Psychology Internship Program

Director, Psychology Training Program (116B)
Department of Veterans Affairs Medical Center
1601 SW Archer Road
Gainesville, Florida 32608-1197
(352) 374-6020

http://www.northflorida.va.gov/careers/psychology/index.asp

APPIC Match Numbers:
General Internship: 120711
Geropsychology Internship: 120712
Application due date: November 1st

What we want you to know about us

All of the required and helpful information about our site is contained below (accreditation status, requirements, important dates, rotations, etc.) and is very important to consider for your internship year. With that said, the feedback we regularly receive from our interns is: “Your program is better than your brochure.” Hence, we have added this introduction so that we can tell you a little more about why we think our program is special and why we are glad you are considering our internship for your training year.

Our service and our training program operate from a clear trauma-informed perspective. Many sites have rotations that provide experiences in working with individuals who have suffered trauma, but what sets our training program apart is that our trauma informed perspective innervates our entire internship and is included in our rotations, in group supervision, and in our didactic presentations. Our goal is for this perspective to inform your thinking in general clinical work and your continued development of theoretical and conceptual competencies.

There are also many of training programs that stress the importance of measurement-based care and evidenced-based treatment. Our program embraces these concepts, but also recognizes that there is a difference between empirically standardized treatment and evidenced-based treatment. We not only want our trainees to learn specific, validated interventions, but also how to utilize these practices to best apply them to the individual patients with whom they work. To that end, we emphasize the content and process of psychotherapy, the interpersonal role of the individual providing the interventions, and the science behind the importance of case conceptualization. Our training opportunities are designed to give our interns the opportunity to integrate the “heart and head” of psychology practice, an integration that we believe leads to improved clinical outcomes, better insight into psychological processes that lead to change, and increased satisfaction with clinical work.

We believe the internship year is critical in transitioning trainees from the sprint pace of undergraduate and graduate programs to the marathon pace of practicing psychology. In our experience, this change of pace is often overlooked, but is essential to maintain passion and energy for the duration of one’s career. We emphasize work-life balance in our program because we believe being a psychologist is what you do and not who you are (although who you are does inform what you do). We encourage our interns to be at work on time and work hard, but at the end of the work day to be with friends and family enjoying life.

More than anything else, we want you to know we are committed, passionate, and excited about our program and about training psychologists. None of the psychologists in our healthcare system are required to supervise, they volunteer because of their commitment to training. The remainder of our brochure provides very important (and required) information – but this information does not describe the heart of our program or our staff (which is what is truly special about our internship program). We wish you the best in your application and thank you for considering our site.

This document may contain links to sites external to Department of Veterans Affairs. VA does not endorse and is not responsible for the content of the external linked websites.
**Accreditation Status**

The psychology internship program at the North Florida/South Georgia Veterans Health System is accredited by the Commission on Accreditation of the American Psychological Association. The next site visit will be during the academic year 2022.

**Application & Selection Procedures**

The North Florida/South Georgia Veterans Health System Psychology Training Program offers APA-accredited internships to U.S. citizens who are pursuing a doctoral degree in clinical or counseling psychology from an APA, CPA, or PCASAS accredited institution. To be considered, students must demonstrate completion of at least three years of graduate course work and a minimum of 625 direct contact hours (combined assessment and intervention hours) and 5 completed psychological assessments. Applicants must be certified as ready for internship by their Director of Training. Completed internship applications are reviewed by the Psychology Selection Committee and must be received no later than November 1st of the calendar year preceding the internship year.

The North Florida/South Georgia Veterans Health System is using the uniform APPIC Application for Psychology Internship (AAPI). This form is available on the APPIC web site. Applications will need to include the following:

- Cover letter that indicates areas of interest (two) and/or staff with whom you would be interested in working
- APPIC Application for Psychology Internship (AAPI)
- Three (3) letters of recommendation
- Graduate transcripts
- A curriculum vita

*Please indicate in your cover letter if you are applying for our GENERAL TRACK, GEROPSYCHOLOGY TRACK, AND/OR BOTH TRACKS. Please also indicate 2 or 3 supervisors and/or training experiences in which you are interested so we may do our best to match you to your interviewers if selected for an interview.*

Although applications will be accepted until November 1, 2018, applicants are encouraged to complete their applications as early as possible. After the November 1st deadline, applications are reviewed by a committee of supervisory psychologists to select applicants for interviews. We typically interview a little less than half of all applicants, which works out to roughly 45-50 applicants based upon approximately 100 applications each year. We inform all applicants of their interview status by e-mail, so please make sure to give us your correct e-mail address. Once all selected applicants are interviewed, the training committee meets to generate our match lists. We will inform applicants of their interview status by December 15. Intern applicants are selected for interviews based upon ratings of the following criteria: quality of academic preparation, quality of intervention experience, quality of assessment experience, quality of letters of recommendation, quality of essays and cover letter, diversity awareness, integration of the science of psychology to practice/academic experiences, and the overall match to our internship program. Interviewed applicants are further rated on their demonstrated competency in responding to questions, overall goodness of fit, and interpersonal style/presentation.

Interview dates will be four days in January, 2019 (tentatively, those dates are January 4, 7, 25, and 28) from 8:00 AM - 3:30 PM. Unfortunately, because of the substantial number of applicants and interviews, the dates and times are not flexible. Prospective interns will receive an interview schedule when they arrive for their interview, and we do our best to match intern applicants with their staff/training interests. Interviewees will have 3 individual staff interviews in the afternoon. The morning is spent with our staff presenting on various training rotations and answering questions. Lunch is provided on-site. If an applicant cannot interview in person for any reason, we are happy to schedule a telephone interview, which will not be on the aforementioned interview days, but on another mutually agreed upon day and time. Telephone interviews consist of staff interviews and an informational contact from an intern.
The North Florida/South Georgia Veterans Health System adheres to all Equal Employment Opportunity and Affirmative Action policies. This internship site agrees to abide by the APPIC Policy that no person at this training facility will solicit, accept, or use any ranking-related information from any intern applicant.

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. (These forms noted below are not required to apply for our internship program, but will be required for those interns with whom we match.)

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. Waiver determinates are made by the VA Office of Human Resources Management and can take six months for a verdict.

4. **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 will be 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 http://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.

   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 is required for all your prior education and training. Your training directors will be reaching out to the appropriate institutions to get that done and complete.

