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Defining
EXCELLENCE
in the 21st Century

Pre-Doctoral Internship

In Professional Psychology



***Psychology Training Program
2016-2017 Training Year***



Table of Contents

This publication is automated with hyperlinks to ease navigation:

Magenta words are linked to pages in this brochure or Internet addresses. Clicking returns to this page

The Setting	5
Living in Cincinnati	5
Cincinnati VA Medical Center	7
Predoctoral Internship	9
Mission	9
Training Goals & Core Competencies	9
Training Model	10
Philosophy of Supervision	10
Breadth of Training	10
Diversity	11
Active Learning	12
Program Structure	13
Rotation Experiences	13
Sample Intern Schedule	13
Internship Tracks and Rotation Assignments	14
Rotation Assignment	15
Training Experiences	16
Track Descriptions	17
General Clinical Track	17
Neuropsychology Track	17
Trauma Recovery Center Track	18
Health Track	18

Major Rotation Opportunities	20
Acute Inpatient Psychiatric Unit & Partial Hospitalization Program	20
Clermont County Community Based Outpatient Clinic (CBOC)	21
Health Psychology (HP)	21
National Center for Organizational Development (NCOD)	23
Neuropsychology	23
Pain Management Services	24
Substance Use Disorder Outpatient Treatment Program	25
Substance Use Disorder/PTSD Services	25
Substance Use Disorder Residential Rehabilitation Treatment Program	26
Trauma Recovery Center	27
Minor Rotation Opportunities	29
Acute Impatient Psychiatric Unit & Partial Hospitalization Program	29
Clermont County Community Based Outpatient Clinic (CBOC)	30
Cognitive Processing Therapy (CPT)	30
Mental Health Clinic	30
Neuropsychology	31
OEF/OIF/OND Clinic	31
The Psychiatric evaluation Center (PEC)	32
Trauma Recover Center Research	32
Vital Program	33
Outpatient Psychotherapy Cases	34
Training Conferences	35
Professional Conference	35
Intern Seminar	35
Empirically Supported Treatments And Empirically Based Practices	35
Intern Hour	37
Life after Internship	38

Applying to the Internship	39
Internship Year & Stipend	39
Eligibility Requirements	39
Application Procedure	41
Visiting Our Site	42
Contact Information	43
APPIC Match Numbers	44
Appendix A: Training Staff	45
Appendix B: Professional Conferences	63
Appendix C: Intern Seminars	64
Appendix D: VA Core Values & Characteristics	66

Living in Cincinnati

Cincinnati is a scenic city built on seven hills along the banks of the Ohio River. The population of the city and surrounding metropolitan area is approximately 2.1 million people. It has the distinct advantage of being a large enough city to offer a great variety of experiences, while not being so large that one gets overwhelmed. Its moderate size allows for excellent government services while offering a wide variety of interesting social, cultural and athletic activities.

The Census Bureau estimates Cincinnati's multicultural population at nearly 50% of the total. African Americans make up the majority of the city's diverse population, and a study released in June, 2007 by the Hispanic Chamber Cincinnati USA found that the area's Hispanic population grew by 38% between 2000 and 2005, ten times faster than the broader Ohio-Kentucky-Indiana Tri-State region. (<http://www.cincyusa.com/multicultural/diversity/>)

Cincinnati is the home of the University of Cincinnati, Xavier University, Hebrew Union College, Cincinnati Art Academy, College Conservatory of Music and the College of Mount St. Joseph. In addition to the cultural events offered at these institutions, Cincinnati has a nationally known symphony orchestra (<http://cincinnati-symphony.org/>), the second oldest opera company in the United States (<http://www.cincinnatiopera.com/>), a May Festival devoted to classical oratorios with nationally known performers, and the Cincinnati Ballet Company. The Cincinnati Playhouse in the Park offers professional productions of contemporary and classical theater on its two stages throughout the year. The Aronoff Center for the Performing Arts in downtown Cincinnati hosts professional theatre and dance year-round (<http://cincinnatiarts.org/aronoff>).



Aronoff Center for the Performing Arts

The greater Cincinnati area also has more than 100 museums and galleries which enhance its reputation as a cultural center. These include the Cincinnati Art Museum in Eden Park, The National Underground Railroad Freedom Center, Contemporary Art Center, Taft Museum, Krohn Conservatory as well as the Museum Center which houses the Natural History Museum, the Cincinnati Historical Society, and the Children's Museum. Cincinnati also has a wonderful Planetarium and Observatory that are open to the public.

Cincinnati is the birthplace of major league baseball and our Cincinnati Reds currently play in the recently completed Great American Ball Park. Football fans can enjoy watching the Cincinnati Bengals play at the new Paul Brown Stadium. Boating, golfing, tennis, ice skating, hiking and camping are among the other activities enjoyed by Cincinnatians who utilize the Ohio River, local lakes and the outstanding state and county park systems.



Cincinnati Reds baseball stadium in downtown Cincinnati



Findlay Market

Findlay Market, Ohio's oldest continuously operated public market, is a gathering place for the most socially, economically, racially, and ethnically diverse crowds found anywhere in Cincinnati. The Market is located just blocks from downtown in Over-theRhine, a dense historic neighborhood rich in 19th century architecture. Findlay Market is home year-around to about two dozen indoor merchants selling meat, fish, poultry, produce, flowers, cheese, deli, and ethnic foods, and hosts numerous street performers and special events. (<http://www.findlaymarket.org/>)

Cincinnati VA Medical Center

The Cincinnati VA Medical Center is a general medical and surgical hospital with all the services found in a large urban hospital. The Mental Health Care Line within the Medical Center is composed of seven divisions including: Outpatient Mental Health; Trauma Recovery Center; Assessment and Intensive Treatment; Substance Use Disorders; Domiciliary Care for Homeless Veterans; Special Mental Health Services; and Community Psychiatry. The various mental health



Cincinnati VA Medical Center

services available to Veterans are distributed between the main campus located two miles north of downtown Cincinnati, the Ft. Thomas Division located five miles southeast of downtown in Ft. Thomas, KY, and a system of six community-based outpatient clinics (CBOCs) located in Clermont County, OH, Georgetown, OH, Butler County, OH, Bellevue, KY, Florence, KY, and Dearborn County, IN.

As a VA hospital, the Cincinnati VAMC is dedicated to the care of Veterans whose injuries or medical conditions were obtained while in the United States military service. Whereas we serve a predominantly Caucasian and African-American male population, a growing percentage of Veterans served at the Cincinnati VAMC are women.

In addition to emphasizing high quality clinical treatment, the VA Medical Center has a strong commitment to training. As a Dean's Committee Hospital, we maintain close teaching ties with the University of Cincinnati College of Medicine. Staff members of most of the clinical services at the VA Medical Center, including many psychologists, have teaching appointments in the College of Medicine. In reciprocal fashion, many of the Medical College faculty serve as consultants to the VA Medical Center. Some of the VA psychology staff also have adjunct appointments to the University of



Atrium in the CARE/Crawley Building on the University of Cincinnati medical campus

Cincinnati Department of Psychology as well as to the Xavier University Department of Psychology. Our Center has fully accredited training programs in most of the major health specialties, including psychiatry, nursing, pharmacy, social work, rehabilitation therapy and medical technology.

The VA Medical Center is located within a large complex of facilities which includes the University of Cincinnati, the University of Cincinnati College of Medicine, the University Hospital, Cincinnati Children's Hospital, Shriners Hospitals for Children, and several other psychiatric and medical facilities. Regularly scheduled programs such as grand rounds, seminars, case conferences and presentations by invited distinguished lecturers are open to interns. Library facilities are available at the VA Medical Center, the Medical School, and the nearby University of Cincinnati.

The Psychology Training Program has video and audio taping facilities available. Interns are encouraged to use these facilities for training and clinical purposes.



Fort Thomas Division of the Cincinnati VA

Internship in Professional Psychology

The Psychology Training Program at the Cincinnati VA Medical Center offers a predoctoral internship training program in professional psychology accredited by the Commission on Accreditation of the American Psychological Association.

Mission

The mission of the internship training program is the development of psychologists who have the knowledge, skills, and self-awareness necessary to deliver psychological services to diverse populations in a variety of settings, and who practice competently and independently in a professional, empathic, and responsible manner. We provide opportunities for interns to examine a broad range of psychological problems, to develop depth of skill in particular areas of specialization, and to gain practical experiences as preparation for successful entry into postdoctoral or entry-level professional positions.

All activities during the training year are coordinated and supervised by the doctoral staff of the Cincinnati VA Psychology Program. Our staff views internship as a year of intensive supervised clinical experience that bridges graduate school with the professional practice of psychology. Each intern's training experience is specifically designed to meet a given student's needs, goals, and skill levels.

Training Goals and Core Competencies

To fulfill our training mission, the primary goal of the training program is the development of intermediate to advanced skills in the core competencies of professional psychology. Broadly, these core competencies follow the core competencies provided by the American Psychological Association (revised 2011) including: application (intervention and assessment); consultation and systems; professionalism; ethics and diversity; science and evaluation; and education. These core competencies are presented and discussed with the interns during orientation week, and the performance objectives are formally captured in the internship evaluation form. This form provides behaviorally-anchored descriptions adopted from the APA standards to illustrate the expected developmental progression of skill and conduct for interns from the start to the completion of internship.

Training Model

Our training program subscribes to a scientist-practitioner model of education and training for the practice of professional psychology. More than rote memorization of specific research findings, we actively encourage interns to adopt a rational empirical process to understand and evaluate their clinical activities, to critically evaluate, integrate, and apply the current scientific literature to their various professional activities in accurate and culturally sensitive ways, and to actively provide, seek, and use feedback to assist with their mastery of the program's core training competencies. In sum, our program upholds the view that good clinical practice is based on critical thinking and the applied science of psychology delivered within an interpersonal context of care and compassion. Further, we also recognize and value the need to skillfully adapt broad empirical data to individual, group, and cultural differences.

Philosophy of Supervision

Our philosophy of supervision at the Cincinnati VA adheres to a mentorship approach, which tailors training to the developmental needs and skills of our interns. Over the course of the internship year, interns are expected to function increasingly independently as they mature in clinical and professional development. Accordingly, while interns always function under direct supervision, their clinical experiences increase in complexity and independence over the course of the training year. This developmental progression is also facilitated by professional development didactics offered throughout the year to the interns. And whereas some interns pursue very specific training goals during this year, our internship also provides a time for each intern to develop his or her individual strengths and to experiment with the variety of roles and activities available within professional psychology.

Breadth of Training

The internship year is structured to maximize exposure to a wide range of experiences, while offering sufficient concentration to provide depth of learning and to build expertise in particular areas. As such, we strive to balance the needs for broad-based training with opportunities to focus on areas of specialization. Our goal is twofold: to support our interns' particular career interests while providing a well-rounded clinical training experience. Consistent with the APA Guidelines on Accreditation, we strive to provide internship education and training in preparation for entry-level practice in professional psychology that is broad and professional in its orientation rather than narrow and technical.

Broad-based training grounded in our core competencies thus provides a comprehensive view of psychological practice intended to encourage creative problem solving through the use of empirically supported psychological principles and sound judgment across clinical, ethical, and professional domains. Interns get experience thinking and practicing as psychologists to prepare them for careers in a variety of settings. The acquisition of specific skills, techniques, and conceptual models are considered as means to this goal, rather than as ends in themselves.

We recognize that a professional psychologist must be capable of thoughtfully applying psychological principles to the solution of complex individual and social problems rather than habitually applying prescribed solutions to narrowly defined complaints. In this regard, our aim is to provide training that not only prepares interns for the problems of today, but also assists them to develop the personal and professional skills needed to successfully manage the challenges that will arise over the duration of a long professional career.

Diversity

As a federal agency, we are an equal opportunity employer, mandated to utilize fully all workers' talents without regard to race, religion, color, sex, age, national origin or ancestry, marital status, parental status, sexual orientation or disability. Within the Department of Psychology, our goal is to extend this commitment to include the creation of a community that recognizes and values the inherent worth and dignity of every person. We believe that diversity among departmental members strengthens our staff, stimulates creativity, promotes the exchange of ideas, and allows us to provide more sensitive and effective patient care. We welcome diversity in our intern class, and we warmly encourage minorities and persons of diverse backgrounds of all types to apply to the Cincinnati VAMC internship. Interns are exposed to aspects of diversity unique to the Veterans' population during the intern year through assessment, treatment, consultation, and intern-specific seminars. Our aim is to optimize the training experience through individual appreciation and clinical understanding of human diversity in all aspects of psychological practice.

Our program views central aspects of training, from assessment to intervention to issues of diversity, to be best addressed "in action" or "in context." Thus, our diversity training focuses on aspects of diversity salient and present in our local military Veteran cultures and region. Interns are asked to apply their knowledge of psychological science, individual differences, and group/cultural diversity directly within their patient care settings.

