movement Desensitization and Reprocessing Therapy, Acceptance and Commitment Therapy, Interpersonal Therapy for Depression, Interpersonal Therapy for Reproductive Mental Health, Psychodynamic/TLDP, Seeking Safety, and Skills Training in Affective and Interpersonal Regulation, among others. Please note, WMHC doctoral level trainees are not able to participate in the formal DBT program, but can provide DBT-informed therapy, when applicable. In addition, the WMHC offers a wide variety of evidence-based groups addressing topics such as race and resilience, emotion regulation, interpersonal effectiveness, harm reduction, PTSD, perinatal skills, and

copied skills. The clinic is also in the process of enhancing gender-specific SUD services and trainees may have the opportunity to co-facilitate groups if interested. The Psychology Intern in the WMHC may have opportunity to provide informal supervision of practicum students (via co-leading groups together), will engage in collaborative treatment planning sessions with Veterans, and can develop new groups and/or projects if there is need and interest among our women Veterans. There is a great deal of flexibility for the WMHC resident to choose cases and groups that suit their training goals.

Historically, supervisees who have an interest have developed groups that fit the interest and needs of our women Veterans. Examples of such groups are below:

- the Mindful Self-Compassion Group
- Hope & Happiness Group
- Pride & Grit (LGBTQ+ Support) Group
- Virtual Women's Wellness Fair

Psychology Training Provided: On this rotation, training is heavily influenced by the trainee's training needs and interest and a strength of our program is that trainees will get both generalist training, as well as specialty training in trauma treatment and gender-specific care. Trainees will typically participate in a weekly triage session, 1-2 groups, and carry a caseload of 3-5 individuals with a variety of presenting problems, including but not limited to Posttraumatic Stress Disorder, Depression, Panic Disorder, personality disorders, Reproductive Mental Health concerns, LGBT/sexuality/gender concerns, and relationship problems. However, the caseload for trainees varies on training goals, developmental level of the trainee, project interests, etc. Most of the patients on this rotation have a complex trauma history, often including childhood physical, emotional, and/or sexual abuse, and a large number of our referrals for therapy are for PTSD related to Military Sexual Trauma (MST). Depending on the case, trainees may engage in crisis intervention, short-term focused psychotherapy, or longer-term psychotherapy.

Training Opportunities

1. Trauma focused outpatient psychotherapy (group and individual)
2. Generalist outpatient psychotherapy (group and individual)
3. Development of new programming that fits the interests and needs of WMHC Veterans
4. Collaboration with WMHC interdisciplinary team (psychology, social work, and peer support)

EBP opportunities: Cognitive Behavioral Therapy (CBT), Prolonged Exposure (PE), Cognitive Processing Therapy (CPT), Dialectical Behavior Therapy (DBT) interventions (not full program DBT training), Acceptance and Commitment Therapy (ACT), Skills Training in Affective and Interpersonal Regulation (STAIR), Interpersonal Therapy for Reproductive Mental Health (IPT for RMH), Seeking Safety.

Assessment opportunities: Self-report symptom measures and some outcome assessment.

Cultural Competence Training: In the WMHC, trainees will work with Veterans who self-identify as female and will become familiar with special considerations in working with women Veterans. Trainees will gain competence in gender-specific and sensitive care, including understanding the barriers that women Veterans face in seeking and receiving treatment at the VA and the ways other identity variables, such as race, religion, sexual orientation, education level, SES, and cognitive status may intersect with gender to influence symptom presentation and treatment.

PSYCHOLOGY TRAINING STAFF CREDENTIALS AND INTERESTS

AMADI, Suzanne C.

Current VA Position: Staff Psychologist, Women's Mental Health Clinic (WMHC) & Behavioral Health Interdisciplinary Program (BHIP)

Training Rotation: WMHC/BHIP

Area of Specialization: Clinical Psychology

Degree: Ph.D., Mississippi State University 2021

VA Hire: 2022

E-mail address: Suzanne.Amadi@va.gov

Licensure: California (2023)

Theoretical Orientation: Cognitive-behavioral & mindfulness-based theories

Areas of Clinical Specialization: Cognitive behavioral therapies (CBT, Dialectical Behavioral Therapy, & Acceptance and Commitment Therapy)

Publications/Research Interests: Experimental psychology; factors relating to self-and other-directed aggression (i.e., pain perception, alcohol use, borderline personality)

Professional Organizations: APA

Teaching/Training Interests: Cognitive-behavioral & Acceptance and mindfulness-based theories and interventions

BRINDLE, Sarah S.

Current VA Position: Program Manager, Spinal Cord Injury/Disorder Psychology Service

Training Rotation: Spinal Cord Injury/Disorder

Area of Specialization: Counseling Psychology; Spinal Cord Injury (postdoc at Rancho Los Amigos)

Degree: Ph.D., University of Iowa, 2004

VA hire: 2005; in Iowa returning to VA Long Beach November 2009

E-mail address: Sarah.Brindle@va.gov

Licensure: California (2005)

Theoretical Orientation: Integrative, Cognitive-Behavioral

Areas of clinical specialization: Rehabilitation psychology, Disability Affirmative Therapy, Faith-based approaches

Publications/Research interests: spirituality and disability, sexuality and disability, women and SCI/disability, women's health psychology

Professional Organizations: American Psychological Association, Div. 22 (Rehabilitation Psychology)

Teaching/Training interests: Rehabilitation psychology, vicarious traumatization/burnout, adaptive yoga, integrating spirituality in treatment

