



*Updated October 2023*

**Application Due Date: December 15th**

## ***Accreditation Status***

The Clinical Psychology Postdoctoral Residency at the **Stratton VA Medical Center (VAMC)** is accredited by the Commission on Accreditation of the American Psychological Association. The Commission can be contacted at Office of Program Consultation and Accreditation 750 First St, NE, Washington, DC 20002-4242 or by telephone at (202)-336-5979.

## ***Application & Selection Procedures***

**Eligibility:** Applicants must meet the following prerequisites to be considered for our postdoctoral residency program:

- Completion of doctoral degree, including defense of dissertation, from an APA-accredited Clinical or Counseling Psychology program before the start date of the residency.
- Completion of an APA-accredited psychology internship program.
- U.S. citizenship.
- Male applicants born after 12/31/59 are required to have registered for the draft by age 26 to be eligible for any federal employment including appointment as a VA paid trainee.

\*\*\* Failure to meet these qualifications will nullify an offer to an applicant.

## **Selection Process**

We seek applicants who have a solid academic and internship record; strong entry-level professional skills in assessment, intervention, and research techniques; and the personal characteristics necessary to function well as a doctoral-level professional in a medical center environment. We select candidates from many different kinds of programs and theoretical orientations, from different geographic areas, of different ages, of different ethnic backgrounds, and with different life experiences. Our training program and the Stratton VA Medical Center in which it resides are committed to Affirmative Action and Equal Opportunity in Employment.

Applications are initially reviewed by the selection committee which is composed of psychologists involved in postdoctoral training. Following the initial review by the selection committee, highly ranked applicants will be invited for an in interview. All interviews will be held virtually. Offers will be extended in accordance with APPIC Postdoctoral Selection Standards and Common Hold Date.

## **Training Term**

The clinical psychology postdoctoral residency is full-time for one year, beginning on or about September 1<sup>st</sup> 2024.

## Stipend and Benefits

For the upcoming year (2024-2025), we expect to receive funding for 2 full-time postdoctoral positions with a stipend of approximately \$53,995 per year. Residents are entitled to 10 federal holidays and earn sick leave and vacation days at a rate of 4 hours of each per two-week pay period. Residents are encouraged to use all of their annual leave before completion of the training year. Unused sick leave may be applied to future federal employment. Up to 40 hours of additional leave may be granted for attendance at conferences and workshops, for other continuing education activities, or for the purpose of applying for VA employment. Postdoctoral residents are not covered by Federal Employee retirement and are not eligible for federal life insurance benefits but are eligible for health insurance benefits.

## Policies

The Stratton VA Medical Center's Clinical Psychology Postdoctoral Residency program selects applicants who are committed to an extra year of focused training and supervision and are committed to completing that year of training.

The Stratton VAMC postdoctoral residency program follows the guidelines set forth by the Association of Psychology Postdoctoral and Internship Centers (APPIC). You will find a copy of the guidelines in effect for this application year at the APPIC website at [www.appic.org](http://www.appic.org).

It is the strict policy of the Stratton VA Medical Center's postdoctoral residency program that selected applicants must have successfully defended their dissertation and must complete all other degree requirements before they begin their residency. Residents must receive approval from the Training Committee to engage in any employment outside of the residency.

Procedures for due process in cases of problematic performance are in place, as are grievance procedures to be followed by residents and staff alike. A copy of this document may be obtained by using the e-mail address found in the application section of this brochure. We collect no personal information about potential applicants when they visit our website.

## Application Checklist

Please apply via email to the training director. All application materials are to be submitted electronically within one email with the following required documents as described below.

1. Description of your interest and experience.
2. Description of the status of your dissertation, including details related to phase of the project and expected dates for subsequent phases and/or completion
3. CV (which includes a brief description of internship rotations)
4. Three letters of recommendation (at least one from an internship supervisor, and at least one from doctoral program faculty). Letters should be signed and scanned into a PDF document. References may either submit their signed PDF directly to the applicant (to include within one's email application) or send directly to the program.
5. Official transcripts of your undergraduate and graduate work (photocopies of official transcripts are fine).
6. One sample de-identified assessment report.

