

2009-2010

PSYCHOLOGY INTERNSHIP



**Louis Stokes Cleveland Department of
Veterans Affairs Medical Center**

PSYCHOLOGY INTERNSHIP PROGRAM

An APA Accredited Program

**2009-2010
Internship Year**

**LOUIS STOKES CLEVELAND
DEPARTMENT OF VETERANS AFFAIRS
MEDICAL CENTER
CLEVELAND, OHIO**



10701 East Boulevard, Cleveland, Ohio 44106
10000 Brecksville Road, Brecksville, Ohio 44141

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INTRODUCTION

The Louis Stokes Cleveland Department of Veterans Affairs Medical Center (LSCDVAMC) provides internship training in Professional Psychology, which is fully accredited by the American Psychological Association. Qualified candidates who are enrolled in APA accredited programs in clinical or counseling psychology are eligible to apply at the doctoral level. Postgraduate candidates who are completing APA accredited programs of respecialization in clinical or counseling psychology are also eligible to apply. The internship provides an unusual range of training opportunities because of the complexity of the Medical Center.

THE LOUIS STOKES CLEVELAND DEPARTMENT OF VETERANS AFFAIRS MEDICAL CENTER

The Medical Center is one of the most diverse in the VA system. It is composed of two major hospital units, with 705 beds, two full service satellite outpatient clinics, and ten community-based outpatient clinics located some miles apart. It provides comprehensive health care services to veterans and their families primarily from its Northeast Ohio catchment area. The patient population includes a broad spectrum of socioeconomic and ethnic groups. In a typical year, almost 13,000 veterans amass over a quarter of a million visits for mental health services at our facility. The Medical Center is also heavily invested in the training of professionals in health care and in basic and applied research. It is affiliated with the Case Western Reserve University School of Medicine. Residents and medical students train at the Medical Center in all major specialties. Affiliations are also maintained with a large number of universities for the training of professionals in a number of other health care disciplines including psychology, social work, nursing, dentistry, audiology and speech pathology, optometry, pharmacology, physical and occupational therapy, and nutrition. Over 1,000 students in the health care professions are trained yearly.



The VA has the largest psychology training program in the United States. In 2008 it increased its support for education, greatly increasing the residency training program positions in the 2008-2009 year. Through its affiliations with medical schools and universities, VA is the largest provider of health care training in the United States. VA medical facilities are affiliated with 107 of the nation's 126 medical schools. These training positions address VA's critical needs and provide skilled health care professionals for the entire nation. The additional positions will also encourage innovation in education that will improve patient care, enable different disciplines to work together, and will incorporate state-of-the-art models of clinical care, including VA's renowned quality and patient safety programs and electronic medical record system.



The Wade Park Campus (W) is located five miles east of downtown Cleveland, within University Circle, the major healthcare, educational, and cultural area of the city. Inpatient services include acute and intermediate medicine, surgery, spinal cord injury, geriatrics, neurology, and physical medicine and rehabilitation. Outpatient services focus on primary care with full support from specialty and subspecialty clinics. Special clinical programs and services include a Pain Clinic, a partial hospitalization Day Hospital program, outpatient mental health, substance abuse treatment, cardiothoracic surgery, women's health, and CT

and MRI. One innovative approach to meeting healthcare needs and improving customer satisfaction of veterans is a short stay unit to facilitate ambulatory surgery. The clinical and basic research program is among the largest in the Department of Veterans Affairs, with researchers known nationally and internationally for their contributions to science and a budget from all sources of ten million dollars. There are also two community based 'Vet Centers', providing readjustment counseling for Vietnam, Korea, Operation Desert Storm, and Iraqi veterans.

The Brecksville Campus (B) is located midway between Cleveland and Akron in the suburban community of Brecksville. In addition to a variety of inpatient units and clinics treating schizophrenia and mood disorders, it includes the Center for Addiction Treatment, a comprehensive inpatient and outpatient substance abuse treatment program, and a Domiciliary, in which homeless veterans receive active rehabilitation. It is the site of the Center for Stress Recovery, which provides a coordinated program of clinical services, training and research for patients with posttraumatic stress disorder. The Long Term Care and Nursing Home Care Units, also located at the Brecksville Unit, are part of the Medical Center's geriatric program.



The Cleveland VA system also includes 13 community based outpatient clinics (CBOCs) throughout our northeast Ohio catchment area. Akron, Canton, and Youngstown Clinics are the largest and provide a range of outpatient medical, dental, mental health, and rehabilitation services to patients in those geographical areas.



PSYCHOLOGY SERVICE AT THE LSCDVAMC

The Medical Center is organized around both service type and professional identity, with mental health programs in Psychiatry, the Center for Addiction Treatment, the Center for Stress Recovery, General Medicine, Geriatrics, Cardiology, Pain Management, Spinal Cord Injuries, and Infectious Disease clinics. There are 40 psychologists in our service who provide comprehensive services to patients and their families in these areas and others throughout the Medical Center. They serve as members of multidisciplinary treatment teams in psychiatric care, as consulting and unit psychologists in specialized medical units, and as coordinator or program manager of several patient care programs. In addition to clinical and administrative duties, psychologists are also actively involved in research and training. There is thus a wide range of professional activities in which an intern may engage, and a large, diverse, and experienced staff with whom to interact. Most of our psychologists are organized in our Psychology Service reporting directly to the Chief of Psychology. Discipline-specific professional activity, such as training programs, credentialing and privileging, and peer review are under the aegis of the Chief of Psychology Service. The Director of Psychology Training manages the day-to-day features of the Psychology Internship Program.

PSYCHOLOGY INTERNSHIP PROGRAM

Training Model and Goals: The Psychology Internship Program follows a *practitioner-scholar* model. With respect to the ‘practitioner’ aspect of the model, the internship focuses on the acquisition and extension of clinical skills; development of the intern’s professional role, identity, and demeanor; and socialization into the health service delivery environment. This is actualized by the intern’s participation in experiential learning on three rotations, an optional enrichment (if elected), and case presentations. With respect to the ‘scholar’ aspect of the model, we believe that sound practice is underpinned by the science of psychology, with the intern gaining systematic experience in the critical evaluation of clinical and research literature. Accordingly, interns participate in a biweekly journal club presenting, discussing, and critically evaluating psychology literature. Scholarly/research background is also incorporated into case presentations, when appropriate. In addition, opportunities to do research on clinical phenomena are available and the possibility of developing research and outcome-based innovations in care/program development can be provided. The Psychology Internship Program thus is designed to provide a sound basis for career development whether that will be as a generalist practitioner in clinical or counseling psychology or through subsequent postdoctoral training and specialization. By the end of the internship, it is expected that the intern will be able to function at the beginning professional level in the psychologist’s core assessment, intervention, and decision-making functions, as well as demonstrate awareness of the strengths and limitations of the discipline’s knowledge and techniques.

Training Assignments: Training opportunities in the areas of mental health, health psychology, neuropsychology and geropsychology are offered. Rotation options within these areas enable the intern to gain experience in settings to which he or she has not been previously exposed. All rotations provide training in the core areas of assessment; individual, group and/or family interventions; and staff consultation. The emphasis varies with specific assignments. Rapid assessment, crisis intervention, brief therapeutic approaches, and consultation are more characteristic of the acute treatment settings, while therapeutic programming, psychosocial rehabilitation, behavioral and social learning approaches, reeducation and staff development are more characteristic of the extended care settings. On the basis of information from the student and his or her university Director of Training and discussions with the student regarding rotations and options in which he or she is interested, an internship program is

formulated which meets the intern's training needs, assures a breadth of experience, and respects developing professional interests. The program will consist of three four-month assignments, plus an optional supplemental training experience (see below).

Assessment Module: At the outset of the internship year, in addition to pursuing the first rotation, each intern must demonstrate beginning competence in diagnostic assessment. The intern interviews, tests, and evaluates a veteran, then writes a report. If the report is deemed adequate, the intern has completed the requirement. Additional cases with supervision may be required until an acceptable assessment is completed.

Stipend: Interns receive \$23,486 for the year. Interns are appointed for a minimum of a year and a day, thus making interns eligible for health and other benefits. Annual and sick leave are also accrued, and interns are not on duty for paid Federal holidays.



MODEL INTERNSHIP TRACKS

The Internship Tracks described here provide the framework within which specific training rotations are developed in accordance with training needs and interests. In addition to providing general training, they prepare the intern for subsequent specialization at the postdoctoral level. The specific assignments or rotations (of four months each) are described in Appendix A. These descriptions should be consulted when considering the model tracks. We make every effort to provide interns' with their initially assigned rotations, however training needs or unforeseen circumstances may necessitate rotation substitutions.