Active Learning

A final value of the training staff is the active involvement of interns with the content and structure of the internship. Interns are invited to participate in the Psychology Training Committee, and intern feedback directs the content and timing of the intern seminars. Interns are expected to provide ongoing feedback to supervisors and to propose improvements in the structure and/or content of their training rotations. In recent years our interns have rewritten our professional conference feedback forms and have designed feedback forms for the intern seminars. Intern feedback has also helped us to reshape our public materials (including this brochure) to more accurately reflect our focus on diversity and science in training.

Program Structure

For every intern, the four fundamental experiences built into the internship program are indicated below:

<u>Experience</u>	<u>Duration</u>	<u>Hours per week</u>	<u>Supervision</u>
2 Major Rotations	6 Months each	24	2 Hours/week
1 Minor Rotation	12 Months	8	1 Hour/week
Long Term Outpatient Therapy Cases	12 Months	5	1 Hour/week
Training Conferences	12 Months	3	

Each intern will work with at least four doctoral staff psychologists as primary supervisors during the year in their two major rotations, the minor rotation, and the long-term outpatient experience. A minimum of four hours of supervision is expected per week, of which three hours are individual meetings with primary supervisors. All members of the psychology staff are also available for consultation. Information about the psychology staff can be found in Appendix A.

Sample Intern Schedule

Time	Monday	Tuesday	Wednesday	Thursday	Friday
8am - Noon	Major Rotation (all day)	Outpatient Therapy Cases	Major Rotation (half day)	Major Rotation (all day)	Minor Rotation (all day)
1 – 2pm	open	Intern Hour	Minor Rotation (half day)	open	Major Rotation (half day)
2 – 3pm	open	Professional Conference	open	open	open
3 – 4:30pm	open	Intern Seminar	open	Outpatient Therapy Supervision	open

Internship Tracks and Rotation Assignments

Each intern applicant will match to the internship on one of four tracks. Our Track admission process is designed to guarantee that at least one of an intern’s Major Rotation training experiences is in an area of their choice.

Track	Track Number	Associated Major Rotation(s)
General Clinical	150411	Acute Psychiatry/Partial Hospital Community Based OP Clinic National Center for Organizational Development Substance-Use Disorders (SUD) SUD/PTSD Treatment Program SUD Outpatient Treatment SUD Residential Treatment
Neuropsychology	150412	Neuropsychology
Trauma Recovery Center	150413	Trauma Recovery Center
Health	150414	Health Psychology or Pain Management

This means that if you match with us on the Neuropsychology or Trauma Recovery Center Tracks, you are guaranteed one major rotation in those specific areas. If you match on the Health Track you may choose either the Health Psychology or the Pain Management rotations, and if you match on the General Clinical Track, you may choose one rotation from the rotations listed above. During orientation week, the second Major Rotation for each intern will be determined in consultation with the training staff, and this rotation will be drawn from the remaining pool of available Major Rotations. The Minor Rotation and Long Term Outpatient Therapy supervisor will also be determined during orientation week.

There are a couple of things to keep in mind about the tracks. First, if you do not match on the Neuropsychology or Trauma Recovery Tracks, you will not have access to those rotations. If you do not match on the Health Track, you may have access to a Health or Pain Management rotation but this is not guaranteed. Also, applicants may apply to more than one track, but a single applicant cannot match with our internship on two separate tracks; so major rotation combinations such as the Trauma Recovery Center and Neuropsychology, or Health and Neuropsychology are not typically available.

Interns seeking a VA internship are often interested in receiving training in trauma treatment during their internship year. We can accommodate this through a number of major and minor rotations including the Cognitive Processing Therapy minor rotation which is open to multiple interns, and training in couples-based PTSD treatment.

Rotation Assignment

Our internship begins with a full week of orientation conducted by the Director of Training (DOT), the Associate Director of Training (ADOT), and the training staff. The internship is introduced to the interns through a series of meetings with our psychology supervisors who describe the training rotations that are available within each of their programs, as well as their own supervision styles and clinical practice backgrounds. Each intern also meets twice during this week with a member of the training staff who serves as mentor, guide, support, and advocate for the intern.

By matching the training opportunities of the internship with interns' training goals, rotation preferences, and needs, the training staff develops each intern's individualized rotation placements. Since this process is collaborative, we do not establish pre-selected sets of rotations prior to orientation week.

Intern requests for combinations of rotations that are narrowly focused (e.g. two major rotations in assessment, or two major rotations in Substance Use Disorder treatment) are typically discouraged. However, all rotation requests are considered and evaluated by the training committee in light of the internship's training model and values.

Training Experiences

The following rotations and long term supervisors are available to interns, though not typically in all possible combinations:

Major Rotations	Minor Rotations	Long Term Therapy Supervisors
Acute Psychiatry/Partial Hospitalization Community Mental Health (Clermont CBOC) Health Psychology National Center for Organizational Development Neuropsychology Pain Management Substance Use Disorder (SUD) SUD/PTSD Treatment SUD Outpatient Treatment SUD Residential Rehabilitation Treatment Program Trauma Recovery Center	Acute Psychiatry/Partial Hospitalization Cognitive Processing Therapy Community Mental Health (Clermont CBOC) Mental Health Clinic Neuropsychology OEF/OIF/OND Clinic Psychiatric Evaluation Center PTSD Research Vital Program	Dr. Boehner Dr. Giannitelli Dr. Greenwald Dr. Meshot Dr. Pukay-Martin Dr. Schumm Dr. Sudbrack Dr. Zinnbauer

Of note, self-disclosure may be required as part of some of these supervised experiences and intern candidates are encouraged to ask for more specific guidelines regarding particular rotations.

Track Descriptions

General Clinical Track

This track is designed for interns who wish to develop broad expertise in the treatment of psychopathology, specific experience in one of the general track rotations, or for those who are unsure of whether they wish to pursue further specialization. The General Mental Health Track balances outpatient and inpatient/residential settings with emphasis placed on managing complex patients who frequently present with dual diagnoses and difficult psychosocial circumstances. This track offers experiences assessing and treating the full range of mental health problems encountered at the VA including depression, anxiety, PTSD, psychosis and personality disorders. Identification and treatment of substance use disorders are emphasized and there are frequent opportunities to work with medically complicated patients. Training provides interns the opportunity to incorporate the use of evidence-based practices in daily work. Thus interns may expect to have cases in which they use a manual as well as those where their patients' issues require additional flexibility and creativity. Use of evidence-based practice in the face of non-compliance, chronicity, and previous treatment failure is explored. Many of the General Track rotations offer training in therapeutic process including interpersonal process in individual therapy, group process and milieu based interventions. A wide range of therapies is utilized on these rotations including interpersonal psychotherapy, PE, CPT, MI/MET, ACT, Seeking Safety, cognitive-behavioral and group therapy.

The General Mental Health Track encompasses a wide array of major rotations (listed above) which are described in the Major Rotations section. Interns in this track will complete two of these major rotations. They will be guaranteed their first choice from among these options.

Supervisors: *listed by rotation in the next brochure section*

Neuropsychology Track

The Neuropsychology track, which consists of both major and minor rotations, is designed for applicants who are planning on careers in the field of clinical neuropsychology and who have prior training and practical experience in this field. As such, applicants who intend to pursue postdoctoral training in neuropsychology are most desirable. Interns will gain experience with both outpatients and inpatients addressing consults from Primary Care, Neurology, Geriatric Psychiatry, Psychiatry/Mental Health and numerous specialty clinics from throughout the facility. There will be opportunity to

work with patients at the main campus in Cincinnati as well as at our Fort Thomas, Kentucky facility and Community-Based Outpatient Clinics (CBOCs). Our intensive training experience is designed to conform to the guidelines recommended by the Houston Conference and the Neuropsychology Division 40 Task Force. Please refer to the Major Rotation section for additional information about the Neuropsychology rotation.

Supervisors: *Drs. Houston, Kelkar, and Rigrish.*

Trauma Recovery Center Track

The Trauma Recovery Center track is designed for applicants seeking a career in trauma psychology. Thus, this track is best suited for applicants who intend to pursue postdoctoral training or employment in the field of trauma psychology. The Trauma Recovery Center places heavy emphasis on empirically-supported assessment and treatment of PTSD. Empirically-supported psychotherapies for PTSD follow a cognitive-behavioral orientation. Therefore, this track is best tailored for applicants with a cognitive-behavioral theoretical orientation and who are interested in advancing their experiences with empirically-supported assessment and treatment of veterans with PTSD. As is described in detail under the Major Rotations section, interns on this track have the opportunity to simultaneously obtain experiences in both outpatient and residential PTSD treatment programs.

Supervisors: *Drs. Chard, Bailey, Buckley, Caldwell, Dickstein, Greenwald, Lewis, Monroe, Pukay-Martin, Schumm, and Weiss.*

Health Track

The Health track is designed for applicants seeking a career in health psychology. Thus, this track is best suited for applicants who intend to pursue postdoctoral training or employment in the field of health psychology. The two major rotations in the Health track are Pain Management and Health Psychology. Each of these rotations is described in detail under the Major Rotations section.

The Health track offers experience providing outpatient behavioral health services to Veterans of all ages who suffer from a wide range of medical conditions. This includes assessment, consultation, and intervention with a diverse patient population whose psychological issues are associated with adjustment to various pain conditions and medical problems.

A central emphasis of this track is integrated care and collaboration with medical staff. The national VA Health Care system is increasingly focused on multidisciplinary and interprofessional team-based care. Therefore, working with health care providers from a variety of disciplines and learning to seamlessly coordinate care is a key professional development skill for our interns.

A second emphasis of this track is the prevention and management of chronic diseases. Through an integrative approach to care, interns work with Veterans to manage chronic pain and medical conditions in order to maintain active and fulfilling lives. Understanding the relationship among psychological factors, behavioral patterns, and physical health and illness is stressed.

Interns matched to the Health track are guaranteed at least one of its major rotations: Pain Management or Health Psychology.

Pain Management Supervisor: *Dr. Keane-Timberlake*

Health Rotation Supervisors: *Drs. Sefferino, Perry, and Meshot.*

Major Rotation Opportunities

Interns are assigned two six-month rotations in clinical settings during the internship year. Interns spend approximately 24 hours per week on their major rotation assignments. Assessment experiences are embedded within every major rotation. Please note that **the only guaranteed access to major rotations in Neuropsychology, the Trauma Recovery Center, and Health/Pain Management is by matching on those respective tracks.**

Acute Inpatient Psychiatric unit (7N) and Partial Hospitalization Program (PHP)

The acute psychiatry unit is an 18 bed inpatient unit. Veterans who are placed on this unit are usually dealing with symptoms of a Severe Mental Illness (most commonly Major Depressive Disorder, Bipolar Disorder, Schizoaffective Disorder, and PTSD.) Also, we are increasingly seeing Veterans who are dealing with dementia as well as SMI symptoms. Patients struggling with substance use disorder issues are sometimes hospitalized as a first step in dealing with their illness. Opportunities for the psychology intern include participation in multidisciplinary treatment teams and group psychotherapy. The intern also provides psychological testing as a way to clarify diagnosis and assist with treatment planning.

The Partial Hospitalization Program (PHP) is an outpatient program affiliated with the psychiatric unit. Veterans in PHP attend groups from 8:30 am - 2:30 pm Mondays through Fridays. This program can be used as a step down from the inpatient unit but it also serves as a way to manage increased symptoms so that hospitalization is not necessary. The psychology intern will have the opportunity to handle consults to determine appropriateness for admission, perform admissions and develop treatment plans, provide group therapy, and possibly engage in some individual treatment. As appropriate, psychological testing can also be utilized to assist in diagnosis and treatment planning. In addition, participating in or leading psycho-educational groups could be made available if the intern is interested. **Supervisor: Dr. Boehner.**

Clermont County Community Based Outpatient Clinic (CBOC)

Community Based Outpatient Clinics (CBOC) are clinics that offer primary care, mental health, and some specialty services to the Veterans in their own community. For many Veterans it is difficult to travel to the main hospital due to health issues, transportation problems, or job and family responsibilities. The CBOCs provide these Veterans with a more convenient location to receive the services. The Clermont County CBOC is located in the Eastgate area, a quickly growing region of Cincinnati with both rural and more urban districts. This CBOC is also the closest location for many Veterans from more remote locations. Currently the Clermont County CBOC is the largest CBOC under the Cincinnati VAMC system, serving more than 5,000 Veterans.

