

PSYCHOLOGY INTERNSHIP PROGRAM VA NORTHERN CALIFORNIA HEALTH CARE SYSTEM- EAST BAY

150 Muir Road Martinez California, 94553 (925) 372-2521 http://www.northerncalifornia.va.gov/

PROGRAM OVERVIEW

Thank you for your interest in our APA-accredited doctoral psychology internship program. On behalf of all our training staff, I want to emphasize how much we enjoy training psychology practicum students, interns, and post-doctoral residents. We have four General Track positions and one Neuropsychology Track position. Interns in our program have the opportunity to work in three distinct facilities that are part of the VA Northern California Health Care System (VANCHCS): the Martinez Campus, the Oakland Behavioral Health and Outpatient Clinics, and the David Grant Medical Center at Travis Air Force Base in Fairfield. Spending a year working in such uniquely diverse settings provides a rich and comprehensive training experience that serves as the capstone for doctoral education in Clinical or Counseling psychology and prepares graduates for post-doctoral specialization or employment.

The training settings are described in this brochure and include rotations in PTSD, Neuropsychology, Cognitive Rehabilitation, Behavioral Medicine, Primary Care Mental Health Integration, Inpatient Psychiatry, Consultation and Liaison, General Mental Health, and Substance Use Disorders. Interns complete 4 rotations (each is 2 days per week for 6 months). Additionally, interns meet weekly for a variety of didactic training seminars, including a range of topics in diversity, ethics, clinical service delivery, and professional development. The seminars are led by training staff and outside speakers. Interns also participate in an intensive year-long psychotherapy training experience and obtain considerable experience as a supervisor of practicum students.

Diversity in its many forms is a central value and focus of our training program. Individual and cultural diversity is emphasized during orientation, seminars, supervision, and case consultation. In addition, interns and postdocs participate in and help develop programming for our monthly Diversity, Equity, and Inclusion meeting, which includes didactics, journal club, experiential exercises, and case presentations.

Our supervisory staff is committed to excellence in training and is made up of diverse professionals with an impressive list of accomplishments. Many faculty members are involved in national professional activities and organizations. Graduates consistently land competitive post-doctoral residencies, including the seven residencies located within VANCHCS. Four of these residencies are in Neuropsychology, two are in Integrated Care and Behavioral Medicine, and one is in Post-Traumatic Stress Disorder. We take great pride in the professional development of our interns, who have consistently reported high satisfaction with their training experiences and the support they received during their internship.

The disruption and uncertainty introduced by COVID-19 has highlighted the importance of flexibility and innovation in our approach to training and clinical service delivery. In March 2020, we quickly moved our 2019-2020 trainees to telework and telehealth service delivery from home, where they completed their training year. Our 2020-2021 trainees' internship activities are being conducted almost entirely virtually. While we cannot describe with precision how the pandemic will impact the 2021-2022 training

year, we are certain of several things. First, the physical and emotional well-being, safety, and professional development of our trainees will continue to be a top priority. Second, we understand that COVID-19 has impacted many applicants' accrual of hours and research productivity and will take this into account as we evaluate applications. Third, all interview activities will be conducted virtually, with the goal of giving applicants as much of an "in-person" feel of our site as possible. Fourth, although the populations we treat and the services we provide will not change, there will continue to be a greater use of telehealth and technology-based formats in our clinical (i.e., care provision, supervision) and didactic (i.e., seminars) training experiences. Finally, we will continue to foster the same transparent, accessible, responsive, and cohesive (with supervisors, trainees, and providers from other disciplines) learning environment that has been the hallmark of our training program.

Thanks again for your interest in our internship program. We hope this brochure is helpful in your decision-making about the internship application process. Please let us know if we can answer any additional questions.

Matthew Cordova, Ph.D. Psychology Training Director (925) 372-2521

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ACCREDITATION STATUS

The doctoral internship at the VA Northern California Health Care System is accredited by the Commission on Accreditation of the American Psychological Association. Our March 2020 site visit was postponed due to the COVID-19 pandemic and is yet to be rescheduled.

The APA Office of Program Consultation and Accreditation can be reached at:

American Psychological Association 750 First St. NE, Washington DC 20002-4242 Phone number (202) 336-5979



INTERNSHIP POSITIONS AND BENEFITS

We anticipate 5 internship positions for the 2021-2022 training year. Each intern receives an annual stipend of \$31,589. Our interns are provided the option to elect health insurance coverage through the VA's benefit program. Health insurance coverage is available for married spouses and dependents. The VA adheres to the recent Supreme Court decision which allows for health benefits for same-sex spouses of interns regardless of state of residency though unmarried partners of either sex are not eligible. Detailed information about the benefits offered for VA's Psychology Training program is found at www.psychologytraining.va.gov/benefits.asp.

Please note: Non-funded internship positions are not offered.

MATCH NUMBERS

For our General Track (typically four positions) our APPIC match number is: **114112**For our Neuropsychology Track (typically one position) our APPIC match number is: **114113**

APPLICATION DEADLINE: Applications must be completed by November 1, 2020.

Please review the Application & Selection Procedures section below for specific instructions on our application process. Please review the Internship Admissions, Support, And Initial Placement Data section for more information about admission requirements, stipend and benefits, and graduate placements.

PROGRAM DESCRIPTION AND TRAINING SITE INFORMATION

There are currently 24 core members of the Psychology Training Committee and many ancillary staff members from several different disciplines actively involved in the training program.

The Clinical Psychology Internship Program sponsored by VA Northern California Health Care System is a full-time APA-accredited clinical internship providing 2080 hours of clinical experience. We offer training in a wide variety of clinical settings with diverse patient populations. The program is designed to train psychologists to effectively respond to the challenges and changes in the modern health care environment. VANCHCS has had an APA-accredited predoctoral psychology internship program since 1977. Currently, we have five full-time permanently funded interns.

The primary training sites for the internship program are in Martinez and Oakland, two communities in the East Bay region of the San Francisco Bay Area. A rotation is also offered at the David Grant Medical

<u>Center</u> (DGMC) which is on Travis Air Force Base in Fairfield. All three training sites are located in the Northeast section of the <u>San Fransico Bay Area</u>. Martinez is approximately 30 minutes from each of the other sites. Oakland and Fairfield are approximately 50 minutes apart from each other.

MARTINEZ OUTPATIENT CLINIC AND EXTENDED CARE FACILITY



The Martinez Outpatient Clinic is a multiple building campus that offers a full range of medical, surgical, and diagnostic services in addition to mental health care. It is also home to the Center for Rehabilitation and Extended Care (CREC), also known as the Community Living Center (CLC). The CLC/CREC is a 120-bed nursing care facility that provides sub-acute medical care, rehabilitation, short term custodial/respite care, and inpatient hospice care. Due

to the breadth of speciality services offered across the campus, opportunities for close collaboration and consulation with interprofessonal teams are abundant. The Martinez campus is home to the internship program which was the first VA program in California to obtain APA accreditation. Martinez has long had a leading Neuropsychology service and there are a number of ongoing grant-funded research programs in affiliation with UC Davis, UC Berkeley, and UC San Francisco. The Martinez Behavioral Health Clinic moved into a new building on the Martinez campus in 2016. The new clinic includes additional office and meeting space, group therapy rooms, and state-of-the-art technology to aid clinical practice. The Psychology Training Program is located in this new building.

The facilty is located in a surburban neighborhood, not far from the shops and restaurants that make up historic downtown Martinez. Martinez is 27 miles from Oakland and 35 miles from downtown San Francisco. Topographically, Martinez runs from hill country to the waterfront and was the home to the famous environmentalist John Muir and the birthplace of legendary baseball great Joe DiMaggio. The martini was invented here in a taven on the ferry docks, at a time before highways and bridges, when Martinez was the main gateway between the Bay Area and gold country.

OAKLAND BEHAVIORAL HEALTH CLINIC



The <u>Oakland Behavioral Health Clinic</u> provides mental health and substance abuse treatment services, including treatment for drug and alcohol-related dependencies, medication management, methadone maintenance, and individual and group therapy. This clinic also houses a PTSD treatment program, Homeless Outreach Program, and a Compensated Work Therapy Program.

The Oakland Behavioral Health Clinic, remodeled into a modern urban health facility in 2009, is located in the trendy Uptown neighborhood in <u>Oakland</u> and enjoys a colorful history which (according to legend) includes a stint as a practice studio for Green Day and other performers. The clinic serves an extremely diverse

clientele and is known for its colloborative team approach, welcoming environment, and world-class potlucks.

DAVID GRANT MEDICAL CENTER



<u>David Grant Medical Center</u> (DGMC) is a teaching hospital and the Air Force's largest medical facility on the West coast. Under a unique joint sharing agreement between the Department of Defense (DoD) and the VA, DGMC has an inpatient psychiatric facility designed to provide state-of-theart psychiatric treatment for Veterans and active duty military personnel. This facility offers the distinctive opportunity to observe cross-agency collaboration in caring for both patient populations and to develop

appreciation for the similarities and differences in Veteran and active duty behavioral health needs.

Located on the <u>Travis Air Force Base</u>, DGMC is a fully accredited hospital with a National Quality Approval gold seal by the <u>Joint Commission</u>. Travis Air Force base is the West Coast terminal for aeromedical evacuation aircraft returning sick or injured patients from the entire Pacific Rim.

LOCATION INFORMATION



Situated in the San Francisco Bay Area, our trainees are offered a vast array of world class cultural and recreational opportunities, comfortable weather, and a rich multicultural environment. Northern California is home to Yosemite National Park, Lake Tahoe, the Sierra Nevada Mountain Range, Pacific beaches, and the wine country of Sonoma and Napa Counties. Psychology training in our region is enhanced by the close proximity to major research universities (UC Berkeley, UC San Francisco, Stanford) and the VA

facilities in San Francisco and Palo Alto. Trainees typically have the opportunity to attend training workshops at the neighboring VA facilities.

While the cost of living in the San Francisco Bay Area is high, the East Bay is relatively more affordable and interns have been able to find affordable housing in communities convenient to

VANCHCS training sites. Interns have often elected to live in either the Oakland/Berkeley area or the Walnut Creek/Martinez/Pleasant Hill/Concord area. Several interns have also lived in San Francisco. The VA offers a transit subsidy benefit which can assist with offsetting public transportation commuting costs. For example, many trainees utilize this transit subsidy to ride BART (the local light rail) to the clinic in Oakland.



