2025-2026 TRAINING YEAR

PSYCHOLOGY PRACTICUM PROGRAM BROCHURE

WASHINGTON DC VETERANS AFFAIRS MEDICAL CENTER

Director of Psychology Training Programs
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50 Irving Street, NW, Washington DC, 20422

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Introduction

Welcome to the Washington DC VA Medical Center. We appreciate that applying for practicum training can be a challenging process and we are excited that you are interested in our program. It is our sincere hope that this brochure provides you with the information that you need to make a well-informed decision regarding your future training at our medical center. Biographies of the Staff Psychologists can be found in our Training Handbook, which is accessible via our Training Programs Webpage Psychology Training Programs | VA Washington DC Health Care | Veterans Affairs .

Philosophy of Training

In our program, we view it as our mission to support psychology trainees in developing their individual identities as psychologists while ensuring they possess the necessary skills and competencies to advance towards independence. Two areas our program highlights are diversity/inclusion and program evaluation/program development. Our program attends to and values the diversity reflected in our staff, trainees, and the veterans we serve, and emphasizes the importance of preparing psychology trainees to deliver patient centered, evidence-based psychological services that incorporates individual and cultural diversity at all aspects of assessment, treatment planning, and intervention.

Diversity Statement

The Washington DC VA Medical Center Psychology Training program places diversity and inclusion at the core of our training philosophy. We take very seriously our responsibility to contribute to the development of psychologists who are prepared to provide patient centered, evidence-based treatment to individuals of diverse, intersectional identities. We promote diversity at every level within our training program and under the larger umbrella of the Mental Health Service Line (MHSL) in which our training program operates. We believe that selecting the country's top talent for trainees and for staff positions from all groups within our communities helps us better serve the Veterans with whom we work and gives us the high-level skill set we need to work with such a complex population.

Our training program recruits practicum students from local universities, including American University, Catholic University of America, The Chicago School of Professional Psychology, Divine Mercy University, Gallaudet University, George Mason University, The George Washington University, Howard University, Loyola University, University of Maryland Baltimore County, University of Maryland College Park, and Uniformed Services University of Health Sciences. As a federal employer, the DC VAMC strictly follows all EEOC policies on fair recruitment and other personnel practices.

We aim to take diversity beyond mere representation of different identities towards authentic inclusion. We recognize that gains with regards to representation of diverse groups in our training program will not be sustained if our work environment does not promote engagement of all team members. We are committed to recognizing and celebrating the intersecting identities of our practicum students and staff; working to create brave spaces in didactics and supervision where challenging conversations about practicing psychology in a diverse world can occur.

Washington DC VA Medical Center

All practicum training experiences takes place at the Washington DC VA Medical Center (DC VAMC) and its five surrounding Community Based Outpatient Clinics (CBOCs). Located in the nation's capital, the DC VAMC is among the most visible and dynamic facilities in the entire VA system. The DC VAMC is under the authority of the Veterans Health Administration (VHA), which is the part of the U.S. Department of Veterans Affairs that is responsible for providing health care for Veterans, as well as funding health research and training for health care providers. Veterans seen at the DC VAMC have served in various military conflict eras, including Operation Iraqi Freedom/Operation Enduring Freedom/Operation New Dawn (OIF/OEF/OND), Kosovo, Bosnia, Desert Storm/Desert Shield, Lebanon, the Vietnam War, the Korean War, and World War II. The DC VAMC also serves Veterans who experienced non-combat traumas, including Military Sexual Trauma (MST), training accidents, and responses to natural disasters.

The DC VAMC is a comprehensive medical center that treats Veterans of all genders who have a wide array of medical and psychiatric needs in both inpatient and outpatient settings. The DC VAMC is a tertiary care, Complexity Level 1B facility. The DC VAMC is part of the Veterans Integrated Service Network (VISN) 5; VISN 5 includes the Baltimore VAMC, Beckley VAMC, Huntington VAMC, Louis A. Johnson VAMC, Loch Raven VA Community Living and Rehabilitation Center, Martinsburg VAMC, Perry Point VAMC, and Washington DC VAMC. The DC VAMC is also the designated Polytrauma Network Site for VISN 5.