The minor rotation at the Clermont CBOC provides a unique opportunity to work in an outpatient setting with clients with a wide range of issues and diagnoses. While the main hospital generally has specialty clinics for specific disorders, underlying issues, or war eras, the mental health providers at the CBOCs serve all the Veterans from the area needing treatment for mental health issues. This offers the intern the possibility to get experience with many different disorders, several different modes of assessment and evidence based treatment including individual, group, and couples psychotherapy. The intern will also be able to collaborate and consult with primary care and the other specialty services on a more immediate and personal level than what might be the case in a larger hospital. This rotation is also amenable to work with specific interests the intern might have if, for example, an intern would like more experience with a specific disorder. There is also the opportunity to take part in the smoking cessation program and to help with group and individual treatment of nicotine addiction. The minor rotation at the Clermont CBOC is perfect for interns seeking a varied and flexible training experience. **Supervisor:** *Dr. Monsson*

Health Psychology (HP)

The Health Psychology (HP) rotation is divided into two programs: (1) Primary Care Mental Health Integration (PC-MHI) and (2) psychosocial evaluations for medical procedures. The intern will spend the majority of his/her HP time (16 hours/week) working on the PC-MHI team and will spend the remaining time (8 hours/week) conducting psychosocial evaluations for medical procedures.

PC-MHI staff are part of the Patient-Aligned Care Team (PACT) in the Primary Care Clinic (PC Clinic) and the Women's Health Center (WHC) and, through collaboration with other PACT team members, provide integrated care to patients. Other PACT team members include physicians, physician assistants (PAs), nurse practitioners (NPs), registered nurses (RNs), licensed practice nurses (LPNs), pharmacists, nutritionists, social workers, and program support assistants.

With the consent of the patient, members of the patient's PACT team can make a referral to the PC-MHI program. Referrals are primarily conducted via a "warm handoff," which involves a PACT member introducing a patient to a PC-MHI provider. Appropriate referrals include presenting problems such as adjustment difficulties, depressive and anxiety symptoms, pain, alcohol misuse, sleep problems, grief, and noncompliance with treatment for chronic medical problems. PACT members can also refer a high-risk or more complicated patient (e.g., a patient with psychotic or manic symptoms) to a PC-MHI provider for further evaluation and recommendations. Patients who are followed in PC-MHI will receive goal-focused brief therapy. The more complicated patients are generally not followed in the PC-MHI program and are usually referred to a VA specialty mental health clinic (e.g., Trauma Recovery Center, Outpatient Mental Health Clinic, Substance Use Disorders Treatment Program).

The PC-MHI team in the PC Clinic and the WHC consists of two part-time psychiatrists, three psychologists, a nurse practitioner, a clinical social worker, and a program support assistant. Additional PC-MHI team members are located in the OEF/OIF/OND Clinic and in several CBOCs. The intern will be an integral part of the PC-MHI team in the PC Clinic (and possibly in the WHC) at the main hospital and will be given the opportunity to collaborate with PACT team members to provide -, integrative care to patients. The intern will also be given the opportunity to participate in staff meetings and in program development.

In addition, as part of the HP rotation, the intern will complete psychosocial evaluations for medical procedures, primarily for organ (liver, kidney) and bone marrow transplant surgeries and occasionally for bariatric and heart-related surgeries. The intern will serve as a consultant to referring medical staff by completing comprehensive assessments and writing reports that integrate information about family support, substance use, mental health conditions, medical compliance, and cognitive abilities.

Supervisors: *Drs. Sefferino and Meshot (PC-MHI) and Dr. Perry (Psychosocial Evaluations for Medical Procedures).*

National Center for Organizational Development

The National Center for Organization Development (NCOD) is focused on building Effective Cultures, Effective Leaders, and Effective Teams across the Veterans Administration (VA). To achieve this, NCOD offers targeted products and services to meet the needs of VA across the country.

This unique rotation offers learning and hands-on experience in organizational development (OD) theory, practice and application. The internship core competencies are reflected in the NCOD rotation, but the focus moves away from delivery of individual mental health services and toward interventions designed to improve larger systems. At NCOD, interns will have the opportunity to learn the foundations of: Organizational Assessment, Organizational Development, Organizational Culture Change, Team Building, Change Management, Leadership Assessment, Leadership Development, and Organizational Consulting.

Supervisors: *Drs. Cash, Lall, and Hansel*

Neuropsychology

The Neuropsychology rotation provides interns with the opportunity to conduct comprehensive neuropsychological evaluations on a wide range of patient populations, including neurological, geriatric, psychiatric and general medicine patients. The rotation is devoted to training in neuropsychological assessment including administration and scoring of a wide variety of tests, interpreting test performance, honing case conceptualization skills, providing patient/family feedback and report writing. Approximately 20 - 25 patients are evaluated each week in the Neuropsychology clinic and interns typically write 2-3 reports per week during their major rotation (One report per week during the Minor rotation). Neuropsychological assessment training will occur in several clinical contexts, including:

General Neuropsychology Clinic

Addressing consults to the Neuropsychology Clinic from throughout the medical center including outpatient Neurology, Psychiatry, Geriatrics and Primary Care, and inpatient Medicine and Psychiatry units.

Residential PTSD/TBI Program	Neuropsychological assessment of pre- and post-residential treatment for veterans with PTSD from across the country who have sustained a traumatic brain injury.
TBI/Polytrauma Clinic	Neuropsychological evaluation of OEF/OIF/OND veterans with a history of TBI and other trauma exposure. Opportunity to participate in weekly interdisciplinary treatment team meetings.

Instructive training is also a major component of this rotation as interns, postdoctoral fellows and graduate students participate in a weekly Neuropsychology didactic that spans the entire internship year. In addition, neuropsychology interns have the opportunity to participate in other didactic experiences including:

- Neurology Grand Rounds (University of Cincinnati Medical Center)
- Geriatric Psychiatry Seminar (University of Cincinnati Medical Center)
- Geriatric Psychiatry Case Conference (Cincinnati VAMC)
- Psychiatry Journal Club (CVAMC)

Interns work closely with each of our four neuropsychology supervisors to learn varied methods for evaluating and assessing patients, and in the process develop and master their own evaluation and consultative skills. Typically, a flexible approach to assessment is employed to both quantify and qualify behavior/cognition. Individual supervision is provided on every case seen in our clinics. In addition to our staff neuropsychologists, the neuropsychology team includes our interns, a pediatric neuropsychology postdoctoral fellow and 1-2 4th year doctoral practicum students as well as Geriatric Medicine fellows, Geriatric Psychiatry fellows, and Psychiatry and Neurology residents.

Supervisors: *Drs. Houston, Kelkar, and Rigrish*

Pain Management Services

Interns participating in the Pain Management rotation will provide clinical services to Veterans with complex chronic pain and comorbid mental health conditions such as depression, anxiety, posttraumatic stress disorder, and substance use problems.

Interns will learn to conceptualize and treat chronic pain using an Acceptance and Commitment Therapy (ACT) approach, integrating principles of chronic pain rehabilitation and

biopsychosocial medicine. As part of this rotation, interns will conduct pain psychology evaluations; provide education to Veterans and families; implement ACT and other evidence-based treatments in individual and group settings; and work collaboratively as part of an interdisciplinary team comprised of staff from psychology, physical therapy, medicine, nursing, pharmacy, nutrition, and social work. Interns will become familiar with the VHA Stepped Care Model of Pain Management and will provide clinical services across the continuum of care (i.e., primary, secondary, and tertiary care settings). Finally, interns will have the opportunity to participate in multidisciplinary clinics offering a wide range of services, including: individual and group psychotherapy, mindfulness training, health and wellness education, physical therapy, nutrition counseling, medication management, and complementary and alternative medicine (e.g., acupuncture, chiropractor, yoga, meditation, and spiritual counseling).

Supervisors: *Dr. Keane-Timberlake*

Substance Use Disorder Outpatient Treatment Program

It is well accepted by researchers and treatment providers that transition from residential to outpatient addiction care is an essential part of long-term recovery from addiction. The SUD Outpatient Treatment Program seeks to provide the continuity of care services that have been shown to be effective in assisting Veterans to build and maintain recovery from addictive disorders. Intern experiences include assessment of addiction and co-occurring mental illness disorders, as well as providing individual and group addiction treatment services. Experiences with the American Society of Addiction Medicine (ASAM) levels of care including intensive outpatient and outpatient care will be provided. Other opportunities for interns include creating their own addiction treatment group that draws from experience and the research literature. Experiences in the Dual Diagnosis program and in tobacco treatment with Dr. Hall are also offered. The primary goal of this major rotation is to facilitate in creating psychologists who have an appreciation for a NIDA-driven, science-based understanding of addiction and its treatment. **Supervisor:** *Dr. Hall*

Substance Use Disorder/PTSD Services of the Substance Use Disorders Programs

The Substance Use Disorder/Posttraumatic Stress Disorder (SUD/PTSD) Program is designed to address the specific needs of male and female veterans dually diagnosed with Posttraumatic Stress Disorder and Substance Use Disorders. The program treats veterans with a range of traumas including combat, military sexual abuse, and childhood abuse. Both disorders are treated concurrently with substance use being addressed with either a harm minimization or abstinence based model.

Veterans may enter groups based on Lisa Najavits' Seeking Safety model. These groups meet one to two times per week, and give veterans the opportunity to learn how to cope with their SUD and PTSD symptoms. Motivational Interviewing, Motivational Enhancement Therapy, trauma focused therapy (Cognitive Processing Therapy or Prolonged Exposure), along with relapse prevention, are also offered by the program. SUD/PTSD is a small cohesive team whose members value the contributions made by interns. The team including two psychologists, a psychiatrist and a social worker.

Interns are integrated into this team and participate in all treatment team meetings and functions. Interns complete interview and psychometric assessments, serve as co-therapists in groups and have the opportunity to learn several types of therapy. In addition to trauma focused therapies, interns receive systematic feedback on their Motivational Interviewing. Interns conduct Motivational Interviewing sessions with patients admitted for medical detoxification after heavy alcohol use. These sessions are then coded by Dr. Steinberg using the Motivational Interviewing Treatment Integrity (MITI) Scale and interns are given feedback to facilitate skill development.

Supervisor: *Drs. Murray and Steinberg.*

Substance Use Disorder Residential Rehabilitation Treatment Program

The SUD Residential Rehabilitation Treatment Program is a 17-bed facility for Veterans whose primary presenting diagnosis is Substance Use Disorder. The average length of stay is approximately 21 days with 380-400 admissions per year. Veterans treated on this unit frequently present with a number of complicating factors, including comorbid psychiatric diagnoses, serious psychosocial stressors (e.g., homelessness, legal issues, relational discord), and co-occurring physical conditions (e.g., poor overall health, cognitive problems, substance-related conditions). Treatment occurs in a collaborative, multidisciplinary setting, in which physicians, psychologists, pharmacists, social workers, nurses, and addiction therapists work together to provide a holistic approach to care.

The SUD Residential Rehabilitation Treatment Program has the capacity to accommodate two intern positions during each six-month period. Throughout that time, interns serve as an integral part of the multidisciplinary team and treatment process for Veterans participating in the program. Interns are responsible for co-leading/leading five psychotherapy groups per week, working individually with Veterans for time-limited therapy, meeting for individual and group supervision, attending daily treatment team meetings, and participating in various didactics. The primary focus of intern training is group therapy, which is taught through an

apprenticeship model in which interns function as co-therapists alongside Dr. Lieb and Dr. Bolte. The program offers training in a variety of group psychotherapy models; namely Acceptance and Commitment Therapy (ACT), interpersonal process, and other action-oriented therapies designed to target experiential avoidance. Other evidence-based treatment approaches are taught as part of the rotation, including Motivational Interviewing and Mindfulness-Based Relapse Prevention. An emphasis is also placed on learning basic counseling skills that are generalizable to working in any clinical context, as well as on flexible implementation of treatment modalities to comport with the unique needs of a given individual or group. **Supervisor:** *Dr. Bolte.*

Trauma Recovery Center

The Trauma Recovery Center provides evaluation and treatment to veterans who have experienced all types of trauma. These services are offered on an outpatient basis, as well as within one of three structured seven or eight week residential programs (men's, women's, PTSD/TBI). The program is open to all veterans, regardless of service era or gender. Although many of the veterans have combat-related PTSD, a significant number of veterans treated in the Trauma Recovery Center also exhibit PTSD related to non-combat traumas (e.g., childhood abuse, sexual violence, accidents). Specialized services for women and men with military sexual trauma are also available. The program uses various forms of evidence-based, cognitive-behavioral interventions to help veterans reduce their symptoms of PTSD and related disorders. These interventions can include Cognitive Processing Therapy, Prolonged Exposure, Virtual Reality, Seeking Safety, Present Centered Therapy, and Cognitive-Behavioral Conjoint Therapy for PTSD. Through these various treatments, veterans are given an opportunity to identify, and begin processing, pivotal traumatic experiences and to place these experiences within a broader life context.

Interns become a part of the residential and/or the outpatient treatment program where they will join a multidisciplinary team providing services to veterans with various types of trauma histories, including combat and sexual traumas. Their work includes assessment as well as individual and group therapy. Group therapy experiences include serving as a co-therapist in trauma/exposure work, anger management and cognitive-behavioral groups. Psychological evaluation experiences include both general psychometric tests, as well as more specific instruments targeting PTSD symptoms. Interns learn skills that generalize to a variety of trauma populations. Emphasis is placed on treating PTSD symptoms and co-morbid conditions such as personality issues, substance use issues, limited social support, and other obstacles to recovery.