TRAINING IN THE VA

The VA is the largest health care system in the nation and is the largest training site for physicians, psychologists, and many other health care professionals. Mental Health services are currently a primary focus of attention in the VA, in large part due to concern about Post Traumatic Stress Disorder, Traumatic Brain Injury, and other issues among service members who served in Iraq and Afghanistan. In addition, the VA is in the middle of an ambitious agenda to define and implement state-of-the-art Mental Health care for all enrolled Veterans across all diagnoses and issues and across the life-span. This has led to a rapid expansion of employees and many new training initiatives. Tele-health modalities are now well-established to provide services to Veterans across our system.

For the past several years, the VA has put significant resources into training its mental health clinicians in specific evidence-based psychotherapies (EBT), including Cognitive-Behavioral Therapy (for Depression, Chronic Pain, and Insomnia), Acceptance and Commitment Therapy, Cognitive Processing Therapy, Prolonged Exposure, Motivational Interviewing, Interpersonal Therapy, and several other approaches. Several members of our internship training faculty have completed these intensive trainings (which include supervision and review of session recordings) and these particular EBTs are emphasized during internship training.

OTHER PSYCHOLOGY TRAINING IN VANCHCS

Sacramento Psychology Internship

VA Northern California also has an VA Central Office-funded internship at the medical center in Sacramento. The first class started in July 2018 and the program achieved APA Accreditation-on-

contingency during its first year of operation. The program has four interns who participate in multiple rotations throughout the facility. Don Koelpin, Ph.D., is the Training Director of the Sacramento program.

Clinical Neuropsychology Postdoctoral Residency

The VA NCHCS Clinical Neuropsychology Postdoctoral Residency Program has been in existence for over 20 years and received APA accreditation in 2009. There are four postdoctoral residents funded through VA Central Office. Two residents are based at the Sacramento (Mather) Campus, and two are based in Martinez. Training also occurs at the Oakland Behavioral Health Clinic, David Grant Medical Center on the Travis Air Force Base, UC Davis Department of Neurology, and the UC Davis Alzheimer's Disease Center. The program has a unique strength in neurocognitive rehabilitation training. Brigid Rose, Ph.D., ABPP, is the Director of the Clinical Neuropsychology Postdoctoral Residency Program.

Clinical Psychology Postdoctoral Residency

VA NCHCS has two postdoctoral residents in Clinical Psychology with a focus in Integrated Care and Behavioral Medicine and one with a focus in Post Traumatic Stress Disorder. This program is APA-accredited and has been in existence since 2011. These residents work in both the Oakland and Martinez facilities.

Student Practicum Programs

There are graduate student practicum programs at the Oakland, Martinez, and Sacramento facilities and the Oakland Vet Center. These programs are based on formal training agreements with local Psychology graduate programs. The students work in several different settings, including general Mental Health, Cognitive Rehabilitation, inpatient psychiatry, and Neuropsychology. Interns and postdoctoral residents have the full array of supervisory experiences with these practicum students, including individual and group supervision, didactic presentations, evaluation, and selection.

TRAINING MODEL AND PROGRAM PHILOSOPHY

The program is designed to facilitate the transition from advanced graduate student to entry-level psychologist. While internship is primarily an intensive clinical training experience, the program exposes interns to the wide range of activities typical of psychologists in complex health care settings. For example, training faculty across the various settings and clinical programs are in program leadership positions. Thus, in addition to the faculty members' clinical activites, the program provides opportunity for exposure to administrative roles that build on graduate training in empirical methodology, scientific literature, and quantitative reasoning. Some faculty members serve as training consultants for the VA evidence-based psychotherapy trainining initiatives.

The training model reflects our adherence to the philosophy that psychological practice is based on the science of psychology which, in turn, is influenced by the professional practice of psychology. We expect that our graduates will have a broad range of clinical and consultation skills that are informed by the scientific literature and will have the ability to apply scientific principles and techniques in addressing clinical and administrative responsibilities. The uniquely broad range of clinical and demographic diversity across our training settings provides an exceptional environment for developing these competencies.

PROGRAM AIM AND COMPETENCIES

The aim of the Psychology Internship program at VA Northern California Health Care System is to provide training that will allow for successful entry into postdoctoral fellowships or entry level positions

in health service psychology, with a particular emphasis on VA or other complex health care systems. The program trains for competency acquisition in nine domains and emphasizes broad and general practice in multiple clinical settings. Our Neuropsychology track provides the opportunity to emphasize training consistent with the sub-field's standards for preparation for advanced postdoctoral training (the Houston Conference Guidelines) while maintaining a broad and general training focus.

Internship training competencies are designed to build upon the basic clinical competencies acquired in graduate training. The internship program utilizes the nine profession-wide competencies identified in APA's Standards of Accreditation:

- 1. Research
- 2. Ethical and legal standards
- 3. Individual and cultural diversity
- 4. Professional values, attitudes, and behaviors
- 5. Communication and interpersonal skills
- 6. Assessment
- 7. Intervention
- 8. Supervision
- 9. Consultation and interprofessional/interdisciplinary skills

Competency Area One: Research

Demonstrates the substantially independent ability to critically evaluate and disseminate research or other scholarly activities (e.g., case conference, presentation, publications) at the local (including the host institution), regional, or national level.

Integrates current research and literature into clinical practice

Competency Area Two: Ethical and Legal Standards

Is knowledgeable of and acts in accordance with each of the following:

The current version of the APA Ethical Principles of Psychologists and Code of Conduct.

Relevant laws, regulations, rules, and policies governing health service psychology at the organizational, local, state, regional, and federal levels.

Relevant professional standards and guidelines (e.g., patients' rights, release of information, informed consent, limits to confidentiality, management of suicidal behavior, and child/elder abuse reporting policies).

Recognizes ethical dilemmas as they arise, and applies ethical decision-making processes in order to resolve the dilemmas.

Conducts self in an ethical manner in all professional activities.

Competency Area Three: Individual and Cultural Diversity

Understands how personal/cultural history, attitudes, and biases may affect personal understanding and interaction with people different from oneself.

Demonstrates knowledge of the current theoretical and empirical knowledge base as it relates to addressing diversity in all professional activities including research, training, supervision/consultation, and service.

Demonstrates the ability to integrate awareness and knowledge of individual and cultural differences in the conduct of professional roles (e.g., research, services, and other professional activities).

Demonstrates the ability to independently apply their knowledge and approach in working effectively with the range of diverse individuals and groups encountered during internship.

Competency Area Four: Professional Values, Attitudes, and Behaviors

Behaves in ways that reflect the values and attitudes of psychology, including integrity, deportment, professional identity, accountability, lifelong learning, and concern for the welfare of others.

Engages in self-reflection regarding one's personal and professional functioning; engages in activities to maintain and improve performance, well-being, and professional effectiveness.

Actively seeks and demonstrate openness and responsiveness to feedback and supervision.

Responds professionally in increasingly complex situations with a greater degree of independence as they progress across levels of training.

Competency Area Five: Communication and Interpersonal Skills

Develops and maintains effective relationships with a wide range of individuals, including colleagues, communities, organizations, supervisors, supervisees, and those receiving professional services.

Produces and comprehends oral, nonverbal, and written communications that are informative and well-integrated; demonstrates a thorough grasp of professional language and concepts.

Demonstrates effective interpersonal skills and the ability to manage difficult communication well.

Competency Area Six: Assessment

Demonstrates current knowledge of diagnostic classification systems, functional and dysfunctional behaviors, including consideration of client strengths and psychopathology.

Demonstrates understanding of human behavior within its context (e.g., family, social, societal, and cultural).

Demonstrates the ability to apply the knowledge of functional and dysfunctional behaviors including context to the assessment and/or diagnostic process.

Selects and applies assessment methods that draw from the best available empirical literature and that reflect the science of measurement and psychometrics; collects relevant data using multiple sources and methods appropriate to the identified goals and questions of the assessment as well as relevant diversity characteristics of the service recipient.

Interprets assessment results, following current research and professional standards and guidelines, to inform case conceptualization, classification, and recommendations, while guarding against decision-making biases, distinguishing the aspects of assessment that are subjective from those that are objective.

Communicates orally and in written documents the findings and implications of the assessment in an accurate and effective manner sensitive to a range of audiences.

Competency Area Seven: Intervention

Establishes and maintains effective relationships with the recipients of psychological services.

Develops evidence-based intervention plans specific to the service delivery goals.

Implements interventions informed by the current scientific literature, assessment findings, diversity characteristics, and contextual variables.

Demonstrates the ability to apply the relevant research literature to clinical decision making. Modifies and adapts evidence-based approaches effectively when a clear evidence-base is lacking.

Evaluates intervention effectiveness, and adapts intervention goals and methods consistent with ongoing evaluation.

Appreciates his/her/their stimulus value to patient and effectively addresses this in therapy.

Provide psycho educational group programming consistent with clinical program needs (e.g., PTSD groups, Pain Management, Substance Abuse, etc.).

Effectively manage termination of therapy.

Competency Area Eight: Supervision

Applies the knowledge of supervision models and practices in direct or simulated practice with psychology trainees, or other health professionals.

Provides effective constructive feedback and guidance (e.g. direct, behaviorally specific, corrective guidance)

Competency Area Nine: Consultation and Interprofessional/Interdisciplinary Skills

Demonstrates knowledge and respect for the roles and perspectives of other professions.

Applies the knowledge of consultation models and practices in direct or simulated consultation with individuals and their families, other health care professionals, interprofessional groups, or systems related to health and behavior.

Identifies appropriate patient care issues that would benefit from interdisciplinary consultation (e.g., with psychiatry, social work, MOVE! Program).

Communicates information and recommendations to the referral source verbally and in writing that are timely, clear, and useful.

PROGRAM STRUCTURE

The internship starts on a Monday in mid-late August and lasts for a full calendar year. Interns work from 8:00 am - 4:30 pm Monday through Friday. Work- life balance is emphasized, and the internship is

designed to involve 40 hours per week. Occasionally, additional time might be necessary to respond to clinical emergencies or complete tasks such as assessment reports. Interns spend various parts of the week at the VA facilities in Oakland and Martinez, and possibly at David Grant Medical Center in Fairfield.