8. **Additional 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. VA identity proofing 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 for appointment as a psychology HPT can be found at the end of this brochure.

Please following the included link for additional information about program eligibility for VA Psychology Training Programs (https://www.psychologytraining.va.gov/eligibility.asp).

**For additional information, please contact:**

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**For information regarding APA accreditation of this internship or other accredited internships, please write or call:**

Office of Program Consultation and Accreditation
American Psychological Association
750 First Street, NE
Washington, DC 20002-4242
Phone: (202) 336-5979
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E-mail: apaaccred@apa.org

**Psychology Setting**

The Internship in Professional Psychology at the North Florida/South Georgia Veterans Health System has been continually APA accredited since 1981. We also have an accredited Clinical Psychology postdoctoral fellowship program with the following emphasis areas (one fellow in each area): geropsychology, substance abuse, and post traumatic stress disorder. Additionally, we offer practicum level training and have from 10-20 graduate students from the University of Florida and Florida State University as well as from other programs during a given year. Currently we have over 65 psychologists on staff throughout our medical center's health care system, including three large, multidisciplinary outpatient clinics and seven community based outpatient clinics (CBOCs). Our staff are well represented in all major areas of healthcare provision as well as serving on a variety of professional committees and
boards, oftentimes in leadership positions. Our medical center is affiliated with the University of Florida and Shands Hospital and as such, offers clinical training to a variety of disciplines including medicine, psychiatry, nursing, pharmacy, and social work.

Training Model and Program Philosophy

The Psychology Internship Training Program at the North Florida/South Georgia Veterans Health System follows a practitioner-scholar model. Thus, the primary training focus is on direct clinical work—but that work is informed by evidenced based practice. It is our belief that interns must be exposed to a diversity of patient problems, many different intervention techniques, multiple theoretical viewpoints, and the relevant scientific literature. Based upon this philosophy, interns receive broad, comprehensive training in preparation for entry-level, generalist practice in professional psychology.

The internship trains students from APA-accredited graduate programs in clinical and counseling psychology. The broad training in professional psychology that interns receive builds upon their graduate education and enhances their professional development as a clinical or counseling psychologists. Although general adult practice is emphasized, the internship retains sufficient flexibility to allow for individual specialty training needs of the intern to be met. The design of the internship program includes a staff representing a wide variety of theoretical orientations that are informed by the scientific literature. The psychology staff view familiarity with the evolving body of scientific and professional literature in psychology as critical to competence in professional practice. Science is integrated with practice through both didactic lectures and discussions of the empirical literature during supervision.

The Internship Training Program reflects our commitment to generalist preparation for clinical practice through a distribution of experiences spanning assessment, therapy, and consultation. A given intern's individualized program is one that takes into consideration graduate school preparation and practica, planned career direction, intern interests, and APA's Standards of Accreditation in Health Service Psychology. The intern participates in rotation selection and receives advice as needed by the Training Director and, when appropriate, the Training Committee.

Our department is committed to diversity on many different levels, including providing an emphasis in diversity in clinical experiences, didactic trainings, and professional interactions. We have an active Psychology Service Diversity Committee that is committed to improving educational opportunities for staff and trainees on differences of race, color, gender, sexual orientation, religion, national origin, age, disability, culture, and intellectual perspective; and how these differences impact mental and physical health issues and delivery of care.

We believe that cultural curiosity is vital to understanding mental illness and essential to provision of care. As such, VA psychologists are obligated to ensure that culturally competent services continually evolve in order to better respond to the needs of our increasingly diverse Veteran population.

Over the course of each training year, we offer a variety of diversity-related educational opportunities:

• Formal Continuing Education for staff and trainees

• Quarterly journal discussions of recent, scholarly research

• Didactic trainings for Intern and Post-Doctoral trainees

• A collaborative Intern special-project or experiential activity

Although the medical center serves a predominately adult male population, there is an increasing number of female veterans using VA facilities (13% nationwide). Our Medical Center has a Women's Health Clinic which has been open since October 1999. This clinic address the medical and mental health needs of
female veterans. The Psychology Service in particular has developed several groups and outreach programs for women veterans such as the Women Veterans Support Group.

**Program Aims and Profession Wide Competencies**

Our training program strives to provide a coherent series of training experiences that lead interns to develop competencies required to enter the field of professional psychology as a successful psychology fellow or early career psychologist. These competencies include the Profession Wide Competencies (PWCs) required by the American Psychological Association’s Commission on Accreditation (research; ethical and legal standards; individual and cultural diversity; professional attitudes, values, and behaviors; communication and interpersonal skills; assessment; intervention; supervision; consultation and interprofessional/interdisciplinary skills). We believe that the primary learning mechanism for competency development is hands-on clinical work with patients and interprofessional teams. Training experiences offer the opportunity to cultivate a broad set of generalist skills, and then develop those skills with specialized populations during each training program rotation. Through this progression of training experiences, we aim to produce psychologists who are well-prepared for entry-level, generalist practice in professional psychology.

Our training program continually strives to understand, appreciate, embrace, and apply concepts related to diversity in our work with trainees, patients, and interprofessional teams. In our program, diversity is perceived as a distinct competency and is also interwoven into how we think about the development of all the Profession-Wide Competencies. The inherent dynamic nature of society, and thus diversity, leads us to a broad conceptualization of diversity, and motivates us to persistently explore the meaning of and application of diversity issues. We endeavor to continually grow new opportunities for our training program and supervisors to be thoughtful of and engage in meaningful dialogues about diversity throughout the training year. We aim to produce psychologists who consider the broad and dynamic nature of diversity and integrate the application of diversity concepts throughout practice.

A developmental model is the core of our training program. Supervisors commit to deliver training in a manner that is respectful to the needs of the trainee, while providing the combination of challenge and support necessary for competency development. Supervisors use formative and summative evaluation to collaboratively make decisions regarding caseload, types of patients assigned, and proximity of supervision in a way that encourages clinical skill development at an appropriate, but progressive level of autonomy. We aim to produce psychologists who are prepared to enter the field of professional psychologists as competent providers of psychological services within a healthcare setting.