The Trauma Recovery Center also offers research experiences to interns either as part of their major rotation or as a separate minor rotation (see description in next section). The Division is very active in treatment outcome research, grant writing, and article writing. Interns have the opportunity to be involved at all levels, including mentorship in how to run a research study, how to write a grant, and how to submit an article for publication. In addition, the division has a sizeable database of information on veteran's that is available to interns interested in writing articles or submitting to national conferences. Recent projects that interns were involved in were grant submissions to NIMH and VA on using Cognitive Processing Therapy (CPT) to treat veterans who served in Iraq and their families, and comparing CPT to Present-Centered Therapy (PCT) among OIF/OEF/OND combat veterans. Our placement rate for those interns who elect to pursue to post-doctoral fellowships in PTSD is currently 100%.

Supervisors: *Drs. Chard, Bailey, Buckley, Caldwell, Dickstein, Greenwald, Lewis, Monroe, Pukay-Martin, Schumm, and Weiss.*

Minor Rotation Opportunities

Each intern will complete a minor rotation that lasts the entire year. Minor rotations are eight hours per week, which includes one hour of supervision with a licensed psychologist. This rotation is intended to supplement the major rotations by giving the opportunity either to connect with a staff member with whom they would not otherwise have an opportunity to work, to learn a unique skills or treatment approach, or to work with a specific Veteran population. Consistent with the emphasis within the internship on training psychologists who are well-rounded, the minor rotation is also often used to fill gaps in previous training.

Minor rotations can serve as scaled-down versions of some major rotations, but certain major rotations are not available as minor rotations such as Health psychology, Pain Management, and SUD Residential Rehabilitation. Some training experiences only exist as minor rotations such as the Psychiatric Evaluation Center.

It is also possible that the minor rotation can be used to develop a unique training experience for the intern. We have worked with past interns to develop novel training experiences to meet their particular training needs or interests. Examples of this have been past rotations in mindfulness, sleep disorders, geropsychology, and spirituality.

While the major focus of this internship program is the acquisition and development of clinical skills, students with a strong clinical background may choose research as a minor rotation. Working with a staff psychologist, the intern would develop, carry out and analyze results for a specific research project. At the end of the year, the work product would be a publication-quality summary of the research effort.

Acute Inpatient Psychiatric unit (7N) and Partial Hospitalization Program (PHP)

Please see description above in the section titled Major Rotation Opportunities.

Clermont County Community Based Outpatient Clinic (CBOC)

Please see description above in the section titled Major Rotation Opportunities.

Cognitive Processing Therapy (CPT)

Cognitive Processing Therapy is one of two evidence-based treatments recommended by VA/DoD for treatment of Posttraumatic Stress Disorder. Within the Trauma Recovery Center (TRC) at the Ft. Thomas Division of Cincinnati VAMC, interns will have the opportunity to attend a three day training and to implement CPT under the supervision of VISN 10 Regional CPT Trainers. Once all requirements are met, interns will qualify for national provider status.

Within this rotation interns are provided one hour of group supervision and one hour of telephone Consultation for CPT. In addition, interns will have the opportunity to work with up to four patients per week utilizing CPT. As scheduling permits, students will also have the opportunity to observe diagnostic assessments within the TRC and to meet with TRC Staff during CPT Group Supervision where they can hear firsthand, seasoned CPT providers discussing complex cases. This rotation is optimal for interns who may want to have some experience and training in the treatment of PTSD without completing the PTSD Major Rotation.

Supervisor: *Drs. Lewis and Monroe*

Mental Health Clinic

The Mental Health Clinic offers interdisciplinary team-based care to Veterans of all eras with a wide range of psychiatric disorders (e.g., Mood Disorders, Anxiety Disorders, PTSD, Personality Disorders, Psychotic Disorders, Substance Use Disorders). The Mental Health Clinic currently has two Behavioral Health Interdisciplinary Team Program (BHIP) teams comprised of psychologists, psychiatrists, social workers, nurse practitioners, advanced practice nurses, registered nurses, and support staff. Together, these teams collaborate to provide care to thousands of Veterans on an outpatient basis.

Psychology interns are invited to participate in many aspects of clinical care provision in the Mental Health Clinic, and opportunities can be tailored to individual interns' interests and training needs. Possible training opportunities for psychology interns completing a minor rotation in Mental Health Clinic include: sharpening differential diagnostic skills, sharpening formal assessment skills, learning evidence-based psychotherapies (e.g., CBT for Depression, CBT for Insomnia), offering individual and group therapy, participating in interdisciplinary treatment team meetings, and learning administrative skills through completion of therapy consults. A minor rotation in Mental Health Clinic is optimal for interns seeking a training experience that provides exposure to a wide variety of mental health concerns in a diverse Veteran population.

Supervisor: *Dr. Volz.*

Neuropsychology

Please see description above in the section titled Major Rotation Opportunities.

Operation Enduring Freedom/ Operation Iraqi Freedom/Operation New Dawn (OEF/OIF/OND) Clinic

The OEF/OIF/OND Clinic provides a unique training experience in that it is a “one stop” clinic specializing in the treatment and care of veterans returning from a combat deployment. The clinic offers multidisciplinary care provided by a team (many of whom are veterans themselves) of support staff, LPNs, nurse practitioners, physicians, social work case managers, a psychiatrist and a psychologist. The staff are distinguished by their cohesion and commitment to the population they serve.

Supervision of the intern is provided by the OEF/OIF/OND staff psychologist, who is a member of the Primary Care-Mental Health Integration (PC-MHI) program. Due to the close proximity of the on-site supervisor, the intern can confront clinical challenges and grow in a collaborative and supportive atmosphere. Aspects of the intern's role can be tailored to match individual interests, and may include the following: postdeployment mental health screens, consultation with medical and psychiatric staff, walk-in mental health appointments, individual and group psychotherapy, and community outreach.

Supervisor: *TBA*

The Psychiatric Evaluation Center (PEC)

Psychiatric Evaluation Center (PEC) is part of the Assessment and Intensive Treatment Division. PEC provides services to patients who present with a variety of mental health needs such as substance use disorders, medication needs, and psychiatric issues including suicide and/or homicidal ideation and crisis counseling. PEC serves as the frontline entry into the many mental health programs at the Cincinnati VA. PEC consists of a multi-disciplinary team of various mental health professions including psychiatrists, a psychologist, nurse practitioners, a social worker, and psychology interns. A close working relationship is also established with the emergency department staff. PEC serves as the bed control division for psychiatric inpatient admission and the nurse practitioners facilitates transfer of patients to and from other VAs or community hospitals to the psychiatric unit as needed. Veterans presenting for services are assessed with a structured interview which then informs a diagnostic write-up and disposition plan.

This rotation would be a good training experience for interns who need more experience with differential diagnosis and are interested in working with a multidisciplinary team. Interns in PEC will have the opportunity to work in a fast paced acute psychiatric setting. Also a PEC intern will improve their ability to prioritize and organize clinical information and they will master the ability to meet an unknown patient and to efficiently assess his or her needs to formulate a plan. A PEC intern will gain more experience with assessment and management of dangerous behaviors. PEC interns learn consultation skills from their interactions with different providers, and they become skilled at thinking quickly and making the best decisions based on the information available. At the end of a PEC rotation an intern has a general knowledge of the hospital systems and how it works. PEC interns also become comfortable with administrative tasks such as paging doctors, talking to individuals who may be seeking treatment or other outside hospitals seeking to know the services the VA provides. An intern may have the opportunity to provide basic crisis management to a caller who may be in distress.

Supervisor: *TBA*

Trauma Recovery Center Research

Trauma Recovery Center staff are actively involved in ongoing applied clinical research. As part of the research minor rotation, interns would have the opportunity to utilize the clinic's large-scale database of nearly 3,000 patients who have participated in either the outpatient or residential Trauma Recovery Center treatment programs. These data are collected as part of routine clinical care through the Trauma Recovery Center and include structured clinical interview data (e.g., CAPS, SCID), primary self-report outcome

measures (e.g., PCL, BDI-II), secondary self-report measures (e.g., measures of coping, trauma-related cognitions, etc.), and information gathered from clinical chart review (e.g., session attendance and therapy session content, demographic information, etc.). The datasets provide opportunities for interns to gain experience in effectiveness and quality improvement research. In addition, Trauma Recovery Center staff are actively involved in funded efficacy research, and interns would have opportunities to learn about grant-writing and administration. Finally, this rotation provides opportunities for interns to co-author manuscripts as well as take lead authorship on scientific manuscripts.

Supervisors: *Drs. Chard, Dickstein, Monroe, Pukay-Martin, and Schumm*

VITAL

The Veterans Integration to Academic Leadership Program (VITAL) is a VA Central Office (VACO) Initiative that serves Veterans pursuing post-secondary education, and the professionals who support them within VA and in the community. The VITAL minor rotation offers a unique learning experience through participation in a collaborative network of care within the CVAMC OEF/OIF/OND Clinic, academic campuses, community agencies, and the national VITAL team. This training opportunity is designed for applicants who are seeking exposure to VACO program development, and a varied and flexible training experience.

A central emphasis for this rotation is integrated care and collaboration with medical staff, case management staff, the CVAMC outreach team, and professionals in the community. Interns on this track have the opportunity to concurrently obtain experiences in direct clinical services (therapy and assessment), care coordination, outreach education, and research.

Supervisor: *Dr. Thiede*

Outpatient Therapy Cases

Each intern carries three long-term psychotherapy cases throughout the internship year. On the basis of their interests and skill-development needs, interns may select individual, marital or family cases. Supervision is provided to interns on a regular weekly basis by their assigned staff psychologists. Audio- and videotaping of sessions are available and encouraged for supervision purposes.

Training Conferences

Professional Conference

Professional Conference meets weekly for one hour. It is designed to meet the interests and growth needs of the professional Psychology staff and interns. The Cincinnati VA Psychology Training Program is an approved provider of Mandatory Continuing Education credits for licensed psychologists by the Ohio Board of Psychology. Several of the professional conferences are specialized programs designed for MCE credits. Our psychology staff members regularly present at these conferences, and each intern presents a clinical case during the training year. The most recent version of the professional conference schedule can be found in Appendix B.

Intern Seminar

This weekly, 90 minute seminar is attended by interns only. Some topics include information specific to our VA hospital and the Veterans' population, while others focus on issues of specific interest requested by the intern class. Seminars may be one-time presentations or span as long as four weeks. Seminar leaders have included both VA hospital staff members and consultants from the community. Aspects of human diversity, including race, gender, ethnicity, sexual orientation, age, physical illness and disability are covered in seminars throughout the year. The most recent version of the intern seminar schedule can be found in Appendix C.

Training in Empirically Supported Treatments and Evidence-Based Practices

The following are a list of trainings in ESTs and EBPs available in the internship. Access to some of them is dependent on supervisor and rotation assignment:

- Acceptance and Commitment Therapy
- Behavioral Couples Therapy for substance use disorders
- Behavioral Family Therapy
- Cognitive Behavioral Conjoint Therapy for Couples
- Cognitive Behavioral Therapy for Insomnia

Cognitive Behavioral Therapy for Social Anxiety
Cognitive Processing Therapy for PTSD
Dialectical Behavioral Therapy
Empirically Supported Therapy Relationships
Exposure and Response Prevention for OCD
Integrative Behavioral Couples therapy
Mindfulness Based Relapse Prevention for Substance Use Disorders
Motivational Interviewing
Panic Control Treatment for Panic Disorder
Prolonged Exposure for PTSD
Present Centered Therapy
Seeking Safety for PTSD and Substance Use Disorders
Social Skills Training

Intern Hour

Each week, interns have one protected hour to meet as the intern class. This allows interns to maintain consistent contact with one another as a cohort as interns may have limited contact aside from didactic trainings depending on rotation placement and schedule. As a program, we encourage each incoming intern class to use this protected time as a source of peer support and resource for navigating this year of training and preparation for future career plans. Past cohorts have reported that Intern Hour was a key aspect of acclimating to internship and promoting continual self-care.