Email one complete application package to the training director, Maggie Stoutenburg, Ph.D.:  
[Maggie.stoutenburg@va.gov](mailto:Maggie.stoutenburg@va.gov)

In your application email, please follow exactly the directions below:

Within the subject line of your email, in this exact format, type your last name, first name, Post Doc Application, i.e. Smith, John, Post Doc Application. It is important **to make sure to format your subject line exactly as listed, so as to make sure your application sorts to the correct folder in our data base.**

Within the body of your email, please copy and paste the following twelve questions. Only include your answers to these questions in the body of the email:

1. Your name
2. Graduate program
3. Concentration (Clinical or Counseling)
4. Degree (Ph.D. or Psy.D)
5. APA accreditation ("Yes", "No", "Probation")
6. Internship
7. APA accreditation ("Yes", "No", "Probation")
8. Defense date (either "completed", "set" or "projected")
9. U.S. Citizen ("Yes" or "No")
10. Email address
11. Home address
12. Phone numbers (indicating which one you prefer we use to contact you)

## **Psychology Setting**

### **Stratton VAMC**

The Stratton VA Medical Center, part of VA Health Care Upstate New York, is located in the heart of Albany, New York. Located in the capital of New York State, this medical center serves veterans in a 200-mile radius. Opened in 1951, the medical center serves veterans in 22 counties of Upstate New York, Western Massachusetts and Vermont.

The Stratton VA Medical Center provides specialized medical services such as: cardiac catheterization, cardiac rehabilitation, nuclear medicine, radiation oncology, stereotactic radiosurgery, hospice/palliative care, adult day health care, treatment of posttraumatic stress disorder, compensated work therapy, memory clinic, geriatric assessment, Community Living Center and respite care. In addition, we offer a Women Veterans Health Program that addresses a variety of health care needs specific to women veterans. Services include gynecology, bone density screening and on-site mammography. There is also extensive diagnostic laboratory medicine and radiology including computerized tomography, and magnetic resonance imaging.

The American College of Surgeons designated the Stratton VA as a Comprehensive Cancer Center. Affiliated medical residency programs are fully integrated with Albany Medical College. Residents and medical students from Albany Medical College and other medical schools rotate through the medical center on a continuous basis. We also provide internships/residencies for most health care disciplines, including: psychology, social work, nursing, public relations, and health care administration. In sum, the goal of Stratton VA Medical Center is to provide the highest quality health care services through continuous quality improvement and technical excellence.

### **Albany, New York**

Albany, capital of New York State, with a population of approximately 100,000, offers the members of its community many advantages of metropolitan living, while maintaining a geographic position that places the city in close proximity to areas of great natural beauty. Chartered in 1686, Albany offers a charming blend of the old and the new. The contemporary Empire State Plaza (a 98 1/2 acre complex of governmental buildings) contrasts interestingly with the surrounding 17th and 18th century architecture. A broad range of cultural activities flourish in the Capital District, including several theater groups, chorale societies, and the Albany Symphony Orchestra. Spectators of the arts enjoy the Saratoga Performing Arts Center (summer home of the New York City Ballet, the Philadelphia Orchestra, and the New York City Opera Company, and host to an array of musical performers), the Berkshire Music Festival at Tanglewood in Lenox, Massachusetts, and many summer stock theater groups located in the communities surrounding the city.

For those who enjoy outdoor activities, the areas around Albany have much to offer. The Adirondack, Catskill, and Helderberg Mountains in New York, as well as the White Mountains of New Hampshire and Green Mountains of Vermont, all replete with State and National Forests, offer excellent opportunities for hiking, camping, boating, and a myriad of winter sports. Downhill and cross-country skiing facilities from Lake Placid to areas in Vermont offer some of the best skiing in the Northeast. Vacation areas such as Saratoga Springs (home of the world famous thoroughbred racetrack - Saratoga Race Course), Lake

George, and Lake Champlain are nearby. Also located within an easy drive are New York City, Boston, and Montreal.

Albany is an area rich in academic traditions. Within the tri-city area (Albany, Schenectady, and Troy), there are several universities (The State University of New York at Albany, Rensselaer Polytechnic Institute, and Union University), colleges (Russell Sage College, The College of St. Rose, Siena College, and Maria College), and professional schools (Albany College of Law, Albany College of Pharmacy, and Albany Medical College).

The cost of living in Albany is quite reasonable when compared to most East Coast cities. For those residents in need of housing, apartments within walking distance from Stratton VAMC average around \$800/month for a one-bedroom apartment.