COOK, Wesley

Current VA Position: Local Recovery Coordinator

Training Rotation: Inpatient Mental Health

Area of Specialization: Clinical Psychology

Degree: Psy.D., Loma Linda University, 2012

VA Hire: 2019

E-mail address: Wesley.Cook@va.gov

Licensure: California (2014)

Theoretical Orientation: Integrative with emphasis on common factors

Areas of Clinical Specialization: Substance Use Disorders, Severe and Persistent Mental Illness, Forensic Psychology, Violence Risk Assessment/Management, and Group Psychotherapy

Publications/Research Interests: Inpatient Group Psychotherapy, Forensic Psychology, and Schizophrenia

Teaching/Training Interests: Conceptualization and implementation of integrative approaches within multidisciplinary treatment teams

COURTNEY, Katherine

Current VA Position: Staff Psychologist, Primary Care Mental Health Integration (PCMHI)

Degree: Psy.D., University of La Verne

Substantive Area: Women's Mental Health and Trauma Recovery

VA hire: 2022

E-mail address: Katherine.courtney@va.gov

Licensure: California (2022)

Theoretical Orientation: Third Wave Integrative

Areas of Clinical Focus: Women's mental health, reproductive mental health, depression, anxiety, trauma recovery, sexual trauma

Professional Organizations: APA

Teaching/Training Interests: Women's mental health, trauma, work place stress/burnout prevention

DILL, Lauren

Present VA Position: Staff Psychologist

Training rotation: Outpatient Geropsychology

Degree: Clinical Psychology (PhD) 2011, Fuller Graduate School of Psychology

VA hire: 2012

E-mail address: Lauren.dill@va.gov

Licensure: CA, 2012

Theoretical orientation: Integrative (Behavioral, Cognitive-Behavioral and Third Wave, Humanistic)

Areas of clinical specialization: Geropsychology and Gero-Neuropsychology, Health and Rehabilitation, Disability/Forensic Evaluation

Publications/Research interests: Cognitive screening, Alzheimer's disease prevention

Teaching/training interests: Psychedelic therapies, dementia education, caregiver support, capacity, spirituality, integrative medicine, psychologist's self-care and personal development

GARCIA-WILLINGHAM, Natasha

Current VA Position: Staff Psychologist

Degree: Ph.D., University of Kentucky, 2020

Substantive Area: Clinical Psychology

VA hire: 2023

Licensure: California (2023)

Theoretical Orientation: Integrative, Cognitive-Behavioral

Areas of Clinical Focus: Rehabilitation Psychology, SCI, ALS, Diabetes, Aging, Behavioral Medicine

Professional Organizations: APA

Teaching/Training Interests: Rehabilitation Psychology; issues relevant to new graduates and early career psychologists (professional development, licensure).

GLIVINGS, Marisa

Current VA Position: Staff Psychologist, Behavioral Health Interdisciplinary Program (BHIP)

Training Rotation: Outpatient Mental Health at BHIP

Area of Specialization: Clinical Psychology

Degree: Psy.D., Alliant International University, 2016

VA hire: 2019

E-mail address: marisa.glvings@va.gov

Licensure: California (2018)

Theoretical Orientation: Integrative (Cognitive Behavioral, Relational and Humanistic approaches)

Areas of clinical specialization: General Mental Health including Trauma and stressor-related disorders, multicultural and diversity issues in psychotherapy

Teaching/Training interests: Providing brief individual psychotherapy, issues of diversity and inclusion, the interface of psychology and religion/spirituality.

GOMEZ, Megan E.

Current VA Position: Staff Psychologist, Home Based Primary Care (HBPC)

Training Rotation: Home Based Primary Care

Area of Specialization: Clinical Psychology, emphasis in neuropsychology

Degree: Ph.D., Fuller Theological Seminary, Pasadena, CA 2014

VA hire: 2015

E-mail address: megan.gomez@va.gov

Licensure: California (2016)

Theoretical Orientation: Interpersonal, Cognitive Behavioral Therapy (CBT)

Areas of clinical specialization: clinical geropsychology, neurocognitive disorders, Parkinson's disease, caregiver support
Publications: Pre-clinical Alzheimer's disease, Cognition in Parkinson's disease, Impulse Control Behaviors in Parkinson's disease, Complementary and Integrative Therapies for Mental Health and Aging
Teaching/Training interests: neurodegenerative diseases, cognition, aging, lifestyle factors, professional development

HARDIN, Stacy A.

Current VA Position: Staff Psychologist, Primary Care Mental Health Integration
Training Rotation: Primary Care- Mental Health Integration (PC-MHI)
Area of Specialization: Clinical Psychology
Degree: Ph.D., University of Southern California 2014
VA hire: 2015
E-mail address: Stacy.Hardin@va.gov
Licensure: California (2015)
Theoretical Orientation: Cognitive Behavioral Therapy (CBT), Mindfulness
Areas of clinical specialization: Adjustment to chronic medical conditions (e.g., cardiovascular disease, chronic pain, cancer); health behavior change; cognitive-behavioral treatment for insomnia, anxiety and depressive disorders; stress management
Publications: Coping with cancer, bidirectional relationship between physical health and emotional distress in patients with cardiovascular disease
Teaching/Training interests: Health psychology, brief psychotherapy in primary care setting, interdisciplinary collaboration, professional development

HAWKINS, Nathaniel

Current VA Position: Staff Psychologist
Training Rotation: Program for Traumatic Stress (Combat PTSD)
Area of Specialization: Clinical Psychology
Degree: Ph.D., Pacific Graduate School of Psychology at Palo Alto University, 2014
VA hire: 2012
E-mail address: Nathaniel.Hawkins@va.gov
Licensure: California (2016)
Theoretical Orientation: Cognitive-Behavioral
Areas of Clinical Specialization: Trauma, PTSD, Substance Use Disorders, Transgender Care
Publications/Research interests: Trauma and substance use
Teaching/Training Interests: Treatment of other trauma related disorders, military and childhood sexual trauma, posttraumatic resilience, PTSD family support, substance use disorders, transgender care, and LGBT issues

HUANG, John S.