Tracks and Rotations:

The term TRACK refers to the overall concentration that each intern pursues, in Mental Health (general track) or in prespecialization tracks of Neuropsychology, Geropsychology, or Health Psychology. This is what APPIC refers to as a specialty area, and each intern selects one Track.

The term ROTATION refers to a four-month, essentially full-time clinical assignment, and each intern completes three rotations per year. The sequence of Rotations in each Track varies with the track, program location and demands, and availability of supervisors.

An ENRICHMENT, as we define it, is a supplementary clinical assignment of up to 300 hours, usually pursued on a one-day per week basis over eight months concurrent with the second and third rotations. Some Tracks specify potential Enrichments, as well as the basic three-rotation sequences.

I. MENTAL HEALTH TRACK

The Mental Health Track provides training in assessment and intervention with a wide variety of psychiatric, behavioral, and environmental problems. It is designed to enable the intern to develop adequate skills in the differential diagnosis of psychopathological disorders and to develop and implement individualized treatment plans essential for successful intervention. Theoretical and therapeutic approaches will vary with the training setting and types of problems typically encountered, but most rotations generally provide experience in (1) psychological assessment, (2) individual interventions, including psychotherapy and cognitive approaches, (3) collective interventions (group, marital, and/or family), (4) case management, (5) vocational assessment and counseling, (6) multidisciplinary treatment team planning, and (7) patient education. Interns generally will concentrate in areas in which they have not gained extensive prior experience to broaden the scope of their diagnostic and treatment skills. This program consists of two different rotations from the mental health area (Appendix A) that do not duplicate previous experience. The remaining assignment may be selected from among the health psychology rotations. Three mental health rotations may be selected where breadth of experience is not an issue, provided that one of these is in substance abuse.



II. HEALTH PSYCHOLOGY TRACK

The Health Psychology Track encompasses clinical health psychology applications. This track meets requirements for health psychology internships promulgated by the Council of Directors of Health Psychology Training Programs. It offers training experiences in a variety of inpatient medical settings, including acute, intensive care, and rehabilitation units. In addition, participation in Primary Care Medical Clinics provides interns with broad experience in assessment and short and long-term care of medical outpatients and their families. Interns interested in this track must have adequate prior experience in



mental health settings so that they will be able to recognize and manage common psychiatric syndromes, since they may coexist with medical problems. Coping with illness, as well as modifying health-related behaviors through direct and focused interventions are emphasized. Depending upon the rotations chosen, training experiences may include the following: (1) differential diagnosis of functional and organic contributions to symptoms, (2) crisis intervention with patients and families, (3) consultation-liaison activities with multi-disciplinary staff, (4) pain and stress management, (5) counseling for adjustment to chronic disease and disability, (6) individual and marital therapy, (7) vocational readjustment counseling, and (8) group intervention aimed at primary and secondary prevention. Interns who elect this track generally take two different rotations from the Health Psychology group (see Appendix A) and a third from the Mental Health group.

III. GEROPSYCHOLOGY TRACK

Interns in the Geropsychology Track receive a broadly based training experience that includes both specific geropsychological work and more general training appropriate to the doctoral level. Over the course of the year the intern generally spends approximately one-half of his/her clinical time with elderly patients. This is accomplished by completing the Geropsychology (W) Rotation and a combination of other experiences that will include considerable exposure to elderly patients. The other rotations and enrichment experience will be selected in areas that insure breadth of training without duplicating previous experiences. Typical programmatic options would be:

- (1) Geropsychology (W) Rotation
Neuropsychology (W or B) or Long-Term Care (B)
Third rotation for breadth of training.
- (2) Geropsychology (W) rotation
Two additional rotations.
Enrichment in Palliative Care (W)

IV. NEUROPSYCHOLOGY TRACK

The Neuropsychology Track affords both general clinical training and preparation for subsequent specialization at a postdoctoral level. The program offered meets the Division 40/International Neuropsychological Society criteria for doctoral Neuropsychology internships. The Track consists of one of the following potential rotation programs, determined as is appropriate based on prior training and experience.

- 1) Two Neuropsychology rotations (W & B) and a third rotation for breadth of training.
- 2) One Neuropsychology rotation (W or B), a second rotation in which there is substantial experience with neuropsychologically impaired populations (Geropsychology, Spinal Cord Injury Service, Pain Clinic), and a third rotation for breadth of training.



ENRICHMENT OPPORTUNITIES

In addition to the three four-month rotations, interns are permitted to pursue an internal or external enrichment option during the year. External Enrichment options are best negotiated during the application process so that suitable arrangements with other training sites can be completed. Applicants interested in pursuing external enrichment possibilities should provide their own liability insurance. In most instances, outside agencies are now requiring this as a condition of accepting any student from an outside program. Internal Enrichments may be petitioned for in October of the training year, once the intern has sufficiently familiarized him or herself with the range of training opportunities.



Internal Enrichment: Up to eight hours per week may be authorized for approved training with an appropriate staff member outside the current rotation. For example, interns who require experience in long-term therapy may see selected patients throughout the internship year through outpatient mental health or other settings. In recent years, enrichments have been pursued with the Gambling Treatment Program, Palliative Care Team, Primary Care, Bariatric Surgery, Women Veterans PTSD Program, and Smoking Cessation group.

External Enrichment: Interns with a training need which will not otherwise be met in the remainder of their doctoral program may be placed in an external (non-VA) assignment. Up to 300 hours of such training at a designated community agency may be credited towards the intern's training year requirement. External enrichments in forensic evaluation and neuropsychology research are available currently.

RESEARCH OPPORTUNITIES

Dissertation Research: Interns not utilizing another enrichment option may be authorized up to 300 internship hours for doctoral Dissertation research if that research involves the hospital's veteran population. A number of former interns have conducted their research at our facility. The variety of settings and patients here facilitates data collection. A particularly large database is available in the Center for Addiction Treatment. Research projects are also active in neuropsychology, General Medicine Clinic, and Psychiatry. Psychology also maintains voluminous psychological testing archives in hard copy and computer files.

Applied Clinical Research: Research opportunities are available on most rotations. Interns may devote up to eight hours per week to developing and implementing a clinical research project pertinent to their assignment or to participating in ongoing research. Consultation and assistance are regularly available from the Psychology staff, a research psychologist at the Medical Center, and faculty from nearby affiliated universities. Major research areas include substance abuse, gambling disorders, pain management, chronic health care, shared medical appointments, tobacco abuse, spinal cord injury, cardiology, obesity, neuropsychology, schizophrenic cognition, and in geriatrics such as the driving evaluation clinic.

SUPERVISION

Our approach to supervision is by apprenticeship during which clinical experiential learning is acquired. The intern is assigned to one primary staff psychologist for supervision and training during each rotation. Supervision is individualized to meet the intern's needs and level of professional development. Throughout the internship, we strive to treat interns as emerging professionals and colleagues. The long tradition of internship training at our facility (over 45 years) ensures ready acceptance of interns by Medical Center staff.

At the outset of each rotation, the intern and his or her supervisor establish the specific rotation competencies to be attained, as well as a supplementary set of individual training objectives appropriate to the setting and the intern's individual needs. Individual supervision is regularly scheduled for at least two hours weekly to review the intern's work, and it is provided at other times as necessary to deal with more immediate issues and concerns, for a total of four hours weekly. Ongoing feedback and observational learning throughout the workday are also afforded by the presence of the supervisor actively engaged in clinical work in the rotation setting. At mid-rotation, the intern and supervisor meet to discuss the intern's progress on the specific rotation competencies, and to revise the goals as appropriate. Toward the end of each rotation, the intern makes a case presentation to a consultant, other interns, and staff to strengthen his or her ability to formulate cases clearly and develop appropriate interventions. The consultant usually comes from outside the Medical Center and is frequently able to add a new perspective to issues in assessment and case management. At the conclusion of the rotation, the supervisor prepares a written evaluation of the intern's performance, which is discussed with him or her before a copy is forwarded to the university Director of Training. The evaluation becomes part of the permanent record and is available to certifying agencies or prospective employers as appropriate. All training is under the supervision of a licensed psychologist and certified with the Ohio State Board of Psychology, as required by Ohio law.