The Practicum Training Experience

The DC VAMC offers formal practicum placements for the academic year. Practicum experiences can start in the summer or fall, and generally last through the spring semester of the academic year, depending on the needs of the student, the clinical program, and supervision availability. Most supervisors prefer that practicum students begin in the summer and continue through the academic year. **The program does not provide a singular summer practicum training experience.** Applicants should be in good standing with their academic institutions and should be from an APA, CPA or PCSAS accredited, doctoral degree program in clinical or counseling psychology. We must also have an academic affiliation agreement

with the student's doctoral program on file prior to the student onboarding. We have standing academic affiliation agreements with most graduate programs in the Washington DC area. Requests for agreements with programs outside of the Washington DC area are reviewed on a case-by-case basis. We cannot accept students who are in terminal, master's degree programs even if their program is accredited by CACREP.

Practicum students are held to many of the same appointment standards as staff, to include: pre-placement fingerprinting, background checks, and required health verifications. Selection decisions are contingent on passing these screens. The DC VAMC also conducts drug screening on randomly selected personnel. Although practicum students are not required to be tested before beginning their externship, they may be subject to random selection during the practicum year, and will experience the same consequences as staff, should a random test be positive.

Didactic Training

In addition to didactic opportunities provided within clinical placements, practicum students receive weekly didactics as part of the practicum didactic series. Currently, an extern attends didactics on either Tuesdays or Thursdays between 8am and 8:50am. Topics may include ACT, Diversity Seminar, Intern panel discussion to address internship readiness and professional development, Motivational Interviewing, Post-doctoral Fellow presentations (based on area of interest), Suicide Prevention, and Traumatic Brain Injury.

Tiered Supervision and Mentorship

Our site hosts both internship and fellowship programs. Both programs are designed to foster competency in supervision provision. For this reason, practicum students may receive some supervision from either an intern or fellow, with guidance from a licensed staff psychologist. This supervision may take a variety of forms, from direct individual supervision, to co-facilitation of group interventions or collaborative supervision provided by a licensed provider and fellow. In these relationships, the licensed provider remains responsible for all patient care, and will seek input from the supervising intern/fellow when completing any evaluation forms on behalf of the practicum student.

In addition to our tiered supervision, practicum students have the opportunity to be mentored by psychology interns or postdoctoral fellows. Mentorship is a separate, non-evaluative relationship designed to foster the ongoing professional development of the mentee. At the start of the year, we will solicit interest on the part of both potential mentors and mentees and work to facilitate initial mentorship pairings.

VA Policies

Due to changes from the COVID-19 pandemic, our site has been very fortunate to have the capacity to allow flexibility with regards to use of telehealth and telework at all levels of training, including externship. Currently, most externs are 50% telework and 50% in-office. All decisions about presence on site will be made following the guidance of our medical center leadership, local public health agencies, and accrediting bodies and with a focus on maintaining the health of our trainees, staff, and the Veterans we serve. When working on site, you will be provided with any necessary PPE.

As trainees at our site, you will be required to follow VA policies regarding vaccination. You and your DCT will need to attest to your fitness for duty on station prior to the start of the training year, using the Trainee Qualifications and Credentials Verification List (TQCVL).

Clinics Accepting Practicum Students

The following pages highlight the practicum training opportunities available at the DC VAMC. Currently, these clinics/teams plan to accept practicum students in 2025-2026.

- Community Living Center
- Community Based Outpatient Clinic (CBOC)
- Mental Health Clinic
- Neuropsychology
- Polytrauma
- Psychosocial Rehabilitation and Recovery Center
- Substance Abuse Rehabilitation Program
- Trauma Services Program

Community Living Center

This placement is open to students with 1 or more years of doctoral level practicum experience.