Current VA Position: Staff Psychologist, PTSD Programs
Training Rotation: Combat PTSD program
Additional Training Role: Evidence Based Practice (EBP) Seminar Coordinator

Area of Specialization: Clinical Psychology

Degree: Ph.D., University of California, Santa Barbara, 2003

VA hire: 2006

E-mail address: John.Huang2@va.gov

Licensure: California (2005)

Theoretical Orientation: Eclectic, Cognitive-Behavioral, Interpersonal Process

Areas of clinical specialization: Diversity issues, PTSD, meditation/relaxation

Publications/Research interests: Diversity and mental health; Healing Touch and PTSD.

Professional Organizations: Association for Contextual Behavioral Science

Teaching/Training interests: Diversity; Buddhism, Christianity

Hinduism, and Native American spirituality

HURWITZ, Vanessa

Current VA Position: Chief Psychologist

Training Rotation: Outpatient Mental Health at BHIP

Area of Specialization: Clinical Psychology

Degree: Ph.D., Fuller School of Psychology, Pasadena 2016

VA hire: December 2017

E-mail address: vanessa.hurwitz@va.gov

Licensure: California (2017)

Theoretical Orientation: Cognitive Behavioral Therapy (CBT), Dialectical Behavior Therapy (DBT), Acceptance and Commitment Therapy (ACT).

Areas of clinical specialization: Trauma, Emotion Dysregulation

Professional Organizations: American Psychological Association

Teaching/Training interests: DBT, Case Conceptualization-driven CBT, CBASP for chronic depression, Professional Development

JACOB MATHEW, Mary

Current VA Position: Staff Psychologist, Laguna Hills Community Based Outpatient Clinic (CBOC)

Training Rotation: CBOC/BHIP

Area of Specialization: Clinical Psychology

Degree: Ph.D., Fuller Graduate School of Psychology, 2022

VA Hire: 2023

E-mail address: mary.jacobmathew@va.gov

Licensure: California (2024)

Theoretical Orientation: Psychodynamic and integrative (CBT, Mindfulness based therapies, DBT)

Areas of Clinical Specialization: Medical psychology, Marriage and family therapy, psychodiagnostics assessment (Gender affirming care), EBP (trauma, CBT, DBT)

Publications/Research Interests: Spirituality and health, spirituality and eating disturbance, health related outcome, diversity issues, health disparities especially among ethnic minorities, and sleep apnea.

Professional Organizations: APA (Div 19), AGPA, CAMFT

Teaching/Training Interests: Integrative therapies, Marital/Family therapies, Aging and care, Medical psychology, Gender affirming care

JOHNSON, Spring Flores

Current VA Position: Postdoctoral Training Director; ~~Acting Internship Training Director;~~ and Clinical Neuropsychologist

Degree: Ph.D., Loma Linda University, 2019

Substantive Area: Neuropsychology and Neurorehabilitation

VA hire: 2022

E-mail address: spring.johnson@va.gov

Licensure: California (2023)

Theoretical Orientation: Biopsychosocial, Integrative (CBT, DBT, solution-focused, Interpersonal, Disability Affirmative)

Areas of Clinical Focus: Geriatric neuropsychology, acquired brain injury, movement disorders, other brain injury/illness

Publications/research interests: acquired brain injury, neuroplasticity, underserved communities

Professional Organizations: NAN, INS, APA, QNS, Division 22

Teaching/Training Interests: neuropsychology, functional neuroanatomy, diversity, neurorehabilitation, professional development

KERNER, David N.

Current VA Position: Staff Psychologist, Spinal Cord Injury/Disorder

Training Rotation: Adjunct Supervisor for Spinal Cord Injury/Disorder (supervisor for practicum students only)

Area of Specialization: Clinical Psychology

Degree: Ph.D., Joint Doctoral Program, UC San Diego/San Diego State University, 1998

VA hire: 2001

E-mail address: david.kerner2@va.gov

Licensure: Illinois (2000)

Theoretical orientation: Cognitive-Behavioral

Areas of clinical Specialization: Medical psychology, rehabilitation psychology, chronic pain management

Publications: Outcome methodology, health psychology

Professional organizations: American Psychological Association

Teaching/training interests: Medical/health psychology, rehabilitation psychology, physiological psychology, pain management

KIM, Christine H.

Current VA Position: Clinical Neuropsychologist

Training Rotation: Neuropsychology

Additional Training Role: Associate Director, Neuropsychology Training; Member of Executive Training Committee; Member of DEI Committee

Area of Specialization: Clinical Neuropsychology

Degree: Ph.D., Fuller Graduate School of Psychology 2008

VA hire: October 2010 (Long Beach VA: January 2017)

E-mail address: christine.kim@va.gov

Licensure: California (2010)

Theoretical Orientation: Cognitive Behavioral Therapy (CBT), Biopsychosocial

Areas of clinical specialization: Gero-Neuropsychology

Publications: normative data on Stroop Test, cognition and aging, ToM in Agenesis of the Corpus Callosum

Professional Organizations: International Neuropsychological Society

Teaching/Training interests: neuropsychology, professional development

KIM, Grace Y.