EDUCATIONAL OPPORTUNITIES

Intern Seminars

(1) **Didactic Seminars:** Two series of didactic presentations are offered on a weekly basis throughout the year. The seminars at the Wade Park Campus usually present a Health Psychology topic and those at the Brecksville Campus a Mental Health topic. Taught by staff and consultants, these seminars are designed to educate interns and staff about current developments in clinical practice and research. Interns are required to attend both seminars. The Health Psychology Seminars cover areas such as the use of medical chart review in differential diagnosis, consultation, neuropsychological assessment, management of chronic and terminal illness pain, geropsychology, use of psychotropic medication in the medical setting, eating disorders, and bioethics. The Mental Health Seminars address issues in substance abuse, post-traumatic stress, evaluation of suicide potential and dangerousness, current trends in conceptualization and treatment of schizophrenia, advanced intervention techniques, psychopharmacology, and professional issues. Intern input during the year permits addition of timely topics as training needs emerge.

(2) **Intern Case Presentations:** At the conclusion of each of the first two rotations, the intern presents a clinical case to an outside consultant and his/her peers. This affords the intern the opportunity of intensively conceptualizing and organizing a case, communicating understanding of that case, and demonstrating clinical judgment to a professional audience.

(3) **Journal Club:** The intern chooses a research or scholarly article, summarizes and communicates the findings and concepts to peers as a group, and moderates a discussion. This gives the intern the opportunity of honing skills in critical thinking and oral communication of scientific and scholarly content. Interns rotate presentations on a biweekly schedule throughout the year.

Inservice Education

Interns attend the periodic Psychology Inservice Education Programs. These half-day and full-day workshops are presented by nationally recognized faculty or prominent local professionals. Since 1989, the Medical Center has been accredited by APA as a sponsor of Continuing Education programs, enhancing our ability to attract distinguished presenters. Relevant presentations are offered by other services and treatment units such as Grand Rounds, Internal Medicine case conferences and journal club, Social Work, the Center for Addiction Treatment and the Office of Geriatrics and Extended Care, and interns are encouraged to attend these as schedules permit. The Regional Learning Resource Center, also located at Brecksville, has an extensive collection of books, journals, and audiovisuals available for intern use. Computerized literature searches and a national network of interlibrary loan are also available.

EVALUATION

Successful completion of the internship program entails demonstrating satisfactory or better competency attainment in the following activities.

- (1) **Assessment Module.** Each intern must write a satisfactory diagnostic report on an initial case.
- (2) **Rotation Performance:** The intern must satisfactorily complete the three clinical experiential rotations, and any supplemental Enrichment opportunity that is elected.

(3) Case Presentations: The intern gives two Intern Case Presentations, at the conclusion of each of the first two rotations.

(4) Journal Club Presentations: The intern must demonstrate satisfactory skill in presenting and moderating discussions of scholarly articles.

(5) Oral Final Examination: During the third rotation, the intern must successfully pass a competency-based oral examination on a clinical case.



NORTHEAST OHIO / NORTHCOAST AREA

Northeast Ohio combines the attractions of a metropolitan area with the benefits of a rationally paced life style. Cultural, educational and recreational facilities abound.

Cleveland's renowned Museum of Art and celebrated Orchestra, along with its Museum of Natural History, Institute of

Art, Institute of Music, and Western Reserve Historical Society, are among the cultural attractions to be found in the University Circle area alone, near the Wade Park Unit of the Medical Center. Case Western Reserve University, Kent State University, Cleveland State University and the University of Akron are major educational institutions within easy driving distance of the VA Medical Center. Major league sporting events, theatre, and contemporary music concerts are abundant, and we are the home of the Rock and Roll Hall of Fame. Lake Erie, the Cleveland Metropark's "Emerald Necklace," the Cuyahoga Valley National Recreation Area, and numerous other nearby parks and recreational sites permit year-round outdoor enjoyment for the hardy as well as the more pedestrian seeker of the good life. Suburban areas with excellent school systems are within a few minutes drive of each Medical Center Campus and offer a wide range of accommodations, including apartments, condominiums and single-family dwellings. The variety of ethnic groups established in the Cleveland area adds to the community's charm as well as to its dining pleasures. The cost of housing and other living expenses is less than that found in most metropolitan areas. Interns have found it possible to live in a civilized, if not opulent, fashion; many have remained in the community to begin their professional careers.



Photo by Shawn Hoefler Clevelandskyscrapers.com



Photo by Kristin Cassidy

APPLICATION PROCEDURES

Applicants must be citizens of the United States who are performing satisfactorily in an APA accredited clinical or counseling psychology doctoral or respecialization program. They must have at least 1,000 hours of supervised psychological experience beyond course practica and be referred by the university Director of Training for internship training. Application materials may be obtained from and completed applications sent to:

Application Address

Robt. W. Goldberg, Ph.D., ABPP
Director of Psychology Training 116B (B)
Brecksville Unit, Building 5
Louis Stokes Cleveland DVAMC
10000 Brecksville Road
Brecksville, Ohio 44141

Application Deadline: NOVEMBER 17th

Basic Information

Questions regarding the accreditation of the internship may be addressed to:

Office of Program Consultation and Accreditation
American Psychological Association
750 First Street N.E.
Washington, D.C. 20002-4242
Phone: (202) 336-5979

This internship site agrees to abide by the Association of Psychology Postdoctoral and Internship Centers (APPIC) policy that no person at this training site will solicit, accept, or use any ranking-related information from any intern applicant.

Telephone inquiries about our program are invited at (440) 526-3030 ext. 7035 or 6901. We encourage application by qualified minority group members. We participate in the current Association of Psychology Postdoctoral and Internship Centers Match Program and observe their policies, practices, and deadlines. We do not preallocate any internship positions to particular universities. Inquiries about accreditation status may also be made to the American Psychological Association, (202) 336-5979.

Internship Requirements

Final appointment to the internship subsequent to the APPIC Computer Match is contingent upon passing a routine physical examination, background security check, and possibly a random drug screening, as is true at all VA internships. An oath of office is required at the beginning of the internship.

Applicant Interviews

Onsite interviews are encouraged but not required by our Program. Onsite interviews may be offered to applicants who have a completed set of application materials (i.e. including all documents such as references) by our deadline. The interview process takes a half-day and there will be several dates offered, on a first come first serve basis. That is, if your preferred date is already filled to our capacity when you contact us, you will need to choose another date where we have slots open. You will be informed of interview dates no later than NOVEMBER 17 and communication with you regarding this will be by e-mail, so PLEASE INCLUDE E-MAIL ADDRESSES (both at campus and during holiday break) on your AAPIC material.

The following are required from the applicant:

1. A completed APPIC Uniform Application Form and all supporting attachments.
2. An OF612 application form for Federal employment.
3. An OF306 Declaration form for Federal employment.
4. At least one letter of recommendation from a psychologist who has directly supervised the applicant's clinical work.
5. Our brief supplementary LSCDVAMC Questionnaire permitting the applicant to indicate Track and Rotation preferences*.
6. Official transcripts of graduate and undergraduate work.
7. Any additional supporting material the applicant wishes to submit (e.g. curriculum vitae, work samples, published articles, additional recommendations.)
8. We encourage but do not require onsite interviews.

You may also submit electronic files of completed documents using MSWord. This is for our convenience, as you must also submit the paper forms.

Completed applications should be received by NOVEMBER 17th.

****Tracks and Rotations:***

The term TRACK refers to the overall concentration that each intern pursues, in Mental Health (general track) or in prespecialization tracks of Neuropsychology, Geropsychology, or Health Psychology. For APPIC purposes, interns apply to one, and only one, of our Tracks (in APPIC Match terms, a “Program”).

The term ROTATION refers to a four-month, essentially full-time clinical assignment and each intern selects three rotations per year. Each of our Tracks has different three-rotation sequences (or options of sequences) which constitute that Track. You must specify the one TRACK (APPIC “Program”) to which you are applying at our site, but three ROTATIONS to fill that track.

An ENRICHMENT, as we define it, is a supplementary clinical assignment of up to 300 hours, usually pursued on a one-day per week basis over eight months, concurrent with the regular second and third rotations. Some Tracks specify potential Enrichments, as well as the basic three-rotation sequences. Enrichment placements are agreed upon by petition near the end of the first four-month rotation.