Planning the Training Year

Prior to the start of the internship year, interns are sent a preliminary non-binding questionnaire to identify initial training interests. This information helps the Training Committee plan for the training year. At the beginning of internship, interns go through several days of orientation activities, which provide the opportunity to visit the clinical sites and meet all the prospective supervisors. During orientation, interns also complete a self-assessment to help identify strengths and training targets.

A training plan is developed individually for each intern in conjunction with the Training Director and other faculty input based on individual interests and training needs. The goal is to develop a broad-based training experience that includes exposure to multiple clinical settings and patient populations. Faculty members in addition to the Training Director are available for consultation to help navigate the various training options. Rotations are selected from the options below based on individual training needs and the program requirements for competency acquisition and broad clinical exposure. Interns are *typically* able to participate in the training activities that they desire but the exact structure and timing of various activities must fit with the overall organizational needs of the program. The Training Director, other faculty members, and the interns work together to ensure the training plan includes all requirements listed below.

The program is organized into two six-month segments. Rotations are scheduled for two days per week, so an intern will be working on two different rotations at a time. Interns' interests and priorities sometimes change over the course of the training year and changes in the training plan are permissible provided that they continue to allow for the intern to complete their required training experiences and the program has the capacity to absorb the change. Mondays are reserved for seminars and the year-long psychotherapy experience. Time is scheduled for interns to have lunch together on Mondays and this is prioritized as an important professional socialization experience.

The neuropsychology track is designed to meet Houston Conference Guidelines for an internship in neuropsychology, and this requires that at least 50% of the training year is dedicated to specialized training in neuropsychology. This is met through assignment to the neuropsychology consultation service and, typically, to the cognitive rehabilitation service. The neuropsychology track intern has the opportunity to engage in at least one rotation in an area outside the emphasis area and the intern is guided to develop a training plan that includes sufficiently broad experiences in addition to neuropsychology specialization. Because neuropsychology track interns typically plan to apply for neuropsychology post-doctoral fellowships, the training plan is designed to emphasize specific experiences early in the year so as to maximize competitiveness for the fellowships by selection process.

ROTATIONS

Behavioral Medicine

Supervisors: Crystelle Egan, Ph.D., Larry Burrell, Ph.D., Matt Cordova, Ph.D.

The Behavioral Medicine Rotation is located at the Martinez site. This rotation provides an opportunity to work with patients with a wide range of medical concerns and conditions. A particular emphasis is placed on pain management, sleep (e.g., CBT-I), and habit control (such as smoking cessation and weight management). Interns receive experience in individual and psychoeducational group therapy, relaxation training, and biofeedback. They also conduct pre-surgical evaluations for patients being considered for stem-cell or solid organ transplants, bariatric surgery, and other procedures.

David Grant Medical Center at Travis Air Force Base

Supervisor: Bill Steh, Ph.D.

This rotation provides the opportunity to work on a 12-bed, locked, inpatient psychiatric unit that is jointly staffed and managed by the Air Force and the VA. This is the only joint (VA/DoD) mental health unit of its kind. Patients served include active duty Air Force (as well as other branches), military retirees, military dependents, and Veterans. David Grant receives active duty members from all over the Pacific Rim and often complicated treatment and disposition decisions must be made. As such, this rotation emphasizes efficient psychodiagnostic (and occasional neuropsychological) assessment and rapid diagnosis. Interns are also an integral part of the treatment team, conduct psychiatric interviews, psychoeducational groups, and individual sessions. Travis Air Force Base is in Fairfield and is about 35 minutes by car from the Martinez campus.

General Outpatient Mental Health

Supervisors: Danielle Spangler, Ph.D., Genevieve Garratt, Ph.D., Charissa Hosseini, Ph.D., Sahiba Chowdhary, Psy.D., Jennifer Chou, Ph.D.

The General Mental Health rotations take place in both the Martinez and the Oakland Behavioral Health Clinics. This rotation provides experience with a range of assessment activities, including triage, intakes, and formal psychological assessment. Psychotherapy experience is available for a wide range of presenting problems and from a range of theoretical perspectives. Specialized training in motivational interviewing, cognitive behavioral therapy, and acceptance commitment therapy are available on this rotation. Interns on this rotation carry a psychotherapy caseload of individual and possibly couples or family therapy. Interns have the opportunity to co-facilitate existing groups, or develop their own groups in the clinic. Interns also participate in treatment team meetings and staff consultation.

Mental Health Consultation-Liaison

Supervisor: Melanie Ropelato, Ph.D.

This rotation takes place in Martinez CLC/CREC. The intern operates as part of an interdisciplinary team consisting of a physician, a nurse practitioner, nurses, rehabilitation therapists (e.g., physical, occupational, speech, and recreation therapists), chaplains, and other specialty providers. In the Consultation-Liaison rotation, the intern engages in a range of activities, including psychodiagnostic assessment; brief, problem-focused psychotherapeutic intervention; patient and family psychoeducation (e.g., regarding pain and/or sleep management); brief cognitive screening and capacity evaluation; and, on the hospice unit, end of life emotional support. The intern educates the treatment team about how an individual's medical condition might be influencing an underlying mental health diagnosis, and viceversa. The intern also serves as a resource for medical staff by providing behavioral support recommendations when challenging behavior from dementia or treatment non-adherence interferes with patient recovery.

Neurocognitive Rehabilitation

Supervisor: Katherine Giles, Psy.D., John Conley, Psy.D.

The Neurocognitive Rehabilitation Service provides specialized treatment services for Veterans experiencing cognitive difficulties that negatively impact day-to-day functioning. Veterans typically present with cognitive concerns associated with known neurological issues (e.g., traumatic brain injuries, stroke, etc.), but they also can represent the secondary influences of complex co-occurring conditions (e.g., psychiatric, medical, substance abuse problems). In the inpatient setting (CREC/CLC), interns learn to assess the cognitive functioning and treatment needs of inpatients with subacute neurological conditions (i.e., mostly stroke, but can also include dementia, traumatic brain injury, and other

neurological syndromes), work with the patients to identify realistic treatment goals, facilitate early recovery through education and instruction in compensatory strategies, and serve as a consultant to the interdisciplinary team regarding the cognitive, emotional, and behavioral needs of the patient. In the outpatient setting, interns have the opportunity to work with individuals and groups with focus on cognitive skill building and use of compensatory strategies. When possible, we strive to involve families and caregivers in the Veterans' treatment plans and caregiver support is integrated into our work across patient populations and settings. If time allows, interns can also seek training and certification in the REACH VA Caregiver program to facilitate their work with caregivers of individuals with dementia.

Neuropsychology

Supervisors: Kristi Steh, Ph.D., Brigid Rose, Ph.D., ABPP, Diana Partovi, Psy.D.

The Neuropsychology service is located on the Martinez Campus. Training and experience on the neuropsychology rotation serves to enhance the intern's working knowledge of brain-behavior relationships, and to introduce interns to the major neurologic syndromes and their neurobehavioral sequelae. Interns learn to integrate neuropsychological findings with those of neuro-imaging and knowledge of neuropathology. Interns develop preliminary competence in conceptualizing and conducting independent neuropsychological evaluations and in effectively communicating findings to referral sources and patients. Most neuropsychological evaluations are done in the outpatient clinic, but there are opportunities for inpatient evaluation at the CREC as well. Interns also participate in the monthly didactic seminar series held at the Martinez campus and at UC Davis Medical Center. These seminar series cover specialty topics related to Neuropsychology and Cognitive Rehabilitation, neuroimaging interpretation/review, clinical case conferences, and preparation for board certification in Clinical Neuropsychology.

Post-Traumatic Stress Disorder (PTSD)

Supervisors: Tanya Aaen, Ph.D., Olivia Chang, Ph.D., Planthara, Psy.D., Rebecca Chandler, Psy.D., Lindsey Pepper, Psy.D.

The Martinez and Oakland Clinics both have multidisciplinary PTSD Clinical teams (PCT) responsible for providing specialized treatment for individuals experiencing the after-effects of trauma. Evidence-based assessment and treatment is emphasized. Both rotations offer training in the Clinical Administered PTSD Scale (CAPS) for DSM-5, Prolonged Exposure (PE), and Cognitive Processing Therapy (CPT). Additional training may involve facilitating Written Exposure Therapy For PTSD, Concurrent Treament of PTSD and Substance Disorders Using Prolonged Exposure (COPE), Stress Inoculation Training (SIT), Skills Training in Affect and Interpersonal Regulation (STAIR), PTSD psychoeducational groups, and other coping skills group, depending on the intern's training needs and goals. Interns also develop strong consultation skills by participating in interdisciplinary treatment team meetings and collaborating with mental and physical health practitioners.

Primary Care-Mental Health Integration Supervisors: TBD

Behavioral health care delivered and integrated into primary care medical clinics is a major emphasis in the VA. The Primary Care-Mental Health Integration Rotation is split between the Martinez and Oakland sites. This rotation provides an opportunity to gain experience in brief assessment and intervention models for general mental health as well as behavioral health issues. Emphasis is placed on promoting good health practices, improving adherence to medical regimens, and addressing psychological/behavioral difficulties that contribute to or result from medical illness.

Substance Use Disorder and Co-occurring Conditions

Supervisors: Dylan Athenour, Ph.D., Andreas Bollinger, Ph.D.

The Substance Use Disorder rotation is located at the Addiction Recovery Treatment Services (ARTS) in the both Oakland and Martinez clinics. The Oakland program includes an Opioid Treatment (Methadone and buprenorphine) Program. Therapeutic services include individual, group, couples, and family treatment. Training experiences on the substance abuse rotation provide interns with an opportunity to enhance their understanding of substance use disorders and the medical, social, and psychological issues that typically accompany them. The rotation also provides an opportunity to assess and treat co-occurring disorders such as depression, PTSD, and other anxiety disorders. Interns function as treatment team members and are responsible for assessment, psychotherapy, and staff consultation. Cognitive-Behavioral and Motivational Interviewing interventions are emphasized. The rotation provides an opportunity to develop experience with the unique ways psychologists can contribute to a multidisciplinary substance abuse treatment team.

ADDITIONAL TRAINING ACTIVITIES

Interns provide supervision and training to practicum students at the Martinez or Oakland facilities. This includes providing individual and group supervision, professional development mentoring, didactic instruction, evaluation, and assistance in the selection process. Interns are provided weekly group supervision of this process.