## **Training Model and Program Philosophy**

Our program is a clinical psychology postdoctoral residency with an emphasis in Posttraumatic Stress Disorder. We believe that advanced training in professional psychology should first and foremost facilitate the continuing and maturing consolidation of a trainee's identity as a psychologist. This process is collaborative and characterized by a sequential progression of academic and clinical training. Residency provides the capstone of this education and allows for greater breadth and depth of experiences than is appropriate for pre-doctoral interns. The clinical and programmatic activities within which post-doctoral residency are integrative, complex and focused. Integrative in the sense of pulling together the varied strands of professional identity thus far developed towards a cohesive whole; complex in the clinical challenges and activities within which the resident engages, and focused by the emphasis of the program (PTSD). The training model of the Stratton VAMC has four key components: 1) the development of strong mentoring relationships with senior psychologists who take responsibility for role modeling a cohesive sense of professional identity 2) varied clinical experiences in a variety of multidisciplinary settings that allow residents to function in a broad range of roles (e.g. treatment provider, evaluator, consultant, supervisor, educator) 3) seminars specifically designed for residents to provide advanced didactic training in small group settings in specialized techniques and theory and 4) completion of a scholarly project that addresses an area of programmatic need or interest.

The clinical psychology post-doctoral residency at the Stratton VA Medical Center follows a Practitioner/Scholar model. We believe that professional psychologists are essentially distinguished by the internalization of a hypothesis testing approach to the broad range of clinical activity. What differentiates the field of professional psychology in our setting most clearly from other health care disciplines is rigorous training in the application of scientific methods to the understanding and amelioration of human suffering. While our training model does not require formal participation in research, faculty and trainees are expected to model the ability to understand, utilize, and communicate research results to others in a sophisticated manner. This model emphasizes applied clinical experience in the context of close mentoring relationships with senior psychologists. The evidence base of psychology is utilized to inform practice and this is imparted to trainees in a number of ways.

As the capstone of formal training, a post-doctoral residency combines the final underpinnings of the socialization of a sense of professional identity with opportunities for expansion of technical expertise. In addition residents must transition to being fully responsible for their own professional growth and development. Thus, advanced training in professional psychology should be grounded in a broad and general foundation of knowledge of the latest empirical findings in theory and practice as well as a sophisticated appreciation of the cultural and historical context within which these findings are embedded. Advanced training should include a balance of exposure to clinical experiences, intensive supervision, didactic instruction, and guided independent study. Socialization into the profession is also facilitated by consultation experiences in multidisciplinary settings characterized by respect for the different proficiencies that various health care disciplines bring to bear in treating patients. Residents are exposed to a variety of theoretical orientations and trained according to a trans-theoretical model that integrates research from a variety of different schools including cognitive behavioral, psychodynamic, and systemic models. Our collegial model of training treats residents as partners and they are involved as full professionals in peer consultation meetings. Finally, identity development in professional psychology is enhanced by training and experience as a supervisor for less experienced trainees. This is accomplished

within a training community that includes psychology students at various levels of development. Completion of a clinically relevant post-doctoral project permits residents the opportunity to refine their skills in research and program evaluation, giving them exposure to the ways which data based projects can provide direction and contribute to leadership in a medical center environment.

A PTSD program within a Veteran's Administration Medical Center provides a setting that combines a focused experience as part of a single multidisciplinary clinical team with the ability to branch out as a consultant throughout the hospital. This offers residents a stable base from which to operate throughout the training year, while also providing opportunities to make independent choices about other clinical experiences they would like to obtain. By adopting a collaborative set in their own training residents are encouraged to become actively engaged in their learning experiences as a transition to the independent lifelong learning that exemplifies successful professional psychologists. We expect that this process from selection of candidates through the various training experiences will have the potential to develop early career psychologists with strong clinical leadership potential in public health settings.

## **Program Goals & Objectives**

Goals for the clinical psychology postdoctoral residency include the development of advanced competencies in the diagnosis, assessment, and treatment of Posttraumatic Stress Disorder (PTSD). Residents will become proficient in administering and interpreting semi-structured interviews and rating scales to assist in diagnosing and developing treatment plans. Skills will be developed at interviewing in order to be able to complete comprehensive reports that emphasize the impact of traumatic stress on the life trajectory of patients. Broad conceptual familiarity with multiple theoretical approaches to understanding the onset and maintenance of posttraumatic stress symptoms will be assimilated over the training year. This will also include exposure to assessment of the overlap between stress disorders and traumatic brain injury symptoms that are a particular issue for veterans returning from current conflicts in Iraq and Afghanistan. Trainees will learn evidence based treatments for PTSD and will have the opportunity to deliver these treatments across a variety of modalities including individual, couples, and group psychotherapy. Completion of the Stratton VA postdoctoral residency program will meet supervised experience requirements to qualify (along with completion of the national exam) for New York state licensure to practice as a psychologist. By the end of the training year residents are expected to be extremely strong candidates for employment across a variety of treatment settings within the Department of Veterans Affairs and other public health sites (in fact eleven out of twelve residents who came to our program are currently employed by the Veteran's Administration, seven of these in our own setting).