APPENDIX A TRAINING ROTATIONS

The full range of internship rotations (of four months each) outlined below is ordinarily available each year. Updated information on availability, new rotations, and enrichment opportunities will be provided as it develops. The symbols (B), Brecksville and (W), Wade Park are used to indicate the site of an intern's training on a given rotation. If both symbols are present it indicates that the rotation training is organized across both hospital campuses, with the primary site identified by the first of the two letters. The training rotations are as follows:

I. MENTAL HEALTH AND SUBSTANCE ABUSE ROTATIONS

PSYCHOSOCIAL SKILLS PROGRAM (B)

In this rotation, interns gain experience with veterans with severe mental illness in a variety of care levels. The primary rotation occurs in the Psychosocial Residential Rehabilitation Treatment Program (PRRTP) residential unit (functionally a “step-down” unit from acute psychiatric care) and the day-hospital-format Psychosocial Skills Program (PSP; an illness management and mental health recovery skills training program). Psychology interns work with the Psychosocial Program Manager, and gain experience working in an interdisciplinary team setting, including psychiatry, nursing, social work, and auxiliary personnel. The client population presents with a broad spectrum of problems, including chronic psychotic disorders, mood and anxiety disorders, personality disorders, and co-morbid conditions. Primary professional training experiences include clinical interviewing and psychological assessment, treatment/rehabilitation planning, case coordination, and individual/group interventions with persons with severe mental illness. Each intern also participates in a program development project. Supplemental training is available for interns to work with veterans at other stage of recovery, including acute psychiatric units and outpatient settings.

PSYCHIATRY DAY HOSPITAL (W)

The Psychiatry Day Hospital, coordinated by a psychologist, consists of a multidisciplinary team representing psychology, psychiatry, nursing, and social work. The target patient population is the seriously mentally ill (e.g., schizophrenia, mood disorders, anxiety disorders, other psychotic disorders). In this rotation, the intern is considered a full member of the team. The intern's responsibilities would include case management, treatment planning, discharge planning, crisis intervention, individual therapy, co-facilitation of group therapy, consultation with inpatient wards, intake assessments, conducting psychological evaluations and providing feedback to the team and patient on the results, and writing reports. The Day Hospital typically manages approximately 15 patients at a time. The Day Hospital strives to help the severely mentally ill patient reduce the frequency of inpatient hospitalizations, decrease the length of stay on acute psychiatry wards, transition from inpatient to outpatient status, and improve compliance with medical interventions. Group therapies offered include anger management, coping skills training, medication management, and stress management with relaxation skills training. The psychology intern would have an excellent opportunity to strengthen clinical skills while being exposed to a broad psychiatric population. The intern would increase knowledge of psychotropic medications and interventions with a psychotic population.

RECOVERY RESOURCE CENTER (B)

In this rotation, interns will partner with a multidisciplinary team to provide psychological services for veterans with a variety of mental health diagnoses, with special emphasis on serious mental illness. The Recovery Resource Center offers a “drop-in center” atmosphere that presents an innovative way for veterans and their families living with mental illness to explore mental health recovery. The Recovery Resource Center capitalizes on each veteran’s goals and strengths to assist with the development of a personal recovery plan. Each intern will obtain professional training in a variety of psychological services: clinical interviewing, psychological assessment, individual and family psychotherapy, psychosocial rehabilitation planning, and case coordination. In addition, the intern will gain experience in conducting a variety of skills groups and co-facilitating Family Empowerment Workshops. Psychology interns will have the opportunity to work with the Director of the Center to implement, assess and monitor the development of this new program utilizing organizational development skills.

PSYCHIATRY UNIT (B)

This unit provides relatively short-term intensive hospitalization and inpatient treatment as well as aftercare planning and outpatient follow-up. There is exposure to acutely disturbed behavior across a broad range of diagnostic categories. Acute schizophrenic episodes, drug-induced psychotic states, major depressive episodes, panic attack, and suicidal behaviors are among the most frequently encountered problems. Interns function as integral members of a multidisciplinary team and learn the process of differential diagnosis through judicious use of psychological tests, interviews, and other sources. Selected patients may be followed from admission, through discharge, and into outpatient treatment. In other instances, interventions are more time-limited and crisis-oriented. Interns gain exposure to a wide variety of treatment modalities, which may include individual psychotherapy, process and psychoeducational groups, and behavioral contracting.



LONG TERM CARE (B)



Services are provided as a member of a multidisciplinary team on a 30-bed psychiatric/long-term milieu as well as thorough consultation on the Nursing Home Care Unit. The population includes geriatric patients, some of whom have comorbid psychiatric illnesses, dementia, and/or behavior disturbances. While the majority of residents are elderly, this population also includes younger individuals with psychiatric, neurological, and/or substance abuse disorders. The rotation emphasizes the cognitive assessment and psychiatric care of individuals who cannot participate in more intensive inpatient treatment programs, who have problems living in this community, or whose capacity to live independently is suspect. Interns gain experience with cognitive assessment evaluating for dementia and the capacity of the patient to live independently, as well as the individual and group therapeutic intervention with this population. Neuropsychological assessment experience is also available for interns with advance assessment experience. Training experiences also include consultation with families of patients.

CENTER FOR STRESS RECOVERY (B)



The Center for Stress Recovery (CSR) offers numerous treatment approaches for men and women who are experiencing posttraumatic stress disorder (PTSD). While combat and sexual assault are the most common traumas experienced by many of our veterans, there is a wide array of other traumas that bring clients to the CSR. In addition to PTSD, these veterans may present with co-morbid conditions such as: anxiety and mood disorders, addictions, sleep disturbance, somatization, malingering, psychosis, marital and family problems, as well as a wide array of personality disorders. CSR Interns will be work with one of the psychologists assigned to the unit and will function as full members of the CSR multidisciplinary treatment team. There is a wide variety of programs in the CSR, including: Residential Program, Women's Trauma Treatment Program (see separate description below), Male Sexual Trauma, Gulf and Iraq Wars Veterans, Outpatient Programs, Seniors Program (WWII and Korean veterans). The CSR offers a wide range of individual and group formats that employ a rich and eclectic combination

of interventions, including: Acceptance and Commitment Therapy, Dialectical Behavior Therapy, Prolonged Exposure Therapy, Nightmare Resolution work, Cognitive-Behavioral interventions, etc. Interns participate in short- and long-term psychotherapy groups, focused skills groups, debriefing meetings, and individual psychotherapy. Interns will have ample opportunities to assess veterans using structured interviews and self-report instruments, and to write comprehensive reports. The goal is to establish a clear symptom picture for each individual and generate objectives tailored to meet his or her treatment needs. Formal and informal supervision is ample, and interns will have frequent access to other staff concerning their patients.





CENTER FOR ADDICTION TREATMENT (CAT)

Substance abuse rotations are in the CENTER FOR ADDICTION TREATMENT (CAT). CAT offers a variety of programs for veterans who have a substance dependence or impulse control disorder. Veterans participating in CAT programming complete an initial assessment tailored to the patients' needs, treatment recommendations, and subsequent treatment aligned with their assessment

results. Treatment modes range from brief intervention to intensive residential programming. In addition to primary treatment for substance dependence, the CAT unit has specialized programs in Gambling Treatment, Opioid Substitution, and Women Veterans Addictive Behavioral Treatment program. Both residential and outpatient treatment is available, with ongoing aftercare following the initial intensive phase of treatment.

GAMBLING TREATMENT PROGRAM (B)

This 35 year-old program, the first in the nation addressing gambling as an addictive disorder, draws referrals nationally, including from the Department of Defense. It includes eight residential rehabilitation beds with a 28-day length of stay, aftercare and outpatient services. Programming follows a structured evidenced-base manual and incorporates peer support and Gamblers Anonymous. The program is headed by a psychologist and has its own program evaluation staff. Research and scholarly activity on the has been presented at national and international forums. Interns serve as co-therapists in daily group psychotherapy and individual work as needed. They are encouraged to participate research and program evaluation.

WOMENS ADDICTION TREATMENT PROGRAM (B)

This is a specialized program designed to meet the unique needs of women veterans diagnosed with substance abuse/dependency within a multidisciplinary setting. Concomitant issues that result from comorbid mood disorders, anxiety disorders (predominantly Post Traumatic Stress disorder) and personality disorders (predominantly borderline personality disorder) constitute a focus of treatment as well. Psychotherapeutic interventions incorporate cognitive-behavioral and psychodynamic approaches as well as psychoeducational skill acquisition sessions and are offered in both individual and group format. The primary treatment modality in this rotation is group therapy. These interventions are supplemented with the use of a structured program manual. The program consists of an intensive five day a week program followed by a continuing care component.