Please note: Fridays are unavailable

The Community Living Center (CLC) is a residential setting for Veterans within the DC VA Medical Center with skilled nursing or hospice needs. Its primary goal is to optimize function and improve or maintain the quality of life of residents across the adult lifespan (with a focus on older adults) and with varying levels of cognitive functioning. Interdisciplinary integrated care teams, including psychology, psychiatry, kinesiotherapy, physical therapy, occupational therapy, speech therapy, recreation therapy, medicine, nutrition and food services, and recreation and creative arts, collaborate to provide care for our Veterans. We provide a wonderful training experience for those interested in developing and enhancing skills with geriatric and rehab Veteran populations in one of our three inpatient programs: hospice/palliative care, long-term care, and rehabilitation. The rehab program provides short-term rehabilitation care for post-acute medical illness and injury, such as wound care, intravenous therapy, stroke, joint replacements, and debilitation from ailments (e.g., pneumonia, cancer, etc.). The long-term care program involves skilled nursing care to eligible Veterans. Veterans in this program tend to be service connected and live in the CLC as their permanent home. These residents typically have multiple chronic medical problems and may also present with mental health needs such as PTSD, depression related to medical illness, adjustment disorders, or dementia. The inpatient palliative care unit focuses on holistic, comfort-oriented care for the terminally ill veteran and his or her family. The focus is on pain reduction and maximizing function as well as quality of life. The role of mental health in this setting is to work alongside medicine, nursing, and Chaplain Services to support the veteran and family caregivers in managing chronic illness and/or end of life care.

The main training goal of this rotation is to prepare students to provide interventions to Veterans who meet the full range of medical and mental health issues in a long-term care setting, with a focus on geropsychology. Training opportunities may include: brief and/or long-term individual or group therapy using cognitive-behavioral, ACT, motivational interviewing, reminiscence, and other evidenced based and non-pharmacological interventions; cognitive, psychological, and neuropsychological assessment; decision-making capacity evaluations; managing disruptive behavior associated with dementia using STAR-VA or other behavioral interventions; collaborating with staff members as part of an interdisciplinary team; and providing staff training on relevant topic areas. Services are provided in-person as well as via video or telephone.

Community Living Center Supervisors
Dr. Chanda Corbett
Dr. Sarah Meyer

Community Based Outpatient Clinic (CBOC)

This placement is open to students without prior doctoral level practicum experience (rising 2nd year graduate students)

Expected Required Days: Monday and Wednesday

Several CBOCs in Virginia and Maryland provide mental health and medical services to Veterans (age range between early 20's and late 70's) who live or work near the location of the clinic. Patients typically receive all or some of their healthcare here and receive more specialized care via telehealth or at the main Veterans Affairs Medical Center. Trainees with interest and experience in the diverse strengths and needs of racial and ethnic minority people are encouraged to apply.

CBOC that is accepting applications for the 2025-2026 Training Year are listed below:

- Fort Belvoir CBOC – VA clinic located on the base at Fort Belvoir

The main training goal of this rotation is to prepare practicum students to learn appropriate interventions to treat individuals with the broad range of psychological disorders typically encountered in a multi-disciplinary outpatient mental health clinic. Psychology externs will have an opportunity to provide individual (approximately 6 weekly clients) and group (approximately 1-2 weekly groups) therapy, diagnostic interviews, and psychoeducation to Veterans seeking care for a wide range of presenting concerns, including mood disorders, trauma-related disorders (including PTSD), anxiety disorders, and adjustment disorders. Externs might also gain experience with Veterans who have psychotic disorders, substance use disorders, and personality disorders. Mental health services at the CBOC are developing based on patient needs and include evidence-based treatments for depression and anxiety. Externs will likely conduct both face-to-face and telehealth treatment formats.

CBOC Psychology Supervisors:
Dr. Matthew Jasinski
Dr. Patrick Love

Mental Health Clinic

This placement is open to students with 1 or more years of doctoral level practicum experience.

Required Days: Monday, Wednesday, or Thursday

The Mental Health Clinic (MHC) is a multidisciplinary outpatient program that offers medical, psychiatric, and social work services to Veterans from a range of conflict eras who hold diverse race, gender, sexual orientation, and cultural identities. Veterans are most often referred to MHC Psychology for evidence-based psychotherapy (EBP) by Primary Care-Mental Health Integration (PCMHI), MHC Psychiatry, and other mental health treatment programs in the medical center.

Practicum students will deepen their knowledge in and application of EBPs for a variety of clinical presentations:

- **Depression**: CBT for Depression, Interpersonal Therapy for Depression (IPT-D)
- **Affect Regulation**: CBT for Anger Management, DBT Skills
- **Serious Mental Illness**: CBT for Psychosis
- **Behavioral Health Challenges**: CBT for Insomnia, CBT for Chronic Pain, Problem-Solving Therapy, CBT for Substance Use Disorders, CBT for Nightmares
- **Anxiety**: CBT for Generalized Anxiety Disorder, CBT for Social Anxiety Disorder, Unified Protocol for Transdiagnostic Treatment of Emotional Disorders
- **PTSD**: Cognitive Processing Therapy (CPT), Skills Training in Affective and Interpersonal Regulation (STAIR)

Clinical responsibilities include providing individual and group psychotherapy, conducting initial treatment planning sessions with Veterans new to the MHC Psychology Clinic, and meeting with Veterans for urgent care needs/walk-in appointments. Practicum students will conduct both in-person and telehealth treatment. Of note, a placement in the MHC allows for the unique opportunity to gain experience implementing EBPs for multiple clinical presentations with optimal protocol adherence and fully consistent with the National EBP Program guidelines.