The philosophy of our internship program is based in the practitioner-scholar model of training. Our training activities are designed to help interns develop competencies through the application of scholarly knowledge to their clinical work. We value the important science upon which our clinical work is predicated—and respect the individual recipients of our clinical work. To that end, we aim to produce psychologists who are versed in empirically standardized treatments—but more importantly who are able to apply interventions in a way that is consistent with evidence-based practice that acknowledges and respects individual treatment needs.

**Program Structure**

**Training Plan**

The internship year, which begins July 1st, consists of three, four-month rotations. The process of developing a training plan which ensures competence in general clinical skills and which accommodates the interests of the individual intern is initiated at the beginning of the internship year. This process is a collaborative one with the intern, Training Committee, and Training Director involved. There are two tracks within our internship program, a General Track (with 5 interns) and a Geropsychology Track (with 1 intern). The Geropsychology Track is funded by the VA’s Geriatric Research, Education, and Clinical Centers (GRECC). The intern selected for this program receives specialized training in geropsychology.
and spends eight months of his or her internship year focusing on the special problems and needs of the older adult. The remaining four month rotation is spent in another training rotation. The rotation outside of geropsychology is designed to help facilitate development of the profession wide competencies with a generalist foundation. Outside of the two required rotations for the intern who matches under the Geropsychology Track, there are no required tracks in our internship program.

During orientation week, interns meet with supervisory Psychology staff both informally and formally in order to learn more about specific rotations offered. This initial exposure to training staff is helpful for interns in thinking about their preferences for rotations and supervisors. At the end of the orientation week, interns will be asked to provide their rotation preferences by allocating a total of 100 points to desired rotations. In doing so, they express their relative preferences. Interns’ choices are reviewed by the Training Committee to ensure that the preferred rotations augment previous training experiences. First rotation assignments will then be assigned and interns will then be asked to re-rank their rotation preferences. These rankings, in combination with suggestions from the Training Committee, are used to assign second and third rotations. By allowing interns to re-rank their rotation preferences at this time, interns have the opportunity to learn more about specific rotations and supervisors and the Training Committee has the opportunity to better assess the training needs of each intern and suggest rotations to match these needs. Every effort is made to ensure that all three major rotations suit the intern well and contribute to development of professional level generalist clinical skills.

All interns participate in certain core training experiences. Interns are required to maintain an outpatient psychotherapy and assessment caseload of 5-7 outpatient visits per week under the supervision of one or more staff psychologists selected by the intern. This ensures that all interns have experience in conducting both brief and long term individual and couples psychotherapy across the internship year. Interns also participate in the testing pool, which allows for a rotating assignment of assessment cases from throughout the medical center. Typically interns complete between 5-7 assessment cases each year.

For the 2019-2020 training year, we will be able to have two interns in the PTSD rotation. It is important to note that there are many opportunities to gain and expand competencies in the area of treating and diagnosing the full spectrum of PTSD throughout our internship program, including outpatient psychotherapy, Women’s Clinic, Substance Use Disorder rotations in Lake City and Gainesville, etc.

**Supervision**
Interns receive regularly scheduled supervision for their clinical work. They are scheduled for at least one hour of individual supervision per week for their outpatient psychotherapy cases and one hour of individual supervision per week for each primary rotation. Additionally, interns received two hours of group supervision per week. Therefore, at a minimum, interns receive two individual hours and two group hours of scheduled supervision weekly.

**Dissertation Research**
While interns are encouraged to complete their doctoral requirements, including the dissertation, prior to beginning the internship, it is understood that some students may desire to complete their research with a veteran population. Individual arrangements may be made with the Training Director and the appropriate supervisors for the intern to spend up to four hours per week on such research. The intern must remain at this medical center for this research activity.

**Evaluation**
The supervisory psychology staff strives to create a supportive and collegial training environment where staff and interns have ample opportunity to interact. Our success in creating an accessible and effective training environment is assessed through intern evaluations of the program and individual supervisors. In addition, the Training Director meets both formally and informally with interns multiple times during the training year to discuss intern satisfaction with the training program.
Intern progress in our training program is assessed through mid-rotation progress checks (completed by the rotation supervisor and outpatient supervisor) and end of rotation summative evaluations completed by the intern's supervisors, including the supervisor for the primary rotation and supervisors for their outpatient cases. These evaluations address demonstrated competency in the following areas: Ethical and Legal Standards; Professional Values, Attitudes, and Behaviors; Communication and Interpersonal Skills; Psychological Assessment; Psychological Intervention; Research/Scholarly Inquiry; and Consultation, Supervision, and Program Evaluation. This, along with evaluations of the intern's performance in case presentations, assures frequent evaluation of intern's progress from multiple sources.

End of rotation meetings are held at the end of each rotation and include the training director, intern, and the intern's supervisors. During these meetings the formal end of rotation evaluation is discussed and completed by all of the intern's supervisors for that rotation. Additionally, feedback is provided to interns about their performance based upon the evaluation described above, their training goals for the year are reviewed and training plans updated if necessary, and feedback is solicited from the interns about the program. Additionally, the Training Director summarizes each intern's performance in midyear and end-of-year evaluations, which are sent to each intern's graduate school Training Director.

Interns are invited to attend and participate in our monthly Psychology Service staff meetings. Through attending these meetings as well as periodic meetings with the Training Director, interns are kept up-to-date about any changes in the program's plans or policy.

Interns are expected to adhere to the Ethical Principles of Psychologists and Code of Conduct by the American Psychological Association and a copy of same is included in the Intern Handbook they receive at the outset of the training year.

To ensure interns' rights of due process, Psychology Service has enacted Memorandum Number 116B-2: Complaints and Grievance Procedures Initiated by Trainees and Memorandum 116B-15: Remediation of Problematic Performance, Due Process, and Grievance Procedures. This policy statement defines the actions that both interns and the Training Committee must take should problems be identified in the intern's performance. This policy is provided to all interns during orientation week (or by request) and is discussed with them to ensure that they understand their rights. Interns' complaints and/or difficulties with supervisors are subject to the same procedures. A copy of same is included in the Intern Handbook interns receive at the outset of the training year.

**Training Experiences**

The clinical rotations described below reflect the variety of services offered by the Psychology Service at the North Florida/South Georgia Veterans Health System. The interns' participation in three rotations during the internship year is designed to increase their experience in general areas of psychological practice while also gaining rotation specific competencies in order to facilitate postdoctoral fellowships in emphasis or specialty areas as well as entry level employment.