To assure a broad and general training experience, several activities are required independent of specific rotation assignments. These include intakes, comprehensive psychological assessments, triage work, group therapy, participation in evidence-based psychotherapy, treatment with veterans from different demographic backgrounds and a project or activity to demonstrate ability to evaluate and disseminate research or other scholarly activities. The program has a process for periodic review of activity completion.

There are additional experiences that may be available based on intern interest and fit with the overall training plan. Such activities are typically decided upon during orientation and incorporated into the training plan. One common example is the opportunity to work with a faculty member in a management position to develop an administrative project. Interns have developed new clinical processes, collected clinic utilization data, and have worked with clinical teams to implement changes based on these findings.

WEEKLY SCHEDULE

Seminars occur on Monday mornings from 8:00 am - 10:00 am. There is a rotating schedule of Cultural Diversity, Ethics and Professional Development, and other topics of clinical and professional interest. Interns are provided time to have lunch together for professional socialization and to discuss their experiences at noon on Mondays. From 10:00 am - 12:00 pm and 1:00 pm - 2:00 pm, interns are involved in a Psychotherapy Training Experience. From 2:00 pm - 3:00 pm there is a Supervision of Supervision meeting. From 3:00 pm - 4:00 pm, interns participate in group supervision for their Monday Psychotherapy Training cases.

In some cases, there may be time on Mondays for additional projects, based on intern interest. Any such projects will be discussed by the training director, intern, and relevant supervisor and documented on the training plan.

The schedule for the rest of the week involves working on two different rotations (one on Tuesday and Wednesday, the other on Thursday and Friday).

Typical Training Week

	Monday	Tuesday	Wednesday	Thursday	Friday
8:00 am – 10:00 am	Intern seminars				
10:00 am – 12:00 pm	1:1 therapy				
12:00 pm – 1:00 pm	Intern lunch			Individual Datation Assistance	
1:00 pm – 2:00 pm	1:1 therapy	individual Rota	tion Assignments	Individual Rotation Assignments	on Assignments
2:00 pm – 3:00 pm	Supervision of supervision				
3:00 pm – 4:00 pm	Group supervision				

All interns are required to work in both <u>Oakland</u> and <u>Martinez</u>, as these sites each have unique patient populations and training experiences. Specific times assigned to each clinic are coordinated based on the collective schedules of all the interns. Several of the rotations (General Mental Health, BMed/Primary Care, PTSD) may involve experiences in both clinics. The clinics are approximately 35 minutes apart by car. It is possible to commute via public transportation, though most interns find it easier to commute via car. As noted above, the VA offers a transit subsidy benefit which may assist with offsetting some commute costs. Information about both traffic patterns and public transportation can be found at www.511.org.

Sample intern schedules are shown below. These are examples and there are several different options for planning your training year depending on your preferences and training needs as well as rotation/staff availability. These schedules are in effect for six months and the schedules rotate at the middle of the training year.

#1 General Track Intern: PTSD and CREC rotations:

Monday	Tuesday (CREC)	Wednesday (CREC)	Thursday (PTSD)	Friday (PTSD)
Intern seminars	Chart review	Chart review	PTSD intake	Chart review
1:1 therapy	See CREC patients	See CREC patients	PTSD EBP Consultation Call	1:1 PTSD EBP
Intern lunch	Lunch	Lunch	Lunch	Lunch
1:1 therapy	See CREC patients	Hospice rounds	PTSD Group	1:1 PTSD EBP
Supervision of supervision	See CREC patients	Supervision	Supervision	1:1 PTSD EBP
Supervision	Notes/wrap	Notes/wrap	Notes	Notes

#2 General Track Intern: Behavioral Medicine rotation and DGMC:

Monday	Tuesday (BMed)	Wednesday (BMed)	Thursday (DGMC)	Friday (DGMC)
Intern seminars	Supervision	1:1 patient	Check in	Check in
1:1 therapy	1:1 patient	MOVE! Group	Grand rounds, tx.	Grand rounds, tx.
	Pain Mgt Group	Notes	team rounds	team rounds
Intern lunch	Lunch	Lunch	Lunch	Lunch
1:1 therapy	Notes	Stress Mgt Group	1:1 patients	1:1 patients
Supervision of	1:1 patients	1:1 patients	Discharge planning	Discharge planning
supervision			or H&P	or H&P
Supervision	Notes	Notes	Notes	Supervision

#3 – Neuropsychology Track Intern: Cog Rehab/Neuropsych

Monday	Tuesday (Cog/Rehab)	Wednesday (Cog/Rehab)	Thursday (Neuro)	Friday (Neuro)
Intern seminars	Notes	Chart review	Didactics – two didactic sessions, all day once per month, half day once per month	Chart review
1:1 therapy	Cog rehab meeting/ Group supervision	Inpatient TBI group	(if no didactic) Full neuro assessment	Scoring, report writing
Intern lunch	Lunch	Lunch	Lunch	Lunch
1:1 therapy	1:1 patient rehab	1:1 patient rehab	Full neuro assessment (morning or afternoon only, not both)	Scoring, report writing
Supervision of supervision	1:1 patient rehab	Cognitive skills group	Supervision	Feedback sessions
Supervision	Interdisciplinary inpatient meeting	Notes	Notes	Notes

FACILITY AND TRAINING RESOURCES

Interns have access to networked PC workstations for clinical and educational activities. All clinical documentation in the VA is completed on the Computerized Patient Record System (CPRS). All computers have internet access and any use in support of clinical or academic activities is acceptable. All computers have the Microsoft Office programs. The training program has a shared folder on the network that contains a large volume of patient handouts, professional articles, and other resources to which interns are given access. Access to statistical software is available. VA Northern California has an extensive virtual library and interns have access to a broad range of academic resources. In addition to the training faculty, there are several administrative and support staff members available to help with orientation and to provide logistical support. Clerical staff members at the Martinez and the Oakland Behavioral Health Clinics are available to help with patient scheduling, computer access, scheduling leave time, and other tasks.



VA NCHCS CLINICAL PSYCHOLOGY INTERNSHIP PROGRAM CORE FACULTY

Below are core internship faculty biographies. There are a number of additional staff members at each of the sites who also contribute to training and supervision.

Tanya Aaen, Ph.D. (she/her/hers)

Staff Psychologist, Martinez PTSD Team Program Director, PTSD Services Ph.D., Clinical Psychology, Loma Linda University, 2005 Internship: Salem VAMC, Salem, VA

Professional Interests: Individual and group psychotherapy; PTSD and traumatic stress; CBT; Gestalt Therapy; adjustment disorders; post-deployment stress; and chronic and terminal illness.

Favorite Pastimes and Bay Area Activities: Spending time with my family, snow skiing, camping, hiking and yoga. I enjoy day/weekend trips in the Bay Area to the Upper Napa Valley, Mendocino, or taking the ferry to San Francisco for the day.

Dylan Athenour, Ph.D. (he/him/his)

Clinical Psychologist, Martinez Addiction Recovery Treatment Services (ARTS) Program Ph.D., Clinical Psychology, Seattle Pacific University, 2015 Internship: Yale University, New Haven, CT

Professional Interests: Substance Abuse; Motivational Interviewing; Dual Diagnosis Treatment; CBT; Harm Reduction and Abstinence Based Approaches; Individual and Group Psychotherapy; Evaluation for Residential and Outpatient Treatment.

Favorite Pastimes and Bay Area Activities: Hiking, kayaking, skiing in Tahoe (winter), trips to the coast (Monterey, Santa Cruz, Big Sur, and Mendocino are some of my favorites), basically any excuse to get outdoors after work or on the weekends, and live music. I also enjoy traveling into San Francisco or Oakland for the day to explore and eat delicious food with friends/family.

Lisa Belvy, Ph.D. (she/her/hers)

Clinical Psychologist, General Mental Health (Evidence Based Therapy, Telehealth) Martinez VA Outpatient Care Center Ph.D., Clinical Psychology, University of Illinois, Chicago, 2013 Internship: University of Illinois Medical Center, Chicago, IL

Professional Interests: Evidence-Based Practice; integrated care; Behavioral Medicine; health behavior change; behavioral pain management; obesity and bariatric surgery; LGBTQ health; CBT; Mindfulness; Motivational Interviewing.

Favorite Pastimes and Bay Area Activities: Sunday brunch with my spouse and little Chihuahua/Miniature Pincher Mix. Weekend trips in the surrounding area including to Lake Tahoe, Santa Cruz, Monterey, Sonoma, and more. After living in Chicago, Washington DC, LA, and SF proper, there's nowhere I'd rather call home than the East Bay!

Andreas Bollinger, Ph.D. (he/him/his)

Clinical Psychologist, Oakland Behavioral Health Clinic Professor, Department of Counseling Psychology, Dominican University of California Ph.D., Clinical Psychology, Pacific Graduate School of Psychology, 1997 Internship: Boston VA Consortium, Boston, MA

Professional Interests: Individual and group psychotherapy; CBT; PTSD and traumatic stress; coping skills; substance abuse/relapse prevention; Motivational Interviewing; diagnostic interviewing; manual-and evidence-based treatments.

Favorite Pastimes and Bay Area Activities: From the dunes of Limantour to the summit of Mt. Diablo, from the taquerías of the Mission District to the vineyards of Napa, always in the pursuit of "more cowbell" with friends and family. . . but then again, it could be a Swiss thing.

Larry Burrell, Ph.D. (he/him/his)

Clinical Psychologist, Behavioral Medicine, Martinez Outpatient Clinic Ph.D., Clinical and Health Psychology, University of Florida, 2018 Internship: Palo Alto VA Health Care System – Beahavioral Medicine

Professional Interests: Evidence-Based Practice; integrated care; Behavioral Medicine; health psychology; racial/ethnic miniory mental health; sexual funcitioning; LGBTQ health; DBT; health equity research.

Favorite Pastimes and Bay Area Activities: Brunch at various Bay Area locales, concerts, and spending time with friends. I also enjoy travel, especially internationally. After living in Atlanta, Baltimore, Gainesville, FL and SF proper, I'm very happy to call the East Bay home!

Rebecca Chandler, DPhil, Psy.D. (she/her/hers)

Staff Psychologist, Martinez PTSD Team
DPhil, Psychiatry, University of Oxford, 2011
PsyD, Clinical Psychology, Alliant International University, 2016
Internship: VA Northern California Healthcare System
Postdoctoral Fellowship – PTSD Focus: VA Northern California Healthcare System

Professional Interests: PTSD and traumatic stress; individual psychotherapy; telehealth; mood disorders; anxiety disorders; substance use; evidence-based practice; diagnostic assessment; program development.