## **Program Structure**

The clinical psychology postdoctoral training program is designed to be flexible in order to meet each resident's individual goals for training. The postdoctoral residency requires a one-year, full-time training commitment. Residents typically average 40 hours per week on site with at least half that time (20 hours) spent in clinical service delivery. Residents will be administratively housed within the Posttraumatic Stress Disorder Program of the Behavioral Health Clinic. The Director of the PTSD Program and the Director of Psychology Training will take full and final responsibility for administering the Residency. Over the course of the training year residents will meet with the Training Director to develop and implement an individualized training plan for the upcoming year.

## **Seminars**

Residents will attend weekly seminars that emphasize the development of competency and a solid knowledge base in PTSD and related clinical areas. Opportunities are available for residents to attend and participate in other educational seminars and case conferences throughout the hospital and community. Residents also attend a monthly **diversity seminar** held throughout the year. The goal of the diversity seminar is to further postdoctoral residents' training and understanding of issues of diversity and to support their growth towards becoming culturally competent psychologists. Residents are encouraged to recognize the importance of multiculturally sensitive treatment and to reflect on their own areas of weakness and strength with regards to this. The seminar meetings incorporate readings, TED talks, case material and self-reflection to help trainees develop culture-centered practices. Issues related to gender, race, social class, age, disability status, training status, veteran status, religion, sexuality, power, and social justice are explored. Trainees are encouraged to reflect on their own backgrounds, identities, world-views, and attitudes to increase their awareness of their potential biases and impact on others through the various roles performed by psychologists.

Residents are expected to discuss case material during the meetings, to include issues they may be struggling with related to diversity issues, and successes in both individual and group treatment. Current social events and how these may impact the work are also discussed. Similarities and differences between therapist and clients are explored as well as culturally informed assessment and intervention strategies. The later meetings also include a focus on developing a culturally competent approach to the provision of supervision.

### **Case Conference/Research Discussion**

Residents attend monthly case conference presentations and monthly research discussions held in the PTSD program. Residents are expected to participate in these team-based discussions and are assigned to present to the team one case conference presentation and lead one research discussion on topics related to PTSD and clinical care. Residents' presentations are expected to reflect their advanced training status.

### **Scholarly Project**

Scholarly activity is viewed as an integral part of the clinical psychology postdoctoral training experience. To this end, residents will be provided with up to 20% of their training time to complete a scholarly or program development project commensurate with their interests and areas of faculty expertise. Residents may also choose to contribute to ongoing projects conducted at the Medical Center. Since completing original data collection projects can be challenging within the confines of a 12-month training program, residents may take advantage of opportunities to collaborate with staff. Residents are expected to present their scholarly projects to the Psychology Discipline Meeting towards the end of the training year.

### **Supervision**

Residents will have a single mentor with whom they will work throughout the year while also working with other supervisors in specific contexts of assessment and treatment. Supervised experience in providing supervision to interns and practicum students will also be available. Along with staff psychologists, residents will co-facilitate a supervision group that includes interns and practicum students. In addition to a minimum of 2 hours of individual face to face supervision per week, residents will also meet monthly with the Director of Training to monitor their progress in the program and discuss professional issues.

### **Evaluations**

A comprehensive and bidirectional evaluation process will assist residents, supervisors, and the program in improving all aspects of the residency. Residents' progress and performance will be evaluated throughout the training year with multiple criterion measures. Residents will also have multiple opportunities to rate themselves, their supervisors, and the program in general.

### **Resident Evaluation**

Over the course of the training period, residents will be evaluated by their supervisors in several domains. In addition, residents will rate themselves over the course of the training year. Residents will meet at specified intervals with supervisors to review ratings and discuss goals for further development. The training director will receive copies of the evaluations and will meet with each resident to review the performance ratings and provide any additional guidance or recommendations.

### **Supervisor/Program Evaluation**

Residents will complete formal rating scales to indicate their satisfaction with respective supervisors, training experiences and outcomes, quality of supervision, didactic experiences, scholarly or research involvement, and facilities and resources available. The training director will review residents' satisfaction ratings and take reasonable steps to address any areas of concern. Throughout the year, the training director will meet with residents in order to gather additional feedback about the training experience and to inform the continuous improvement of the postdoctoral training program. It is expected that residents will provide feedback to their supervisors on an ongoing basis concerning their needs and the extent to which the training activities are fulfilling their goals.