II. HEALTH PSYCHOLOGY ROTATIONS

GENERAL MEDICINE CLINICS (W)

Psychology's involvement in the General Internal Medicine (GIM) Firm system is - a multidisciplinary, primary care, preventive health model. The psychology intern is instrumental in assessment and treatment of biobehavioral problems such as gastrointestinal disorders, tobacco abuse, obesity, impotence, somatoform disorders, and other psychological problems and he/she follows a small number of outpatients for short-term psychotherapy. Interns work very closely with medical attending physicians, residents, nurse practitioners, -Podiatry, -Optometry, Dietetics, Audiology/ Speech Pathology, and Social Work. -The intern



participates as a facilitator in interdisciplinary Shared Medical Appointments for both hypertension and diabetes. The intern also participates in the Morbid Obesity Clinic (a multidisciplinary psychoeducational group for weight loss), an HIV Support Group, a Preventive Medicine Clinic (a resident teaching clinic where patients are assessed and treated for tobacco abuse, obesity, and non-adherence), and a Women's Health Clinic. Interns become proficient in evaluating potential candidates for bariatric surgery and bone marrow transplantation. Interns are also invited to attend various lectures, case conferences, and journal clubs sponsored by the Department of Medicine. Research is a requirement of the rotation.



PAIN MANAGEMENT CENTER (W)

The Pain Management Center is a Section of the Anesthesiology Service at Wade Park. There is a strong emphasis on regional anesthetic interventions. Besides Anesthesiology, the core treatment team is drawn from the Nursing and Psychology professions. The Psychology Section of the program is involved in the behavioral/psychometric assessment of new patients for the purpose of evaluating appropriateness for opioid analgesics, spinal cord stimulation, and other implantable devices. The electroanesthetic techniques of Transcutaneous Nerve Stimulation and Neuroprobe are executed by the Psychology Section. Although the model of the Center is primarily consultative, there is opportunity for the psychology intern to follow select patients on a time-limited basis for behavioral management of pain utilizing techniques such as relaxation training, biofeedback and hypnosis. The intern will also be involved in co-

directing the psychoeducation groups that cover topics such as electrotherapy modalities, pharmacologic principles and cognitive/physiologic self-regulative techniques. While independent research is not a requirement of the rotation, the field of pain management provides many opportunities for investigation, and this is encouraged.



CARDIOLOGY/ORGAN TRANSPLANT (W)

The Cardiology rotation provides interns with a broad range of experiences and the opportunity to work as a member of a multidisciplinary health care team that includes cardiologists, residents, nurse practitioners, social workers, and rehabilitation professionals. Interns on this rotation participate in the service's shared medical clinics and gain detailed knowledge in both psychological and medical aspects of cardiac illness. Interns selecting the cardiology rotation follow a small caseload of patients for short-term psychotherapy and address a variety of

psychosocial issues including assessment of risk factors, treatment of adherence problems, development of coping strategies, as well as associated depression/anxiety. Support groups are held monthly for patients in the clinic to provide medically relevant education and support. The rotation also provides exposure to the psychosocial problems of hospitalized, critically ill patients and their families. Interns gain experience in assessing and treating a variety of problems including acute depression/anxiety, delirium, pain, and bereavement.

As a member of the organ transplant team, interns prepare comprehensive psychosocial evaluations of veterans referred for heart, lung, liver, and kidney transplants within the healthcare system. Assessment focuses on patient risk factors, coping resources, social support, and adherence to treatment regimens. Transplant candidates may participate in short-term individual or group psychotherapy that focuses on managing the demands of physicians, residents, nurse practitioners, and other healthcare professionals, in determining transplant candidacy and providing pre-transplant and post-transplant care. Experience in objective assessment measures including the MMPI-2 and BDI-II are beneficial.

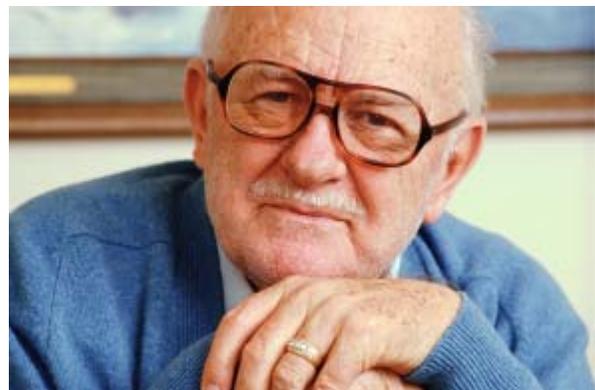
Research is required on the cardiology/transplant rotation and interns may elect to join other professional on existing projects or choose to develop their own areas of scholarly interest.

GEROPSYCHOLOGY (W)

Interns in the Geropsychology rotation gain experience in the assessment, care and management of the elderly veteran in different settings as a valued member of the geriatric treatment team.

Psychological services are provided to an 8-bed inpatient Geriatric Evaluation and Management (GEM) Unit and to the Geriatric Outpatient Medical Clinic. Interns are involved in psychological and neuropsychological assessment of the patients. Individual, marital and family therapy are frequently

utilized to help veterans and their families cope with a wide variety of difficulties including medical, neurological and psychiatric illness. Interns also help staff



manage and treat patients more effectively by direct intervention, counseling or staff training. Interns are able to build and maintain therapeutic relationships with patients in this rotation. Interns learn to address issues specific to the aging population, including issues such as competency, placement, grief and loss, dementia, delirium, behavioral issues, loss of driving privileges, delerium, and psychosis. Interns gain understanding of medical conditions, procedures and medications, and the impact they have on elder patients' cognition and emotional status. Working as members of a multidisciplinary team fosters interactions with a variety of different disciplines. Research opportunities are available and encouraged.

SPINAL CORD INJURY AND DISORDERS UNIT (W)

This is a new designated Center of Excellence for comprehensive medical care and rehabilitation of veterans with spinal cord injuries (SCI). This rotation offers experience in providing psychological services to people with disabilities, including diagnostic evaluation, psychotherapy process and psychoeducational groups, and behavioral contracting. Interns will become familiar with the medical aspects of SCI as well as



the acute and long-term psychological problems associated with this disability, such as depression, anxiety, and substance abuse. The rotation emphasizes working within an interdisciplinary team in order to promote positive treatment outcomes and program development. Interns interested in acute medical or rehabilitation settings may benefit from the rotation.

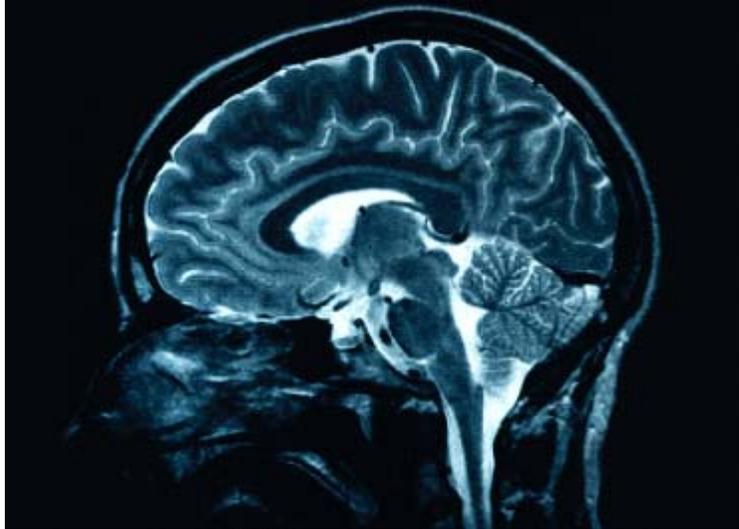
WOMEN'S HEALTH CLINIC (W)

The Women's Health Clinic (WHC) is an interdisciplinary, primary care, teaching environment. Although the WHC focuses on primary care, health promotion, and disease prevention other, more specialized, psychological, psychiatric, and gynecological procedures are offered as well. The psychology intern functions as a team member and through motivational interviewing helps patients move toward an active stage of improved health behaviors. More traditionally, the intern can assess women veterans for MST, PTSD, and other mental health concerns. Primary care psychology interns may assist in reducing a woman veteran's anticipatory anxiety prior to medical and /or surgical procedures. The primary care psychology intern spends one (1) morning per week in the clinic. The intern participates in morning WHC conferences and is responsible for giving a presentation to the team members at least once during the 4 month rotation. Collaborative research opportunities are abundant.

