**Clinical Psychology Internship at**

**Charlie Norwood Veterans Affairs Medical Center**

(Medical College of Georgia at Augusta University/Charlie Norwood Veteran Affairs Medical

Center Psychology Internship Program)

1 Freedom Way (26)

Augusta, GA 30904

**Applications Due: November 1, 2023**

**Psychology Training Director** **APPIC Match #s for CNVAMC**

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Charlie Norwood Department of Veteran’s Affairs Medical Center - Downtown VA (above)

Augusta VA Medical Center - Uptown VA (below)

***A building with flags in front of it. Uptown Augusta VA campus. 
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# Local Information

The city of Augusta is nestled in the Augusta metropolitan area with a population estimated over 600,000. However, this town is know for being a “big city with small town vibes”. Surrounding the downtown area which boasts a thriving medical/training community and a lively food and arts scene, there is also easy access to retail and grocery shopping, nature and sports facilities, and an abundance of housing options within a 5- 30 minute drive of the Augusta VAMC. Augusta is situated on the Georgia/South Carolina border which shares the Savannah River, a common destination for many of the locals. There is also a wealth of diversity in culture celebrated through festivals, foods, and community gatherings that ensure access to fun options in your down time.

Consider checking out these sites for additional information about the area and of course, let us know if you have any questions:

[Visit Augusta, Georgia | Things to Do, Hotels, Events](https://www.visitaugusta.com/)

[Best of Augusta 2023 | Official Georgia Tourism & Travel Website (exploregeorgia.org)](https://www.exploregeorgia.org/city/augusta)

[Little Guide Augusta | Augusta GA | Facebook](https://www.facebook.com/LittleGuideAugusta/)

# APA Accreditation and APPIC Membership

The Augusta University/Medical College of Georgia-Charlie Norwood Veterans Affairs Medical Center Psychology Internship (AU/MCG-Charlie Norwood VAMC Psychology Internship) was formed in 1982 and has been accredited by the American Psychological Association (APA) since 1983. The APA Commission on Accreditation is recognized by both the Secretary of the U.S. Department of Education and the Council for Higher Education Accreditation as the authority for professional education and training in psychology. The internship was most recently accredited for 10-years with the next site visit scheduled for 2029.\* This doctoral internship program is also a member of the Association of Psychology Postdoctoral and Internship Centers (APPIC).

 \*As of May 2022, the consortium has notified the Commission on Accreditation of the American Psychological Association (APA) of intent to dissolve the consortium agreement. At this time, we intend to submit our application for accreditation, on contingency in early 2024. We are fully committed to **maintaining accreditation as a consortium until we achieve independent accreditation during this transitional period, meaning that applicants that match with our internship will complete an APA accredited internship.** The training directors and institutional leadership communicate frequently and maintain close contact regarding updates to the timeline of consortium dissolution and compliance will all accreditation standards. We are available to discuss any questions or concerns with regards to this process. Despite the expected changes, we are committed to having high-quality training for the upcoming year and do not anticipate any significant changes to training offered.

APA can be contacted at: American Psychological Association 750 First Street NE Washington, DC 20002-4242. (202) 336-5979

# Eligibility, Application and Interviewing Processes

A candidate for the Charlie Norwood VAMC portion of the psychology internship consortium is considered based on the following:

* Candidates must show verified progression within a doctoral program in Clinical or Counseling Psychology that is APA, CPA, or PCSAS accredited.
* US Citizenship is required.
* Matched candidates must provide proof of COVID-19 vaccination and are subject to random drug screening. Vaccination waivers for trainees are extremely rare and require approval from the facility Chief of Staff.
* Applicants much have at least 400 clinical intervention hours, and at least 40 clinical assessment hours, at time of application. Our settings and faculty offer training across a broad array of clinical experiences, including health psychology, trauma recovery, and rehabilitation. We welcome applicants with primary interests in assessment, intervention, or both.

We are strongly committed to building a diverse internship class and welcome applications from prospective trainees of varied ethnic, cultural, sexual orientation, and/or disability backgrounds. Interested individuals who meet eligibility criteria should submit the following application materials using the online AAPI application process. While we await dissolution of our consortium, applicants will apply to the Augusta CNVAMC tracks as listed at the top of this document.

All application materials are due by November 1, 2023 through the portal to include the following:

* The APPIC Application for Psychology Internship (AAPI)
* A cover letter indicating intent to apply to the internship and noting specific training rotations of interest and how the tracks applied to will help round out training needs
* A curriculum vita
* A deidentified Assessment Report or Treatment Summary showcasing your work
* Official graduate transcripts
* Three letters of reference (not including the letter of verification from the Graduate Training Director)

We encourage submission of applications from all eligible candidate and consider the variety of clinical experiences an applicant might have had. Individuals that are successful and thrive in our training program are those who have a strong desire for development of skills in evidence based treatments, interest in working with complex medical and mental health presentations, and/or focus in delivery services within a general adult population or specific interest in working with the military/Veteran population.

Intern applicants are matched according to emphasis track interests. This allows Interns to accumulate a specific expertise that is consistent with their long-range career interests and enhances their marketability upon graduation. Interns are selected on the basis of an emphasis training track in which the training will occur during a 6-month rotation.