### **Primary Training Experience**

Residents will spend the majority of their training year working as part of the PTSD Team. In this regard they will complete comprehensive clinical assessments of newly presenting patients who have been referred to this clinic. They will also provide individual and group psychotherapy to patients. Residents

will also receive training and exposure to other psychometric assessments on patients with complex presentations of Posttraumatic Stress Disorder.

### **Posttraumatic Stress Disorder Program (PTSD):**

The PTSD program is an intensive program designed to provide treatment to combat veterans with readjustment problems (including Posttraumatic Stress Disorder). As substance abuse is a problem afflicting many in this group, a close collaboration exists between the PTSD and chemical dependency programs. Services provided by the PTSD program take three basic forms: 1) consultation services regarding the diagnostic and treatment issues of this population; 2) outpatient group treatment programs designed to address skill deficits which frequently interfere with adaptive function; and 3) individual treatment focusing on desensitization and the emotional processing of traumatic memories via evidence based therapies.

In particular, the training program is designed to provide postdoctoral residents with a wide range of clinical skills including diagnosis and assessment of PTSD, treatment plan development, individual and group therapies, and psycho-educational workshops. Since 1990, a specific emphasis has been placed upon the use of evidence-based interventions tailored to the needs of individual patients. Currently the PTSD program clinicians utilize Prolonged Exposure, Cognitive Processing Therapy and Written Exposure Therapy for trauma processing. In addition to traditional group therapy methods, PTSD clinicians conduct time-limited groups focused on the simultaneous treatment of PTSD and substance abuse (i.e. Seeking Safety); emotion regulation skills (i.e. Dialectical Behavior Therapy); Cognitive Processing Therapy (CPT). This integration of evidence-based practice with experiential methods promotes patient attachment, minimizes missed appointments, and promotes quality treatment with positive outcomes.

### **Additional Training Experiences**

Residents will also have the opportunity to participate in one of several training contexts briefly described below.

#### **Behavioral Health Clinic (BHC):**

Clinicians at the Stratton VA Medical Center Behavioral Health Clinic work on a multidisciplinary team with responsibility for screening, diagnosing, assessing, and treating a broad spectrum of patients. A wide range of mental health opportunities exist for working with veterans with combat related PTSD, including group, marital and family therapies, as well as management of psychopharmacological issues. Referrals that might be seen by residents that would broaden their experience might include cases emphasizing non-combat PTSD and childhood sexual abuse.

#### **Chemical Dependency Rehabilitation Program (CDRP):**

Residents serve as an integral member of a multidisciplinary treatment team consisting of professional and paraprofessional staff devoted to the treatment of veterans with alcohol and drug abuse/dependence problems. A multimodal treatment approach is used, which includes individual, group, and milieu psychotherapy/counseling, lectures, discussions, 12-step meetings, experiential tasks, and other therapeutic activities. An important subset of the CDRP population is the patient who is dually diagnosed with both mental illness and addictions.

#### **Adult Inpatient Psychiatry:**

Veterans who need individual intensive crisis oriented assessment and intervention for the treatment of their mental illness or substance abuse problem may be admitted to the inpatient psychiatry program. Inpatient treatment stays are relatively short (3-10 days) and are supplemented with referral services in the outpatient continuum of care. These programs provide the veteran with an individualized care plan delivered by a multidisciplinary team of mental and physical healthcare professionals in a holistic model of recovery and care. Residents will conduct diagnostic interviews and administer tests, facilitate group therapy sessions, develop case management skills, and otherwise work as members of the inpatient team to reduce psychiatric symptomatology and restore the veteran's ability to function independently.

#### **Behavioral Health Recovery Center (BHRC):**

The Behavioral Health Recovery Center (BHRC) BHRC is a program primarily for veterans with the most severe mental illnesses who have also been "high users" of inpatient psychiatric services. The primary goals of BHRC are to facilitate each veteran's ability to maintain stability in the community without the

need for inpatient care, and to improve each veteran's quality of life. BHRC provides a broad continuum of treatment services ranging from outreach based interventions to onsite day treatment, all of which are designed to address the wide ranging needs of veterans with severe mental illnesses. Residents have the opportunity to engage the following activities: individual and group therapy, case management, recreational therapy, and vocational rehabilitation.

**Community Based Outpatient Clinics (CBOCs):**

Community Based Outpatient Clinics provide a comprehensive, integrated primary care that creates opportunities for veterans who have psychiatric disabilities to work toward symptom resolution and maintain a productive life-style. Residents function as members of a small multidisciplinary team and have the opportunity to engage in the following activities: short term individual psychotherapy, group therapy, couple's and family therapy, psycho-educational interventions, psychological and neuropsychological testing, crisis intervention, case management, and supportive therapy.