**Outpatient Therapy/Assessment Experience/Testing Pool**

Interns are expected to carry 5-7 outpatient therapy and/or assessment cases throughout the training year. When therapy has been ended with a patient – new cases will be assigned to ensure the caseload remains fairly consistent throughout the training year. These cases are largely derived from the Mental Health Clinic and offer the interns an opportunity to engage in general therapy and assessment work to help round out the experiences they receive on each rotation. The testing pool consists of assessment cases being referred for diagnostic assessment from a variety of areas in the medical center. Mostly, the testing pool cases come from the MHC, inpatient psychiatry, and health psychology. Interns take turns completing these assessments as they are referred, which comes out to, on average, 5-7 testing cases over the course of the year. The assessment cases typically consist of a diagnostic interview, medical record review, and objective and/or projective personality measures. When appropriate, other measures,
such as intellectual and neuropsychological testing can be incorporated as well. Supervisors for this experience are selected based upon referral question.

**Clinical Neuropsychology**

*Supervisory Psychologists: Jason Demery, Ph.D., ABPP-CN, Christian Dow, Ph.D., Heather Tree, Ph.D., Christopher N. Sozda, Ph.D.*

The rotation offers interns the opportunity to participate in the evaluation and treatment of patients demonstrating diverse neurological disorders. Specially populations and team experiences include dementia, traumatic brain injury, seizure disorders, multiple sclerosis, stroke, movement disorders, and various forms of psychopathology. Interns will learn to administer a variety of standard neuropsychological assessment instruments within an ongoing outpatient clinical context. Clinical practice will be supplemented with interdisciplinary didactic experiences. Interdisciplinary approaches will be stressed so that psychology interns can expect to collaborate with physicians, rehabilitation professionals, and other mental health disciplines. Under special circumstances, select interns with sufficient background preparation may elect to extend their neuropsychological assessment and treatment experience. Interns with such an interest will be offered this rotation for the first four months of internship and will be allowed to maintain neuropsychological assessment cases throughout the remaining eight months of training as a part of the outpatient therapy/assessment experience.

- Interns who complete this rotation will be able to:
  - Design and conduct neuropsychological interviews
  - Develop a syndrome analysis, process approach to neuropsychological assessment
  - Demonstrate familiarity with the administration and scoring of a wide variety of commonly employed neuropsychological assessment instruments
  - Demonstrate knowledge of neuropsychological evaluation and treatment
  - Write comprehensive neuropsychological reports addressed to diverse referral sources
  - Provide feedback and psychoeducation to patients and caregivers

**Gainesville Substance Abuse Treatment Team (SATT and SARRTP)**

*Supervisory Psychologists: Jason Pickren, Psy.D., Wandamaria Lopez, Ph.D.*

The NF/SGVHS supports several levels of care in an interdisciplinary approach to the treatment of Veterans with substance use disorders (SUDs). Available to Veterans in a 52-county rural and urban catchment area is an array of services, including intensive hospital based detoxification, ambulatory detoxification, dual diagnosis or substance abuse focused residential care, and a full range of outpatient services including vocational rehabilitation. In consultation with their supervisor, interns will select a combination of experiences available at either the Gainesville substance abuse clinic, which serves a 16-bed residential program, or the Lake City VA Medical Center, which features a 13-bed residential program designed specifically for Veterans dealing with both substance use disorders and comorbid severe mental illness.

The SATT is based upon a biopsychosocial model of addictive behaviors that accommodates a developmental framework, with patients moving from one type of service to another depending upon their individual needs and treatment goals. The interdisciplinary team members provide their unique perspectives on the patients’ problems and the treatment of substance use disorders. In addition, the SATT acts as an intensive treatment resource for Veterans served by practitioners in Outpatient Clinics and Community Based Clinics, and provides for coordination of services throughout the NF/SGVHS.

*Interns who complete this rotation will be able to:*
  - Demonstrate knowledge of substance use disorders, diagnostic criteria, and course
  - Demonstrate knowledge of Addiction Society of Addiction Medicine (ASAM) criteria for determining appropriate level of intervention on behalf of a patient with a substance use disorder
• Utilize assessment measures which may guide SUD interventions
• Conduct SUD-focused group therapy
• Conduct individual therapy targeting SUD and associated mental health disorders
• Work with and organize a multidisciplinary treatment team

The Gainesville Substance Abuse Treatment Team (GNV-SATT) offers training:
• across the spectrum of levels in care including inpatient/outpatient detoxification, residential, intensive outpatient, and community re-entry services
• in a wide variety of empirically validated treatments including Motivational Interviewing, Cognitive Behavioral Therapy, 12 step facilitation, Seeking Safety, Dialectical Behavior Therapy Skills Training, Cognitive Processing Therapy, and Prolonged Exposure Therapy.
• utilizing group psychotherapies, individual psychotherapies, and psychological assessment. Psychological assessment opportunities emphasize objective personality and cognitive measures.
• in treating Veterans from a variety of biopsychosocial backgrounds struggling with a variety of comorbid disorders. There is a distinct track of services specifically tailored to treat veterans with both substance use disorders and PTSD.

Lake City VAMC SUD Training (PRRT P)
Supervisory Psychologist: John Auerbach, Ph.D.

The Lake City VA Medical Center offers a full range of comprehensive health care, including both specialty outpatient and residential care for Veterans with SUDs. In consultation with the supervisor, the intern will develop a rotation training plan that fosters expertise in all stages of treatment of patients with SUDs. This will include initial intake assessment, recommendation of care according to American Society of Addiction Medicine (ASAM) criteria, and treatment of both outpatients and residential patients through individual and group modalities. The residential dual-diagnosis program allows the intern exposure to a small, psychiatrically complex patient population multiple times per week, permitting exploration of a unique level of depth in case conceptualization and diagnostic clarification.

Specific assessments approaches with which the intern will gain competence include structured interviews for patients with SUDs, psychopathology assessment, personality assessment, performance-based assessment, neuropsychological assessment, and use of the Brief Addiction Monitor, which is now being used by the VA nationwide as an objective measure of SUD treatment outcomes. Treatment modalities include Motivational Interviewing/Motivational Enhancement Therapy, Dialectical Behavior Therapy, Cognitive Behavioral Therapy for SUD, Mentalization Based Therapy, Mindfulness-Based Cognitive Therapy, Seeking Safety, Process-oriented Group Therapy, and Contingency Management for patients with SUD.