Charlie Norwood VAMC Positions for 2024-2025 (2 positions for each track):

* **Clinical Health, Behavioral Medicine, and Rehabilitation Medicine Track**
* **Veteran's Healthcare Disparities with emphasis in Women's Health Track**
* **Trauma Psychology Track**

Note that when applying via APPIC – for the academic year 2024-2025, Interns will see and select from seven track choices (between the AU-paid (4 options) and VA-paid tracks (3 options as listed above)). Within the application to APPIC, applicants should **apply to no more than 3 emphasis tracks during the application phase.** However, Interns may apply for any of the tracks on their APPIC match forms to meet the 3 maximum which may include both CNVAMC and AU/MCG positions. Notifications for interview considerations will be sent by the funding site (i.e., applicants to a Child and Family track and a Women's Health Track will receive 2 notifications, one from AU/MCG and one from CNVAMC). Please email Dr. Speed ([katrina.speed@va.gov](mailto:katrina.speed@va.gov)) and/or Dr. Drescher ([cdrescher@augusta.edu](mailto:cdrescher@augusta.edu)) for questions. For the 2024-2025 recruitment season, **the VA and AU/MCG will be holding separate interviews with applicants**.

## Interviews

Interview invitations will be sent via email no later than November 15, 2023 and will be sent out by the respective funding site so applicants applying to MCG/AU tracks and CNVAMC tracks will receive 2 separate notifications. VA applicants will be offered one of four dates from which to choose which will be filled on a first come, first served basis.

The interview days typically last 4.5 hours and will be held on EST via virtual platforms. The format of the interview days includes: (1) virtual orientation of the program sites, faculty, and associated practicums; (2) individual virtual interviews with faculty at the primary practicum sites - typically an applicant will receive three to four 30-minute individual virtual interviews with faculty; and (3) non-evaluative meeting with at least one representative from the current intern cohort. As much as time and availability permit, requests to virtually meet with specific faculty are honored.

Given all of the lessons learned during the pandemic and with a strong consideration of both social justice and current best practices, we will only be offering virtual interviews so as to remove as many financial inequities and barriers in the application and selection process as possible. Further, given feedback from previous years and intentional consideration of risk for potential bias, perpetuation of economic inequity, and ongoing safety, we will not be offering an Open House this year. However, we would be happy to assist in making arrangements for site tours after program ranking have been submitted by the internship in late January/early February 2024 for applicants who are interested and/or close enough to visit Augusta to inform their ranking. Although we miss getting to meet so many wonderful people in person, we are excited for the opportunity to potentially expand the diversity of our applicants with the virtual interviewing process and genuinely want to ensure equity in the interviewing and ranking process for all.

## Selection

The CNVAMC psychology internship program, as a part of the MCG/AU – CNVAMC Consortium complies with all APPIC guidelines in the recruitment and selection of interns and participates in the computer match program. The program agrees to abide by the APPIC policy that no person at this training program will solicit, accept, or use any ranking-related information from any intern applicant. A complete copy of APPIC policies can be found at the APPIC website at [www.appic.org](http://www.appic.org). Those matched will be contacted by the Training Director at the appropriate time on match day. Matched interns are also notified via e-mail to obtain appropriate signatures. Letters of recognition of the match are sent to each intern’s program director.

## Important Dates

**Application deadline:** November 1, 2023

**VA interview dates:** December 8th, 12th, 15th 2023 and January 9th 2024

**Starting date:** July 1, 2024

# General Information

The Medical College of Georgia (MCG)/Augusta University and the Charlie Norwood Veterans Affairs Medical Center (VAMC) are organized as partners in offering a 12-month, full-time Internship in Clinical Psychology. The CNVAMC portion of the psychology internship program currently funds up to six interns yearly. The Internship combines a solid grounding in clinical skills with access to a wide range of mental health and medical settings through which an Intern can develop general foundational skills as well as emphasis training. Our training model focuses on three primary facets of training in the development of professional psychologists: (1) Training in the implementation of essential practice skills in key field settings; (2) Training in an empirical approach to practice, and; (3) Training in the provision of care for underserved populations. Across training experiences, Interns work collaboratively with a variety of physicians, specialists, and other allied health professionals to develop skills in providing interdisciplinary health care.

The VA-paid interns will be complete two 6-month Rotations (General and Emphasis Rotations) as most rotations include integrated health care teams and opportunities for brief assessment/treatment and consultation liaison work can be completed across general and/or emphasis training.

There are two required 6-month rotations:

1. **The General Practice Rotation:** This rotation focuses on psychological assessment skills, skills pertaining to rapid assessment, and triaging in individuals with acute psychiatric conditions, evidence-based psychotherapy groups and, individual, and possibly couple and family psychotherapy.
2. **Emphasis Training Rotation:** In addition to the generalist training opportunities available, emphasis training is provided through the selection of one of three tracks: Clinical Health, Rehabilitation Medicine and Behavioral Medicine (VA-2 slots), Veteran’s Health Disparities/Women's Health (VA-2 slots) and Trauma Psychology (VA-2 slots).
3. Interdisciplinary teams-based training is also offered as in many medical settings focused on acquiring skills that will enable interns to apply fundamental psychological principles to health care settings with a goal of training interns to function independently in interdisciplinary settings. This training may occur in the general and/or emphasis training rotations.