In addition, there will be opportunities to hone skills in case conceptualization and shared decision-making. Although practicum students do not complete comprehensive psychological assessments as part of this training experience, they will regularly administer assessment measures (e.g. PHQ-9, DERS, ISI, PCL-5, GAD-7) to evaluate treatment progress.

MHC Psychology Supervisors:
Dr. Kwesi Dunston

Dr. Julie Rones
Dr. Melissa LaVan

Neuropsychology

This placement is intended for practicum students with at least one year of previous practicum experience in neuropsychology.

Required Days: Monday, Tuesday, or Wednesday

Neuropsychological evaluations are often provided to Veterans who are experiencing decreased cognitive functioning, including short or long-term memory loss, attention problems, language impairment, perceptual difficulties, and problem-solving deficits. Evaluations are used to clarify diagnosis, determine etiology of impairment, quantify functional loss, monitor changes in cognitive functioning as a result of treatment, and determine baseline level of cognitive functioning. Common referral diagnoses include mild cognitive impairment, dementia, concussion/TBI, multiple sclerosis, cerebrovascular disease, HIV and other infectious diseases, and neurocognitive concerns associated with psychiatric disorders. In addition to diagnostic impressions and description of functional loss and cognitive strengths, evaluation reports include detailed treatment recommendations.

The goal of this rotation is to provide practicum students with well-rounded training in all aspects of neuropsychological evaluation and consultation. Training will be tailored to meet the needs and interests of the extern. Practicum students will be trained in all aspects of neuropsychological evaluation, including clinical interviewing, test administration, test scoring, interpretation, and report writing. A flexible battery approach is used with test selection based on referral issue and age of patient. Practicum students will conduct outpatient evaluations (on average, one per week). Currently, the Neuropsychology Clinic is conducting approximately 90% of evaluations in a traditional, face-to-face format and 10% of evaluations via video telehealth. Therefore, practicum students will gain experience with both face-to-face and telehealth assessment. Additionally, there are often opportunities to participate in testing feedback sessions with Veterans and their family members, which consists of reviewing test results, discussing diagnoses, and providing treatment recommendations. Feedback sessions are conducted face-to-face or virtually (via video telehealth or phone), based on Veteran preference. The Neuropsychology clinic uses a tiered supervision model, so practicum students may receive supervision from both a more senior neuropsychology trainee (intern or postdoctoral fellow) and a licensed staff psychologist. Practicum students are strongly encouraged to attend the Neuropsychology clinic’s weekly didactic seminar for trainees.

Opportunities also exist to attend neurology or neuroimaging grand rounds, brain cuttings, and other relevant didactics.

Neuropsychology Supervisors
Ernest Aucone, PhD, ABPP-CN
Ashlyn Mitchell, PsyD
Lauren Skalina, PhD

Polytrauma Clinic

This is a supplemental practicum placement and is a quarter or half-time (4-8 hour) opportunity for students at advanced levels of doctoral training.

As a Polytrauma Network Site, DC VAMC provides specialized services to Veterans who have sustained injuries to multiple organ systems, often including a traumatic brain injury. The frequency and unique nature of polytraumatic injuries resulting from exposure to blasts, particularly during OIF/OEF/OND, has created the need for specialized interdisciplinary rehabilitation programs that can handle the complex medical, psychological, rehabilitation and prosthetic needs of these individuals. Polytrauma services are carefully coordinated with other services required for comorbid conditions including, but not limited to PTSD, complex trauma, amputation, auditory and visual impairments, spinal cord injury and other medical or mental health problems.