The intern will develop this expertise with the support of, and in consultation with, a diverse multidisciplinary treatment team that includes not only the supervising psychologist, but also a post-doctoral psychology fellow, psychiatric nurses, social workers, a psychiatrist, and vocational rehabilitation specialists. This will allow exposure to a holistic model of care that emphasizes positive psychology and a humanistic approach to recovery. The rotation is designed so that the intern completes the experience with sufficient expertise to function as a generalist capable of competently treating patients with substance use disorders. However, interns with previous SUD experience have the opportunity to advance their expertise to a degree that they can compete effectively for roles on SUD specialty care teams within the VA.

Interns who complete this rotation will be able to:
• Demonstrate knowledge of substance use disorders, diagnostic criteria, and course
- Demonstrate knowledge of Addiction Society of Addiction Medicine (ASAM) criteria for determining appropriate level of intervention on behalf of a patient with a substance use disorder
- Utilize assessment measures which may guide SUD interventions
- Conduct SUD-focused group therapy
- Conduct individual therapy targeting SUD and associated mental health disorders
- Work with and organize a multidisciplinary treatment team

**PTSD Clinical Team (PCT) – Lake City**
Supervisory Psychologist: Valerie LaRocco, PsyD

The PTSD Clinical Team (PCT) is an outpatient clinic specializing in evidence-based treatment for PTSD. The PCT primarily offers treatment to veterans diagnosed with PTSD connected to military-related traumas, including combat, sexual assault, physical assault, natural disasters, and accidents. There may be occasions when services are extended to veterans diagnosed with PTSD connected to civilian-related traumas. Comorbid conditions are common and often include depressive disorders, anxiety disorders, substance use disorders, traumatic brain injury, and personality disorders. Psychosocial challenges are also common and may include homelessness, unemployment, legal problems, financial problems, and comorbid medical conditions.

The Lake City PCT is staffed with a multidisciplinary team, including members from Psychology, Psychiatry, Nursing, and Social Work. The team frequently coordinates with other clinics, both mental health and physical medicine, throughout the hospital in order to offer comprehensive care for mental health concerns, medical problems, and psychosocial needs. The PCT offers individual therapy, group therapy, and medication management with a focus on treating PTSD and comorbid conditions.

The intern will function as a member of the team with opportunity to complete intake screening assessments, to provide psychological services, and to coordinate with other programs. A typical day might include a treatment team meeting, group therapy, individual therapy, intake assessment, and coordination with other treatment providers. Group opportunities may include Seeking Safety group, a PTSD support group, or a PTSD Skills group.

Opportunity will be provided to receive additional training in one evidence-based psychotherapy for PTSD: Cognitive Processing Therapy (CPT) or Prolonged Exposure (PE). The intern will then have opportunity to provide this treatment (either CPT or PE) to at least one veteran. Given the typical length of these treatments (6-15 sessions), it may be necessary to continue working a half day with the Lake City PCT after the end of the rotation to ensure ample opportunity to complete a full course of therapy. Certification in CPT or PE will not be offered as part of the training experience.

There will also be opportunity to work closely with the Psychosocial Residential Rehabilitation Treatment Program (PRRTP), which is a residential dual diagnosis treatment program located at the Lake City VA Medical Center. Veterans admitted to PRRTP who have problems associated with past trauma and who are interested in treatment services for PTSD or related problems are frequently referred to the PCT for concurrent treatment of PTSD. The intern may offer intake screening for the PCT, individual therapy, or group therapy to veterans admitted to PRRTP. There may also be opportunity to observe and/or co-lead groups offered in PRRTP, such as a process group or a coping skills-focused group.

**Rotation Goals and Objectives:**
- Complete rotation and acquire hours of supervision and direct patient contact.
- Complete at least 3 intake screening assessments to include clinical interview for PTSD, administration and interpretation of self-report measures, psychosocial history, diagnostic impressions, and treatment recommendations.
- Serve as a co-facilitator in at least one PTSD-related coping skills group.
- Complete training in one evidence-based psychotherapy – either PE or CPT. Certification will not be offered as part of the training experience.
• Provide evidence-based individual psychotherapy (either PE or CPT) to at least one veteran in the PCT.
• Attend weekly PCT treatment team meetings to discuss issues related to veteran care and treatment planning.
• Identify and recommend appropriate referrals to address comorbid conditions and/or psychosocial challenges.
• Learn about available veteran resources related to PTSD and make appropriate recommendations regarding use of these resources during provision of psychological services.
• Learn about available provider resources related to PTSD and demonstrate use of at least one available resource.
• Acquire information sufficient to provide a basic overview of available treatment options for PTSD to veterans seeking treatment in the PCT.
• Attend and participate in weekly supervision.
• During supervision, discuss at least 1 ethical dilemma in therapy.
• Discuss and apply research findings in assessment, conceptualization, diagnosis, and psychotherapy for PTSD.
• Develop awareness of factors that may impact response to trauma, that may increase risk for development of PTSD, that may complicate recovery from PTSD, and that may aid in recovery from PTSD.
• Develop awareness of how PTSD interacts with individual and cultural differences, including ethnicity, lifestyle, gender, and age.
• Meet deadlines for completion of work, including documentation.
• Coordinate with PCT and other staff to ensure comprehensive care for veterans in the PCT.

**Primary Care Behavioral Health**

*Supervisory Psychologists: Julius Gylys, Ph.D.; Timothy Ketterson, Ph.D.; Michelle Smith, Ph.D., Dr. Lisa Watson, Psy.D.*

On the Primary Care Behavioral Health (PCBH) rotation, interns learn how to adapt traditional clinical and health psychology services for the primary care setting. Typical clinical activities include brief evaluation and treatment of clinical and health psychology problems; consultation and collaboration with primary care practitioners for psychological and medical management; and triage decision making to prioritize service delivery.

Common referral questions include ones which can be categorized as mental health (e.g. depression, PTSD, anxiety, dementia, somatoform, adjustment disorders); health behavior change (e.g. tobacco cessation, increasing physical activity, and weight management); and behavioral medicine (e.g. insomnia, pain management, coping with illness, treatment adherence, and practitioner-patient communication). Interns will have less frequent, albeit significant, interaction with patients presenting with chronic, severe mental illness as well.