III. NEUROPSYCHOLOGY ROTATIONS (W & B)

Neuropsychology rotations are available at either the Wade Park or Brecksville Campuses. In contrast to the Wade Park Campus (with emphasis on Neurology, rehabilitation, and case management), at the Brecksville Campus there is greater emphasis on differential diagnosis in patients whose primary diagnoses are psychiatric but who typically have additional neurological complications. There is a

substantial emphasis on required background readings in neuroscience and related fields as well as readings conceptually targeted to particular cases and their relevant differential diagnostic issues. Considerable time is spent delineating cognitive mechanisms underlying impaired performance and how this relates to neuroimaging, radiological, neurological and neuropsychiatric data. Research opportunities are available at the Cleveland Clinic Foundation and our own facility.



APPENDIX B QUALIFICATIONS AND INTERESTS OF PARTICIPATING STAFF

ABOOD, Laura M., Ph.D., University of New York at Binghamton, 1993. Assignment: Geriatric Medicine (Geriatric Outpatient Clinic and Geriatric Evaluation and Management Unit). Theoretical orientation: eclectic, primarily cognitive-behavioral and family systems. Clinical specialization: geriatric behavioral medicine; health psychology; individual, marital and family therapy. Teaching and supervision interests: aging, health psychology, psychotherapy. Research interests: Issues related to aging and health psychology including geriatric driving evaluations and a drug study involving treatment of dementia. Professional organizations: American Psychological Association, Ohio Psychological Association, Gerontological Society of America. Also: Clinical Assistant Professor of Psychology at Case Western Reserve University.

BAGLEY, Cherie A., Ph.D., University of Illinois, 1989. Assignment: Brecksville and Wade Park Outpatient Clinics. Theoretical orientation: psychodynamic, social learning. Clinical specialization: individual, group, family therapy, multicultural, aging, physical, sexual & emotional abuse women's issues. Publications: infertility, African American families, women and religion, racial identity, problem solving, Africans and African Americans, poetry. Research interests: Ethnicity, Eating disorders, Families Personality, and Aging. Professional Organizations: American Psychological Association (Divisions: Counseling, Ethnic Affairs), Alpha Kappa Alpha Sorority . Teaching and supervision interests: culture, gender, career, family, aging issues. Licensure: 1991 Iowa, 1995 Ohio. Certifications: 1996 Health Service Provider in Psychology (HSPP) (Iowa), 1996 Chemical Dependency Counselor III (Ohio).

BERMAN, Susan P., Ph.D., University at Buffalo, 1991. Assignment: Center for Addiction Treatment Women's Treatment Program. Theoretical Orientation: psychodynamic. Clinical specialization: individual and group psychotherapy, addictions. Professional organizations: American Psychological Association, Ohio Psychological Association. Teaching and supervision interests: individual and group psychotherapy, psychodynamic psychotherapy, addictions.

BROWN, Tina, Psy.D. Xavier University, 2004. Certificate in Organizational Concepts and Management. Assignment: Director of Recovery Resource Center and Family Service Coordinator for serious mental disorders. Theoretical Orientation: Eclectic, contemporary psychodynamic with appreciation for cognitive-behavioral and mindfulness interventions. Clinical specializations: psychosocial rehabilitation for serious mental disorders, utilizing the recovery model within evidence-based programming; group and individual psychotherapy. Clinical and Research Interests: psychosocial rehabilitation process and outcomes; recovery and destigmatization of mental health interventions, application of mindfulness interventions. Presentation/Publications: recovery from serious mental disorders: evidence-based practices in psychosocial rehabilitation. Professional Organizations: American Psychological Association, Ohio Psychological Association: Public Sector Psychologists Representative; OPA Liaison to the Clinical Quality Council of the Ohio Department of Mental Health. Teaching and Supervision Interests: group and individual psychotherapy utilizing recovery model and evidence-based interventions for serious mental disorders; clinical diagnostic assessment, including use of the Rorschach; program development, measurement and outcome.

CARROL, Edward N., Ph.D., University of Delaware, 1979. Assignment: Director of Pain Psychology, Pain Management Center. Theoretical orientation: physiologic, pharmacology, behavioral. Clinical specialization: electroanesthetic and pharmacological control of cancer pain. Publications: multimodal management of cancer pain, management of pain by transcutaneous nerve stimulation, conventional and neuroprobe sensation seeking. Research interests: development of a multi-drug analgesic regimen for end-stage cancer pain, neuroprobe blockade of radicular pain, outcome evaluation of Pain Clinic efficacy, sensation seeking trait and its effect on

response to pain therapy. Professional interests outside of VA: designer of and consultant to pain management center in private sector GM & S hospital. Professional organizations: International Association for the Study of Pain, Midwestern Pain Society, Diplomat of the American Academy of Pain Management. Teaching and supervision interests: assessment and multimodal management of respondent (organic) pain.

CHAPMAN, Heather A., Ph.D., Kent State University, 1997. Assignment: Primary Substance Abuse Treatment. Theoretical Orientation: Psychodynamic conceptualization with use of cognitive-behavior techniques. Clinical specialization: Addictions, dual-diagnosis, group and individual psychotherapy, and clinical research. Publications: Addictions, Dual-Diagnosis, Depression, and Schizophrenia. Current research interests: Pathological gambling, personality, dual diagnosis. Professional Organizations: National Council on Problem Gambling. Other professional activities outside VA: independent practice, professional consultation and supervision for the treatment of pathological gambling, training and presenting on the diagnosis and treatment of pathological gambling, certified Art Therapist. Teaching and supervision interests: Addictions, group dynamics, individual and group psychotherapy for the treatment of addiction.

DELAMATRE, James, Ph.D., University of Akron, 1995. Assignments: Section Chief, Assessment and Consultation Section, Coordinator for Mental Health Compensation and Pension Evaluations, Wade Park and Brecksville Outpatient Clinics, Employee Evaluations, Smoking Cessation Preceptor, EAP Coordinator. Theoretical orientation: Integrative eclectic. Clinical specializations: assessment, health psychology. Publications and research interests: clinical use, theoretical validity, and psychometric properties of assessment instruments. Teaching and supervision interests: assessment and evaluation, individual and group psychotherapy.

DIXON, Thomas, Ph.D., Case Western Reserve University, 1989. Assignment: SCI Unit/General Rehabilitation. Theoretical orientation: Eclectic. Clinical specialization: Rehabilitation Psychology. Publications: traumatic brain injury, self-awareness. Research interests: community integration following disability, applied personality and social psychology. Professional organizations: APA, American Association of Spinal Cord Psychologists and Social Workers. Teaching and supervision interests: adaptation to disability, working on interdisciplinary teams.

ECHOLS, Mary Ann, Ph.D., Kent State University, 2000. Assignment: Youngstown Outpatient Clinic. Theoretical orientation: Psychodynamic and Cognitive-Behavior. Clinical specialization: Individual and group psychotherapy, Post Traumatic Stress Disorder, Smoking Cessation. Research interests: trauma recovery, women's mental health issues, spirituality in therapy, anger and stress management, and psychological assessment. Professional Organizations: American Psychological Association. Professional activities outside the VA: Private practice, community program speaker, and workshop presenter.

GOLDBERG, Robert W., Ph.D., University of Michigan, 1971. Diplomate - Clinical (ABPP), Diplomate-Forensic (ABPP), Distinguished Practitioner in Psychology, National Academies of Practice. Assignment: Team Leader, General Psychiatry Services; Associate Chief, Section Chief, (Academics, Education, & Training), Director of Psychology Training. Theoretical orientation: psychodynamic. Clinical specialization: individual and group psychotherapy, psychological assessment, forensic psychology, psychoanalytic theory. Publications: history of professional psychology, negative outcomes of therapy, personality assessment, ego development and object relations. Research interests: Rorschach validity, malingering. Academic appointments: Adjunct Associate Professor of Psychology, Kent State University; Adjunct Assistant Professor of Psychology, Case Western Reserve University; Clinical Assistant Professor of Psychiatry, Case Western Reserve University, School of Medicine. Professional activities outside of the VA: independent practice; Past President, APA Division 18 (Public Service); past Corresponding Secretary, American Board of Forensic Psychology; past Secretary, Board of Directors, Association of Psychology Postdoctoral and Internship Centers; Past Chair, VA Section 3, APA Division

18; Editor, The ABPP Specialist; Editor, APPIC Newsletter. Professional organizations: American Psychological Association, Ohio Psychological Association, American Academy of Forensic Psychologists (Fellow), Academy of Clinical Psychologists (Fellow), American Psychology-Law Society, National Academies of Practice. Teaching and internship supervision interests: psychodynamic psychotherapy, projective assessment, forensic consultation.