This rotation is intended for externs who are interested in blending exploratory and supportive therapy with more directive approaches such as EBPs and neurocognitive rehabilitation techniques, to work with Veterans adjusting to TBIs, disability and/or co-morbid PTSD. Possible training opportunities include conducting individual psychotherapy such as trauma-focused therapy and CBT-I, as well as co-leading groups such as an ACT group, a mood management group based on DBT and CBT interventions, a meditation group, and cognitive rehabilitation groups such as Brain Boosters. Opportunities to participate in interdisciplinary team meetings and rehabilitation grand rounds are also available, as is weekly group supervision with other Polytrauma psychology trainees. No prior experience in a rehabilitation setting is required, but externs should be generally familiar with psychotherapeutic interventions. This clinic is not currently offering opportunities for psychological or neuropsychological assessment.

Polytrauma Psychology Supervisor
Dr. Scott Levson

Psychosocial Rehabilitation and Recovery Center (PRRC)

This placement is open to students with 1 or more years of doctoral level practicum experience.

The PRRC is a fast-paced intensive outpatient program that provides telemental health and face-to-face group and individual therapy services to Veterans who are diagnosed with a serious mental illness (e.g., Bipolar Disorder, Major Depressive Disorder, Post-traumatic Stress Disorder, Schizophrenia). Veterans may also present with co-morbid substance use issues, personality disorders, and additional mental health diagnoses. PRRC externs have the valuable opportunity to work closely with a multi-disciplinary team consisting of staff and trainees from psychology, nursing, peer specialists, recreation therapy, social work and chaplain services to provide recovery-oriented care to a Veteran population that is diverse in race/ethnicity, age, gender, sexual orientation, socioeconomic status, cognitive/physical functioning, and clinical presentation. PRRC trainees are actively involved in daily staff meetings and receive approximately 2-3 hours of weekly individual and group supervision from PRRC psychology fellows and PRRC staff psychologists. On a weekly basis, PRRC trainees typically co-facilitate 4-5 groups across the PRRC and inpatient unit, meet with 2 Veterans for individual therapy, and administer 1 recovery-oriented assessment to Veterans.

As many Veterans enrolled in the PRRC present with concerns related to suicidality, PRRC practicum students have the unique opportunity to develop their suicide assessment skills, including receiving extensive training in the administration and interpretation of the Columbia – Suicide Severity Rating Scale and the Veterans Affairs Comprehensive Suicide Risk Evaluation. Trainees also collaborate with Veterans to develop detailed safety plans and consult with PRRC staff and members of the Suicide Prevention Program to discuss risk/protective factors and acute/chronic risk to determine whether a higher level of mental health care (e.g., inpatient admission) is clinically warranted. Furthermore, practicum students can conduct comprehensive suicide risk assessments using the Collaborative Assessment and Management of Suicidality (CAMS) framework and Advanced Safety Planning (ASPI).

Practicum students will have the opportunity to co-facilitate PRRC telemental health and face-to-face groups. Examples of PRRC Groups include: Acceptance and Commitment Therapy, Anger Management, Cognitive Behavior Therapy for Anxiety, Cognitive Behavior Therapy for Depression, Cognitive Behavioral Therapy for Insomnia, Coping with Voices and Paranoia, Cultural Acceptance and Racial Empowerment, Dialectical Behavior Therapy Skills, Disordered Eating, Ending Self-Stigma, Grief and Loss, Men's Group, Mindfulness, Relationships Group, Self-Compassion, Skills Training in Affective and Interpersonal Regulation, Social Skills Training, and Suicide Prevention/CAMS Group. Based on the needs of the PRRC and a trainee's clinical interest, practicum students will also have the opportunity to develop and co-facilitate a new PRRC group. We offer both open and closed group formats, and externs are welcome to gain experience across both. Extensive training is provided to PRRC practicum students on learning to effectively co-facilitate telemental health groups (currently, 50 PRRC telehealth groups, using WebEx, are available for Veterans to attend weekly, with group sizes

ranging between 5 and 40 Veterans per group). Externs may also have the opportunity to co-facilitate groups on the Acute Psychiatry Inpatient Unit as available.