Favorite Pastimes and Bay Area Activities: Pilates, hiking, spending time with friends, reading, and discovering new restaurants, coffeeshops, and neighborhoods in the Bay Area.

Olivia Chang, Ph.D. (she/her/hers)

Clinical Psychologist, Martinez PTSD Team Ph.D., Clinical Psychology, University of Kansas, 2009 Internship: Salem VAMC, Salem, Virginia

Professional Interests: PTSD and traumatic stress, individual and group psychotherapy, Cognitive Behavioral Therapy, Acceptance and Commitment Therapy, evidenced-based practice, interpersonal process in psychotherapy.

Favorite Pastimes and Bay Area Activities: Running, hiking, live music, Kansas basketball, traveling, gardening, and spending time with friends and family. I love the easy access to San Francisco and the wide array of options for food, culture, and outdoor activities.

L. Jennifer Chou, Ph.D. (she/her/hers)

Staff Psychologist, Oakland Behavioral Health Clinic Ph.D. Clinical Psychology, Palo Alto University, 2014 Internship: VA Loma Linda Healthcare System

Professional Interests: health and wellness through the integration of mind, body, and spirit; health focused behavioral interventions for chronic diseases (e.g. chronic pain, diabetes, hypertension, insomnia); coping skills/stress management; brief and longer term individual and group psychotherapy addressing a range of mental health presentations including PTSD and traumatic stress, substance use, and depression/anxiety; CBT, ACT, mindfulness/meditation, and values-based interventions.

Favorite Pastimes and Bay Area Activities: I enjoy running, yoga (Mysore Ashtanga style), ballroom dancing, and hanging out with friends and family. I was born and raised in the Bay Area and love my hometown sports teams - Go Giants, go Warriors, go 49ers!

Sahiba S. Chowdhary, Psy.D. (she/her/hers)

Staff Psychologist, General Mental Health, Martinez Outpatient Clinic Psy.D., Clinical Psychology, Widener Institute of Graduate Clinical Psychology, 2019 Internships: Victim Services Center of Montgomery County, Widener University Counseling Center Fellowship: Edith Nourse Rogers Memorial VA, Bedford, MA

Professional Interests: Individual and group psychotherapy; CBT, DBT, trauma-focused, and attachment-based interventions; multicultural assessments and competencies; sexual assault awareness; forensic psychology; coping skills/stress management; psychology training and supervision

Favorite Pastimes and Bay Area Activities: Hiking, kayaking, sticking my feet in the sand; travelling, especially internationally; spending time with loved ones; dancing; reading; discovering new food and music; filling my house with plants.

John J. Conley, Psy.D. (he/him/his)

Staff Clinical Neuropsychologist, VA Northern California Health Care System (Oakland & Martinez) Psy.D., Clinical Psychology, Pacific University, 2017 Internship: VA NCHCS, Martinez, CA

Professional Interests: Neuropsychological assessment; capacity evaluation; neurocognitive rehabilitation; caregiver education and support; non-pharmacological management of challenging behaviors; geriatric neuropsychology; multicultural assessment; brief/bedside neuropsychological evaluation; diagnostic accuracy and clinical utility of neuropsychological assessment.

Favorite Pastimes and Bay Area Activities: Hiking, camping, and backpacking; occasional light mountaineering and winter adventures in the Sierra; spending time with family, friends, and pets; discovering new food spots and activities in San Francisco, Oakland, and closer to home.

Matthew Cordova, Ph.D. (he/him/his)

Clinical Psychologist, Behavioral Medicine, Martinez Outpatient Clinic Training Director, Mental Health Training Program Manager Associate Professor, Palo Alto University Ph.D., Clinical Psychology, University of Kentucky, 1999 Internship: VA Palo Alto Health Care System, Palo Alto, CA Professional Interests: Behavioral Medicine; primary care psychology; behavioral pain management; psychosocial oncology; traumatic stress; positive psychology; interpersonal process.

Favorite Pastimes and Bay Area Activities: Basketball (playing and watching), baseball (watching my kids and the Giants), and time with my family (my wife, my college-age son, and by high school-age daughter). My favorite getaways in the Bay Area (and nearby) are Monterey, Yosemite, Davis, and Gold Country (both summer and winter).

Crystelle Egan, Ph.D. (she/her/hers)

Clinical Psychologist, Behavioral Medicine, Martinez Outpatient Clinic Ph.D., Clinical Psychology, University of Rhode Island, 2010 Internship: VA Northern California Health Care System, Martinez, CA

Professional Interests: Behavioral medicine; integrated care; behavioral pain management; health behavior change; CBT for Insomnia; Chronic Kidney Disease; older adult substance misuse; program development and evaluation; interpersonal process.

Favorite Pastimes and Bay Area Activities: Listening to live music (there is so much here in the Bay Area!), hiking (from trails close to work and home to Pt. Reyes), yoga, and supporting small local theater. As a Bay Area native, I enjoy the many new surprises this area offers as well as my numerous old favorites.

Genevieve Garratt, Ph.D. (she/her/hers)

Clinical Psychologist, Oakland Behavioral Health Clinic Ph.D., Clinical Psychology, University of Kansas, 2007 Internship: VA Northern California Health Care System

Professional Interests: CBT, Individual and group psychotherapy, psychoeducational groups, integrated care, CBT insomnia, chronic pain management, mindfulness, neuropsychology and assessment, communication skills training, adjustment to chronic illness.

Favorite pastimes and bay area activities: Traveling, walking, hiking, camping, running when my knees permit, reading, spending time with family and friends, going to comedy shows and storytelling events, exploring the diverse cultural activities and food options available in the bay area.

Katherine Giles, Psy.D. (she/her/hers)

Staff Clinical Neuropsychologist, VA Northern California Health Care System (Oakland/Martinez) Psy.D, Clinical Psychology (Neuropsych Track), PGSP-Stanford Consortium, 2014 Internship: University of Florida, Gainesville, FL Fellowship: University of Colorado, Aurora, CO

Professional Interests: Neuropsychology; neurocognitive rehabilitation; neurodegenerative disorders; healthy aging; behavioral medicine and holistic approaches to care.

Favorite Pastimes and Bay Area Activities: Travel, day trips to San Francisco, Monterey Bay, local state parks, and Napa, camping in Yosemite, hiking around the East Bay hills and the Bay Trail, and enjoying all the amazing cuisines available in the SF Bay Area.

Rita Hargrave, M.D., F.A.P.A. (she/her/hers)

Geriatric Psychiatrist, Martinez Outpatient Clinic

Consultant to UC Davis Alzheimer's Disease Center

Assistant Professor, Department of Psychiatry, University of California at Davis

M.D. Howard University Medical Center, 1979. Board Certified in Adult and Geriatric Psychiatry.

Professional Interests: Geriatric psychiatry; cross-cultural; psychiatry, psychopharmacology; consultation-liaison; neuropsychiatry.

Favorite Pastimes and Bay Area Activities: Producer, director of upcoming documentary—"The Last Mambo—The past, present and future of Bay Area Afro-Latin Music." Percussionist for Calle Ocho—a East Bay Afro-Cuban music ensemble. Salsa dancer, events promoter and teacher.

Charissa Hosseini, Ph.D. (she/her/hers)

Staff Psychologist, General Mental Health, Martinez Outpatient Clinic

Ph.D., Clinical Psychology, Palo Alto University, 2019

Internship: Jerry L Pettis Memorial Veterans Hospital, Loma Linda, CA

Postdoctoral Fellowship - Geropsychology Focus: San Francisco VA Medical Center, San Francisco, CA

Professional Interests: Individual and group psychotherapy addressing a range of mental health presentations including depression, anxiety, insomnia, and traumatic stress through utilization of Evidenced Based Protocols such as CBT, ACT, and Mindfulness; treatment of couples via EFT; geropsychology; intersection between aging, physical health, and mental health status.

Favorite Pastimes and Bay Area Activities: Exploring hidden gems in California. Even as a Bay Area native I continue to stumble upon more! In my free time I explore the Bay Area's beautiful parks, scenic drives (Hwy 1), views, hiking trails, kayaking, and top rated restaurants, as well as spend time with family and friends.

Jeff Kixmiller, Ph.D. (he/him/his)

Cognitive Rehabilitation Specialist/Neuropsychologist; Director, Post Deployment Assessment and Treatment (PDAT) Program, Center for Rehabilitation and Extended Care, Martinez Ph.D., Counseling Psychology, Ball State University, 1992
Internship: Highland Drive VA Medical Center, Pittsburgh, PA

Professional Interests: Cognitive rehabilitation in neurological dysfunction; ecological validity of neuropsychological measures; outcome evaluation of cognitive interventions; functional assessment of neurologically impaired patients; relative influences of non-neurological factors on neuropsychological performance; social skills training; training and psychoeducational support of nursing staff in inpatient settings.

Favorite Pastimes and Bay Area Activities: I like to hang out with my family, travel around Northern California, and do day-visits to San Francisco, Napa, and Sonoma. We enjoy wine tasting and outdoor concerts in Livermore, CA.

James J. Muir, Ph.D. (he/him/his)

Clinical Psychologist, Martinez Outpatient Clinic, Center for Integrated Brain Health and Wellness, Center for Rehabilitation and Extended Care, Martinez

Ph.D., Clinical Psychology, Georgia State University, 2002

Internship: University of Arizona, Tucson, AZ

Postdoctoral Fellowship in Clinical Neuropsychology: UC Davis Medical Center and VA Northern California HCS

Professional Interests: Neuropsychology and assessment; cognitive rehabilitation; psychotherapy and behavioral management; holistic approaches to care; traumatic brain injury; PTSD and polytrauma, adjustment to disability; degenerative disorders of aging; training and supervision; research into mindfulness-based interventions and development of new and novel therapy techniques.

Favorite Pastimes and Bay Area Activities: Water and snow sports; woodworking, construction and period-correct home restoration; music enthusiast in all genres; restoration of vintage guitars.

Diana Partovi, Psy.D. (she/her/hers)

Acting Lead Psychologist, Staff Clinical Neuropsychologist, VA Northern California Health Care System Assistant Clinical Professor, University of California – Berkeley Psy.D, Clinical Psychology, Alliant International University, 2012 Internship: VA NCHCS, Martinez, CA

Professional Interests: Neuropsychology; neurocognitive rehabilitation; evaluation of capacity; movement disorders; Diversity, Equity, & Inclusion Initiatives; management of difficult dementia-related behaviors; caregiver support/education; Hospice/Palliative Care; legacy interviews; traumatic brain injury.