Life After Internship

Our interns have been successful in securing an impressive array of positions following their internship year. A sampling of recent Postdoctoral Fellowships include:

- National Center for PTSD – Boston
- OAA Research Fellowship – Central Texas Center of Excellence for Returning Veterans
- Denver Mental Illness Research Education and Clinical Center (MIRECC),
- VA Eastern Colorado Health Care System
- University of Michigan Medical Center
- The VA National Center for Organizational Development
- University of Virginia, Department of Medicine, Child-Parent Attachment Clinic
- Harry S. Truman VA Medical Center in Columbia, Missouri - PTSD/TBI Fellowship
- NIH-Sponsored Postdoctoral Research Fellowship at the University of California, San Diego, Division of Geriatric Psychiatry
- Cleveland Clinic Foundation Chronic Pain Treatment Program
- University of Alabama-Birmingham in Neuropsychology
- Medical College of Wisconsin, Milwaukee, in Neuropsychology
- The Geisinger Clinic, Danville, PA in Neuropsychology
- The Drake Center for Rehabilitation, Cincinnati, OH, in Neuropsychology
- The Rehabilitation Institute of Chicago
- Brown University Medical School in Neuropsychology

Others interns have gone on to forensic positions in the federal prison system as well as clinical positions at both community mental health centers and private practices. Our graduates also serve on the faculties of the Ohio State University, University of Dayton, Miami University of Ohio, University of Tennessee, Radford University, and the University of Kentucky. The Veterans Administration is invested in retaining top talent, and positions within the VA are also possibilities for graduating interns. Recent graduates from our internship are currently working at VA Medical Centers in Indianapolis, San Diego, Huntington, Lexington, American Lake, and here in Cincinnati. In fact, half of our own psychology staff at the Cincinnati VAMC are former interns and practicum students.

Applying to the Internship

Internship Year & Stipend

The internship year begins July 25, 2016 and ends July 21, 2017. The training stipend is \$24,896. Interns receive 10 paid federal holidays and 13 days of leave for vacation and/or professional development. State and federal income tax and FICA (Social Security) are withheld from interns' checks. The United States government covers interns for malpractice under the Federal Tort Claims Act.

Eligibility Requirements

Applications for the predoctoral clinical psychology internship program are welcome from students who have met the following requirements at the time of application:

- Three years of graduate study, completion of comprehensive exams, and acceptance as a doctoral candidate into an APA-accredited graduate program in Clinical or Counseling Psychology. Persons with a doctorate in another area of psychology who meet the APA criteria for respecialization training in Clinical or Counseling Psychology are also eligible.
- Approval for internship status by graduate program training director
- Completion of a minimum of 300 AAPI Intervention Hours.
- Completion of a minimum of 150 adult psychotherapy hours (individual or group).
- Dissertation proposal approved by beginning of internship.
- Completion of online APPIC application procedure.
- U.S. citizenship. VA is unable to consider applications from anyone who is not currently a U.S. citizen. Verification of citizenship is required following selection. All interns must complete a Certification of Citizenship in the United States prior to beginning VA training.

- A male applicant born after 12/31/1959 must have registered for the draft by age 26 to be eligible for any U.S. government employment, including selection as a paid VA trainee. Male applicants must sign a pre-appointment Certification Statement for Selective Service Registration before they can be processed into a training program. Exceptions can be granted only by the US Office of Personnel Management; exceptions are very rarely granted.
- Interns are subject to fingerprinting and background checks. Match result and selection decisions are contingent on passing these screens.
- VA conducts drug screening exams on randomly selected personnel as well as new employees. Interns are not required to be tested prior to beginning work, but once on staff they are subject to random selection for testing as are other employees.

We seek applicants who have a sound clinical and scientific knowledge base from their academic program, strong basic skills in standard assessment, psychotherapy, and research techniques, and the personal characteristics necessary to function well in our internship setting. Our selection criteria are based on a "goodness-of-fit" with our training opportunities. We prefer to build an intern class that comes from many different kinds of programs and theoretical orientations, from different geographical areas, of different ages, of different cultural backgrounds, and with different life experiences.

Very strong candidates for our internship would be those who have achieved one or more of the following in their graduate school and practicum experiences:

- **Intervention:** 500 intervention hours accrued in quality settings with populations consistent with our site (e.g., military personnel or Veterans, hospitals, adults, severe psychopathology), and experience with at least one empirically supported treatment.
- **Assessment:** 150 assessment hours, at least 5 integrated reports, and good experience with diagnostic interviewing and utilizing sound personality and cognitive assessment instruments.
- **Scholarship:** Research productivity as evidenced by one or more first author publications in a quality peer-reviewed journal or several peer-reviewed publications for which the applicant is a contributing author.

- Diversity: Demonstrable pattern of valuing of diversity through prior work with diverse clients and strong articulation of a sensitivity to and/or awareness of diversity considerations in their applications and interviews.

It is also important to recognize that specific prior experience is particularly relevant when applying to our Trauma Recovery Center, Health, and Neuropsychology tracks.

Strong applicants for Neuropsychology will have accumulated advanced training and experience with a wide range of Neuropsychological instruments and neurobehavioral disorders. Strong Applicants for Health will have accumulated training and experience with health promotion, illness prevention, pain management, behavioral medicine, or related area of health psychology. Strong applicants for the Trauma Recovery Center will have prior experience with empirically supported treatments for PTSD, treatment experience with military-related PTSD, and research productivity related to PTSD.

Application Procedure

Applications must be received no later than November 1, 2015, and must be completed online. Applications must include:

- A completed online AAPI and online verification by your Director of Clinical Training
- Three letters of recommendation
- A current Curriculum Vitae
- An official transcript of all graduate work
- **A clear list of track preference(s) at the top of your cover letter:** General Clinical, Neuropsychology, Trauma Recovery Center, or Health. You may apply to more than one track. We assume that if you list the Neuropsychology or Trauma Recover Center tracks that you are interested in those corresponding major rotations. If you are interested in the Health or General Clinical tracks please indicate your top choice of rotation within those tracks. You cannot match to our internship on more than one track, but you may indicate interest in more than one track in your application and may rank more than one track in the APPIC Match.

Your list of track and rotation preferences is used for the purpose of scheduling interviews - you may change your track and rotation preferences at any time prior to submitting your rank lists.

After listing your track preferences, please also list 3 or 4 major and minor rotations of potential interested to you. A sample format for this would be

Track Preference: Health Track: Pain Management rotation

Additional Rotations: SUD/PTSD, CPT minor rotation, OEF/OIF/OND Clinic

The psychology training committee will review all completed applications. This committee includes the Director of Training, the Associate Director of Training, psychology staff, and current interns. Applicants may seek consideration for any or all training tracks. Those not meeting the eligibility requirements will be notified as soon as possible.

Of the over 200 applications we typically receive in a given year, we typically offer onsite interviews to 75 candidates. We do not conduct phone interviews, even for reasons of travel difficulty or inclement weather. Our program, and the Cincinnati VA Medical Center as a whole, are committed to Affirmative Action and Equal Opportunity in Employment. Applicants are welcome to contact Dr. Zinnbauer with any questions.

Visiting Our Site

If you are invited to interview, you will be invited to participate in a half-day visit to our facility and you will be notified for which track(s) your application is being considered. Most of this visit will include interviews with staff members and present interns. These will take place on the following days:

Wednesday December 9, 2015	from 12:00-4:30 pm
Monday December 14, 2015	from 12:00-4:30 pm
Tuesday January 5, 2016	from 12:00-4:30 pm
Wednesday January 13, 2016	from 12:00-4:30 pm
Thursday January 21, 2016	from 12:00-4:30 pm

Applicants will be notified by email whether or not they will be invited to interview by December 1, 2015. *Again, we regret that we are unable to offer phone interviews or interviews on dates other than the five dates noted above.*

Contact Information

Brian Zinnbauer PhD, Director of Training
Cincinnati VAMC
3200 Vine St.
Cincinnati OH 45220
Telephone: 513.861.3100 x4969
Email: brian.zinnbauer@va.gov

Please Note

This internship site abides by all APPIC policies, including the directive that no person at this training facility will solicit, accept, or use any ranking-related information from any intern applicant prior to Uniform Notification Day.

This predoctoral clinical internship is accredited by the Commission on Accreditation of the American Psychological Association

*Questions related to the program's accredited status should be directed to the Commission on Accreditation:

Office of Program Consultation and Accreditation
American Psychological Association
750 First St, NE Washington, DC 20002-4242
Email: apaaccred@apa.org
Phone: (202) 336-5979 TDD/TTY: (202) 336-6123 Web:
www.apa.org/ed/accreditation

It is important for us to let you know that, in accord with the Federal Drug-Free Workplace Program, interns accepted here may be asked to submit a urine specimen as part of their pre-employment physical. Other branches of the federal government may also conduct routine background checks as an additional pre-employment requirement. Incorrect, incomplete or falsified information may be grounds for dismissal. By submitting an application for internship, you are agreeing to these conditions, as well as authorizing release of information. You are also agreeing to abide by all policies and procedures of a federal workplace, should you accept an internship position at the Cincinnati VA Medical Center.

APPIC Match Numbers

Our match numbers are:

General Clinical - 150411

Neuropsychology - 150412

Trauma Recovery Center - 150413

Health - 150414

Please note that if you do not match on the Neuropsychology or Trauma Recovery Tracks, you will not have access to those rotations. If you do not match on the Health Track, you may have access to a health rotation but this is not guaranteed. Also, applicants may apply to more than one track, but a single applicant cannot match with our internship on two separate tracks; so major rotation combinations such as the Trauma Recovery Center and Neuropsychology, or Health and Neuropsychology are not typically available.

Interns seeking a VA internship are often interested in receiving training in trauma treatment during their internship year. We can accommodate this through a number of major and minor rotations including the Cognitive Processing Therapy minor rotation which is open to multiple interns.

Appendix A: Staff

The Psychology Psychology Training Staff

The broad range of background, expertise, and experience represented in the staff at the Cincinnati VA is also reflected in the variety of clinical services delivered throughout the hospital. Staff who are actively involved in the training program are listed below.

Gregory W. Bailey, Ph.D.
Loyola University Chicago, 2002
Staff Psychologist, Trauma Recovery Center
Lead Clinician, PTSD/TBI Residential Program

Dr. Bailey is a staff psychologist in the Trauma Recovery Center. He works in the residential program for veterans with PTSD and Traumatic Brain Injury and the outpatient PTSD program. Dr. Bailey provides individual, group, and couples-based therapy as well as diagnostic assessments. In addition to the cognitive-behavioral approach used in the residential PTSD/TBI program, Dr. Bailey has experience with interpersonal and family-based approaches to psychotherapy. Dr. Bailey earned his Ph.D. from Loyola University in Chicago, Illinois. Before coming to the Cincinnati VA, Dr. Bailey worked for a non-profit organization recognized for research, training, and clinical service provision to children and families affected by prenatal substance exposure. His responsibilities included providing psychological services to high risk children, adolescents, young adults and their families.

Suzan Barrett, Ph.D.
Uniformed Services University of the Health Sciences, 1990
Director, Outpatient Mental Health Division

Dr. Barrett is a Health Psychologist with particular interest in pain, substance abuse, and body weight regulation. She has bachelor's degrees in both biology and psychology. She received her Ph.D. in Experimental Health Psychology at the Uniformed Services University (USUHS) in 1990. Dr. Barrett re-trained in clinical health psychology at the University of Memphis. She interned at the University of Alabama's

Consortium program. She did a postdoctoral fellowship in chronic pain at the Cleveland Clinic. Dr. Barrett's emphasis in graduate school was on the psychopharmacology of addiction as well as in health psychology. After leaving the USUHS, she taught at the University of Memphis and then the University of Alabama at Birmingham for a total of ten years. She has over forty publications in peer reviewed journals. Her research has focused primarily on the relationship between smoking and body weight. However, she has also studied other drugs and other aspects of nicotine addiction. Dr. Barrett is currently a member of the TriState Tobacco and Alcohol Research Center. The center conducts studies related to the treatment of tobacco and alcohol addiction. She has been at the Cincinnati VAMC since 1995. She has been director of the Outpatient Mental Health Division since 2005. Dr. Barrett's clinical orientation incorporates family systems therapy and cognitive behavioral approaches. Her individual work is mostly with patients with psychological issues related to, or exacerbated by, poor health. She also does several groups for patients with specific medical problems. She serves on the Medical Center's Pain Advisory Board. In addition, she chairs the Medical Center's Complementary Alternative Medicine Committee, whose job is to evaluate and make recommendations regarding the use of complementary strategies in this facility. In addition to her duties as the facility's only health psychologist, Dr. Barrett holds faculty appointments in the Department of Psychiatry and the Department of Psychology at the University of Cincinnati.

Constance S. Boehner, Ph.D.

University of Cincinnati, 2002

Staff Psychologist, Inpatient Psychiatric Unit and Partial Hospitalization Program (PHP)

Dr. Boehner provides diagnostic assessments, psycho-educational classes, social skills training and individual and group psychotherapy for Veterans both on the unit and in the outpatient PHP, located in the VA Medical Center. The inpatient unit serves Veterans with mood disorders (including substance induced), thought disorders, personality disorders, and a variety of geriatric-psych difficulties. The Partial Hospitalization Program provides both step-down treatments for those Veterans needing additional stabilization once they leave the inpatient unit as well as a way to prevent hospitalizations for Veterans in the Outpatient setting who are struggling with an increased level of distress. Dr. Boehner was trained in cognitive-behavioral approaches to symptom relief but also utilizes interpersonal strategies based on the individual needs of each client.