Current VA Position: Staff Psychologist, Women's Mental Health Clinic (WMHC)

Training Rotation: WMHC

Area of Specialization: Clinical Psychology

Degree: Ph.D., Rosemead School of Psychology – Biola University 2020

VA Hire: 2021

E-mail address: grace.kim8@va.gov

Licensure: Iowa (2021) & California (2022)

Theoretical Orientation: Integrative; psychodynamic & cognitive behavioral

Areas of Clinical Specialization: PTSD, trauma-focused evidence-based therapies, attachment related interpersonal issues, emotion dysregulation

Publications/Research Interests: self-compassion, therapist burnout & affective empathy, attachment theory, interpersonal trauma, PTSD

Professional Organizations: APA

Teaching/Training Interests: integration of psychodynamic theories/brief dynamic interventions and cognitive behavioral theory/interventions. Mindful self-compassion as resilience against shame, early childhood experiences and trauma and its effects on adult relationships and interpersonal interactions

LA TOURETTE, Tammi

Current VA Position: Staff Psychologist, Military Sexual Trauma Coordinator

Training Rotation: Laguna Hills Community-Based Outpatient Clinic (CBOC)

Area of Specialization: Clinical Psychology

Degree: Ph.D., University of Louisville, 2002

VA hire: 2022

E-mail address: tammi.latourette@va.gov

Licensure: California (2023)

Theoretical Orientation: Cognitive-Behavioral Therapy (CBT), Dialectical Behavior Therapy (DBT), Acceptance and Commitment Therapy (ACT)

Areas of clinical specialization: Trauma, Emotion Dysregulation

Professional Organizations: American Psychological Association (APA)

Teaching/Training interests: DBT, ACT, Military Sexual Trauma (MST)

LAU, Angela W.

Current VA Position: Staff Psychologist, Home-Based Primary Care

Training Rotation: Home-Based Primary Care

Area of Specialization: Clinical Psychology, emphasis in clinical geropsychology
Degree: Ph.D., West Virginia University, 2000
VA hire: November 2009
E-mail address: angela.lau@va.gov
Licensure: California (2003)
Theoretical Orientation: Behavioral, Cognitive-Behavioral
Areas of clinical specialization: Clinical geropsychology, behavioral medicine, anxiety disorders
Publications: Minority mental health, aging, anxiety, professional development
Teaching/Training interests: Diversity and mental health, clinical geropsychology, behavior and cognitive-behavioral therapies, professional development

LEIBOW, Michael S.

Current VA Position: Staff Psychologist, Primary Care Mental Health Integration
Training Rotation: Primary Care-Mental Health Integration (PC-MHI)
Area of Specialization: Clinical Psychology
Degree: PsyD, DrPH, Loma Linda University, 2012
VA hire: 2013
E-mail address: Michael.Leibow@va.gov
Licensure: Maryland & Virginia (2014); California (2019)
Theoretical Orientation: Integrative (motivational interviewing and problem-solving)
Areas of clinical specialization: Health Psychology/Behavioral Medicine, Primary Care
Publications: Exercise, Flourishing, and the Positivity Ratio; Tobacco Cessation Counseling in Veterans
Teaching/Training interests: Health psychology/behavioral medicine, health behavior change, tobacco cessation, weight management, CBT-Insomnia, brief assessment in primary care setting, and professional development.

MARTINEZ, Audrey E.

Current VA Position: Suicide Prevention Coordinator
Training Rotation: Suicide Prevention
Area of Specialization: Clinical Psychology
Degree: Ph.D., Loma Linda University
VA Hire: 2022
E-mail address: audrey.martinez2@va.gov
Licensure: California (2017)
Theoretical Orientation: Cognitive Behavioral
Areas of Clinical Specialization: Suicide Prevention and Postvention, mental health first aid, trauma, cognitive behavioral therapy, prolonged exposure, EMDR, cognitive processing therapy, Gottman therapy
Professional Organizations: American Psychological Association, Los Angeles County Psychological Association (LACPA), LACPA Ethics Committee
Teaching/Training Interests: Evidence-based suicide risk assessment and mitigation practices

MONCRIEFFE, Kristina

Current VA Position: Staff Psychologist; Medical Psychology, Consultation-Liaison Psychology

Training Rotation: Outpatient Medical Psychology & Inpatient Consultation-Liaison Psychology Service

Area of Specialization: Clinical Psychology; Rehabilitation Psychology Fellowship (VA Long Beach Healthcare System)

Degree: Psy.D., Fuller Graduate School of Psychology, 2020

VA hire: September 2022

E-mail address: Kristina.Moncrieffe@va.gov

Licensure: California (2022)

Theoretical Orientation: Integrative (Acceptive and Commitment Therapy, Biopsychosocial, Cognitive Behavioral Therapy, Humanistic approaches), Solution-focused, Interpersonal, Motivational interviewing.

Areas of clinical specialization: Medical/Health psychology, Rehabilitation psychology, Behavioral medicine

Professional Organizations: Division 22 (Rehabilitation Psychology)

Teaching/Training Interests: Medical/Health psychology, consultation-liaison psychology in acute medical settings, brief psychotherapy, neuro/rehabilitation psychology, neuropsychology, spirituality and existentialism, adjustment to disability and/or life altering chronic medical conditions, interdisciplinary treatment collaboration, intersectionality of disability and racial identity

NAPIER, Shana M.