While the rotation emphasizes individual treatment, there are opportunities to participate in tobacco cessation and other behavioral health groups as available (e.g., tinnitus, MOVE!). As primary care is an ever-changing environment, group development and program evaluation are also potential experiences. Interns will also have the opportunity to partake in primary care behavioral health and medical team meetings. At times, a University of Florida graduate student trains on the same rotation and the VAMC intern is invited to actively participate in training supervision as appropriate to their level of competence.

**Rotation Goals and Highlights**

Interns will develop skills in conducting brief assessments in the primary care setting. Assessments will include record review, clinical interview, and brief psychological testing as appropriate. Interns will be able to diagnose major presenting problems, identify psychosocial issues impacting functioning, and develop appropriate treatment plans. In addition, they will learn to provide feedback, including diagnostic impressions and treatment plan, to the patient and primary care team in a concise manner. As part of the
rotation, interns will also practice brief-oriented behavioral health sessions. The following is a list of rotation highlights:

- This rotation is full-time, 3-day per week
- Experience being on call via the team’s mobile phone by pager for real-time, same-day consultation and referrals from primary care and the emergency department providers.
- Learn to adapt report writing skills using brief/concise format
- Develop skills in brief-oriented psychotherapy for a variety of presenting issues
- Discuss relevant research literature with supervisor
- Build familiarity with psychotropic medications and their clinical use
- Opportunities for group treatment in smoking cessation or behavioral health groups as available, group development participation may be possible
- Obtain extensive practice with triage, building treatment plans, and implementing interdisciplinary treatment plans
- Opportunities to participate in interdisciplinary PCBH team meetings and other medical team meetings
- Discussions on ethical and professional issues with patients and specifically those that relate to PCBH services
- Discussions of diversity issues pertaining to individual and group differences
- Obtain experience with a diverse set of patients during the rotation with respect to presenting condition, age, ethnicity, socioeconomic status and culture.

**Women’s Primary Care Clinic and Military Sexual Trauma**  
*Supervisory Psychologist: Elizabeth P. Dizney, PsyD*

This primary care clinic provides outpatient medical and mental health services to women veterans and eligible wives of veterans. In addition to the supervisory psychologist, the team is composed of one nurse practitioner, three nurses (2 RNs and 1 LPN), a licensed clinical social worker, a physician, a full-time psychiatrist, and a clerical support person.

An intern will have the opportunity to participate in an interdisciplinary team approach to patient care (Primary Care Mental Health Integration – PCMHI) involving both a full range of behavioral health issues and treatment related to specialized areas; such as military sexual trauma, intimate partner violence, complex trauma, personality disorders, combat trauma, and transgender/gender dysphoria. Particular learning experiences include psychological evaluations and provision of evidenced-based psychotherapy approaches, both short- and long-term, including trauma-based approaches and Dialectical Behavior Therapy (DBT). The DBT program in the Women’s Clinic has been established to provide empirically-based treatment for some of the most distressed female Veterans. Treatment interventions may be utilized with individuals, couples, families, and group. Opportunities to co-facilitate ongoing interpersonal process and cognitive-behavioral groups are available to the intern; including Cognitive Processing Therapy, Dialectical Behavioral Therapy, and CBT for Chronic Pain. An intern may initiate and develop short-term psychotherapy groups to address specific health-related concerns; such as assertiveness, weight loss, coping with depression, and parenting. An intern will also have the opportunity to work with women across a wide age-range and cultural background.

*Interns who complete this rotation will be able to:*
- Conduct comprehensive psychological assessments involving interviews and testing as appropriate
- Develop appropriate therapy treatment plans and referrals
- Conduct brief and long-term individual psychotherapy with female veterans, including evidence-based trauma protocols and Dialectical Behavior Therapy
- Co-lead existing groups and/or organize new groups to meet the intern’s areas of interest
- Gain an understanding of the social issues impacting female veterans in their daily lives; especially the issues of sexual trauma, intimate partner violence, familial responsibilities, adjustment issues, race, gender, and financial constraints
Medical Psychology
Supervisory Psychologist: Valerie Shorter, Ph.D.

The Medical Psychology program offers psychological services to Medical and Surgical inpatients and outpatients and their families on a consultation-liaison basis. Currently, consultations are being done on inpatient wards, intensive care units, a chemotherapy clinic, and other medical/surgical specialty clinics.

An intern will have the opportunity to observe and participate in an interdisciplinary team approach to patient care. Particular learning experiences, in addition to psychological evaluation and treatment, will include interacting with patients and their families, filling the role of liaison between patient and caregiver or family member, assisting in end-of-life planning, and generally facilitating the patient’s adjustment to the treatment regimen and adopting a more healthful lifestyle. Both short-term and extended interventions may be utilized with individuals, couples, or families.

Psychologists working in this program also perform evaluations of candidates for organ transplantation, bone marrow transplantation, and other medical interventions.

Other aspects of the program include weekly attendance at Psychiatry Consultation/Liaison rounds. Meetings with hospital or clinic staff groups are conducted upon request, either ad hoc to address matters of acute concern, or on a regular schedule in the interest of providing support, improving communication, and enhancing team identity and cohesion.

Interns who complete this rotation will be able to:
- Conceptualize a psychological consultation issue utilizing clinical interview and history, including information from the client's Computerized Patient Record System (CPRS) entries.
- Demonstrate competence in consultation, in responding to referring professionals, and in intervention as indicated.
- Conduct evaluations preceding medical/surgical procedures and convey results of these effectively both verbally and in written reports.
- Demonstrate knowledge of medical record review, medical terminology, pharmacology, and pathology.
- Participate in the interdisciplinary approach to health care, spanning the range from prophylaxis to assisting in end-of-life planning.
- Acquire familiarity with science-based and other professional literature pertinent to health psychology topics, receiving materials from supervisor and researching relevant literature independently.