**Home Based Primary Care (HBPC):**

Home Based Primary Care is a group effort between the veteran, family, caregiver, Department of Veterans Affairs, and the community. The program uses a team of health care professionals who work together to create a plan of care for each veteran. The program is designed to meet the needs of veterans who are homebound because of illness, caregiver issues, or whose care needs will best be met within their own home. With the overarching goal of improving quality of life and restoring levels of health, services include: nutritional counseling, telemedicine, chart and medication review, and psychological services. Residents function as members of the multidisciplinary team and provide psychological testing and interventions as well as case management.

**Community Living Center (Nursing Home Unit):**

The CLC provides individual and group psychotherapy, family interventions, psychological and cognitive assessment, and behavioral interventions to patients on this long-term care unit. Residents also have opportunities to provide assessment, consultation, and education to staff on the unit and on other medical units in the hospital. Residents interface with medical providers, physical and recreation therapists, nursing staff, administration, behavioral health providers and all members of the multidisciplinary team. An array of behavioral tools and theoretical perspectives are applied to the medical setting including most especially behavioral, existential and systemic interventions.



## Training Staff

### **Maggie Stoutenburg, Ph.D.**

State University of New York at Buffalo, 2008

**Primary Assignment:** Director of Clinical Training for Psychology & PTSD Clinical Team Manager

**Primary Specialty:** PTSD

**Interests:** Trauma recovery, Individual and Group Psychotherapy, Grief and Loss, Psychedelic Assisted Psychotherapy, Suicide Postvention,

### **William Breen, Ph.D.**

George Mason University, 2009

**Primary Assignment:** Chief of Psychology

**Primary Specialty:** Anxiety, Depression, ACT

### **Annette Payne, Ph.D.**

State University of New York, University at Albany, 1994

**Primary Assignment:** Chief of Mental Health

**Primary Specialty:** Behavioral medicine, healthy psychology

### **Caitlin Holley, Ph.D.**

University of Louisville, 2009

**Primary Assignment:** Community Living Center

**Primary Specialty:** PTSD, Neuropsychology, Geriatrics

**Interests:** Dementia screening and evaluation, Caregiving, Trauma recovery, Dual diagnosis, Psychedelic Assisted Psychotherapy

### **Steve Nozik, Ph.D.**

SUNY Buffalo, 1986

**Primary Assignment:** Behavioral Health Clinic

**Primary Specialty:** Cognitive and group therapy

**Interests:** Treatment of trauma and addictions, couples therapy, group therapy, cognitive therapy, eye movement desensitization and reprocessing.

### **Amanda Smith, Ph.D.**

University of Nebraska-Lincoln, 2010

**Primary Assignment:** PTSD

**Primary Specialty:** PTSD, MST

**Interests:** Trauma recovery, sexual revictimization, chronic pain, supervision.

### **Devon Cummings, Ph.D.**

The University of Akron, 2008

**Primary Assignment:** Chemical Dependency Rehabilitation Program Manager Chemical Dependency Rehabilitation Program

**Primary Specialty:** Substance Use Disorders

**Interests:** Substance Use, Palliative Care, Behavioral Medicine, Vocational Behavior, & Criminal Justice

### **Kevin Pertchik, PhD**

CSPP/Alliant Fresno, 2001

**Primary Assignment:** PTSD

**Primary Specialty:** CBT, Stress Inoculation, PTSD

**Interests:** PTSD, Comorbid Depression

**Matthew Golley, PhD**

Palo Alto University, 2017

**Primary Assignment:** PTSD

**Primary Specialty:** PTSD, CPT, Trauma recovery

**Interests:** Mindfulness, PTSD, Trauma recovery

**Thomas Schwartz, Ph.D.**

Fairleigh Dickinson University, 2006

**Primary Assignment: Neuropsychology**

**Interests:** Neuropsychology, Rehabilitation Psychology, and Psychological Assessment

**Leslie Waite, Psy.D.**

Adler University, 2018

**Primary Assignment:** Chemical Dependency Rehabilitation Program/Disruptive Behavior Committee

**Interests:** Substance Use Disorders, PTSD

**Joanna Young, Ph.D.**

CUNY Graduate Center/John Jay College of Criminal Justice, 2018

**Primary Assignment:** PTSD

**Primary Specialty:** PTSD

**Interests:** Trauma recovery, individual and group therapy, supervision, equine-assisted psychotherapy

## Post Doctoral Trainees

### 2021-2022

Long Island University, Brooklyn	Ph.D	Clinical Psychology
Fielding University	Ph.D.	Clinical Psychology