Current VA Position: Women's Mental Health Clinic Coordinator & WMH Champion
Women's Mental Health Center

Training Rotation: Women's Mental Health

Area of Specialization: Clinical Psychology

Degree: Ph.D., Fuller Graduate School of Psychology, 2017

VA hire: 2018

E-mail address: shana.napier@va.gov

Licensure: California (2020)

Theoretical Orientation: Integrative (e.g., Cognitive Behavioral Therapy (VA certified in CPT and PE), Interpersonal/Psychodynamic (VA certified in IPT for RMH), Existential)

Areas of Clinical Specialization: Women's Mental Health, Military Sexual Trauma (MST), Trauma/PTSD, Diversity, Reproductive Mental Health, Integration/Spirituality, Creativity.

Publications/Research Interests: Biological and Psychological contributors to Creativity, Creativity and Implications for Depression, Anxiety, and Self-Concept Impairment

Professional Organizations: APA, LACPA

Teaching/Training Interests: Women's Mental Health, Military Sexual Trauma (MST), Trauma/PTSD, Sexual Health, Diversity, Reproductive health, Grief, Integration/Spirituality, Creativity, and Professional development.

PALAD, Veronica

Current VA Position: Staff Psychologist, Behavioral Health Interdisciplinary Program (BHIP); Dialectical Behavioral Therapy (DBT) Coordinator

Training Rotation: Outpatient Mental Health at BHIP; Assessment Seminar Coordinator

Area of Specialization: Clinical Psychology

Degree: Ph.D., Palo Alto University, 2013

VA hire: December 2021

E-mail address: veronica.palad@va.gov

Licensure: California (2016)

Theoretical Orientation: Cognitive Behavioral Therapy (CBT), Dialectical Behavior Therapy (DBT)

Areas of clinical specialization: Trauma, Emotion Dysregulation, Severe Mental Illness

Professional Organizations: American Psychological Association, CPA, LACPA

Teaching/Training interests: DBT, Case Conceptualization-driven CBT

ROUSH, Jared F.

Current VA Position: Deputy Chief, Psychology Service

Training Rotation: Suicide Prevention

Area of Specialization: Clinical Psychology

Degree: Ph.D., Texas Tech University, 2018

VA Hire: 2019

E-mail address: Jared.Roush@va.gov

Licensure: California (2019)

Theoretical Orientation: Integrative; third wave cognitive behavioral

Areas of Clinical Specialization: Suicide prevention, risk assessment and mitigation, crisis intervention, cognitive behavioral therapies

Publications/Research Interests: Evidence-based suicide risk assessment and mitigation practices, theory-driven suicide risk conceptualization, suicide prevention in medical settings, suicide risk among mental health inpatients

Professional Organizations: American Psychological Association

Teaching/Training Interests: Evidence-based suicide risk assessment and mitigation practices, professional development, program development, process improvement

SHULZE, Jeffrey, I.

Current VA Position: Staff Psychologist, Spinal Cord Injury/Disorder

Training Rotation: Spinal Cord Injury/Disorder

Area of Specialization: Clinical Psychology, Rehabilitation Psychology (postdoc at Rancho Los Amigos)

Degree: Ph.D., Saint Louis University, 2021

VA hire: 2023

E-mail address: jeffrey.shulze@va.gov

Licensure: California (2023)

Theoretical orientation: Third-wave Cognitive Behavioral

Areas of clinical Specialization: Rehabilitation psychology, performance psychology

Publications: Mental health stigma, eSports, harassment of female athletes, risk factors for adverse health outcomes

Professional organizations: American Psychological Association

Teaching/training interests: Coping and adjustment, traumatic brain injury, rehabilitation psychology, and mindfulness

SINNARD, Morgan

Current VA Position: Staff Psychologist

Training Rotation: Geropsychology – Community Living Center (CLC) & Geriatric Evaluation and Management (GEM)

Area of Specialization: Counseling Psychology

Degree: Ph.D., University of Wisconsin-Madison (2021)

VA Hire: 2023

E-mail address: Morgan.Sinnard@va.gov

Licensure: California (2023)

Theoretical Orientation: Generally time-limited interventions informed by third-wave behavioral, attachment-based, and existential theories.

Areas of Clinical Specialization: Rehabilitation psychology, neuropsychology, and inpatient medical/health/gero- psychology.

Professional Organizations: APA Divisions 20, 22, & 40; International Neuropsychology Society; National Academy of Neuropsychology; Queer Neuropsychology Society.

Teaching/Training Interests: Assessment and intervention in inpatient medical milieu, dementia care, hospice, end of life care, geriatric neuropsychology, LGBTQ topics in health care, professional development.

STEWART-BURET, Melissa

Current VA Position: Staff Psychologist, Combat PTSD Program

Training Rotation: Combat PTSD; Supervision of Supervision Seminar Co-coordinator

Area of Specialization: Clinical Psychology

Degree: Psy.D, Spalding University (2019)

VA hire: 2020

E-mail address: melissa.stewart-buret@va.gov

Licensure: California (2021)

Theoretical orientation: Integrative (cognitive-behavioral, mindfulness/acceptance-based approaches), Cognitive Processing Therapy (CPT, VA certified), Prolonged Exposure Therapy (PE)

Areas of Clinical Specialization: Trauma and PTSD

Publications/Research interests: Trauma-focused evidence-based therapies, Integrative therapy for trauma

Professional Organizations: American Psychological Association (APA), International Society for Traumatic Stress Studies (ISTSS)

Teaching/Training Interests: CPT, Trauma-focused evidence-based therapies, Professional Development

SU, Judy J.