Geropsychology
Supervisory Psychologists: Carrie Ambrose, Ph.D. (Lake City), Julie Barratt, Ph.D.; Merle Miller, Ph.D. (Home Based Primary Care); Carly Ostrom, Ph.D. (Lake City)

TWO TRACKS

(1) GRECC Geropsychology Track: The GRECC (Geriatric Research, Education, and Clinical Center) sponsors one internship position in geropsychology. The GRECC-funded intern completes two rotations focused in Geropsychology (Gainesville and Lake City) and a third rotation in one of our other, non-geropsychology-oriented rotations. The geropsychology track trainee will participate in weekly didactic presentations from other GRECC disciplines, including medicine, pharmacy, speech therapy, physical and occupational therapy, and dietetics. The NF/SG VHS GRECC also holds an annual poster conference for all GRECC trainees to present their research and/or clinical work.

(2) General Track with Geropsychology Experiences: General track interns can receive training in one Geropsychology rotation at either site.
ROTATIONS

(1) Malcom Randall VA Medical Center Geropsychology (Gainesville)
Supervisory Psychologist: Carly Ostrom, Ph.D.

This rotation includes opportunities to work with a variety of interdisciplinary teams that provide primarily inpatient services to older adults. These opportunities may include:

Geriatric Evaluation and Management (GEM): Short-term rehabilitation team that is designed to provide comprehensive interdisciplinary assessment, treatment, preventive, and restorative/rehabilitative care to veterans who have sustained a change in physical functioning. This is a teaching service, meaning medical students, medical residents, and trainees from other disciplines are part of the clinical team.

Short Stay Service: Short-term inpatient services including rehabilitation or skilled nursing care (wound care, IV antibiotics). This is a non-teaching service. Common presenting concerns include: Adjustment (to medical conditions, change in functioning, hospitalization), depression, anxiety, insomnia, multiple medical comorbidities, grief and anticipatory grief, cognitive deficits, substance abuse, PTSD, challenging/responsive behaviors, and interpersonal conflicts.

Palliative Care Consult Team: This multidisciplinary team addresses inpatient and outpatient consults for veterans who have been diagnosed with a life-limiting illness. The team rounds two times each day. They make recommendations for optimal care, focusing on the veteran’s wishes and promoting quality of life. They provide ongoing follow-up care including opportunities for psychology trainees to provide team consultation, individual therapy, and family therapy.

*Each intern in this rotation will have the chance to select and focus on a couple of the above opportunities. While it would be impossible to fully engage in all of these opportunities at one time, it is possible to experience each.

(2) Lake City VAMC CLC
Supervisory Psychologists: Carrie Ambrose, Ph.D. and Julie Barritt, Ph.D.

The Community Living Center at the Lake City VAMC is located approximately 45 miles north of Gainesville. It consists of five separate neighborhoods with a total of 230 beds. The neighborhoods’ specialties include specialty care for people with dementia and other cognitive challenges, rehabilitation and restorative care, intensive skilled nursing/medical management, long-term care, hospice/palliative care, and inpatient respite stay.

The four neighborhoods include:

Eagle’s Cove: 60-bed neighborhood for veterans who need long-term care. Opportunities to answer consults, conduct short-term and long-term psychotherapy, complete neuropsychological testing and capacity evaluations, write reports, implement behavioral interventions and behavioral contracts, and facilitate psychoeducational or psychotherapeutic groups (e.g., Meaning-Centered Psychotherapy Group).

Camp Dignity: 60-bed neighborhood for veterans with advanced dementia and psychiatric disorders. Opportunity to do STAR-VA Behavior Interventions, Montessori Groups, staff support and education, neuropsychological testing and report writing.

Patriot’s Place: 60-bed neighborhood for sub-acute medicine and rehab. Opportunities to answer consults, short-term, behavioral health groups, neuropsychological testing and report writing, behavioral interventions and behavioral contracts.
Serenity Place: 20-bed hospice and palliative care neighborhood. Usually long-term hospice and palliative care from 1 month and beyond. Opportunities to answer consults, short-term and long-term psychotherapy, family therapy, and bereavement counseling.

**Culture Transformation at the Lake City CLC:** Resident-directed care that transforms the long-term care medical model to one that nurtures the human spirit, as well as meeting medical needs. Culture Change is not a finite destination, but a work in progress, always evolving to meet the needs of the residents. Our goal is creating a home rather than an institution, and improving quality of life rather than just quantity of life.

**Overall Goals of Culture Change are:**
1. **Restore** control over daily living to residents, respecting the right of residents to make their own decisions
2. **Involve** all levels of staff in the care process, honoring those who work most closely with residents
3. **Include** families and friends in a comprehensive team building approach to care
4. **Provide** a familiar and hospitable environment, a supportive workplace and responsive, individualized care practices that focus on the needs and preferences of people

Psychology has an essential role in Culture Transformation within the CLC, including leading monthly Quality of Life meetings, in which culture-change ideas are brainstormed, specific goals are developed, and progress is discussed. Exciting culture-transformation successes include establishing a buffet-style lunch rather than serving veterans trays in their rooms, initiating Montessori-inspired engagement, implementing Music & Memory programming for veterans with dementia, utilizing “Do you recall” videos, starting a monthly CLC newsletter, modifying medical and nursing practices to reduce unnecessary blood draws and care tasks, and planning special meals, holiday celebrations, gatherings, and events (e.g., senior prom).

**CHARACTERISTICS OF BOTH ROTATIONS**

**Interdisciplinary Teams:** An integral part of both geropsychology rotations is participation as a member of an interdisciplinary treatment team, which includes representatives from Nursing, Medicine, Social Work, Physical Therapy, Dietetics, Chaplain services, and Pharmacy. Interns will attend interdisciplinary didactic rounds and care plan meetings. Psychology provides consultation for referral sources with services ranging from evaluation to behavioral management or psychotherapy. There are also opportunities to work with family members, caregivers, and staff members.

**Veteran Diversity:** Veterans receiving care in geropsychology settings are heterogeneous in terms of their:
- a) ethnicity,
- b) age (increase in referrals for veterans in their 50s and 60s)
- c) cognitive abilities (cognitively intact, mild to major neurocognitive disorders)
- d) medical conditions (heart conditions, respiratory conditions, diabetes, kidney disease, obesity, amputations, recent surgical procedures, wounds, infections)
- e) lifestyle (rural, unusual living arrangements, chronic substance abuse)
- f) presenting problems (adjustment to medical conditions or functional changes, depression, anxiety, sleeping problems, grief, chronic pain, SMI, relational problems)

With our diverse population, interns can tailor the training experience to their interests and training goals.