As part of the inpatient unit, Dr. Boehner works collaboratively with a multidisciplinary team and finds this most beneficial to Veteran's recovery needs. Her clinical interests include trauma and anxiety disorders, SMI, and personality disorders. She is also active on the LGBT Task Force and Suicide Prevention Team at the VA. Outside her efforts in

the VA, she continues to provide psycho-educational groups on adolescent substance use disorders in conjunction with juvenile probation programs. In addition, Dr. Boehner has acted as a consultant in court cases of sexual assault, domestic violence, and child abuse.

Teri Ann Bolte, Ph.D., ABPP

University of Kentucky, 2008

Staff Psychologist, Substance Use Disorder Residential Rehabilitation Treatment Program.

Dr. Bolte is a psychologist in the SUD Residential Rehabilitation Treatment Program. She has been employed as a member of the professional staff since August 2008, and also completed her predoctoral internship at the Cincinnati VA. Her responsibilities in this program are primarily clinical, and she provides group and individual psychotherapy to residential clients, participates in the multidisciplinary treatment team, and works on issues related to program development. She enjoys teaching and serves as a major rotation supervisor for predoctoral interns, and participates in other aspects of the internship program. Along with Dr. Jonathan Steinberg she co-facilitates trainings in Motivational Interviewing for psychology interns, medical residents, and hospital staff. She has been trained in several evidence-based treatments, including Motivational Interviewing, Acceptance and Commitment Therapy, and Seeking Safety. She values and utilizes a broad range of treatment approaches, and believes in the importance of having strong foundational therapy skills that generalize to any clinical context. As a supervisor, she places emphasis on enhancing foundational counseling skills, increasing knowledge and utilization of empirically-based treatments (especially ACT and MI), flexible implementation of interventions based on individual client needs, and the professional development of the intern.

Amy Buckley, Ph.D.

University of Louisville, 2003

Staff Psychologist, Trauma Recovery Center

Cincinnati VA Evidence-Based Psychotherapy (EBP) Coordinator

Dr. Buckley is currently one of the lead clinicians in the women's PTSD Residential program, a position she has held since joining the VA in 2008. She completed a predoctoral internship and a postdoctoral fellowship at the University of Illinois Medical Center at Chicago (UIC), Department of Psychiatry, specializing in stress and anxiety disorders and cognitive behavior therapy. While at UIC she served as a certified cognitive

therapist on the STAR*D treatment effectiveness study, a large, multi-site study sponsored by NIMH designed to assess the effectiveness of a variety of treatments for depression. During her fellowship year at UIC she also completed additional research training in The Brain-Body Center and provided cognitive-behavior therapy supervision to PGY-3 Psychiatry Residents. In her current position, Dr. Buckley conducts diagnostic assessments in both the residential and outpatient programs, and also provides individual and group treatment to Veterans with PTSD. Dr. Buckley provides clinical supervision for interns in the areas of diagnostic assessment, individual therapy, and group therapy. Her theoretical orientation is cognitive-behavioral.

Nicola K. Caldwell, Ph.D.

University of Pittsburgh, 2003

**Staff Psychologist, Trauma Recovery Center Coordinator,
Residential PTSD Programs**

Dr. Caldwell completed her Ph.D. at the University of Pittsburgh and her postdoctoral training with the United States Army where she served as an Active Duty officer at the rank of Captain providing a full range of psychological services for eligible military personnel and their dependents. She is a staff psychologist in the Trauma Recovery Center, lead therapist for the men's PTSD residential program, and the coordinator for all residential PTSD programs. Working primarily in the residential programs, Dr. Caldwell provides individual and group psychotherapy utilizing cognitive behavioral approaches within an integrated client-centered, humanistic and systems theoretical framework. She also conducts diagnostic assessments for both outpatient and residential programs. Dr. Caldwell provides supervision for interns in the areas of diagnostic assessment and individual and group psychotherapy. From a clinical and research perspective, she is interested in treatment outcomes, and exploring conduits to bridging the research to practice gap.

Maureen Cash, Ph.D.

Michigan State University, 1993

**Supervisory Program Analyst
National Center for Organizational Development**

Dr. Maureen Cash received her doctorate in Clinical Psychology from Michigan State University in June 1993 after having completed her predoctoral internship at the Cincinnati VA Medical Center (VAMC). She worked as a clinical psychologist at the Lawrenceburg Community Mental Health Center in Lawrenceburg, IN in 1994. She left there in September of 1994 to work with Professional Psychiatric Services, Inc. as coordinator of mental health services at the University

of Cincinnati's Student Health Center as well as staff psychologist on the inpatient psychiatric unit at University Hospital. In March 1996, Dr. Cash began working full-time at the Cincinnati VAMC as staff psychologist in the residential and outpatient substance dependence programs. She became Associate Director of the Psychology Training Program in 2003, and Director of Training in 2006. She maintained a half-time position as staff psychologist on the residential substance dependence unit during this time, and in March 2007, also took on the additional duties of Chief of Psychology for the medical center.

Due to her shifting interests toward program development and organizational functioning, Dr. Cash took a position with the VHA National Center for Organization Development in May 2010 as Supervisory Program Analyst in the Organizational Health branch of NCOD. She is now Director of Organizational Health at NCOD, and currently provides national oversight for VHA's Civility, Respect, and Engagement in the Workplace (CREW) initiative as well as supervising NCOD staff who provide intensive support and guidance for CREW and the VA All Employee Survey. She coauthored a chapter on the CREW Initiative for the textbook Creating Healthy Workplaces, and has authored articles for VA's Organizational Health newsletter. She also provides executive coaching, and is involved in a number of special projects that work toward improving the work culture for VA employees.

Kathleen M. Chard, Ph.D.

Indiana University, 1994

Director, Trauma Recovery Center

Dr. Chard is the Director of the Trauma Recovery Center and she is a Professor of Clinical Psychiatry and Behavioral Neuroscience at the University of Cincinnati. In her position she oversees the outpatient and residential treatment programs in the Trauma Recovery Center. Dr. Chard is also the Director the National VA CPT Dissemination Initiative designed to provide training and consultation in Cognitive Processing Therapy to clinicians throughout the VA system. Dr. Chard completed her Ph.D. at Indiana University and her postdoctoral training at the Center for Trauma Recovery in St. Louis, Missouri. Her prior positions were as an Associate Professor and the Director of the Center for Traumatic Stress Research at the University of Kentucky.

Dr. Chard is the creator of Cognitive Processing Therapy for Sexual Abuse and she is co-author of the Cognitive Processing Therapy: Veteran/Military manual. Dr. Chard's research interests include examining the effectiveness of empirically supported, cognitive treatments for the treatment of Posttraumatic Stress Disorder, as well as the mediating effects of positive psychology variables on treatment outcome. She is currently Co-Chair of a 17-site study comparing CPT with Prolonged Exposure in Veterans of all eras. Dr. Chard is an Associate Editor of the Journal of Traumatic Stress and a member of the ISTSS

Board of Directors. She has over 50 peer reviewed manuscripts and numerous presentations related to PTSD and efficacy-based treatments.

Benjamin D. Dickstein, Ph.D.

Boston University, 2013

Staff Psychologist, Trauma Recovery Center

Dr. Dickstein received his doctoral degree from Boston University in 2013 and was a member of the Cincinnati VAMC internship class during the 2012-2013 training year. During his time in graduate school, he received specialized training in PTSD assessment and intervention at the VA Boston Healthcare System and National Center for PTSD. He currently works in the outpatient treatment program at the TRC. In addition, Dr. Dickstein is an active member of the TRC research team and Local Site Investigator for VA Cooperative Studies Project 591, a multi-site trial comparing the relative effectiveness of Prolonged Exposure and Cognitive Processing Therapy. His research interests include mechanisms of psychotherapy, treatment enhancement, and barriers to mental healthcare. He supervises interns completing a PTSD research minor.

Janell Giannitelli, Psy.D.

Xavier University, 2004

Associate Director, Psychology Training Program

Staff Psychologist, Bellevue, KY Community Based Outpatient Clinic (CBOC)

Dr. Giannitelli works in one of the Cincinnati VAMC's Community Based Outpatient Clinics (CBOC). The clinic is located in Bellevue, Kentucky (which is across the river from downtown Cincinnati) and is designed to offer outpatient services to Veterans in a location closer to where they live. The clinic offers services in primary care, nurse triage and anticoagulation, lab work, psychology, psychiatry, social work, optometry, pharmacy, and nutrition. Dr. Giannitelli provides individual and group therapy, psychological assessment, and psychoeducational classes to Veterans with a wide range of presenting problems.

Her clinical approach is an integration of cognitive-behavioral and interpersonal process techniques. She adapts her approach to therapy based on the individual needs of each client. Dr. Giannitelli values multidisciplinary collaboration and strives to facilitate comprehensive care for her clients, especially clients dealing with health issues. She also enjoys taking part in the training program and supervising interns and practicum students. In her position as Associate Director of the Psychology Training Program, she assists with

the development and management of the predoctoral internship and clinical practicum training programs.

David J. Greenwald, Ph.D.

University of Pittsburgh, 1983

Staff Psychologist - Trauma Recovery Center, and Mental Health Clinic.

Dr. Greenwald received his Ph.D. in Clinical Psychology from the University of Pittsburgh, in 1983 after having completed his pre-doctoral internship at the Pittsburgh Veterans Affairs Psychology Internship Consortium (now called Pittsburgh Veterans Healthcare System Internship). He provides diagnostic assessments, along with individual, couples, and group psychotherapy using the Cognitive Processing Therapy model in the treatment of PTSD for the Trauma Recovery Center's residential and outpatient programs. At the Mental Health Clinic, he provides outpatient individual and group treatment for depression, anxiety disorders and somatic symptom disorders, using a combination of Cognitive Behavior Therapy, Paradoxical interventions, and Behavioral interventions. His theoretical orientation is Cognitive-Behavioral, and he has a background and experience in strategic family therapy.

Prior to coming to the VA, he worked for 11 years as a clinical psychologist in physical medicine and rehabilitation units, where he provided both inpatient and outpatient treatment for those who had sustained a wide variety of physical injuries and illnesses. During that time, he also provided consultation-liaison services on medical/surgical units in two large medical/surgical hospitals. Dr. Greenwald was a member of the team that developed the partial hospital program at the Good Samaritan Hospital in Cincinnati in 1992, where he also designed and facilitated, the Cognitive-Behavioral therapy group, and where he collaborated on diagnostic assessments. In addition, as part of his private practice, he has 14 years of experience in providing litigation support services. This included the evaluation of individuals involved in civil forensic cases, including workers' compensation, personal injury, and fitness for duty, along with consultation services to attorneys to aid in their preparation for cross examination. He has frequently served as an expert witness in depositions and live courtroom testimony as a component of his forensic work. Dr. Greenwald has been on the adjunct faculty of the University of Pittsburgh and the University of Illinois at Springfield.

Danny Hall, Ph.D.

University of Akron, 2004

Coordinator, Outpatient Substance Use Disorder Program

Dr. Hall completed a 2-year NIDA funded addiction treatment research postdoctoral fellowship at the University of California, San Francisco (UCSF) in 2006. After that training he accepted a position at the Detroit VAMC in which he designed an intensive outpatient program (IOP) for addiction treatment. He was the coordinator of this program from 2006-2012. Also, he assisted in the writing the proposal that lead to that VA being awarded a postdoctoral fellowship in addiction psychology. He was the primary supervisor for that program and it was APA-accredited in 2012.

Dr. Hall currently serves as a psychologist in the Substance Use Disorder Treatment Programs at the Cincinnati VAMC. He works as part of comprehensive, multidisciplinary outpatient and residential treatment directed toward assisting Veterans with substance use disorders and their families. In this role, Dr. Hall provides psycho-diagnostic assessment, therapeutic and psycho-educational interventions as well as consultative services to Veterans who manifest symptoms of substance use disorders as well as other co-morbid disorders and conditions. Additionally, he is the coordinator of the outpatient services program as well coordinator of Clean Break, a tobacco treatment program housed in the residential substance use disorder clinic. He is currently developing a Substance Use Disorder IOP and will be the coordinator of that program once established. He is interested in training interns in evidence-based practices, using research to inform policy and practice, to create psychologists who are well versed in a NIDA-driven, science-based understanding of addiction and its treatment.

Joseph Hansel, Ph.D.

University of Kentucky, 2006

Staff Psychologist, VHA National Center for Organizational Development (NCOD)

Dr. Hansel works full-time at NCOD as a Trainer with VHA's national culture change initiative, which is called CREW –Civility, Respect, and Engagement in the Workplace. He is active in the development and delivery of various Organizational Health products. His interests include team building, action planning for culture change, leadership development, and program evaluation.

Wes S. Houston, Ph.D.