There are three required seminars:

1. The Diagnostic/Treatment Seminar meets weekly for eleven months of the year and includes application of a “Problem-Based Learning” (PBL) model.  The PBL approach to learning employs a clinical case/problem as the vehicle of learning and demands development of clinical/scientific reasoning.  The Seminar facilitates a 10-week course (two hours per week) that reviews Cognitive Behavior Therapy and introduces ACT which includes joint psychology and psychiatry residency training activities.

2. The Psychotherapy Process Seminar meets for the year and provides a laboratory to develop skills of empiricism and reflection in the nonparticipant mode of peer supervision and in the participant mode of a live therapy session presentation.  Each Intern along with the faculty/seminar directors take turns presenting a psychotherapy case live. Didactics for the seminar focus upon: (a) Common factors in psychotherapy, (b) Supervision, and (c) therapy termination.

3. The Professional Issues Seminar is intended as a complementary endeavor to be devoted to didactics and discussions related to the professional development of the Intern.  The seminar primarily focuses on the non-therapy aspects of being a psychologist.

Other Educational Opportunities Include: Grand Rounds, Workshops, half-day dedicated time for research

# Stipend and Benefits

The program begins in early July of each year and carries an annual stipend of **$33,469 for the 2024-2025 training year**. We currently fund 6 interns for the full internship cohort (4 – AU/MCG and 2 – VA) and anticipate funding a maximum of 10 interns for the joint Class of 2024-2025 internship cohort.

Work hours for interns are 8:00 a.m. to 4:30 p.m. for VA paid interns. Every effort is made to ensure that scheduling and experiences allows for leaving on time although on rare occasions interns may need to or opt to complete additional experiences outside of hours (i.e., timely documentation of crisis patient case or outreach presentations). This will be discussed with supervisors and/or TD as appropriate on a case-by-case basis.

At the VA you will accrue vacation (Annual Leave or AL) and Sick Leave (SL) at the rate of four hours per pay period (every 2 weeks). This amounts to 13 days of annual leave and 13 days of sick leave over the course of the year. The Training Director has discretion to authorize additional professional/educational leave up to 5 days for activities including (but not limited to): interviews, dissertation defenses, conferences, licensing testing, training. The VA also has 11 Federal Holidays. You cannot take more leave than you accrue. Leave time may not be used in bulk at the end of the year without prior approval from the Training Director and all leave must be approved through written documentation.

Interns are also eligible for VA employee health insurance plans, including dental and visual insurance; coverage for families is available.

The CNVAMC has required paperwork which is completed at the beginning of the internship year. Stipends are paid in 26 biweekly installments via direct deposit.

Interns are provided with malpractice coverage through the Federal Tort Claims Act.

The VA as an institution is invested in the recruitment and retention of high quality trainees and staff. As such, a benefit of training within the VA is access to direct hire opportunities for future VA employment. There are annual events held through the Trainee Recruitment Event to help facility these placement opportunities.

# Charlie Norwood VA Information

The CNVAMC is a two-division medical center providing tertiary care in medicine, surgery, neurology, psychiatry, rehabilitation medicine, and spinal cord injury. The Downtown Division is authorized 166 beds (58 medicine, 37 surgery, and 71 spinal cord injury). The Uptown Division, located approximately three miles away, is authorized 123 beds (68 psychiatry, 15 blind rehabilitation and 40 rehabilitation medicine). In addition, a 132-bed Restorative/Nursing Home Care Unit and a 60-bed Domiciliary are located at the Uptown Division. The medical center serves as a network resource for the treatment of spinal cord injury, blind rehabilitation, post-traumatic stress disorder, and psychiatry patients. The primary service area for the CNVAMC includes 17 counties in Georgia and 7 in South Carolina, and approximately 48,000 veterans are served. The CNVAMC serves as a regional resource for the treatment of spinal cord injury, post-traumatic stress disorder, substance abuse, blind rehabilitation and general psychiatry. Psychologists at the CNVAMC are afforded training opportunities that entail the full array of psychological services within these facilities including individual/family/group psychotherapy, psychological assessment, and diagnostic/treatment planning within interdisciplinary health care teams. Consultation/liaison training experiences are available in the Domiciliary Rehabilitation Treatment Program, Medical Rehabilitation units, Substance Use Recovery Clinic, Trauma Recovery Clinic, Women’s Health Program and the VAMC Center for Spinal Cord Injury.