HARMON, Julie, Ph.D., Wayne State University, 1992. Assignment: Facility Recovery Coordinator; Major Preceptor, Clinical Psychology Postdoctoral Residency Special Emphasis in Psychosocial Rehabilitation with Seriously Mentally Ill. Theoretical Orientation: cognitive-behavioral with appreciation for holistic approach. Clinical specialization: mental health recovery; psychosocial rehabilitation and evidence-based practices for persons with severe mental illness; psychological assessment (cognitive, personality, projective, and diagnostic); individual and group psychotherapy. Research interests: illness management and recovery outcomes; evidence-based treatment modalities for severe mental illness; treatment outcome in addictive behaviors, classification and treatment outcome in schizophrenia. Presentations/Publications: motivation for change and co-occurring disorders (addiction and severe mental illness) outcomes, mental health recovery and recovery-oriented practice, ethical principles and code of conduct for psychologists, regulatory outcomes for professional psychology in Ohio, professional boundaries, assertive community treatment, treatment outcome in cocaine addicts, neuropsychological functioning in Tourette's Syndrome. Professional organizations: Member, Ohio State Board of Psychology (2004-2009); American Psychological Association. Teaching and supervision interests: mental health recovery and psychosocial rehabilitation; psychosis and severe mental illness, clinical differential diagnostic assessment, including utility of the Rorschach; individual and group psychotherapy.

JOLLY, Jacqueline, K. Ed.D., University of San Francisco, 2000. Assignment: Wade Park Outpatient Psychiatry Clinic. Theoretical orientation. Cognitive-Behavioral, Family and Organizational Systems, Brief Psychodynamic such as Time-Limited Dynamic Psychotherapy (TLDP). Clinical Specialization: Expressive Arts, dual diagnosed and seriously mentally Ill, Assessment, counseling & guidance and psychotherapy with individual, family, couples and groups. Research: Nonverbal Creative Abilities in Cognition as Predictors of Coping Response Patterns in Schizophrenia and in Schizoaffective and Bipolar disorders, Dissertation, NIMH-funded study of psychotic spectrum disorders focused on the neurocognition, symptom syndrome, electrophysiology, brain imaging, hematology, and biochemical characterization of community-dwelling outpatients with schizophrenia, psychotic mood disorders, and substance-induced psychotic disorders, epidemiological research project implementing and conducting Stanford Violence Prevention and Substance Use/Abuse Prevention Survey and Youth Risk Behavior Survey to middle and high school students funded by the department of public health. Outcomes research focused on the development of computer generated language and learning programs in the area of childhood learning disorders funded by Scientific Learning Corporation and the use of Brief Therapy in treatment of dual or triple diagnosed (major mental illness, substance dependence, HIV positive, terminal) at University of California San Francisco AIDS Health Project, and Brain and Attention in Substance Abusers with Posttraumatic Stress Disorder using neuroimaging and psychophysiological methodology. Teaching and internship supervision interests: prevention, psychotherapy, counseling complex clients, expressive arts, research topics, clinical skills & Training course, behavioral learning theory, Jung, approaches to dreams & psychodynamic theory/control mastery course.

KENNY, John T., Ph.D., Fordham University, 1975. Diplomate-Clinical Neuropsychology (ABPP). Assignment: Neuropsychology Section. Theoretical orientation: functional systems. Clinical specialization: clinical and neuropsychological evaluation, geriatric assessment, forensic assessment. Academic appointment: Assistant Professor of Psychiatry, Case Western Reserve University. Research interests: neuropsychological functioning in psychosis. Professional organizations: American

Psychological Association, International Neuropsychological Society, Cleveland Neuropsychological Society.

KOENIG, H. Fred, Ph.D., University of Kansas, 1973. Assignment: Canton Outpatient Clinic. Theoretical orientation: cognitive-behavioral, Gestalt. Clinical specialization: individual and PTSD, stress management, smoking cessation. Academic appointment: Clinical Assistant Professor, Department of Psychology, Case Western Reserve University. Research interests: effects of meditation on hypertension. Professional organizations: American Psychological Association. Teaching and internship supervision interests: stress management, communication skills, and PTSD.

KOZLOWSKI, Neal, Ph.D., Loyola University Chicago, 2003. Assignments: Team leader for Psychosocial Skills Program, Brecksville outpatient clinic. Theoretical orientation: experiential, cognitive-behavioral. Clinical specialization: Serious mental illness, dual diagnosis, addictions. Teaching and research interests: Dual diagnosis treatment, cognitive rehabilitation of schizophrenia, management of mentally ill criminal offenders, management of confidentiality and HIV, ethical issues in the training of psychology graduate students.

MAKO, Thomas J., Ph.D., Kent State University, 1990. Assignment: Youngstown Outpatient Clinic. Theoretical orientation: Psychodynamic and Cognitive. Clinical specialization: Individual and group psychotherapy, PostTraumatic Stress Disorder, Smoking Cessation. Publications: career exploration, narcissism, anxiety. Research interests: physical/sexual/emotional abuse, trauma recovery, self-concept/self-esteem. Professional organizations: Ohio Psychological Association. Professional activities outside of the VA: Assistant professor, Walsh University. Private practice. Academic appointment: Adjunct faculty, Walsh University. Teaching and supervision interests: Psychodynamic and cognitive psychotherapy, anxiety disorders.

MCCUTCHEON, Kevan, Ph.D., University of Cincinnati, 1989. Assignment: Center for Stress Recovery outpatient program. Theoretical orientation: Eclectic. Clinical specializations: Acceptance and Commitment Therapy (ACT); Linehan-trained in dialectical behavior therapy; Application of mindfulness to individual and group psychotherapy; manualization of treatment of veterans with PTSD, character disorders, and/or addictions; couples therapy. Professional Organizations: Association for Contextual Behavioral Science; American Psychological Association; Ohio Psychological Association. Teaching and supervision interests: experiential approaches, ACT; DBT; mindfulness and spiritual aspects of psychotherapy. Professional activities outside the VA: private practice.

MCGOVERN, Robert H., Ph.D., Case Western Reserve University, 1977. Assignment: Primary Substance Abuse Treatment. Theoretical orientation: eclectic. Clinical specialization: assessment, medical psychology, hypnosis, neuropsychological assessment. Research interests: AIDS education, psychopathology of the aged, family issues related to AIDS. Professional organizations: International Society for AIDS Education. Activities outside VA: Member, Board of Trustees, AIDS Housing Council of Greater Cleveland; Member, Patients' Rights Committee, Cleveland AIDS Commission; Member, Speakers' Bureau. Health Issues Taskforce: Co-facilitator, Significant Other Support Group for People with AIDS. Teaching and supervision interests: psychological aspects Of Physical disability, psychological and social issues related to AIDS, neuropsychological assessment.

PADIN-RIVERA, Edgardo Ph.D., Vanderbilt University, 1987. Assignment: Chief, Psychology Service, Acting Director, Center for Stress Recovery. Clinical specialization: PTSD interventions; addiction rehabilitation counseling. Research interests: change and intervention variables in group processes; variables associated with addiction and compulsive behaviors; PTSD Interventions. Professional Associations: International Society for Traumatic Stress Studies (ISTSS). Teaching and supervision interests: PTSD

treatment, group process; systems consultation; addiction and compulsive behaviors; alternative intervention paradigms.

RIDLEY, Josephine, Ph.D., West Virginia University, 1997. Assignment: Coordinator, Psychiatry Day Hospital. Theoretical Orientation: Behavioral, cognitive-behavioral, integrative. Clinical specialization: diagnosis and treatment of anxiety disorders, PTSD, treatment of psychotic disorders, background in neuropsychology and behavioral medicine; behavior therapy, diagnosis and treatment of addictions including pathological gambling; treatment of minorities. Publications: Anxiety sensitivity. Research interests: Anxiety Disorders, PTSD, ethnic issues. Professional organizations: Association for the Advancement of Behavior Therapy (AABT). Teaching and supervision interests: assessment and treatment of the seriously mentally ill, anxiety disorders, cross-cultural and ethnic therapy.

RUFF, Suzanne, Ph.D., Case Western Reserve University, 1993. Assignment: SCI/General Rehabilitation. Theoretical orientation: Cognitive-behavioral. Clinical specialization: Behavioral Medicine with sub-specialization in pain management. Research interests: Pain management, patient education, clinician education, non-pharmacological pain management techniques. Teaching and supervision interests: pain assessment; patient advocacy; staff communication issues; patient education; group education and process in pain management; addiction vs. undertreated pain. Professional interests outside of VA: independent practice.