University of Cincinnati, 2001

Director, Neuropsychology Clinic

Dr. Houston is a clinical neuropsychologist who received his Ph.D. in Clinical Psychology from University of Cincinnati, and completed internship at the VA San Diego Healthcare System/University of California, San Diego, and postdoctoral fellowship at the San Diego VA. He works closely with the rest of the Neuropsychology team consisting of

Drs. Parkinson, Rigrish and Schmerler. He is involved in the training of graduate students, predoctoral interns and postdoctoral fellows on the Neuropsychology rotation. Areas of clinical and research interest include age-related cognitive decline, neuropsychological functioning in early dementia, and neuropsychological functioning in Veterans with mild TBI/PTSD. Active research projects include a cognitive rehabilitation program for older adults with cognitive decline; the emotional/cognitive correlates of mTBI; and, assessing Veteran's emotional reaction to receiving a diagnosis of cognitive impairment. He continues to serve as an ad-hoc reviewer for several neuropsychology journals.

Shauna Keane-Timberlake, Psy.D.

Xavier University, 2012

Staff Psychologist, Pain Management Service

Dr. Keane-Timberlake is part of the interdisciplinary team (psychologist, pharmacist, chiropractor, physical therapist, nurse, physician) that serves veterans struggling with complex chronic pain. In addressing the specific needs of veterans trying to live a full life with their physical and emotional pain, the Pain Management Service team uses an Acceptance and Commitment Therapy approach consistent with a chronic pain rehabilitation model. Dr. Keane-Timberlake has a particular interest in the impact of mental illness and medical illness/injury on identity. She completed her internship at the VA medical center in Miami, Florida with specialized training in spinal cord injury, pain management, PTSD and home-based primary care. In 2013, she attained advanced training through the Society for the Advancement of Sexual Health. Dr. Keane-Timberlake joined the Cincinnati VAMC staff in the fall of 2012.

Kalika Kelkar, Psy.D.

Virginia Consortium Program in Clinical Psychology, 2011

Staff Psychologist, Neuropsychology; Trauma Recovery Center

Dr. Kelkar completed her internship at the Coatesville VAMC, PA, followed by a postdoctoral fellowship at the Edith Nourse Rogers Memorial VAMC, Bedford, MA. She provides clinical services and supervision of practicum students, interns, and postdoctoral fellows at the Neuropsychology Clinic in Cincinnati and the Fort Thomas, KY facility. Clinical responsibilities in the Neuropsychology Clinic include conducting neuropsychological assessments for patients with cognitive complaints secondary to traumatic brain injury, dementia, stroke, seizure disorders, movement disorders, and psychiatric disorders. At Fort Thomas, she conducts neuropsychological assessments for veterans participating in the residential PTSD/TBI Treatment program, and consults with other members of the treatment team regarding the effects of TBI and provides

treatment recommendations. She also conducts outpatient neuropsychological assessments for veterans referred through Trauma Recovery Center.

Rakesh Lall, Ph.D., MBA

Pacific Graduate School of Psychology, 1994

Staff Psychologist, VHA National Center for Organizational Development (NCOD)

Dr. Lall works full-time at NCOD as a Trainer with VHA's national culture change initiative, which is called CREW –Civility, Respect, and Engagement in the Workplace. His interests include designing, developing and delivering products and services in the areas of culture change, team building, leadership assessment and development, and executive coaching. He is passionate about continuous learning, innovation, and helping others to achieve their potential.

Jennifer Lewis, Ph.D.

Western Michigan University, 2003

Staff Psychologist, Trauma Recovery Center

Lead Clinician Women's Residential PTSD Program

VISN 10 Regional CPT Trainer

Dr. Lewis completed her Psychology Internship at the Cincinnati VAMC in 2000 and a Postdoctoral Fellowship with the Posttraumatic Stress Disorder Program at the Cincinnati VAMC in 2004. She conducts diagnostic assessment and group and individual therapy for Veterans with anxiety and Post-traumatic Stress Disorder in both outpatient and residential programs. She is a lead clinician in the Women's Residential PTSD Program, facilitating groups and conducting individual and group CPT and CPT-C. Dr. Lewis provides supervision for interns in the areas of diagnostic assessment and individual and group psychotherapy from a cognitive behavioral orientation. She also supervises the CPT Minor rotation and is a Trainer and Consultant for the CPT Implementation Program.

Chris Meshot, Ph.D.

Miami University, 1993

Staff Psychologist, Primary Care/Mental Health Integration Program

Dr. Meshot is a member of the Primary Care Mental Health Integration [PCMHI] team. The PCMHI program is located in the Primary Care area of the main hospital. The team collaborates with the primary care staff to provide mental health services: consultation, psychiatric evaluation, short-term psychotherapy, and education. The relationship between health issues and mental health issues is a key component of the services the

team offers. Dr. Meshot adopts an existential personal construct theoretical perspective with an emphasis on interpersonal dynamics. He has worked in a variety of settings including partial hospitalization programs for adolescents, community mental health, and a group private practice. His areas of interests include treatment of chronic depression and spiritual/religious development.

J. Richard Monroe, Ph.D.

The University of South Dakota, 2009

Staff Psychologist, Trauma Recovery Center

Dr. Monroe is a staff psychologist in the Trauma Recovery Center. He is one of the lead clinicians in the PTSD/Traumatic Brain Injury Residential Program and provides psychotherapy services in the outpatient PTSD Program. Dr. Monroe completed his Ph.D. in clinical psychology at The University of South Dakota with a specialization in disaster mental health. He completed fellowships with The United States Department of Homeland Security and The Disaster Mental Health Institute. Dr. Monroe's theoretical orientation is cognitive-behavioral and he places a strong emphasis on providing culturally competent, evidence-based assessment and psychotherapy services. He is a Trainer and Consultant for the Cognitive Processing Therapy Implementation Program and a supervisor for the Trauma Recovery Center major rotation and the Cognitive Processing Therapy minor rotation. Dr. Monroe serves as chair of the ISTSS Special Interest Group on Trauma Assessment and Diagnosis. Current research interests include treatment outcome, diagnostic assessment, and motivation enhancement.

Yngve Monsson, Ph.D.

University of Kansas, 2010

Staff Psychologist, Clermont County CBOC

Dr. Monsson is a staff psychologist at the Community Based Outpatient Clinic (CBOC) located in the Eastgate area of Clermont County. The CBOCs are VA clinics offering outpatient primary care, mental health, and other specialized services to Veterans in locations closer to where they live. Dr. Monsson provides individual, group, and couples psychotherapy, and psychological assessment to Veterans with a wide range of different diagnoses. He is also involved in the Tobacco Cessation program at the Clermont location, and conducts individual and group tobacco cessation therapy.

Dr. Monsson received his Ph.D. from the University of Kansas, and he completed his pre-doctoral internship at the Leavenworth VA in Kansas. He has been trained in several different approaches to psychotherapy, including cognitive-behavioral therapy,

dialectical behavior therapy, applied behavior analysis, Therapeutic Lifestyle Change, family systems theory, and Acceptance and Commitment Therapy, and he draws on all of these when working with clients. His areas of interests include chronic sorrow and ambiguous loss, evidence based treatments, coping in parents of children with autism, and Hope theory.

Shanna Murray, Ph.D.

Bowling Green State University, 2008

Staff Psychologist, Substance Abuse/PTSD (SA/PTSD) Program

Dr. Murray works in the Substance Abuse/PTSD program, facilitating group and individual therapy using a variety of approaches including Seeking Safety, Cognitive Processing Therapy (CPT) and Prolonged Exposure (PE), motivational interviewing, harm reduction, and interpersonal therapy. She completed a PTSD post-doc at the VA Long Beach which focused on the treatment of PTSD in Veterans across the various war eras. At the VA Long Beach, she co-facilitated groups on mindfulness and PTSD, PTSD and anger management, and CPT. Dr. Murray completed her internship at the VA Hines where she focused on training in PTSD, substance use, and health psychology. Dr. Murray has broad clinical and research interests in the areas of empirically based treatments, health psychology, substance abuse craving and relapse, weight loss, and cancer and compliance with health care treatment.

Jennifer L. Perry, Ph.D.

University of Houston, 2004

Staff Psychologist, Primary Care-Mental Health Integration & Hospice and Palliative Care

Dr. Perry is part of the Primary Care-Mental Health Integration (PC-MHI) team, a group of mental health providers who work with medical staff to care for patients seen in the Primary Care Clinic and the Women's Health Center at the main hospital. She is also part of the interdisciplinary Hospice and Palliative Care team. Dr. Perry completed her internship at the VAMC in White River Junction, Vermont and completed a Health Psychology fellowship at the University of Texas Medical Branch (UTMB) in Galveston, Texas where she primarily worked with adult and pediatric burn survivors.

Nicole D. Pukay-Martin, Ph.D.

University of North Carolina at Chapel Hill, 2010

Staff Psychologist, Trauma and Recovery Center

Dr. Nicole Pukay-Martin received her doctoral degree from the University of North Carolina at Chapel Hill where she specialized in the design of couple-based interventions for psychopathology and health problems. She completed her clinical internship and fellowship with a focus on the treatment of posttraumatic stress disorder (PTSD) at the Durham VAMC in North Carolina. Prior to her position at the Cincinnati VA, Dr. Pukay-Martin worked with Dr. Candice Monson at Ryerson University in Toronto as a project coordinator investigating a couple-based intervention for PTSD and examining the interpersonal factors involved in the development and maintenance of PTSD. Her current research interests include examining PTSD treatment outcomes, couple-based treatments for PTSD, interpersonal effects of PTSD, and relational factors involved in the development and maintenance of PTSD. She currently supervises interns on a PTSD research minor rotation and interns wishing to gain specialized training on cognitive-behavioral conjoint therapy (CBCT) for PTSD.

Diana Rigrish, Psy.D.

Wright State University, 1988

Staff Psychologist, Neuropsychology

Dr. Rigrish came to the Cincinnati VA Medical Center with a nursing background. The focus of her predoctoral internship was in clinical neuropsychology and health psychology. She received postdoctoral training in clinical neuropsychology at the Cincinnati VA Medical Center. Upon completing her postdoctoral training, she worked part time at the Cincinnati VA and part time at the University Hospital Epilepsy Monitoring Unit conducting neuropsychological assessment. She has been full time at the VA since 1993. Currently, her primary clinical responsibility is to provide neuropsychological assessment to Veterans referred to the neuropsychology laboratory. She works closely with the rest of the Neuropsychology team to provide training to interns, postdoctoral fellows, graduate students, and medical residents.

Jeremiah A. Schumm, Ph.D.

Kent State University, 2005

Associate Director, Trauma Recovery Center

Prior to joining the Cincinnati VA, Dr. Schumm was Instructor of Psychology at Harvard Medical School. In addition to his position as Staff Psychologist at the Cincinnati VA, Dr.

Schumm holds a joint appointment as Associate Professor of Clinical Psychiatry at the University of Cincinnati. He values his role as scientist practitioner within the VA and the opportunities to merge clinical research with practice. His primary interests are in PTSD, substance use disorders, and families. Dr. Schumm has received grant funding from multiple sources, and has developed an integrated couple-based treatment for alcohol use disorders and PTSD. He is the national co-lead trainer for the VA dissemination of behavioral couples therapy for substance use disorders and is also a lead trainer for cognitive-behavioral conjoint therapy for PTSD. Dr. Schumm's secondary areas of interest are in the application of advanced multivariate statistical techniques to clinical research and in improving the understanding of PTSD, substance use disorder, and family relationships among women and under-researched populations. He currently supervises interns on a research minor rotation or interns who would like to gain specialized clinical training in couple-based treatment of substance use disorders and PTSD.

Mindy R. Sefferino, Psy.D.

Wright State University School of Professional Psychology, 2006

Staff Psychologist, Primary Care/Mental Health Integration Program

Dr. Sefferino is a member of the Primary Care/Mental Health Integration (PCMHI) Team, which is located in the Primary Care Clinic and Women's Health Center. The PCMHI team collaborates with Primary Care staff to address the mental health and behavioral health needs of their patients. The PCMHI program is designed to provide brief, solution focused treatment. Dr. Sefferino earned her MA in Counseling Psychology from the University of Notre Dame and her Psy.D. in Clinical Psychology from Wright State University. During her fellowship at Wright State University, she was also an adjunct professor in the School of Professional Psychology and in the undergraduate psychology program. Prior to working at the VA, she worked in a variety of settings, including a juvenile rehabilitation center, university counseling centers, and a group private practice. Currently, her areas of interest include substance use disorders and women's health. Dr. Sefferino utilizes an integrative approach to therapy, incorporating primarily cognitive-behavioral, interpersonal, and motivational interviewing concepts.

Jonathan L. Steinberg, Ph.D.

Miami University, 1991

Coordinator, SUD/PTSD Program

Dr. Steinberg's training emphasized psychodynamic therapies, but he has developed an integrative approach that utilizes more symptom-focused techniques. His work in the

SUD/PTSD program incorporates evidence based therapies such as Seeking Safety, Motivational Interviewing, and Prolonged Exposure while maintaining a broader attentiveness to the therapeutic process. Prior to joining the SUD/PTSD program in 2002, Dr. Steinberg worked in the Cincinnati VA's PTSD program for 10 years. When doing clinical supervision Dr. Steinberg encourages interns to formulate their own ways of integrating and implementing therapeutic approaches which they have learned.