## Psychology Training

Within the Medical Center, Psychology training is conducted within the context of the Mental Health Service Line (MHSL), a multidisciplinary department including professionals from the following disciplines: psychology, psychiatry, social work, and nursing. The mission of the MHSL is patient care, training, and research. The Psychology Training Director and the Training Committee oversee psychology training activities. The entire Psychology Service consists of approximately 30 doctoral level psychologists representing diverse theoretical orientations, clinical specialties, and areas of interest & expertise. Psychologists have major leadership roles within hospital clinics and programs, and have recognized national expertise and leadership within VHA as well as national psychology organizations. Several psychologists in the Trauma Recovery Programs are nationally certified in evidence-based trauma interventions and some serve as Trainers and Consultants for the National Center for PTSD and VA Central Office Training Initiatives in Prolonged Exposure Therapy, Cognitive Processing Therapy, Interpersonal Therapy, and Cognitive Behavioral Therapy for Depression. Staff psychologists have authored textbooks, written numerous professional articles, and helped to develop clinical programs. In addition, psychologists have served on national VHA Work Groups, Task Forces, and QUERIs. Training experiences also involve Primary Care, Geriatrics, Emergency Medicine, and a variety of other specialty areas. To date, nearly all training activities take place at the Uptown Division of the Medical Center.

In addition to the internship training program, the CNVAMC offers an APA-accredited psychology post-doctoral training program, as well as advanced practicum training for local psychology doctoral students from programs including Augusta University and the University of Georgia. Interns may have the opportunity to supervise junior trainees over the course of the training year or may receive supervised supervision from a postdoctoral Fellow.

## Client Population

While the VA patient population is predominantly adult male, there are opportunities for clinical work with women and on occasion couples or families of service members. Interns work with patients who differ widely in race, socioeconomic status, sexual orientation, physical ability, education, religious and spiritual backgrounds, and degree of psychopathology. Psychological services are provided to veterans receiving medical, surgical, and psychiatric care in both inpatient and outpatient settings. Among the psychiatric patients, Interns will encounter a wide range of disorders including depression, anxiety, substance abuse, PTSD, schizophrenia, bipolar disorder, and personality disorders. In the area of medicine, there are opportunities to work with conditions such as neurodegenerative disorders and other neurological disorders, chronic pain, addictions, sexual dysfunction, nicotine addiction, and sleep disorders.

# Program Values and Training Model

Training Program Values and Training Philosophy.The AU/MCG-Charlie Norwood VAMC Internship supports the foundational value of the scientist-practitioner model of training for the professional psychologist. Scientific methods can both inform us of the human experience and guide in the development and implementation of therapeutic responses to life problems. Therefore, training in scientific methods should be a core endeavor for the development of the professional psychologist. We aspire to a training model that we identify as The Empirical Clinician model of training. This model focuses on two primary facets of training in the development of professional psychologists: (1) Training in the implementation of essential practice skills in key field settings; (2) Training in an empirical approach to practice. Our internship emphasizes the training of professional psychologists to practice their skills in medical settings as well as more traditional mental health contexts. Incoming Interns should demonstrate the basic component skills of practice. Broadening the training in the implementation of essential practice skills has been a traditional role fulfilled by internship sites. Consequently, our training efforts seek not only to instruct and train interns in critical assessment and treatment skills but also to ensure that interns learn to adapt these skills in diverse interdisciplinary health care settings. Finally, we endeavor to prepare professional psychologists to provide quality services to underserved and minoritized populations.

Training Model.The Augusta University/Medical College of Georgia-Charlie Norwood Veterans Affairs Medical Center Psychology Internship (AU/MCG-Charlie Norwood VAMC Psychology Internship) training model focuses on two primary facets of training in the development of professional psychologists: (1) Training in the implementation of essential practice skills in key field settings; and (2) Training in an empirical approach to practice (fostering attitudes of empiricism and reflection. The distinguishing characteristic of our training efforts, however, has been our focus on producing professional and diverse psychologists who are well prepared for and seek out careers that are directed toward integrated approaches to health care issues and who aspire to greater cultural awareness and humility in their practice. Consequently, the AU/MCG-Charlie Norwood VAMC Psychology Internship has combined solid grounding in core clinical psychology skills with emphasis training in the areas of integrated health psychology and health behavior care. Integral to all required rotations are joint educational and clinical service activities with primary care physicians, psychiatrists and other physician specialists, nurse practitioners, physician’s assistants, social workers, and other allied health professionals. Furthermore, core competencies taught include skills specifically relevant to the provision of mental health care in medical settings: (1) the application of clinical assessment and treatment in medical settings; (2) the ability to function effectively as a member of an interdisciplinary team, and; (3) the development of consultation strategies in medical contexts. Consistent with overarching principles of professional psychology training, the curriculum of AU/MCG-Charlie Norwood VAMC Psychology Internship intends to provide sequential and cumulative opportunities for the development and demonstration of core competencies. Furthermore, we strive to foster a culture of humility and inclusivity, prioritizing a training environment that is supportive of lifelong learning in multicultural orientation and humility and structural competencies.

Diversity Statement.The CNVAMC serves veterans who represent a wide variety of dimensions of diversity, including but not limited to gender, race, ethnicity, sexual orientation, physical ability, regional affiliation, age, and religious/spiritual orientation. The CNVAMC’s Psychology Postdoctoral Residency is deeply committed to the appreciation of diversity and integrating a multicultural orientation framework into all training and clinical activities. During the training year, Interns develop awareness, knowledge, and skills to enhance cultural humility, cultural opportunities, and cultural comfort through a variety of experiences. These include diversity-focused presentations, readings, and learning activities; discussions with supervisors, peers, and other clinical staff; and direct provision of services to veterans with diverse backgrounds. The overall goal of these training activities is the promotion of social justice, equity and inclusion within the mental health profession and society as a whole.