PRRC practicum students will develop their clinical application of various evidence-based psychotherapy treatments in time-limited (i.e., up to 12 sessions) individual therapy. Trainees will collaborate with Veterans to develop specific recovery goals to address in individual therapy and will assist Veterans with reinforcing skills that they are learning in PRRC groups. Practicum students will also have the opportunity to apply various measurement-based instruments (e.g., Beck Anxiety Inventory, Beck Depression Inventory, Beck Hopelessness Scale, Patient Health Questionnaire, PTSD Checklist) to evaluate treatment progress during the course of the Veteran's individual therapy treatment. Trainees will also have the opportunity to participate in the NEPEC research initiative by administering and interpreting recovery-oriented assessments to track recovery progress for Veterans enrolled in the program (assessments completed every 90 days). Trainees will work closely with the PRRC multi-disciplinary team to ensure Veteran-focused and recovery-oriented mental health transition plans for Veterans who they are working with in individual therapy.

PRRC practicum students also have the opportunity to work closely with Veterans by completing longitudinal measurement-based care clinical interviews that assess community functioning, self-reported disability, internalized stigma, Veteran satisfaction, and well-being; engage in monthly PRRC Community Meetings; actively participate in weekly National PRRC conference calls; and collaborate with psychology staff to engage in program development initiatives. Practicum students are required to complete weekly didactics hosted by providers within the Mental Health Service on varied clinical and professional development topics. Trainees will also have the opportunity to engage in additional PRRC-related trainings/didactics/webinars based on interest and availability. Moreover, the PRRC psychology staff have developed an extensive virtual resource library of evidence-based psychotherapy manuals and resources, and PRRC practicum students will have the opportunity to engage in self-study to further develop their clinical skills.

Advanced Practicum Experience: An advanced psychology practicum experience is available for those who have completed ***one academic year of clinical training in PRRC***. A student selected for this advanced training year will have the opportunity to continue to develop individual and group psychotherapy skills in evidence-based treatments. An advanced practicum student can also choose to enhance his or her program development and research skills by working with staff in the PRRC. An opportunity may also be available to provide clinical supervision and mentoring of trainees and to receive hierarchical supervision from psychology fellows and/or staff psychologists. Additional opportunities not listed here (e.g., development of additional didactics to provide to incoming trainees, opportunity to collaborate with PRRC staff to prepare for accreditation surveys, assist with additional program development initiatives) may be considered.

PRRC Supervisors:
Dr. Corinne Galgay
Dr. Maggie McGuire
Dr. Lilli Salky
Dr. Naomi Stahl

Substance Abuse Rehabilitation Program (SARP)

This placement is open to students without prior doctoral level practicum experience (rising 2nd year graduate students)

Rotations typically begin in June and terminate at the end of May/early June of the following year (some flexibility may be possible with these dates).

SARP is a 10-week long, intensive outpatient substance abuse program that uses a multidisciplinary team (e.g., psychologists, social workers, psychiatrists, recreational therapists, addiction therapists, peer support specialists, clinical nurse specialists) to treat Veterans. SARP offers a dynamic patient population, serving Veterans who typically range from 22 to 80+ years old. Typical substances of abuse include alcohol, opioids, cocaine, PCP, marijuana and prescription medications. In addition, many Veterans referred to SARP often struggle with an array of co-occurring psychiatric disorders – including Major Depressive Disorder, PTSD, Schizophrenia, Bipolar Disorder, and Personality Disorders, as well as psychosocial issues (such as legal charges, homelessness, unemployment and relationship dysfunction), and various medical conditions associated with substance use (chronic pain, HIV and Hepatitis C).

The primary training goal is to prepare practicum students to treat alcohol and drug misuse, as well as co-occurring disorders, in a multidisciplinary setting. Practicum students can provide individual therapy and group therapy, with trainee generally seeing 5-6 individual patients and co-leading 1-2 psychoeducation/process groups (e.g., CBT and Depression) per week. Although practicum students primarily work from a cognitive-behavioral therapy framework, they have the opportunity to learn additional evidence-based practices, including Motivational Interviewing (MI), Acceptance and Commitment, and Relapse Prevention. Practicum students also participate in biweekly didactics focusing on topics including substance use disorders, Motivational Interviewing, professional development, and internship preparation. Finally, practicum students work closely with their clinical supervisor (which may also include interns and post-doctoral fellows) to develop an individualized training plan that meets their training needs and interests as well as the needs of our veterans.

SARP Psychology Supervisor:
Dr. Leonard Tate

Trauma Services Program (TSP)

This placement is open to students with 1 or more years of doctoral level practicum experience.