Current VA Position: Staff Psychologist, Spinal Cord Injury/Disorder Psychology Service

Training Rotation: Spinal Cord Injury/Disorder

Area of Specialization: Neuropsychology

Degree: Ph.D., Fuller Theological Seminary/School of Psychology, 2019

VA hire: 2023

E-mail address: judy.su@va.gov

Licensure: California (2021)

Theoretical Orientation: Cognitive-Behavioral

Areas of clinical specialization: Neuropsychology, Rehabilitation Psychology

Publications/Research interests: Agenesis of the Corpus Callosum, mTBI/blast injuries in Veterans, neurodegenerative disorders, cultural neuropsychology

Professional Organizations: American Psychological Association, Div. 40 (Neuropsychology), International Neuropsychological Society (INS), National Academy of Neuropsychology (NAN)

Teaching/Training interests: Neuropsychology, neuropsychological assessment, rehabilitation psychology, movement disorders, neurodegenerative/neurological disorders, cognitive and psychiatric comorbidities

TAULE-NADAL, Daniel

Current VA Position: Staff Psychologist, Combat PTSD and PCMHI

Training Rotation: Combat PTSD

Degree: Psy.D., Rutgers University

Substantive Area: Clinical Psychology

VA hire: 2021

E-mail address: Daniel.Taule-Nadal@va.gov

Licensure: In Progress (2023)

Theoretical Orientation: CBT

Areas of Clinical Focus: PTSD, Depression, Insomnia, Anxiety Disorders

Publications/Research Interests: Increasing MH access within Primary Care;

Adaptations for PTSD Tx

Professional Organizations: APA Div. 19 Society for Military Psychology

Teaching/Training Interests: EBPs for PTSD; Exposure-based Tx for OCD & Anxiety

Disorders; CBT-I; brief assessment & intervention; Behavioral Activation for Depression

VAILLANCOURT, Ashley A.

Current VA Position: Staff Psychologist, Blind Rehabilitation Center (BRC)

Training Rotation: BRC; Supervision of Supervision Seminar Co-coordinator

Area of Specialization: Rehabilitation and Neuropsychology

Degree: Ph.D., Major Area of Study Neuropsychology, Fuller Theological Seminary, 2019

VA Hire: 2021

E-mail address: ashley.vaillancourt@va.gov

Licensure: California (2021)

Theoretical Orientation: Integrative: CBT, Disability Affirmative, MI

Areas of Clinical Specialization: Rehabilitation Psych; Adjustment to disability, life altering medical conditions and chronic health conditions; neuropsychology; neurorehabilitation; PM&R

Publications/Research Interests: Agenesis of Corpus Callosum, trauma and executive functioning, disability and issues of diversity, adjustment to injury/disability

Professional Organizations: American Psychological Association (Div 22 & 40); National Organization of Disorders of the Corpus Callosum (Board Member)

Teaching/Training Interests: rehabilitation psychology, disability affirmative psychology, diversity, neuropsychology/assessment; interdisciplinary care

Directions to the VA Long Beach Medical Center and Psychology Department

The VA Long Beach Healthcare Center is located on the corner of Bellflower Boulevard and Seventh Street in Long Beach. It is adjacent to California State University at Long Beach, and is just northeast of where Pacific Coast Highway intersects with Bellflower Blvd. and Seventh Street. For more information on orienting yourself to VA Long Beach, please check the VA Long Beach Website: www.longbeach.va.gov

Freeway access from the North on the San Diego Freeway (405)

- Take the Bellflower Blvd. exit going south.
- On Bellflower Blvd., after passing shopping areas and crossing Atherton Street, you will come upon CSU Long Beach on the left.
- Immediately after Beach Drive are the VA grounds, also on the left.
- Since you cannot make a legal left turn on Sam Johnson Road, you must go further to Palm Road where there is a left turn lane enabling you to enter the VA grounds through Gate 3.

Freeway access from the North on the San Gabriel Freeway (605)

- Take the Seventh Street (22 West) exit.
- After passing CSU Long Beach on the right on Seventh Street, you will come upon the VA, which is also on the right.
- Directions are easier if you pass the main VA entrance and make a right on Bellflower Boulevard.
- Take the second hospital entrance (Sam Johnson Road) and proceed straight (east) and park in the lots on your the left hand side after you pass the intersection with Canob Road.

Freeway access from the South on the San Diego Freeway (405)

- Take the Seventh Street (22 West) exit.
- After passing CSU Long Beach on the right on Seventh Street, you will come upon the VA, which is also on the right.
- Directions are easier if you pass the main VA entrance and make a right on Bellflower Boulevard.
- Take the second hospital entrance (Sam Johnson Road) and proceed straight (east) and park in lots on your the left hand side after you pass the intersection with Canob Road.

The Psychology main offices are located on hallway "A-2" on the second floor of Building 128.

- Proceed up the steps and cross the street and walk up the sidewalk to the right (west) of the Community Living Center.
- Voluntary services with a blue awning will be on your right.
- Keep walking straight until you enter through the double doors, make a right, and proceed down a long corridor. You'll get to an intersection, and please turn left there.
- Go through the sliding glass door and then make a right, following the signs for A-2. Make your second left and you'll see two elevators on the left.
- Take one up to the second floor, turn left, proceed down the hall to the end and check in with our Program Support Assistant in the Psychology office (A-200).
- If you need additional directions, please call us at (562) 826-5604.