The CNVAMC Mental Health Service has made efforts to recruit and maintain a diverse psychology staff in a geographic region with limited ethnic and racial diversity. As such, the Residency Program places a high value on attracting a diverse group of Interns and on maintaining an awareness of diversity issues during the residency year. The program appreciates the fact that attracting a diverse group of Interns is important, not only for the residency, but for the staff as well. Throughout the training year, the training program provides various learning activities and trainings that build upon the multicultural competency from graduate training. For example, the training program schedules a number of seminars directly dealing with a variety of diversity topics. We have speakers discuss issues of multicultural competency, religion/spirituality, gender, sexual orientation, culture, and age. The topics vary year to year, in large part due to the requests of the individual training cohort and their needs as determined by the Director of Psychology Training.

# Competencies

This Psychology Internship program strives to promote the development of the full range of generalist skills required for independent functioning as a psychologist, as well as opportunities for emphasis training in the areas of Health and Rehabilitation Psychology, Trauma Psychology, and the unique aspects of Women’s Mental Health within a Veteran population. Consistent with requirements of accreditation and standards of practice, the following competencies represent the areas in which psychology interns at the CNVAMC are evaluated:

|  |
| --- |
| **INTEGRATION OF SCIENCE AND PRACTICE**  **INDIVIDUAL AND CULTURAL DIVERSITY**  **ETHICAL AND LEGAL STANDARDS**  **PROFESSIONAL VALUES AND ATTITUDES**  **COMMUNICATION AND INTERPERSONAL SKILLS**  **CONSULTATION AND INTERPROFESSIONAL/INTERDISCIPLINARY SYSTEMS**  **ASSESSMENT**  **INTERVENTION**  **SUPERVISION** |

# Requirements for Completion

## Hours

Interns must complete 2080 professional hours within the 52-week training year in order to complete the Internship. Of these hours, at least 25% of the hours are required to be “direct hours” which equates to 520 direct service hours over the year. Interns are required to maintain a record of their hours on a specific spreadsheet provided by the program. Interns may use Time-2-Track for hours in addition to this should their graduate program require it and/or should they desire; however, it will not supersede the requirement for completion of the spreadsheet. Verification and feedback is tracked no less than monthly to ensure that Interns will meet expected hours and requirements for the training program. Accrued paid leave time and authorized absences for professional development activities are counted toward the 2080-hour requirement.

## Demonstration of Competency

As outlined above, Interns are continuously evaluated throughout the training year. Evaluation focuses on the successful demonstration of competency in the areas outlined in the Competencies section above. Interns must be rated at a level of 2 or higher across (intermediate to advanced competency) all competencies on the 6-Month Evaluation. If any competencies are rated as a 1 (below average level of competency) on the 6-Month Evaluation, a remediation plan will be established, which includes a specified plan for ongoing evaluation and dates for completion. To meet advanced-level competence upon program completion, Interns must be rated as fully successful across all competencies on the 12-Month Evaluation to successfully complete the program.

Interns must also receive a passing score for research and outreach presentation products and demonstration of clinical interviewing skills and of a CBT-based therapy case.

# Program Structure

## Preparing for Orientation and Onboarding

In order to assist in preparation for the transition to the internship, the Training Director and Program Coordinator will typically exchange correspondence with incoming trainees around onboarding paperwork, preferences for rotation schedule, training experiences desired, and general planning for the move to the area. As you prepare to start the training year, we highly encourage communication within the cohort as well to start building relationships and learn tips from the prior training class. We typically offer a brief virtual meet and greet to provide recommendations for the move, information about the flow of the training year, and formally introduce the cohort members to each other.

## Orientation

Interns begin the training year with several days of orientation to the VA, the Medical Center, and the training program. Interns meet with the Psychology Training Director and with supervisors from all clinical rotations to review and confirm the training opportunities available with each so that the training plan can be finalized. Interns also meet with relevant Mental Health leadership representatives. This process allows time for Interns to begin to develop familiarity with the Medical Center, clinical activities, record keeping, personnel issues, and procedures specific to the Mental Health Service Line. Interns will inform the Training Director of any concerns with rotation preferences/selection by the end of orientation so that clinical training experiences can begin promptly.

## Training Plans and Evaluation

During orientation, Interns complete a self-assessment of their relative strengths and weaknesses with respect to the goals and objectives described above. The Overall Supervisor then meets individually with each Intern to develop a personalized training plan and goals for the year. The goal of the training plan is to identify needed and desired learning activities to round out the Intern’s general training, to further develop fundamental clinical skills, to address deficits in skill or experience, and to gain exposure to new patient populations and methods of assessment and intervention. The Psychology Training Director makes every effort to honor the preferences of the Intern; however, they reserve the right to require certain training experiences if a significant need is identified. The training plan may be revisited and amended at any point in the training year as new interests or needs are identified.