Favorite Pastimes and Bay Area Activities: Music (especially live performances), travel, hiking (Yosemite is one of my favorite places on this earth), and spending time with friends and family.

Lindsey Pepper, Psy.D. (she/her/hers)

Staff Psychologist, Martinez PTSD Team Psy.D., Clinical Psychology, La Salle University, 2015

Internship: Louis Stokes Cleveland VA Medical Center

Postdoctoral Fellowship – PTSD/Addictions Focus: Louis Stokes Cleveland VA Medical Center

Professional Interests: Individual and group psychotherapy, PTSD and traumatic stress, substance use disorders, Cognitive Behavioral Therapy, Dialectical Behavioral Therapy, evidence-based practice, coping skills, mindfulness, clinical program development, training and supervision.

Favorite Pastimes and Bay Area Activities: Spending time with family and friends, local fairs and festivals, wine tasting, cooking and discovering new restaurants (I am a proclaimed foodie), travelling, and perusing Pinterest with hopes I can create some sort of masterpiece! After living in New Jersey, Baltimore, Philadelphia, and most recently Cleveland, I'm interested in continuing to learn all that the Bay Area Has to offer!

Pamela Planthara, Psy.D. (she/her/hers)

Staff Psychologist, Oakland PTSD Team
Psy.D. Clinical Psychology, Nova Southeastern University, 2001
Post-doctoral masters in psychopharmacology, Alliant International University, 2005
Internship: USAF – Malcolm Grow Medical Center, Joint Base Andrews, MD

Professional Interests: PTSD and traumatic stress. Individual and group psychotherapy, CBT, coping skills, combat/deployment stress; critical incident stress management; military psychology and cultural humility.

Favorite Pastimes and Bay Area Activities: I love paddle boarding, kayaking, hiking, yoga, and going to new places/activities in the bay area (and the list of new discoveries is endless). Spending time with with family and friends is a high priority and soul filling.

Melanie Ropelato, Ph.D. (she/her/hers)

Staff Psychologist, Center for Rehabilitation and Extended Care (CREC), Martinez Ph.D. Clinical Psychology, Palo Alto University, 2009 Internship: VA North Texas Health Care System, Dallas, TX

Professional Interests: Geriatrics, adjustment to disability, chronic illness, rehabilitation psychology, health psychology, interdisciplinary collaboration, whole person care.

Favorite Pastimes and Bay Area Activities: Family time including going to Six Flags, playing board games and watching my children participate in adorable sports. I am on the PFC board of our local school and am active in volunteering. In the summer, we go to beaches and activities in Santa Cruz and Monterrey, as well as hit up the plethora of local fairs and festivals in the East Bay area and beyond. My personal interests include going to the gym and reading, as well as a small addiction to the game Hungry Shark!

Brigid Rose, Ph.D., ABPP-CN (she/her/hers)

Training Director, Clinical Neuropsychology Postdoctoral Residency Program Staff Clinical Neuropsychologist at Martinez Outpatient Mental Health Clinic Ph.D., Clinical Psychology, Loyola University Chicago, 2005 Internship: VA Palo Alto Health Care System, Palo Alto, CA

Professional Interests: Neuropsychological assessment and capacity determination; geriatric and rehabilitation psychology; adjustment to disability; dementia care; hospice/end of life care; management of challenging dementia-related behavior.

Favorite Pastimes and Bay Area Activities: Living here, I most enjoy the quick accessibility to the Sierra Nevada mountain range; every summer I make several trips to the mountains for lakeside camping and hiking. I also love exploring the local beach towns to the west (like Half Moon Bay or Bodega Bay) or taking a beautiful drive in the North Bay wine country. When I'm at home, I enjoy going for runs in the East Bay hills, eating frozen yogurt in the hot Concord sun, and spending time with my family.

Danielle Spangler, Ph.D. (she/her/hers)

Staff Psychologist, General Mental Health, Martinez Outpatient Clinic Ph.D., Clinical Psychology, Palo Alto University, 2018 Internship: VA Long Beach Health Care System, Long Beach, CA

Professional Interests: Clinical- Individual and group psychotherapy addressing a range of mental health presentations including depression, anxiety, traumatic stress; geropsychology; CBT, ACT, mindfulness, coping skills/stress management, and values-based interventions; Research- suicide assessment, intervention, and prevention; developing online interventions.

Favorite Pastimes and Bay Area Activities: Eating good food, being outdoors (hiking, camping, going to lakes and beaches, taking my dog to Fort Funston), spending time with family/friends, going to sports games (Giants, Warriors, 49ers!), and taking day/weekend trips in Northern California/Nevada.

Bill D. Steh, Ph.D. (he/him/his)

Staff Psychologist, David Grant Medical Center/Travis Air Force Base Ph.D., Clinical Psychology (Neuropsychology track), California School of Professional Psychology, Fresno, 2000

Internship: Oak Forest Hospital of Cook County, Oak Forest, IL

Professional Interests: Neuropsychological and psychodiagnostic assessment; psychology training; inpatient mental health; effects of mood and personality disturbances on cognitive functioning; med-legal and forensic psychology.

Favorite Pastimes and Bay Area Activities: Family time, coaching youth baseball & softball, Giants/Warriors/49ers/Sharks, working out, trail running, reading, melodic rock.

Kristi Steh, Ph.D. (she/her/hers)

Staff Clinical Neuropsychologist at Martinez Outpatient Mental Health Clinic Ph.D., Clinical Psychology, California School of Professional Psychology, Fresno, 2002 Internship: Federal Medical Center, Rochester, MN

Professional Interests: Neuropsychological assessment; geriatric neuropsychology and issues of aging; dementia; traumatic brain injury; PTSD.

Favorite Pastimes and Bay Area Activities: Spending quality time with my family, friends, and pets, photography, hiking (from Yosemite to local places), going on walks, jigsaw puzzles and crosswords, playing the piano, and listening to music.

ADDITIONAL FACULTY

Joel Schmidt, Ph.D. (he/him/his)

Associate Director, Advanced Fellowship Program VA Office of Academic Affilations Ph.D., Clinical Psychology, University of Arkansas, 1994 Internship: Amercan Lake VAMC, Tacoma, WA

Professional Interests: National Health Professions Education policy and program management, use of technology in training; supervision training; faciliting professional development.

Favorite Pastimes and Bay Area Activities: Running, Kayaking on Lake Chabot, hiking in the East Bay Hills, family bike rides to the Farmer's Market.

INTERNSHIP ADMISSIONS, SUPPORT, AND INITIAL PLACEMENT DATA

Date Program Tables are updated: August 6, 2019

Internship program admissions:

Basic Eligibility

Applicants must meet all requirements for VA internship eligibility, which includes enrollment in an American Psychological Association (APA), Canadian Psychological Association (CPA), or Psychological Clinical Science Accreditation System (PCSAS) Clinical or Counseling Psychology doctoral program, approval for internship status by the graduate program training director, and U.S. Citizenship.

Applicants must complete at least 3 years of graduate training prior to internship and have at least 500 combined intervention and assessment hours documented on the AAPI. It is expected that applicants have successfully proposed their dissertation or final project prior to the application deadline. While exceptions to this may be considered on a case-by-case basis, it is incumbent on the applicant to articulate a realistic plan for project completion before or during the internship year. The Director of Clinical Training from the applicant's program must verify readiness for internship on the AAPI.

The Department of Veterans Affairs (VA) adheres to all Equal Employment Opportunity and Affirmative Action policies. As a Veterans Health Administration (VHA) Health Professions Trainee (HPT), you will receive a Federal appointment, and the following requirements will apply prior to that appointment:

- 1. **U.S. Citizenship**. HPTs who receive a direct stipend (pay) must be U.S. citizens. Trainees who are not VA paid (without compensation-WOC) who are not U.S. citizens may be appointed and must provide current immigrant, non-immigrant or exchange visitor documents.
- 2. **U.S. Social Security Number**. All VA appointees must have a U.S. social security number (SSN) prior to beginning the pre-employment, on-boarding process at the VA.
- 3. Selective Service Registration. Male applicants born after 12/31/1959 must have registered for the Selective Service by age 26 to be eligible for U.S. government employment, including selection as a paid or WOC VA trainee. For additional information about the Selective Service System, and to register or to check your registration status visit https://www.sss.gov/. Anyone who was required to register but did not register before the age of 26 will need to apply for a Status Information Letter (SIL) and request a waiver. Waivers are rare and requests will be reviewed on a case by case basis by the VA Office of Human Resources Management. This process can take up to six months for a verdict.
- 4. **Fingerprint Screening and Background Investigation**. All HPTs will be fingerprinted and undergo screenings and background investigations. Additional details about the required background checks can be found at the following website: http://www.archives.gov/federal-register/codification/executive-order/10450.html.
- 5. **Drug Testing**. Per Executive Order 12564, the VA strives to be a Drug-Free Workplace. HPTs are not drug-tested prior to appointment, however are subject to random drug testing throughout the entire VA appointment period. You will be asked to sign an acknowledgement form stating you are aware of this practice. See item 8 below.
- 6. **Affiliation Agreement**. To ensure shared responsibility between an academic program and the VA there must be a current and fully executed Academic Affiliation Agreement on file with the VHA Office of Academic Affiliations (OAA). The affiliation agreement delineates the duties of VA and the

affiliated institution. Most APA-accredited doctoral programs have an agreement on file. More information about this document can be found at https://www.va.gov/oaa/agreements.asp (see section on psychology internships). Post-degree programs typically will not have an affiliation agreement, as the HPT is no longer enrolled in an academic program and the program is VA sponsored.