The Trauma Services Program (TSP) is an outpatient clinic that provides assessment and treatment to Veterans with Posttraumatic Stress Disorder (PTSD) and co-occurring conditions. Veterans served by TSP have experienced a range of different traumatic events during their military service as well as prior to their service. TSP trains practicum students to accurately diagnose PTSD and related conditions, create a comprehensive treatment plan, and provide effective and culturally sensitive treatment, all within a trauma-informed treatment approach.

Practicum students learn a variety of psychotherapy interventions for PTSD that are evidence-based and evidence-informed. Therapies provided in the Trauma Services program include Cognitive Processing Therapy (CPT), Prolonged Exposure (PE), Written Exposure Therapy (WET), and a number of other therapeutic modalities (e.g., EMDR, ACT, STAIR, DBT, etc.). Students can generally expect, on a weekly basis, to conduct four hours of assessment and treatment planning sessions and hold a caseload of up to 4 individual therapy clients. Individual therapy cases will most likely provide opportunities to learn CPT, PE, and/or WET. Practicum students will also have the opportunity to co-facilitate a group therapy with either a postdoctoral fellow or staff member in TSP. Some practicum students may also be supervised by a postdoctoral fellow for part of their caseloads, with hierarchical supervision provided by a staff psychologist. They can also participate in clinical meetings and didactics. Practicum students will serve either in the Medical Center in Washington DC or in one of our CBOCs (Community Based Outpatient Clinics) located in Gaithersburg MD or Camp Springs MD. Practicum students work closely with their clinical supervisor to develop an individualized training plan that meets their training goals and interests as well as the needs of our Veterans.

TSP Psychology Supervisors:
Dr. Sarah Afromowitz
Dr. Aparna Arjunan
Dr. Ranon Cortell
Dr. Melissa Decker
Dr. Matthew Dickson
Dr. Stephanie Guedj
Dr. Catherine Hearne
Dr. Peter Luehring-Jones
Dr. Arthur Ryan
Dr. Christiana Shao
Dr. Erika White

Applying to The Practicum Training Program

To help coordinate the annual offering and accepting of externship placement, our program adheres to the guidelines set forth by The Greater Washington Area Directors of Clinical Training.

Below are guidelines:

- Externships should not exceed 16 hours in a two-day block and should not require externs to take work home.
- Externship directors should inform students of required times that they need to be present at the training facility (e.g., practicum didactic series every Thursday between 8-8:50am) at the time of interviews.
- Individual face-to-face supervision should occur at least 25% of the time that externs spend in service-related activities (i.e., treatment, assessment, interviews, report-writing, case presentations, and consultations). We require direct observations of externs' service-related activities with clients (live or electronically) at least once per semester to comply with APA's Observation Standards.
- For the 2025-2026 Academic Year Externship Application Cycle, the Universal Acceptance Date (UAD) will be **Friday, March 7, 2025**. Both externship directors and students do not attempt to elicit information from each other regarding their status or ranking prior to the acceptance date. Externship directors should notify applicants that they are no longer under consideration by the site at the earliest possible date in advance of the acceptance date.
- The university/school and the externship training director should complete externship training contracts as early as possible after the acceptance date.* We encourage stipends for externs (Please note that there is no stipend currently offered for practicum training experiences at the DC VAMC).

* The VA has existing training agreements with all local institutions that have been created and approved by the VA's Office of Academic Affiliation. We do not complete additional training contracts with individual programs.

To Apply:

We will begin accepting applications on January 1st. Please email a cover letter and curriculum vitae to Dr. Candace Tomes (candace.tomes@va.gov) and Ms. Brittany Bland (Brittany.bland@va.gov) by **February 1, 2025**. **In your cover letter, please indicate the one clinic that most interests you and detail the specific reasons that you are choosing to apply to that specific clinic.** We ask applicants to specify only one clinic because of the large number of applications that the psychology staff receive and need to review. Dr. Tomes and Ms. Bland will forward your application to the staff psychologists associated with the specific clinic that you identify. Please do not send letters of recommendation or sample treatment reports unless a staff member specifically requests these from you.

Conclusion

Thank you for considering our Practicum Training Program. We look forward to reviewing your application. If you have any further questions about the practicum training experience, do not hesitate to email the Director of Psychology Training Programs, Dr. Candace Tomes, at candace.tomes@va.gov