- We'll have more information with acceptance announcements as to which building and room number we'll congregate in, and .pdf facility maps are available for email attachments upon request.

Current and Former Practicum students

Class of 2022-2023

TJ Mundy-Punchard	Rosemead School of Psychology
Claudia Son	Rosemead School of Psychology
Dayspring Goforth	Rosemead School of Psychology

Class of 2021-2022

Gregory Jacks	Pepperdine University
Athena Jones	Loma Linda University
Chelsea Krueger	Rosemead School of Psychology
Chyna (CJ) Parker	Pepperdine University
Stasska Sichko	UCLA
Esther Yu	Rosemead School of Psychology

Class of 2020-2021

Mary Jacob Mathew	Fuller School of Psychology
Gianna Kozel	Fuller School of Psychology
Jonathan Lefavour	Rosemead School of Psychology
Amanda Lipari	Pepperdine University
Gregory Loumagne	Rosemead School of Psychology
Yehsong Kim	USC

Class of 2019-2020

Christina Cress	Rosemead School of Psychology
Sheriece Hooks	Pepperdine University
Ryan Lubock	Pepperdine University
Jessica Poulsen	Fuller School of Psychology
Hannah Rasmussen	USC
Jade Suyematsu	Pepperdine University
Alexandra (Alex) Venegas	UCLA

Class of 2018-2019

Angela Dupont	Fuller School of Psychology
Mercy Huang	Fuller School of Psychology
Pamela "Mandy" Hughes	Rosemead School of Psychology
Kinnari "Nina" Jhaveri	USC
Mona Khaled	USC
Grace Kim	Rosemead School of Psychology
Brenna Moore	Pepperdine University
Jonathan Parker	Pepperdine University
Hannah Rasmussen	USC

Class of 2017-2018

Melabi Amponsah	Rosemead School of Psychology
Morgan Bartholomew	UCLA

Helene Diamond
Nicholle Johnston
Susannah Kondrath
Jefferson Pou
Erin Santos
Alexandra Tanner

Pepperdine University
Rosemead School of Psychology
Fuller School of Psychology
Rosemead School of Psychology
Pepperdine University
UCLA

Class of 2016-2017

Meredith Blackburn
Jason Cencirulo
Gregory Foley
Tara Guarino Fairbanks
Lilian Medina Del Rio
Kelly Miller
Ariel Reid
Jon Rugg
Christopher Schadt
Rachel Weller

Fuller School of Psychology
Pepperdine University
Fuller School of Psychology
Fuller School of Psychology
Rosemead School of Psychology
USC
Fuller School of Psychology
Rosemead School of Psychology
Rosemead School of Psychology
Pepperdine University

Class of 2015-2016

Tyonna Adams
Meredith Blackburn
Kristen Eliason
William Orme
David Pyo
Mario Souza

Pepperdine University
Fuller School of Psychology
Rosemead School of Psychology
Rosemead School of Psychology
Fuller School of Psychology
Pepperdine University

Class of 2014-2015

Sean Agopian
Anthea Gray
Ahoo Karimian
Vance Kunze
Deniz Mustafaglou
Nina Tilka

Pepperdine University
Pepperdine University
Pepperdine University
Rosemead School of Psychology
Pepperdine University
Rosemead School of Psychology

Class of 2013-2014

Rachael Green
Phil Nelson
JB Robinson
Elizabeth Romero
Quyen Sklar
Via Strong

Fuller School of Psychology
Rosemead School of Psychology
Fuller School of Psychology
Pepperdine University
Rosemead School of Psychology
Pepperdine University

Class of 2012-2013

Alyssa Aguilar
Alison Conway
Kenneth Davis
Carey Incledon
Adrienne Meier

Rosemead School of Psychology
Pepperdine University
Rosemead School of Psychology
Pepperdine University
Fuller School of Psychology

Class of 2011-2012

Justin Baker
Kelsy Clark
Megan Gomez
Thomas Hanson
Christopher Ogle
Kristopher Thomas

Rosemead School of Psychology
Rosemead School of Psychology
Fuller School of Psychology
Pepperdine University
Pepperdine University
Fuller School of Psychology

Class of 2010-2011

Timothy Arentsen
Lisa Finlay
Daniel Kim
Samuel Park
Francesca Parker
Kimberly Smith

Fuller School of Psychology
Fuller School of Psychology
Rosemead School of Psychology
Rosemead School of Psychology
Pepperdine University
Pepperdine University

Class of 2009-2010

Kathryn Harrell
Caroline Kelly
Kerri Schutz
Jennifer Thiessen
Amy Verbonich
Elizabeth Welsh

Fuller School of Psychology
Pepperdine University
Pepperdine University
Rosemead School of Psychology
Rosemead School of Psychology
Fuller School of Psychology

Class of 2008-2009

Daniel Combs
Lauren Lopez
Lauren Lovato
Sarah Reiner
Hana Shin
Karen Torres

Rosemead School of Psychology
Fuller School of Psychology
Pepperdine University
Rosemead School of Psychology
Fuller School of Psychology
Pepperdine University

Class of 2007-2008

Katy Jakle
Jeanette Lantz
Grace Lee
Robert Pate
Rogelio Serrano

Pepperdine University
Fuller School of Psychology
Fuller School of Psychology
Rosemead School of Psychology
Pepperdine University