At mid-year and end-of-year, all Interns will formally review their training plans and progress with the Psychology Training Director and the Overall Supervisor with and recommendations discussed from the Psychology Training Committee. Evaluation of Intern progress is ongoing throughout the training year and occurs both informally and formally. Informal feedback is provided continually in weekly supervision and in communication between training staff members. Intern progress is formally discussed by the training staff in monthly meetings of the Postdoctoral Training Committee; areas of strength and areas for growth are documented in the Committee’s meeting minutes. Interns are also formally evaluated by each of their clinical supervisors at the end of each quarter at the VA; the written feedback is reviewed between Intern and supervisor and is submitted to the Psychology Training Director for inclusion in the training file. At a minimum, Interns meet with the Psychology Training Director and the Overall Supervisor twice (at mid-year and at end-of-year) for formal discussions of progress and review of training plans. Additional formal feedback may be scheduled as needed.

# Schedule Expectations

The internship year is divided into two six-month semesters (July- December and January-June).

Across the training year, interns will complete a minimum of 3 and a maximum of 6 training

rotations. Interns may complete up to 4 major rotations (approximately 2 days per week for 6

months) or 1 major and 1 minor rotation (approximately 2 days for major and 1 day per week for minor experiences for 6 months). Please see tables below for major and minor rotations and sample schedules.

One day per week will be dedicated to development of assessment experiences and skills in delivery of evidence based treatment protocols. Interns will be expected to maintain a caseload of approximately 2 psychotherapy cases outside their formal rotations focused on development of skills in a specific therapy (i.e., Cognitive Processing Therapy, Interpersonal Therapy for Depression, Cognitive Behavioral Therapy for Insomnia or Chronic Pain) throughout the training year. Time that is not being used in consultation and therapy delivery will be devoted to Intern completion of psychological assessment batteries with a designated supervisor.

# Rotations

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Location | Rotation | Setting | Major | Minor |
| Uptown | PTSD/Trauma Recovery Program | Outpatient | X | X |
| Uptown | Behavioral Health Interdisciplinary Program | Outpatient | X | X |
| Uptown | Primary Care Mental Health Integration | Outpatient | X |  |
| Uptown | Traumatic Brain Injury Team | Outpatient | X | X |
| Uptown | Blind Rehabilitation Center | Outpatient/Residential |  | X |
| Uptown | Medical Rehabilitation Unit | Inpatient | X | X |
| Uptown | Behavioral Sleep Medicine | Outpatient | X | X |
| Uptown | Acute Psychiatric Unit | Inpatient | X | X |
| Downtown | Spinal Cord Injury Unit | Residential | X |  |
| Downtown | Neuropsychology\* | Outpatient |  | X |

\*Only those with extensive neuropsychology background and training will be considered for the neuropsychology training rotation. The training offered with this rotation will not meet standards for neuropsychology board certification requirements and may not be sufficient to help an intern secure future training/employment in a neuropsychology postdoctoral fellowship or staff position.

# Sample Schedules:

\*Thursdays are typically protected for didactics and trainings. Assessment/EBP psychotherapy cases will be designated to one protected day, but the day of the week may vary by intern and supervisor availability. **Note: Listed rotations are examples; we have no required rotations for interns.** Majors are approximately 2 days per week; minors are approximately 1 day per week.

**Women’s Health track example:**

General practice rotation example for Women's Health. Monday = substance use clinic. Tuesday = Primary Care clinic. Wednesday = Assessment and EBP patients. Thursday = didactics. Friday = Primary Care. 

Emphasis Track example. Monday = trauma clinic. Tuesday = trauma clinic. Wednesday = Assessment and EBP patients. Thursday = didactics. Friday = trauma clinic. 

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**Trauma track example:** General practice rotation example for Trauma clinic. Monday = general outpatient clinic. Tuesday = general outpatient clinic. Wednesday = Assessment and EBP patients. Thursday = didactics. Friday = inpatient clinic. 

Emphasis Track example. Monday = trauma clinic. Tuesday = trauma clinic. Wednesday = Assessment and EBP patients. Thursday = didactics. Friday = trauma clinic. 

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**Health, Behavioral Medicine, & Rehabilitation Medicine Track example:**

General practice rotation example for Health, Behavioral Medicine, and Rehabilitation Medicine. Monday = general outpatient with emphasis in sleep health. Tuesday = Primary Care clinic. Wednesday = Assessment and EBP patients. Thursday = didactics. Friday = Primary Care clinic. 

Emphasis Track example. Monday = spinal cord injury recovery clinic. Tuesday = spinal cord injury recover clinic. Wednesday = Assessment and EBP patients. Thursday = didactics. Friday = TBI, Medical Rehabilitation, and Blind Rehabilitation clinic. 

# Training Activities

Assessments/Psychological Testing Consults **-** Interns are required to complete **a minimum of three psychological testing cases rated at the fully successful level** during the training year. Consults are submitted by providers throughout the Mental Health Service Line (MHSL) and are assigned to Interns, who will be supervised by a member of the Training Committee. The emphasis of this training experience is on enhancing general diagnostic skills, clinical interviewing, and overall assessment/testing skills. Each assessment case is unique and varies broadly along a spectrum of cognitive and personality evaluations. As such, there is no standard test battery or report format. To fulfill the minimum assessment requirement, Interns must be rated at a Level 3 on at least 3 assessments. An integrated report is defined by APPIC as a report that includes a review of history, results of an interview and at least two psychological tests from one or more of the following categories: personality measures, intellectual tests, cognitive tests, and neuropsychological tests.