SCHAUB, Kimberley K., Ph.D. Indiana State University, 2003. Assignment: Cardiology Clinic, Organ Transplant Teams (heart, liver, lung, kidney), Bioethics Committee. Theoretical orientation: Interpersonal Process Approach, Cognitive-behavioral. Clinical Specialization: Health psychology with an emphasis on the assessment and treatment of psychological factors associated with hypertension and cardiac illnesses, adherence, and psychological correlates of organ transplantation. Research interests: Interdisciplinary education, the chronic care model, the role of shared medical clinics in health related outcomes and multidisciplinary training, psychological factors in the treatment of hypertension, heart failure, diabetes, and cardiac rehabilitation. Professional Activities: Case Western Reserve University's National Heart Failure Training Program (NHeFT). Professional Organizations: American Psychological Association, Ohio Psychological Association. Professional Interests: Health psychology education and supervision, interdisciplinary training, shared medical clinics, chronic care model.

SERNA, George S., Ph.D., University of Akron, 2004. Assignment: Long-Term Care Unit – Brecksville. Theoretical orientation: Cognitive –behavioral with an appreciation for the neurobiological aspects of personality. Theoretical Orientation (neuropsychological assessment: Disease Impact/Syndrome Oriented approach. Clinical Specialization: Neuropsychological assessment, geriatric/competency assessment, short-term individual and family therapy, particularly with recently diagnosed dementia patients. Research interests: Biological versus socially-influenced structure of personality. Professional Organizations: American Psychological Association (Division 6 – Behavior Neuroscience and Comparative Psychology & Division 40 - Clinical Neuropsychology), International Neuropsychological Society, National Academy of Neuropsychology. Academic Appointment: Clinical Instructor of Psychiatry, Case Western Reserve University School of Medicine. Teaching and supervision interests: Cognitive/neuropsychological assessment with geriatric patients with comorbid psychiatric illness and/or dementia as well as individual and group therapy with this population.

SHURELL, Richard, J., Ph.D., Kent State University, 1979. Assignment: Brecksville Outpatient Psychiatry Clinic. Theoretical orientation: eclectic, combining cognitive and psychodynamic perspectives. Clinical specialization: individual assessment and treatment, forensic psychology, suicidology, consultation in high-risk and disruptive patients. Educational activities: team building, stress management, prevention and management of disruptive behavior, dealing with anger and aggression, coping with difficult people. Academic Appointment: Adjunct Assistant Professor, Kent State University. Professional activities outside of the VA: Private practice. Internship supervision interests: individual therapy, psychological assessment.

SMITH, Suzanne, Ph.D., Ohio University, 2003. Assignments: Smoking Cessation Clinic, HIV Clinic, Hepatitis C Clinic, Primary Care Clinic Theoretical Orientation: Eclectic, Cognitive-behavioral and Psychodynamic. Clinical Specialization: Health psychology with emphasis in behavioral health assessment, smoking cessation, compliance with medical care, adjustment to medical conditions, issues of death and dying, stress management, relaxation training, and chronic pain management. Publications and Research Interests: Health-related quality of life, Chronic pain management, Families and chronic pain. Teaching and Supervision Interests: Behavioral health assessment, behavioral medicine interventions, group therapy, individual therapy.

STRAUSS, Gerald J., Ph.D., Kent State University, 1990. Assignment: Section Chief, Health Psychology; General Internal Medicine, Women's Health Clinic, Morbid Obesity Clinic, Co-Director of Bariatric Surgery Program, Managing Overweight in Veterans Everywhere (MOVE) Program Champion. Section Chief of Health Psychology. Theoretical orientation: eclectic, cognitive-behavioral. Clinical specialization: health psychology with emphasis in promotion of healthy behaviors, smoking cessation, weight reduction, stress management, and treatment of psychological factors affecting physical health, preceptor faculty member in General Medicine Resident Ambulatory Clinic (Preventive Medicine), facilitator in shared medical appointments for diabetes and hypertension. Research interests: bio-behavioral risk factors, psychosocial interventions to improve functional status of prostate cancer patients, stages of change and motivations affecting health behaviors, morbid obesity, psychological factors in the treatment of diabetes, use of shared medical appointments for diabetes in high risk patients, and the chronic care model of interdisciplinary treatment. Professional activities outside the VA: Private practice with emphasis on health psychology and exercise / sports psychology, Assistant Professor of Medicine and Associate Director of Inquiry Groups Program CWRU School of Medicine. Professional organizations: American Psychological Association, Ohio Psychological Association (Past President, Chair of Advocacy Committee, Former Task Force Chair on Prescription Privileges), Society of Behavioral Medicine, Akron Area Professional Psychologists. Professional interests: prescription privileges for psychologists, public policy, social justice. Teaching and internship supervision interests: motivational interviewing, health psychology, chronic care model.

VAN KEUREN, Cynthia, Psy.D. Xavier University, 2003. Assignment: Center for Stress Recovery. Theoretical orientation: eclectic. Clinical specialization: assessment of PTSD, group and individual psychotherapy. Research interests: PTSD and addiction, stress management. Professional organizations: American Psychological Association. Teaching and supervision interests: assessment, individual and group psychotherapy.

WEISS, Kenneth M., Ph.D., University of Exeter (England), 1969. Assignment: Brecksville Outpatient Psychiatry Clinic. Theoretical orientation: cognitive/behavioral/experimental. Clinical specialization: cognitive function in schizophrenia. Academic appointment: Adjunct Assistant Professor, Department of Psychology, Case Western Reserve University; Publications: conditioned emotional behavior, behavior chains, cognitive function in schizophrenia, conceptual approaches to research and treatment in schizophrenia. Research interests: cognitive performance and rehabilitation in schizophrenia. Professional organizations: American Psychological Association, American Psychological Society, American Association of Applied and Preventative Psychology, Society for Research in Psychopathology. Teaching and internship supervision interests: Schizophrenia. research.

WOOD, Rita, Psy.D., Forest Institute of Professional Psychology, 2003. Assignment: Akron Community Outpatient Services and Akron Home-Based Primary Care program. Theoretical Orientation: eclectic, primarily cognitive-behavioral orientation. Clinical specialization: individual and group psychotherapy, seriously mentally ill, assessment, and substance abuse. Professional organizations: American Psychological Association and Ohio Psychological Association. Teaching and supervision interests: individual and group psychotherapy, assessment, and evaluation.

YOUNG, Graham D., Ph.D., University of Akron, 2003. Assignment: Wade Park Outpatient Psychiatry Clinic. Theoretical orientation: contemporary psychodynamic, cognitive-behavioral. Clinical specialization, individual assessment and psychotherapy, couples psychotherapy. Research and publications: Transtheoretical Model of change, help-seeking behavior, vocational behavior. Teaching interests: individual psychotherapy, personality theory, psychopathology, and professional issues.

Louis Stokes Cleveland DVAMC QUESTIONNAIRE

NAME: _____

Please complete the items below. For the rating scales, indicate whether you have had specific course work in a particular skill area (circle Y(es) or N(o) as well as your degree of skill in each (1=None; 2=some familiarity, but requiring close supervisors; 3=considerable exposure requiring occasional supervisory review; or 4= extensive experience requiring little supervision.

Assessment Skills:

Objective personality tests	Y	N	1	2	3	4
Projective personality tests	Y	N	1	2	3	4
General cognitive tests	Y	N	1	2	3	4
Neuropsychological testing	Y	N	1	2	3	4
Interviewing	Y	N	1	2	3	4

Intervention Skills:

Individual verbal therapy	Y	N	1	2	3	4
Cognitive/behavioral therapies	Y	N	1	2	3	4
Group work	Y	N	1	2	3	4
Marital/Family therapy	Y	N	1	2	3	4

Program:

Please check which ONE of the three programs (tracks) to which you are applying.

1. Mental Health
- 2a. Health Psychology OR 2b. Geropsychology Track (Same track - choose ONE)
3. Neuropsychology Track

NOTE: Under the APPIC Match System, we cannot rank you unless you respond to the above. You must check one and only one box.

Specific Rotations:

Please indicate three of our specific rotations and one alternative in which you are interested (See brochure Appendix A).

1. _____

2. _____

3. _____

Alt. _____

APPENDIX D
APPLICATION FORMS

The remaining application forms are attached as document files accessed by the “Attachments” tab or from the menus.