- 7. **TQCVL**. To streamline on-boarding of HPTs, VHA Office of Academic Affiliations requires completion of a Trainee Qualifications and Credentials Verification Letter (TQCVL). An Educational Official at the Affiliate must complete and sign this letter. For post-graduate programs where an affiliate is not the program sponsor, this process must be completed by the VA Training Director. Your VA appointment cannot happen until the TQCVL is submitted and signed by senior leadership from the VA facility. For more information about this document, please visit https://www.va.gov/OAA/TQCVL.asp
 - a. **Health Requirements**. Among other things, the TQCVL confirms that you, the trainee, are fit to perform the essential functions (physical and mental) of the training program and immunized following current Center for Disease Control (CDC) guidelines and VHA policy. This protects you, other employees and patients while working in a healthcare facility. Required are annual tuberculosis screening, Hepatitis B vaccine as well as annual influenza vaccine. Declinations are EXTREMELY rare. If you decline the flu vaccine you will be required to wear a mask while in patient care areas of the VA.
 - b. **Primary source verification** of all prior education and training is certified via the TQCVL. Training and Program Directors will be contacting the appropriate institutions to ensure you have the appropriate qualifications and credentials as required by the admission criteria of the training program in which you are enrolled.
- 8. **Additional On-boarding Forms**. Additional pre-employment forms include the Application for Health Professions Trainees (VA 10-2850D) and the Declaration for Federal Employment (OF 306). These documents and others are available online for review at https://www.va.gov/oaa/app-forms.asp. Falsifying any answer on these required Federal documents will result in the inability to appoint or immediate dismissal from the training program.
- 9. **Proof of Identity per VA**. VA on-boarding requires presentation of two source documents (IDs). Documents must be unexpired and names on both documents must match. For more information visit: https://www.oit.va.gov/programs/piv/_media/docs/IDMatrix.pdf

Additional information regarding eligibility requirements

- Trainees receive term employee appointments and must meet eligibility requirements for appointment as outlined in VA Handbook 5005 Staffing, Part II, Section B. Appointment Requirements and Determinations. https://www.va.gov/vapubs/viewPublication.asp?Pub_ID=646&FType=2
- Selective Service website where the requirements, benefits and penalties of registering vs. not registering are outlined: https://www.sss.gov/Registration/Why-Register/Benefits-and-Penalties

Additional information specific suitability information from Title 5 (referenced in VHA Handbook 5005):

- (b)Specific factors. In determining whether a person is suitable for Federal employment, only the following factors will be considered a basis for finding a person unsuitable and taking a suitability action:
 - (1) Misconduct or negligence in employment;
 - (2) Criminal or dishonest conduct;
 - (3) Material, intentional false statement, or deception or fraud in examination or appointment;
 - (4) Refusal to furnish testimony as required by § 5.4 of this chapter;
 - (5) Alcohol abuse, without evidence of substantial rehabilitation, of a nature and duration that suggests that the applicant or appointee would be prevented from performing the duties of the position in question, or would constitute a direct threat to the property or safety of the applicant or

appointee or others;

- (6) Illegal use of narcotics, drugs, or other controlled substances without evidence of substantial rehabilitation;
- (7) Knowing and willful engagement in acts or activities designed to overthrow the U.S. Government by force; and
- (8) Any statutory or regulatory bar which prevents the lawful employment of the person involved in the position in question.
- (c)Additional considerations. OPM and agencies must consider any of the following additional considerations to the extent OPM or the relevant agency, in its sole discretion, deems any of them pertinent to the individual case:
- (1) The nature of the position for which the person is applying or in which the person is employed;
- (2) The nature and seriousness of the conduct;
- (3) The circumstances surrounding the conduct;
- (4) The recency of the conduct;
- (5) The age of the person involved at the time of the conduct;
- (6) Contributing societal conditions; and
- (7) The absence or presence of rehabilitation or efforts toward rehabilitation.

Does the program require that applicants have received a minimum number of hours of the following at time of application? If yes, indicate how many:

Total Direct Contact Intervention Hours:	N	Y	Amount: 200
Total Direct Contact Assessment Hours:	N($\left(\begin{array}{c} X \end{array} \right)$	Amount: 50

Describe any other required minimum criteria used to screen applicants: See first three paragraphs in the table above. Please also see section below table for more details regarding the selection process.

Financial and other Benefit Support for upcoming training year

We anticipate 5 internship positions for the 2021-2022 training year.

Stipends for Full-time interns: \$31,589.

Stipends for Half-time interns: None

Program provides access to medical insurance: Yes

Trainee contribution to cost required: Yes

Coverage of family member(s) available Yes

Coverage of domestic partner available: No Hours of Annual (Vacation) Leave 104 (accrued 4 hours per 2-week pay period)

Hours of Sick Leave 104 (accrued 4 hours per 2-week pay period)

In event of medical conditions and/or Family needs that require extended leave Does the program allow reasonable unpaid Leave in excess of personal time off and

Sick leave? Yes

<u>Other benefits</u>: Our interns are provided the option to elect health insurance coverage through the VA's benefit program. Health insurance coverage is available for married spouses and dependents. The VA adheres to the Supreme Court decision which allows for health benefits for same-sex spouses of interns regardless of state of residency though unmarried partners of either sex are not eligible. Detailed information about the benefits offered for VA's Psychology Training program is found at

www.psychologytraining.va.gov/benefits.asp.				
Initial Post-Internship Positions (2016-2019)				
Number of interns in the three cohorts: 17				
Total number who did not seek employment because they returned to complete their doctoral degree: 0				
	Post-Doctoral Fellowship	Employed Position		
Community mental health center	0	0		
Federally qualified health center	0	0		
Independent primary care facility/clinic	0	0		
University counseling center	0	0		
Veterans Affairs medical center	11	0		
Military health center	0	0		
Academic health center	4	0		
Other medical center or hospital	0	0		
Psychiatric hospital	0	0		
Academic university/department	0	1		
Community college or other teaching setting	0	0		
Independent research institution	0	0		
Correctional facility	0	0		
School district/system	0	0		
Independent practice setting	1	0		
Not currently employed	0	0		
Changed to another field	0	0		

ADDITIONAL IMPORTANT APPLICATION AND PLACEMENT INFORMATION

Application Materials

Our internship program participates in the APPIC match and application must be made through the online AAPI (which can be found at the APPIC website: www.appic.org). No mail or email application materials will be accepted. We have a General Track and a Neuropsychology Track (described above). In your cover letter, please be sure to specify which track(s) you are applying to in the first sentence. It is acceptable to apply for both tracks but you must outline your specific interests for each. For applicants who apply for both tracks, we will be interested in how each of the specific tracks would satisfy your training interests.

Please make sure your cover letter indicates your specific interests in our program and lists your potential rotation interests in descending order of preference. In addition, please include your curriculum vita and three letters of recommendation through the online AAPI. Applications must be completed in the AAPI by **November 1.** Applicants are requested to complete the application before the deadline when feasible so that ample time will be available for application review

Selection Criteria

Applicants are evaluated based on a number of criteria, including breadth and quality of clinical training experience, academic performance and preparation, scholarship and contributions to the profession (e.g., publications, presentations, participation in professional organizations), quality of written expression,

progress on dissertation or final project, attributes outlined in recommendation letters, and compatibility of training preparation and interests with the program's goals and resources. We recognize that the COVID-19 pandemic has impacted many applicants' accrued hours and research productivity and will take this into consideration in our decision-making.

Selection Procedures

We have a two-part selection procedure. First, application materials are reviewed for basic eligibility, strength of training and experience, and goodness of fit with our program. The selection committee develops a pool of applicants to invite for a formal interview based on these criteria. Interviews are an integral aspect of our selection process. We will notify applicants of their interview status by December 15 (or earlier if possible).

Upon the completion of our interviews, we rank order applicants in terms of their suitability for our program in accordance with APPIC guidelines.

Interview Information and Dates

We schedule interviews for five days in January. The interview provides the opportunity to learn more about our program and meet with the training director, several training staff members, and current interns. This year, all interview components will be conducted virtually (by video/phone). The interview day will last from approximately 8:30 am to 3:00 pm. Applicant attributes such as professionalism, communication skills, self-awareness, flexibility, and compatability with the program's training goals will be used in making selection decisions.

Our interview dates for 2021 are listed below:

Please note: There is a cap on the number of applicants per day, but every attempt will be made to accommodate applicants' preferences for interview dates.

- Tuesday, January 5
- Thursday, January 7
- Monday, January 11
- Wednesday, January 13
- Tuesday, January 19

Statement of Nondiscrimination

The Psychology Internship program strongly seeks and values diverse experiences and backgrounds as the building blocks of a rich training environment. As such, the program emphasizes respect for trainees, patients, and staff members representing all forms of diversity, including (but not limited to) race, ethnicity, religion, gender, sexual orientation, disability, marital status, Veteran status, and political affiliation. Interns are entitled to equal treatment in selection decisions and freedom from harassment or unfair treatment. If an intern feels that any form of discrimination is occurring, he/she is encouraged to discuss this with the Training Director and/or follow the grievance process outlined below. In addition, the intern may elect to utilize the VA NCHCS EEO process (see VANCHCS policy). The intern can request confidential assistance in accessing the EEO program from the Training Director, Associate Training Director, any member of the training committee, or the program support assistant. The program seeks to obtain a diverse intern class while selecting the most qualified candidates. Individuals from diverse backgrounds are particularly encouraged to apply. The VA is an Equal Opportunity Employer and the training program follows institutional guidelines in this regard.

PAST TRAINEES

Interns have come from the following graduate programs over the past several years:

Alliant International University, CSPP San

Francisco

Arizona State University

Bowling Green State University Brigham Young University

Columbia University Emory University

Fuller Theological Seminary George Mason University

Georgia State University Idaho State University

Kent State University

Miami University (Ohio) Northern Illinois University Northwestern University

Oklahoma State University

Pacific University
Palo Alto University

Palo Alto U./Stanford Consortium

Roosevelt University Rosalind Franklin Rutgers University School of Medicine

Saint Johns University Seattle Pacific University Southern Illinios University The Ohio State University

University of Alabama, Birmingham University of California, Berkeley University of California, Los Angeles

University of Colorado

University of Illinois, Chicago

University of Iowa University of Kentucky

University of Missouri, Kansas City University of Nevada, Las Vegas University of Nevada, Reno University of Rhode Island University of Southern California

University of Tulsa

University of Wisconsin - Milwaukee

Washington State University

Graduates of the program have primarily gone on to post doctoral residencies and have completed research or clinical residencies at the following locations in the past several years:

Bedford VA Health Care System (clinical residency)

Johns Hopkins (clincal neuropsychology residency)

Kaiser Permanente (clinical residencies in multiple Bay Area locations)

Santa Clara Valley Health and Hospital System (clinical residency)

Stanford University School of Medicine (clincal and research residencies)

VA Loma Linda Health Care System (clinical residency)

VA Northern California (Behavioral Medicine, Neuropsychology, PTSD, research)

VA Palo Alto (both clinical and research residencies)

VA Puget Sound (clincal residencies at both Seattle and American Lake)

VA San Diego Health Care System (clincal residency)

VA San Francisco (both clinical and research residencies)

UCLA (clinical and research residencies)

UC Davis School of Medicine (clinical residencies)

UC San Francisco School of Medicine (clincal and research residencies)

Other graduates have entered group practices, university faculty, entry-level psychologist positions, or other less-formal training opportunities. Following post doctoral training, graduates have entered a diverse range of clinical, research, and academic positions. By a substantial margin, the VA is the agency that employs the highest number of graduates.