Dr. Steinberg enjoys teaching and provides training workshops on Motivational Interviewing to psychology interns, psychiatry residents, and addiction fellows. He holds an Assistant Professor of Clinical Psychiatry appointment at the University of Cincinnati and is a member of the Motivational Interviewing Network of Trainers (MINT). He provides Motivational Interviewing training and coaching to staff across the country as part of the VA's dissemination of Motivational Interviewing and Motivational Enhancement Therapy.

Outside of the VA, Dr. Steinberg volunteers as a trustee of the Hamilton County Community Mental Health and Recovery Board which allocates public money to Cincinnati area mental health and substance use disorder treatment services.

Jennifer L. Sudbrack, Ph.D.

Miami University, 2002

Patient Care Coordinator for Mental Health, Florence, KY (CBOC)

Dr. Sudbrack provides psychological services at the Cincinnati VAMC Community Based Outpatient Clinic (CBOC) located in Florence, KY. The CBOCs are VA outpatient clinics offering primary care, mental health, and select other specialized medical services to Veterans at locations more convenient to where they live. In addition to providing direct patient care, Dr. Sudbrack serves as Patient Care Coordinator for Mental Health at the Florence location and as Lead Psychologist for the five CBOCs of the Cincinnati VAMC.

Dr. Sudbrack's primary areas of professional interest are eating disorders, body weight and shape concerns, PTSD, and self-management of chronic illness. She has been trained in a variety of approaches to psychotherapy, and she regularly makes use of techniques from diverse models, including client-centered, cognitive, feminist, group process, and family systems theories. However, her clinical work is most influenced by the theoretical perspective of archetypal psychology. Her approach to supervision of interns is guided by the intern's clinical skill and professional development. She invites interns to explore a

variety of theoretical perspectives and interventions and enjoys working with them to discover and refine their own approach to the work.

Jessica H. Thiede, Psy.D.

Wright State University, 2006

Staff Psychologist, Veteran Integration to Academic Leadership (VITAL) Initiative

Dr. Thiede serves as the VITAL Program Coordinator at the CVAMC, and is the national clinical chair for this VA Central Office program. In this capacity she serves as the lead in clinical program development and standardization of best-practice procedures for delivery of services on campus. Dr. Thiede is also part of the VITAL national research team, and mentors new VITAL sites as they establish practices. Prior to taking the Program Coordinator position with VITAL, she served as the staff psychologist in the Operation Enduring Freedom/Operation Iraqi Freedom/Operation New Dawn (OEF/OIF/OND) Clinic at CVAMC. As a clinical psychologist, much of Dr. Thiede's work has focused on trauma and adjustment. She is also interested in ADHD, the impact of patient-provider relationships on health and well-being, assessment, program development, and integrated delivery of health care. Dr. Thiede has a strong commitment to multidisciplinary collaboration, and has been a part of several initiatives to improve patient care within the VA and community. She has trained students, interns and psychiatry residents in the areas of consultation, diagnostic assessment and delivery of evidence-based therapies (EBT). In addition she has been invited to speak at local, state and national conference on the student Veteran population and adjustment post-combat. Dr. Thiede maintains a private practice in Cincinnati, OH where she provides general psychotherapy and assessment services to adolescents and adults, in addition to offering trauma specialty services.

Angela R. Volz, Ph.D.

Miami University, 2012

Staff Psychologist, Mental Health Clinic & Trauma Recovery Center

Dr. Volz found her passion for working with the veteran population while completing a pre-doctoral practicum in the Trauma Recovery Center at the Cincinnati VA Medical Center. Dr. Volz completed her pre-doctoral internship at the Memphis VA Medical Center and a postdoctoral fellowship in Trauma Recovery with a special emphasis in sexual trauma at the Durham VA Medical Center. In addition to being a VA-recognized provider in Cognitive Processing Therapy (CPT) for PTSD and Prolonged Exposure (PE) for PTSD, Dr. Volz is also a consultant for clinicians in the VA Health Care System learning PE for PTSD. In her current position, Dr. Volz uses a number of treatment approaches, including Dialectical Behavior Therapy, CBT for Insomnia, CBT for Depression, Skills

Training in Affective and Interpersonal Regulation, Motivational Interviewing, CPT, PE, and Cognitive Behavioral Conjoint Therapy for PTSD. Prior to her current position, Dr. Volz was a staff psychologist in the residential PTSD/SUD program at VA Maryland Health Care System and was Program Evaluator for the national CPT dissemination initiative. Her research is broadly focused on the intersection of interpersonal victimization and substance use; recent projects have included an examination of the role of distress tolerance in predicting abstinence among smokers, an investigation of motives for alcohol use and sexual behavior among women, and an examination of CPT vs. CPT-Cognitive Only on PTSD symptoms over time. She currently supervises interns on the Mental Health Clinic minor rotation.

Tobias C. Weiss, PsyD, ABPP

Xavier University, 2003

Staff Psychologist, Trauma Recovery Center

Dr. Weiss is presently a co-lead for the men's residential PTSD program. He divides his time between the residential PTSD programs, outpatient PTSD program, and multiple research projects. Dr. Weiss provides diagnostic evaluations, individual psychotherapy, group psychotherapy, and couples psychotherapy. Dr. Weiss completed his Psy.D. at Xavier University and completed the American Board of Professional Psychology (ABPP) specialty certification in Cognitive-Behavioral Psychology in 2011. Prior to his work with the Cincinnati VAMC, he worked in outpatient community mental health managing a caseload of individual therapy clients and performing guardianship evaluations for Campbell County, KY. Dr. Weiss has extensive experience in psychological assessments having worked in various hospital, outpatient, and forensic settings. His current areas of interest include: supervision, group process work, and augmenting evidenced-based treatments in residential settings. Dr. Weiss is currently coordinating and focusing his own research on a PTSD residential therapy group that combines the principles of Aikido (a defensive martial art) with conflict resolution/anger management skills.

Brian Zinnbauer, Ph.D.

Bowling Green State University, 1998

Chief, Psychology Program

Director, Psychology Training Program

As Chief of the Psychology Program, Dr. Zinnbauer advises Medical Center leadership on issues pertaining to professional aspects of our discipline such as credentialing and privileging, continuing education, resource management, hiring of psychologists, and training of students. In his position as the Director of the Psychology Training Program,

Dr. Zinnbauer is responsible for the development and management of the predoctoral internship, postdoctoral fellowship, and clinical practicum training programs.

Dr. Zinnbauer also provides psychological services to Veterans in the Mental Health Care Line. Dr. Zinnbauer's clinical work draws upon cognitive therapy, interpersonal process, addictions treatment, and positive psychology. He also has a professional interest in writing, research, and clinical applications of the psychology of religion and spirituality. Dr. Zinnbauer's approach to intern supervision includes a developmental approach to understanding interns' clinical skills and professional development. For outpatient psychotherapy supervision he emphasizes understanding interpersonal process, case conceptualization, and flexible strategies to meet Veterans where they are in treatment and to adapt treatment approaches to the individual needs of our Veterans.

Appendix B: Professional Conference

The chart below lists the Professional Conferences that were offered between September and June during the 2014-2015 training year.

Presenter	Topic
Toby Weiss	CPT Case presentation
Sheri Wirtz	Sleep Disorders
Nancy Gustin	Mindfulness Based Relapse Prevention
Jennifer Lewis	CPT Early Responders
David Greenwald	The Use of Paradoxical interventions
Diana Rigrish	Ethical considerations in Assessing Capacity to Drive in Older Adults
Juris Mezinskis	Interpersonal Psychotherapy for Depression
Alyssa Lieb	Using Dialectical Behavior Therapy with a non-BPD Individual with Substance Use Disorder: A Case Presentation
Laurie Greco	Two day ACT training
Yngve Monsson	Evolutionary psychology and depression
Jessica Thiede	The VITAL program
Shauna Keane Timberlake	Sexual functioning and disorder in the veteran population
Nicole Pukay-Martin	Involving Family Members in Mental Health Treatment
Jeanne Schmerler	Assessment of Effort and Validity in Neuropsychological Evaluations: Ethical Considerations
Schumm & Greenwald	MMPI - 2
Schumm & Greenwald	MMPI - 2 RF
Rachelle Sekerka	Psychotherapy and Psychosis
Benjamin Dickstein	PAI
Nancy Nagel	Issues in Compensation and Pension Evaluations
Brian Zinnbauer	Humor in Psychotherapy
Brian Zinnbauer	Malingering

Appendix C: Intern Seminars

The chart below lists the Intern Seminars that were offered between September and July during the 2014-2015 training year.

Brian Zinnbauer & Janell Giannitelli	Orientation to the Internship and the Developmental Process of the Internship Year
Rashidat Akinyemi	Managing Emergencies at the VA / Suicide
Chris Meshot	Medical Chart Terminology
Rick Seim	Overview of Internship Assessment Training
Kelly Knox	Military Culture
Chris Meshot	Mental Health Treatment Planning
Brian Zinnbauer	Psychoeducation in a SAR RTP: Teaching Methods and Styles
Danny Hall	DSM-5: Changes in Substance Abuse Diagnoses
Teri Bolte	Grandiosity
Wes Houston & Diana Rigrish	Neuropsychological Screening and Assessment
Jonathan Steinberg & Teri Bolte	2 Day Motivational Interviewing Workshop
Schumm, Seim, Kelkar, Butler & Juran	Post Doc Applications
Teri Bolte	SUD, Axis II, and counter-transference
Mike Schmalte	OEF/OIF Experiences
Jennifer Phillips	Sexual Diversity
Janell Giannitelli & PTSD Group	Vietnam Experiences
Rashidat Akinyemi	The Duty to Warn
Brian Zinnbauer	Ethical Decision Making
Janell Giannitelli	Dreams
Katherine Butler	Integrated Dual Diagnosis Treatment
Kelly Napier, Raquel Maymir & Pauline Lloyd	Home Based Primary Care
Amy Buckley	ESTs and EBPs
Janell Giannitelli & Rachel Rauck	Managing Surprising and Difficult Events in Treatment
Janell Giannitelli & Rachelle Sekerka	Gender Dynamics in Clinical Practice

Brian Zinnbauer	Supervision
Brian Zinnbauer & Janell Giannitelli	Dilemmas in Supervision
Lawson Wulsin	Psychopharmacology
Yngve Monsson & Benjamin Dickstein	EPPP and Licensure
Janell Giannitelli	Affair Recovery
Pauline Lloyd	Self Care
Brian Zinnbauer	Myths of Psychotherapy
Mary Hagerty Bruns	Life After Internship

Appendix D: VA Core Values



U.S. Department
of Veterans Affairs

VA Core Values and Characteristics Quick Reference



Because **I CARE**, I will...

Integrity	Act with high moral principle. Adhere to the highest professional standards. Maintain the trust and confidence of all with whom I engage.
Commitment	Work diligently to serve Veterans and other beneficiaries. Be driven by an earnest belief in VA's mission. Fulfill my individual responsibilities and organizational responsibilities.
Advocacy	Be truly Veteran-centric by identifying, fully considering, and appropriately advancing the interests of Veterans and other beneficiaries.
Respect	Treat all those I serve and with whom I work with dignity and respect. Show respect to earn it.
Excellence	Strive for the highest quality and continuous improvement. Be thoughtful and decisive in leadership, accountable for my actions, willing to admit mistakes, and rigorous in correcting them.



VA Core Characteristics

Trustworthy	VA earns the trust of those it serves – every day – through the actions of all employees. They provide care, benefits, and services with compassion, dependability, effectiveness, and transparency.
Accessible	VA engages and welcomes Veterans and other beneficiaries, facilitating their use of the entire array of its services. Each interaction will be positive and productive.
Quality	VA provides the highest standard of care and services to Veterans and beneficiaries while managing the cost of its programs and being efficient stewards of all resources entrusted to it by the American people. VA is a model of unrivalled excellence due to employees who are empowered, trusted by their leaders, and respected for their competence and dedication.
Innovative	VA prizes curiosity and initiative, encourages creative contributions from all employees, seeks continuous improvement, and adapts to remain at the forefront in knowledge, proficiency, and capability to deliver the highest standard of care and services to all of the people it serves.
Agile	VA anticipates and adapts quickly to current challenges and new requirements by continuously assessing the environment in which it operates and devising solutions to better serve Veterans, other beneficiaries, and Service members.
Integrated	VA links care and services across the Department; other federal, state, and local agencies; partners; and Veterans Services Organizations to provide useful and understandable programs to Veterans and other beneficiaries. VA’s relationship with the Department of Defense is unique, and VA will nurture it for the benefit of Veterans and Service members.