### 2020-2021

SUNY Albany	Ph.D.	Clinical Psychology
Boston University	Ph.D.	Clinical Psychology

### 2019-2020

Seton Hall University	Ph.D.	Counseling Psychology
CSPP/Alliant University	Psy.D.	Clinical Psychology

### 2018-2019

Seton Hall University	Ph.D.	Counseling Psychology
Graduate Center, CUNY	Ph.D.	Clinical Psychology

### 2017-2018

Palo Alto University	Ph.D.	Clinical Psychology
Antioch University	Psy.D.	Counseling Psychology

### 2016-2017

Nova University	Psy.D.	Counseling Psychology
CSPP/Alliant University	Psy.D.	Clinical Psychology

### 2015-2016

Arizona School of Professional Psychology	Psy.D.	Clinical Psychology
Adler School of Professional Psychology	Psy.D.	Clinical Psychology

### 2014-2015

SUNY Albany	Ph.D.	Counseling Psychology
SUNY Albany	Ph.D.	Clinical Psychology

### 2013-2014

Rutgers University	Ph.D.	Clinical Psychology
Midwestern University	Psy.D.	Clinical Psychology

### 2012-2013

Fordham University	Ph.D.	Counseling Psychology
George Mason University	Ph.D.	Clinical Psychology

### 2011-2012

Adelphi University	Psy.D.	Clinical Psychology
SUNY Albany	Ph.D.	Counseling Psychology

### 2010-2011

Western Michigan University	Ph.D.	Counseling Psychology
University of Nebraska-Lincoln	Ph.D.	Clinical Psychology

### 2009-2010

University of Louisville	Ph.D.	Clinical Psychology
Indiana State University	Psy.D.	Clinical Psychology

### 2008-2009

SUNY-Buffalo	Ph.D.	Counseling Psychology
University of Tennessee	Ph.D.	Clinical Psychology:

## Local Information

*For more information about Albany, please visit:*

[www.albanyny.org](http://www.albanyny.org)

[www.alloveralbany.com](http://www.alloveralbany.com)

[www.timesunion.com](http://www.timesunion.com)

[www.albany.com](http://www.albany.com)

**POST-DOCTORAL RESIDENCY ADMISSIONS,  
SUPPORT, AND INITIAL PLACEMENT  
DATA**

**Program  
Disclosures**

<p>Does the program or institution require students, trainees, and/or staff (faculty) to comply with specific policies or practices related to the institution's affiliation or purpose? Such policies or practices may include, but are not limited to, admissions, hiring, retention policies, and/or requirements for completion that express mission and values.</p>	<p>_____ Yes</p> <p><u>  X  </u> No</p>
<p>If yes, provide website link (or content from brochure) where this specific information is presented:</p>	

**Postdoctoral Program Admissions**

<p>Briefly describe in narrative form important information to assist potential applicants in assessing their likely fit with your program. This description must be consistent with the program's policies on resident selection and practicum and academic preparation requirements:</p>
<p>Our program is a clinical psychology postdoctoral residency with an emphasis in Posttraumatic Stress Disorder. Applicants considering their potential fit with our program should know that our primary training goal is the continuation and consolidation of a trainee's identity as a psychologist. The clinical and programmatic activities within which post-doctoral residency are integrative, complex and focused. Integrative in the sense of pulling together the varied strands of professional identity thus far developed towards a cohesive whole; complex in the clinical challenges and activities within which the resident engages, and focused by the emphasis of the program (PTSD). The training model of the Stratton VAMC has four key components: 1) the development of strong mentoring relationships with senior psychologists who take responsibility for role modeling a cohesive sense of professional identity 2) varied clinical experiences in a variety of multidisciplinary settings that allow residents to function in a broad range of roles (e.g. treatment provider, evaluator, consultant, supervisor, educator) 3) seminars specifically designed for residents to provide advanced didactic training in small group settings in specialized techniques and theory and 4) completion of a scholarly project that addresses an area of programmatic need or interest. We seek applicants who have a solid academic and internship record; strong entry-level professional skills in assessment, intervention, and research techniques; and the personal characteristics necessary to function well as a doctoral-level professional in a medical center environment. We are committed to recruiting a range of diversity among our trainees. We select candidates representing different programs and theoretical orientations, different geographic areas, of different ages, of different ethnic backgrounds, and with different life experiences, as diversity helps us to continue to grow. Graduates of our postdoctoral resident program are prepared for independent practice as clinicians with expertise in trauma and the treatment of PTSD.</p>
<p>Describe any other required minimum criteria used to screen applicants:</p>
<ul style="list-style-type: none"> <li>• Completion of doctoral degree, including defense of dissertation, from an APA-accredited Clinical or Counseling Psychology program before the start date of the residency.</li> <li>• Completion of an APA-accredited psychology internship program.</li> <li>• U.S. citizenship, as per nation-wide VA guidelines</li> </ul>