ADMINISTRATIVE POLICIES AND PROCEDURES

Leave

Interns receive 13 paid vacation days and up to 13 paid sick days per year. It should be noted that this leave accumulates over time (4 hours per 2 week pay period for both vacation and sick leave), so interns should not plan on taking an extended leave early in the training year. In addition, up to 10 days per year

can be used as "professional leave." This time can be used for dissertation work/research meetings, conference attendance, and post-doc or job interviews but must be approved in advance by the training director.

Policy on Psychology Trainee Self Disclosure

Consistent with the Ethical Code of the American Psychological Association, psychology trainees in the VA Northern California Health Care System are generally not required to self-disclose sensitive topics (e.g., sexual history, history of abuse and neglect, psychological treatment or conditions, and relationships with parents/family members, peers, and spouses or significant others) during application to the program or during the course of training. The only exception is in situations in which a trainee's personal problems or condition could reasonably be judged to put patient care, the trainee, or clinical and educational operations at risk. This policy is designed to balance the importance of trust and personal privacy in the supervisory relationship with the supervisor's responsibility for care of the patient and for the safety of all staff members and trainees. In cases when self-disclosure of personal information is necessary, the required disclosure is limited to circumscribed information related to managing the specific clinical, safety, or patient care concern. It should also be noted that disclosure might be included as an optional exercise in a learning experience. For example, trainees might be invited to complete a genogram exercise as part of the Cultural Diversity Seminar.

Privacy Policy: We will not collect any personal information about you when you visit our website.

Intern Evaluation & Minimal Requirements

Interns are evaluated at the beginning of the training year for areas of training need and interest. Throughout the year, evaluation and feedback occurs through the supervisory process to aid the intern in developing the program's competencies. The Psychology Training Committee meets once a month and discusses each intern's progress. A midpoint evaluation is completed halfway through each training experience and is discussed with the intern in order to make any training adjustments needed for successful completion. At the internship midpoint (in February) and again at the end of the internship, a summative review of all training activities for each intern is conducted by the Psychology Training Committee. This process allows for analysis of performance across all supervisors and training experiences. The intern provides input regarding her/his assessment of performance during this process and receives formal written feedback.

During the summative evaluations, each of the program's nine training competencies are linked to specific behavioral elements on the intern rating form. Acceptable progress by the midyear evaluation is defined as receiving a rating score indicating an "intermediate level of competency" on all of the items on the summative evaluation. In order to successfully complete the program, interns must receive a rating score indicating an "intermediate to advanced level of competency" on all of the items in the end of year summative evaluation.

Intern Grievance Policy

The Grievance Policy provides an effective and consistently-applied method for an intern to present his/her grievances and have those grievances internally resolved at the lowest possible level. At the same time, the process allows for the opportunity to appeal up the chain of command (e.g., supervisor, Training Director, Associate Training Director, Associate Chief of Staff for Mental Health, Chief of Staff) if needed to ensure due process and help interns feel comfortable that concerns can be addressed without fear of reprisal.

It is the training program's policy to be responsive to the interns and their concerns. Therefore, interns may use the process described below for the resolution or clarification of his/her grievances. The

Director of Training is responsible to the Associate Chief of Staff for Mental Health (ACOS/MH) for carrying out the provisions of this policy.

Process:

- A. All training staff and interns are responsible for attempting to resolve grievances at the lowest possible level to the satisfaction of all parties involved.
- B. Interns should attempt to resolve minor grievances directly with the individual involved utilizing existing program structure (e.g., the supervision process).
- C. In the event that interns do not feel comfortable addressing issues within the supervisory process, they may appeal directly to the Training Director for assistance in resolution. Minor grievances processed in this manner are considered informal.
- D. An intern may choose to file a formal grievance at any point. The grievance must be presented in writing to the Training Director. The submission of the formal grievance should include (if applicable):
 - 1. The grievance and the date when the incident occurred
 - 2. Suggestions on ways to resolve the problem
 - 3. Information regarding any previous meetings to attempt to resolve the grievance
- E. If the grievance is against the Training Director, the intern can file the grievance with the Associate Training Director or the ACOS/MH.
- F. The program support assistant or any of the training faculty members can assist the intern in filing this grievance with the ACOS/MH.
- G. Formal grievances will be presented to the Psychology Training Committee (PTC) for resolution. Interns may present their grievance directly to the PTC. The intern may invite a staff member of his/her choice to provide advocacy and emotional support. The body to hear the formal grievance will be assembled as soon as possible and in all cases within three weeks from the presentation of the formal grievance. If the grievance is against the Training Director or another individual normally assigned to this body, that individual is not involved in the body's deliberation and may only attend to provide testimony, as indicated. Resolution may involve the Director of Training from the intern's graduate program.
- H. Any formal grievance and its resolution will be documented, and copies forwarded to the Director of Training from the intern's graduate program.
- I. If adequate resolution cannot be achieved through this process, or interns wish to take the grievance outside of the existing training program structure, they may appeal directly to the ACOS/MH for resolution. The ACOS/MH will review the grievance as soon as possible and in all cases within three weeks from the presentation of the formal grievance. The program support assistant or any of the training faculty members can assist the intern in communicating with the ACOS/MH.
- J. An intern may appeal any formal action taken by the Psychology Training Committee (PTC) regarding their program status (see also Due Process policy, below). Interns appeal first to the body itself (see item F above). This appeal is made directly by the intern (in association with any

- counsel he or she may choose). The body to hear the appeal will be assembled as soon as possible and in all cases within three weeks from the written notification of appeal.
- K. If the intern is not satisfied with the result of their appeal, the intern may appeal directly to the ACOS/MH. After consideration, the ACOS/MH has the discretion to uphold, or overrule formal action taken by the body. Should the ACOS/MH overrule the decision of the body, the decision is binding, and the Training Director, the intern, and supervisors shall negotiate an acceptable training plan (in consultation with the Director of Training from the intern's graduate program). Should the ACOS/MH uphold the decision of the committee, the intern may appeal this decision to the Chief of Staff, VA Northern California Health Care System who will appoint a board of three psychologists in the system not involved in the training program. The decision of this panel is binding.
- L. Specific questions regarding this policy should be directed to the Training Director.

Remediation, Due Process, and Intern Termination

The aim of the program is to successfully graduate interns into a career in professional psychology, and the program is designed to maximize the prospect for successful completion. The evaluation process mandates early intervention if needed to provide the opportunity for corrective action and ultimately successful mastery of each competency area.

If remediation is required, a formal remediation plan is developed with clear and specific expectations and is agreed upon by the intern, supervisor(s), and Training Director. When necessary, the Director of Training from the intern's graduate program is notified and provides assistance in designing remedial efforts. The Training Director is responsible to the Associate Chief of Staff for Mental Health (ACOS/MH) for carrying out the provisions of this policy as described below:

Process

Supervisors are responsible for monitoring trainee's progress in achieving the specific training objectives, providing timely feedback to interns, and developing and implementing specific training activities for ensuring intern professional growth and development. Supervisors are responsible for communicating about intern's performance to the Training Director.

- A. Interns are responsible for adhering to training plans.
- B. Progress and performance within the internship program are monitored continuously using both informal and formal evaluation processes. Supervisors provide the first line of feedback to interns about performance and identify areas requiring additional growth. Supervisors and interns agree on training opportunities and experiences to meet the program's and intern's objectives.
- C. The intern's progress is tracked monthly by the Training Director during the Psychology Training Committee meeting.
- D. When specific training competencies do not seem to be adequately developing as a result of the routine and ongoing supervisory feedback, the supervisor consults with the Training Director and other training staff to develop a specific remediation plan. This plan includes specific learning tasks and timelines for completion. The timelines are developed such that the adequacy of task completion can be assessed rapidly. The remediation plan is discussed with the intern, who has opportunities for input. The plan is provided in written form to the intern.

- E. Performance on the remedial plan items is assessed frequently. If performance is not adequately improving after one month, the intern may be placed on academic probation for a period of one to three months. During this time, heightened oversight and assessment of the intern's performance occurs and significant effort is made to help the intern remediate. The intern is provided with written feedback regarding whether the remediation plan items have been adequately resolved. The Director of Training from the intern's graduate program will be included in all subsequent decisions regarding the intern.
- F. If the intern has progressed satisfactorily after the probationary period, the intern will be formally reinstated. If performance has not sufficiently improved, but the intern is making progress, the probationary period may be extended. If the intern fails to progress, termination from the program may be considered. The intern is provided with written feedback regarding his/her performance as it relates to probationary decisions.
- G. Formal actions (academic probation or dismissal) must receive a majority vote by the Psychology Training Committee. Prior to any vote on formal actions, the intern is afforded the opportunity to present his or her case before the training body that will be deciding the intern's status (see also Grievance Policy, section F above). The interns may invite a staff member of his/her choice to provide advocacy and emotional support.
- H. Concerns of sufficient magnitude to warrant formal action include but are not limited to: incompetence to perform typical psychological services in a clinical setting; violations of the ethical standards for psychologists; illegal acts; or behavior that hampers the intern's professional performance.
- I. Specific questions regarding this policy should be directed to the Training Director.

Maintenance of training files

A record is kept for each intern admitted to the program. This includes formal evaluations (mid-year and end-of-year summative evaluations), mid-rotation evaluations, any additional documentation related to performance during the training year, and a record of successful completion of the program. These records are kept permanently so that the program may verify program completion throughout the trainee's professional career. Graduates are encouraged to contact the Training Director, or the Program Support Assistant as needed to request this verification.

TRAINING PROGRAM CONTACT INFORMATION

Thank you for your interest in our program! Please feel free to send any questions to the Training Director, Associate Training Director, or the Program Support Assistant at the contact information below.

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