Examples of personality measures, intellectual tests, cognitive tests, and neuropsychological tests that may be available to Interns are provided below:

**Personality and Adaptive Functioning measures:** Personality Assessment Inventory (PAI and PAI-Adolescent version), Minnesota Multiphasic Personality Inventory (MMPI-2, 2-RF, and 3), Adaptive Behavior Assessment System (ABAS-3), Independent Living Scales, Millon Clinical Multiaxial Inventory-IV, Autism Diagnostic Interview – Revised (ADI-R), Ages & Stages Questionnaire (ASQ-3), Behavior Assessment System for Children (BASC-3), Gilliam Autism Rating Scale (GARS-3), Vineland Adaptive Behavior Scales (Vineland-3), Miller Forensic Assessment Of Symptoms Test (M-FAST), Structured Interview of Reported Symptoms (SIRS-2), Psychopathy Checklist Revised (PCL-R), HRC-20 V3, Pain Patient Profile (P-3), Texas Functional Living Scales (TFLS), Rorschach

**Intellectual tests:** Wechsler Intelligence Scale for Children (WISC-V), Wechsler Adult Intelligence Scale (WAIS-IV), Wechsler Preschool & Primary Scale of Intelligence (WPPSI-IV), Wechsler Abbreviated Scale of Intelligence (WASI-II), Test of Nonverbal Intelligence (TONI-4)

**Cognitive and Neuropsychological tests:** Wechsler Memory Scales IV (WMS-IV), Woodcock Johnson Achievement, Test of Memory Malingering (TOMM); Clinical Assessment of Attention Deficit -Adult (CAt-A), Repeatable Battery for the Assessment of Neuropsychological Status (RBANS), NEPSY-II, Wechsler Individual Achievement Test (WIAT-4), Wide Range Achievement Test (WRAT-5), Montreal Cognitive Assessment (MOCA), Mini Mental Status Exam (MMSE), Wisconsin Card Sorting Test, Competency Assessment for Standing Trial (CAST-MR), Validity Indicator Profile (VIP), Delis-Kaplan Executive Function System (D-KEFS), California Verbal Learning Test (CVLT-II), Boston Naming Test (BNT), Rey 15-Item Test

Supervision: Psychology Interns are considered junior colleagues in many respects and are expected to demonstrate a developmentally appropriate degree of autonomy and self-motivation. APA guidelines require that Interns receive a minimum of two hours of individual supervision each week and four hours of total supervision minimum. Supervision of psychotherapy cases is provided by at least two licensed psychologists during the training year, each of whom typically spends one hour per week reviewing cases with the Intern. Supervision of assessment work involves additional scheduled, formal supervision. Less formal supervision occurs on the go during rotation days as indicated and during seminars or mentoring from training staff. Supervision by professionals from other disciplines may be arranged when desired and appropriate.

Didactics: Interns are required to participate in didactics, as described above, with additional elective didactic opportunities if desired (i.e., AU/MCG Psychiatry Grand Rounds, VA Community of Practice calls). This training often includes additional emphasis in suicide risk evaluation, safety planning, and lethal means restriction training.

Research: Intern Research/Scholarly time is facilitated by providing 4 hours of dedicated time each week for scholarly activities. This time can be used for dissertation efforts, if not yet completed. Interns must produce a scholarly paper, either from the dissertation or other research activities, that is of publishable quality by May of the internship year.

Supervision Training: All Interns have the opportunity to develop supervision skills through supervision didactics and demonstration of skills in simulated practice during didactics. As available, we also strive to offer supervised supervision of one practicum student. Interns who are working directly with a practicum student are provided with supervision of supervision by a licensed psychologist (1 hour per week).

Outreach: Interns are required to participate in one outreach activity designed to provide mental health education for consumers and providers on issues of prevention and treatment of mental health disorders based on the needs of the mental health consumers and providers. Interns may also work with the committee throughout the hospital such as the Women’s Health Committee for the Medical Center or the Suicide Prevention Team.

Emphasis Areas:Depending on which track an individual is matched to, the program and training faculty strive to facilitate opportunities for additional training through offerings with local, regional, and national trainings; consultation opportunities with experts; recommendation for area specific training within the TMS training portal (VA-funded); emerging research articles; and area outreach.

# Facility and Training Resources

Interns have full access to the same level of clerical and technical support as staff psychologists. They are provided with computers that have full access to the hospital network, Microsoft Office, and access to the Internet. Printers and secure fax machines are readily available in all treatment areas of the hospital. Support staff is available to assist Interns in scheduling appointments, administrative tasks, coordination of multimedia equipment, and negotiating the Medical Center’s bureaucracy. Interns have access to technical support for their computers and telephones through the Information Technology Service, a representative of which works within the MHSL and is available by phone or email. The VA network has a number of psychological tests available for computer-based administration. In addition, the psychology staff has an extensive inventory of tests and test materials. Interns are also able to use the Medical Center’s library, which provides them with access to computer-based resources, a variety of in-house materials, and almost unlimited access to materials available through affiliation with other libraries. Multimedia equipment, including video and audio machinery, can be accessed through the Medical Media Service.