### Financial and Other Benefit Support for Upcoming Training Year\*

Annual Stipend/Salary for Full-time Residents	\$47,105	
Annual Stipend/Salary for Half-time Residents	N/A	
Program provides access to medical insurance for resident?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
<b>If access to medical insurance is provided:</b>		
Trainee contribution to cost required?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Coverage of family member(s) available?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Coverage of legally married partner available?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Coverage of domestic partner available?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Hours of Annual Paid Personal Time Off (PTO and/or Vacation)	104	
Hours of Annual Paid Sick Leave	104	
In the event of medical conditions and/or family needs that require extended leave, does the program allow reasonable unpaid leave to interns/residents in excess of personal time off and sick leave?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
10 Federal Holidays included.		

## Post-Residency Experiences

**Note: \*Employment Setting Options** = Academic Teaching; Community Mental Health Center; Consortium; Correctional Facility; Health Maintenance Organization; Hospital/Medical Center; Independent Practice; Psychiatric Facility; School District or System; University Counseling Center; Other

Resident ID	Initial Post-Residency Employment Setting (use setting options*)	Initial Job Title	Current Employment Setting (use setting options*)	Current Job Title
2021-01	Hospital/Medical Center	Staff Psychologist	Hospital/Medical Center	Staff Psychologist
2021-02	Hospital/Medical Center	Staff Psychologist	Hospital/Medical Center	Staff Psychologist
2020-01	Hospital/Medical Center	Staff Psychologist	Hospital/Medical Center	Staff Psychologist
2020-02	Independent Practice	Staff Psychologist	Independent Practice	Staff Psychologist
2019-01	Hospital/Medical Center	Staff Psychologist	Hospital/Medical Center	Staff Psychologist
2019-02	Hospital/Medical Center	Staff Psychologist	Hospital/Medical Center	Staff Psychologist
2018-01	Hospital/Medical Center	Graduate Psychologist	Hospital/Medical Center	Staff Psychologist
2018-02	Hospital/Medical Center	Staff Psychologist	Hospital/Medical Center	Staff Psychologist
2017-02	Hospital/Medical Center	Staff Psychologist	Hospital/Medical Center	Staff Psychologist
2017-01	Hospital/Medical Center	Staff Psychologist	Community Mental Health Center	Psychologist
2016-02	Hospital/Medical Center	Staff Psychologist	Hospital/Medical Center	Staff Psychologist
2016-01	Hospital/Medical Center	Staff Psychologist	Independent Practice	Psychologist
2015-02	Hospital/Medical Center	Staff Psychologist	Hospital/Medical Center	Staff Psychologist
2015-01	Hospital/Medical Center	Staff Psychologist	Hospital/Medical Center	Staff Psychologist
2014-02	Hospital/Medical Center	Staff Psychologist	Hospital/Medical Center	Staff Psychologist
2015-01	Hospital/Medical Center	Staff Psychologist	Hospital/Medical Center	Staff Psychologist
2013-02	Hospital/Medical Center	Staff Psychologist	Independent Practice	Psychologist
2013-01	Hospital/Medical Center	Staff Psychologist	Hospital/Medical Center	PTSD Program Manager
2012-02	Hospital/Medical Center	Staff Psychologist	Hospital/Medical Center	Staff Psychologist
2012-01	Hospital/Medical Center	Staff Psychologist	Hospital/Medical Center	Staff Psychologist
2011-02	Other	NA	Other	NA
2011-01	Hospital/Medical Center	Staff Psychologist	Academic Teaching	Associate Professor
2010-02	Hospital/Medical Center	Staff Psychologist	Hospital/Medical Center	Staff Psychologist
2010-01	Hospital/Medical Center	Staff Psychologist	Independent Practice	Psychologist

### Initial Post-Residency Positions

(Provide an Aggregated Tally for the Preceding 3 cohorts)

	2018-21	
Total # of interns who were in the 3 cohorts	6	
Total # of interns who remain in training in the internship program	0	
	PD	EP
Academic teaching	0	0
Community mental health center	0	0
Consortium	0	0
University Counseling Center	0	0
Hospital/Medical Center	0	0
Veterans Affairs Health Care System	0	5
Psychiatric facility	0	0
Correctional facility	0	0
Health maintenance organization	0	0
School district/system	0	0
Independent practice setting	0	1
Other	0	0