Class of 2006-2007

Jamie Bedics
Rebecca Harvey
Heather Himes
Christine Kang
David Schafer

Fuller School of Psychology
Pepperdine University
Rosemead School of Psychology
Fuller School of Psychology
Pepperdine University

Class of 2005-2006

Robert Braese
Jennifer Carusone
Paul Hewitt
Christopher Laviola
Lisa Mitchell

Fuller School of Psychology
Pepperdine University
Rosemead School of Psychology
Pepperdine University
Fuller School of Psychology

Daniel Pelton
Angela Yi

Rosemead School of Psychology
Fuller School of Psychology

Class of 2004-2005

Bryan Goudelock
Sharon Hsu
Alisha Ledlie
Karen Molano
Miatta Snetter
Katherine Walker

Fuller School of Psychology
Rosemead School of Psychology
Rosemead School of Psychology
Pepperdine University
Pepperdine University
Pepperdine University

Class of 2003-2004

Frances Diaz
Serina Hoover
Kathleen Huh
Scott Symington
Sarah Cusworth Walker
Michelle White

Pepperdine University
Pepperdine University
Pepperdine University
Fuller School of Psychology
USC
Rosemead School of Psychology

Class of 2002-2003

Stephanie Law
Lisa MacDonald
Lionel Mandy
Steven Rogers
Jennifer Romesser
Melissa Symington
Todd Wahl
Michelle Zeller

Rosemead School of Psychology
Pepperdine University
Pepperdine University
Fuller School of Psychology
Pepperdine University
Fuller School of Psychology
Rosemead School of Psychology
Pepperdine University

Class of 2001-2002

Russell Carroll
Lori Haas
Allen Kilian
Kimberly Miller
Elizabeth Osborn

Pepperdine University
Pepperdine University
Fuller School of Psychology
Pepperdine University
Rosemead School of Psychology

Class of 2000-2001

Greg Danos
Joshua Kenton
Suzanne Lau
Jocelyn McGee
Mark Schnose

Rosemead School of Psychology
Pepperdine University
Rosemead School of Psychology
Fuller School of Psychology
Fuller School of Psychology

**** Practicum students from previous years not listed due to space limitations**

ADDENDUM: COVID-19 Pandemic-Related Changes to Psychology Training

COVID-19-related restrictions and practices at VA Long Beach are evolving to address the ongoing situation. We cannot yet know how or whether COVID-19 pandemic restrictions will impact the 2023-2024 training year, but these are the current adjustments to training at VA Long Beach.

Hospital Safety Precautions:

VA Long Beach has taken facility-wide steps to reduce the risk of spreading the coronavirus.

Facility Maintenance staff across the hospital are engaging in enhanced sterilization protocols, and communal spaces (e.g., the cafeteria) are set up for social distancing. Hand sanitizer is readily available throughout the hospital.

VA Long Beach provides appropriate PPE to all trainees who come onto campus and interact with patients, including scrubs, masks, face shields, gowns, and gloves as needed. For testing, plexiglass barriers are also provided. Hospital-grade disinfecting wipes are available to clean materials and surfaces on campus.

The requirements for entrance to the hospital and any inpatient area may change according to safety protocols as the situation evolves. Trainees are updated about relevant changes as they occur via hospital-wide email and communication from TD and supervisors. VA Long Beach has a COVID-19 Sharepoint with constantly updated information and resources, which trainees can access from their VA computers.

COVID-19 testing and COVID-19 vaccines are readily available to all staff and trainees on site at no cost through VA occupational health, including testing for active COVID-19 via nasal swab and antibody testing through bloodwork.

Changes to Training During the 2019-2022 Training Years:

Beginning in mid-March 2020, training activities that could happen virtually became virtual. This included seminars, didactics, individual and group supervision (in accordance with OAA, APPIC, and CA Board of Psychology allowances), interdisciplinary team meetings, and most individual and group care (apart from those clinical activities that cannot be provided virtually, mentioned above).

Orientation Week 2020 - 2022 were conducted virtually, with the exception of coming to campus one half day to complete orientation items that necessitated being at the VA in person (e.g., picking up ID badges and equipment, getting photos taken, etc.).

Beginning in March 2020, psychology trainees and staff psychologists had the ability to work from home on VA-issued laptops. Today, trainees and staff work a variety of schedules including fully on-site work, fully remote work, or a hybrid schedule of both remote work and on-site work. Trainee schedules typically mirror that of their supervisor's schedules and is collaboratively determined. The plan is to continue these modalities for the duration of the pandemic as hospital policy and licensure/accreditation bodies permit.

It is important to note that trainees working in **certain clinical areas** are required to spend some amount of time on-campus/in-person due to the nature of the clinical work, which

cannot be accomplished virtually. These clinical areas include Spinal Cord Injury/Disorders, Blind Rehabilitation Center, Community Living Center, and Neuropsychology. For trainees who are selected to work in these clinical areas, PPE is required and supplied by the VA. COVID vaccines and COVID testing, as well as COVID antibody testing, is also available on campus at no cost to the trainee. In some of these clinical areas, everyone working in the area is tested regularly (either monthly or weekly depending on policies) as a condition of working on-site.

Please note that the flu vaccine and COVID-19 vaccine are mandatory for all VA trainees and staff, except in the rare case of a documented medical exemption or deeply held religious belief that precludes being vaccinated.

If you have any questions about how we are addressing any aspect of training during COVID-19 restrictions, please reach out to Dr. Leela Farina (Director of Psychology Internship Programs) at Leela.Farina@va.gov or (562) 826-8000 x14743 for more information.