Each Intern has a private office in their primary work area with access to a shared group office for documentation and training preparations. Offices are equipped with desks, computers, and locked cabinets to secure sensitive information and personal belongings. While space at the CNVAMC is always in high demand, Interns are always provided with sufficient clinical and administrative space. Conference rooms and group therapy rooms throughout the Medical Center are used for group sessions and training seminars.

# Training Staff

Depending on the elective and general therapy and assessment experiences chosen, Interns may work with any of the approximately 15 members of the psychology training staff during the course of the year if schedule permits. Information for the core faculty for the Internship is listed below.

In addition to working with the CNVAMC Training Director, Dr. Speed, interns will work with overall supervisors (point supervisor for administrative roles and/or clinical supervision), rotation supervisors (clinical only), and have the option to also select faculty mentors (non-evaluative).

# Core Psychology Training Committee Members (2024-2025)

## CNVAMC Psychology Training Director

* **Katrina Speed, Ph.D.** [katrina.speed@va.gov](mailto:katrina.speed@va.gov) – Clinical psychologist; rotation supervisor for

Primary Care Mental Health Integration (women’s health clinic) and outpatient behavioral sleep medicine rotation; CNVAMC Psychology Training Director

## Acute Psychiatric Unit

* **Crystal Roberts, Ph.D.** [crystal.roberts@va.gov](mailto:crystal.roberts@va.gov) **–** Clinical psychologist; rotation supervisor/mentor

## Behavioral Health Interdisciplinary Team (General Outpatient Clinic)

* **Wendy Fogo, Ph.D**. [wendy.fogo@va.gov](mailto:wendy.fogo@va.gov) – Clinical psychologist; rotation/case

Supervisor (virtual)

* **Daniel Fry, Ph.D.** [daniel.fry@va.gov](mailto:daniel.fry@va.gov) – Counseling psychologist; rotation/case supervisor
* **Cody Carson, Ph.D.** [cody.carson@va.gov](mailto:cody.carson@va.gov) – Clinical psychologist; CNVAMC

Assistant Chief of Mental Health; rotation supervisor/mentor

## Outpatient Polytrauma/TBI Clinic and Inpatient Medical Rehabilitation Unit

* **Jennifer Lind Whitford, Ph.D.** [jennifer.whitford@va.gov](mailto:jennifer.whitford@va.gov) – Counseling psychologist

and Assistant Clinical Professor; didactics and supervisor with specialty skills in behavioral medicine and treatment of TBI and chronic pain; rotation/case supervisor

## Spinal Cord Injury/Disorders and Consultation Liaison

* **Jill Hann, Ph.D**. [jill.hann@va.gov](mailto:jill.hann@va.gov) – Clinical psychologist and Assistant Clinical

Professor; rotation supervisor

* **Keith Monroe, PsyD.** [keith.monroe@va.gov](mailto:keith.monroe@va.gov) – Clinical psychologist and Assistant

Clinical Professor; rotation/case supervisor

* **Debra Pierce, Ph.D.** [debra.pierce2@va.gov](mailto:debra.pierce2@va.gov) – Neuropsychologist; case/rotation

Supervisor

## Suicide Prevention

* **Lisa Gerardot, LCSW** [lisa.gerardot@va.gov](mailto:lisa.gerardot@va.gov) – Clinical social worker; CNVAMC Suicide Prevention Program Manager; didactics and/or rotation supervisor

## Trauma Recovery Clinic

* **Vicie Hurst, Ph.D.** [vicie.hurst@va.gov](mailto:vicie.hurst@va.gov) – Clinical psychologist; rotation/case

Supervisor (virtual)

* **J. Richard Monroe, Ph.D.** - [j.richard.monroe@va.gov](mailto:j.richard.monroe@va.gov) – Clinical Psychologist; TRC

Program Manager; rotation/case supervisor

* **Timothy Perry, Ph.D.** – [timothy.perry3@va.gov](mailto:timothy.perry3@va.gov) – Clinical psychologist; rotation/case supervisor
* **Shannon Rogers, Ph.D**. [shannon.rogers4@va.gov](mailto:shannon.rogers4@va.gov) – Clinical psychologist; rotation/case supervisor

## Affiliated Faculty

* **Alan Campbell, Ph.D.** [alan.campbell@va.gov](mailto:alan.campbell@va.gov) – Counseling Psychologist; BHIP Psychologist in Athens CBOC; mentor/didactics speaker
* **Jaclyn Kraemer, Ph.D.** [jaclyn.kramer@va.gov](mailto:jaclyn.kramer@va.gov) – Clinical Psychologist; TRC Psychologist (virtual) ; mentor/didactics speaker
* **Sarah Rowland, Ph.D**. [sarah.rowland@va.gov](mailto:sarah.rowland@va.gov) – Clinical psychologist; CNVAMC

Assistant Chief of Mental Health

* **Dustin Wright, Ph.D.** [dustin.wright@va.gov](mailto:dustin.wright@va.gov) – Clinical psychologist and Associate

Clinical Professor, CNVAMC Chief of Mental Health