**Opportunities:** Depending on the internship position (Geropsychology Track or General) and selected Geropsychology rotations, interns who complete Geropsychology training will have the opportunity to:
- Conduct initial assessments of new admissions.
- Select, administer, score, and interpret tests appropriate for geriatric populations.
- Conduct capacity assessments and write reports.
- Conduct behavioral analysis using STAR-VA and develop a behavior management plan.
• Perform evaluations of dementia and age-related cognitive decline, becoming familiar with the prevailing diagnostic nomenclature and specific diagnostic criteria.
• Determine, with the supervising psychologist, the residents to be followed for psychotherapy and work closely with the interdisciplinary team in accomplishing therapeutic goals.
• Conceptualize cases for treatment planning and attainment of therapeutic goals.
• Establish rapport and maintain a therapeutic alliance with older adults in individual or group psychotherapy.
• Gain factual and experiential information about certain life events that typically occur in later life.
• Understand aging individuals in the context of social structures, as social contexts define and shape the lives of older people.
• Utilize specific techniques for working with the elderly who experience emotional suffering and dysfunction secondary to dementia.
• Gain an appreciation for the medical problems experienced by the elderly and the effects these illnesses have on personality, emotion, and behavior.
• Gain an understanding of the social issues impacting the elderly in their daily lives, especially the issues of poverty, race, and gender.
• Contribute to culture transformation and quality of life efforts.

**ROTATION GOALS AND OBJECTIVES**

(1) **Assessment and Diagnostic Competency**: To broaden the intern’s development of interviewing and assessment skills, utilizing the psychodiagnostic interview and neurocognitive screening to provide an initial assessment and treatment plan.
  • Begin rotation by participation on clinical rounds and team meetings with the supervisor.
  • Observe clinical interviews conducted by the supervisor, prior to assuming the clinical responsibility for the intakes or consultations.
  • Learn how to evaluate consultations (i.e., what the problem is that may be underlying a consult but unstated) by discussing each consult with the supervisor and, if possible, with the referral source.
  • Perform at least 5 intake interviews.
  • Select, administer, score, and accurately interpret tests appropriate for geriatric patients.

(2) **Intervention Competency**: To develop intern’s competency in envisioning and then selecting from a wide variety of treatment modalities from behavioral management to traditional psychotherapy based on the needs and competency of the individual patients.
  • Develop a treatment plan tailored to the individual patient’s needs.
  • Develop competency in planning at least one behavioral intervention.
  • Develop competency in providing short-term psychotherapy for at least 3 clients.
  • Provide couples therapy or family counseling as needed.
  • Professionally and appropriately consult and communicate with an interdisciplinary team.
  • Attend weekly team meetings and walking rounds.
  • Within the team meeting, discuss individual assessment of patients and work with team to develop an overall plan.
  • Develop brief and effective writing skills for assessments and progress notes.
  • For consultations, give succinct and effective feedback to referral source.
  • Participate in weekly supervision.

(3) **Professional and Ethical Behavior**: To enhance intern's ability to consider ethical issues and to make professional and ethical decisions in their work.
  • Discuss ethical dilemmas, including dying with dignity, DNR declarations, Advanced Directives, the provision of palliative care.
  • Discuss the right to refuse treatment.
  • Identify and appropriately address ethical challenges faced by psychologists in a geriatric residential setting, including confidentiality and capacity.
(4) **Human Diversity**: To promote intern’s knowledge of and sensitivity to issues of human diversity and cultural differences.

- Discuss ethnicity, culture, and sexual diversity as it relates to the treatment of patients/residents.
- Discuss diversity issues in supervision as it relates to patient care.
- Identify age-related diversity factors, such as cohort-based differences in experiences, norms, and values.
- Work with diverse patients and staff and discuss related issues in supervision.
- Engage in ongoing discussion of respecting and working within individual and cultural differences.

(5) **Practitioner-Scholar Model**: To promote the intern’s ability to seek out and to apply both new and previous knowledge about the lives of the elderly and how that relates to their specialized care.

- Read and discuss at least two recommended readings from supervisor and apply the knowledge to working with elderly clients.
- Discuss with supervisor and other team members the effect of long-term and chronic illness on the elderly.
- Appreciate the effect of common medications on the elderly.
- Meet with supervisor and other geriatric trainees to share and discuss scientific articles.
- The GRECC intern will present at a GRECC Friday Noon Conference.
- The GRECC intern will present at the annual GRECC Poster Day.

**The Residence at the HONOR Center**

*Supervisory Psychologist: Julia Owen-Shoal, Psy.D.*

The Residence at the HONOR Center is a 45 bed residential treatment program for homeless veterans with a variety of medical, psychological, and/or substance abuse problems. Our staff is dedicated to a Recovery Model treatment approach which focuses on hope, compassion, empowerment, responsibility, and veteran-directed care. The rotation offers ample opportunities in the areas of medical psychology, trauma, substance use disorders, and serious mental illness. Trainees may focus their work broadly on treating this population as a whole or they may choose to focus their work more specifically on a particular sub-population, due to either pre-existing interest or professional experience with this population or due to a desire for professional growth and to gain experience with a less familiar population. This rotation caters to individuals who have interests in clinical program development, psychological assessment, clinical interventions (including Evidenced Based Treatments) and a holistic approach to treatment conceptualization. Trainees would serve as part of a multidisciplinary team which works to respond to the multifaceted needs of the residential community. The role of psychology involves providing individual therapy, group therapy, assessment, and team consultation/leadership. Opportunities may also be available to shadow other disciplines to learn more about their roles and work within the team.

Trainees who complete this rotation will be able to:

- Demonstrate an ability to contribute to the treatment of persons struggling with homelessness in addition to medical, psychological, and/or substance use disorders.
- Determine appropriate assessment tools and then administer, interpret, and follow through on psychological testing to aid in diagnostic clarification and treatment planning. Standard assessment tools include self-report measures, personality testing, and neuropsychological testing.
- Utilize assessment tools to monitor symptoms and treatment outcomes during the course of treatment.
- Provide individual and group therapy to a complex population of veterans in residential treatment, including evidenced based therapies.
- Develop a time limited group therapy protocol based on personal interests or strengths and/or the needs of the community.
• Demonstrate knowledge of the Recovery Model and be able to apply those principles to clinical interventions and consultation
• Work collaboratively and in a leadership role with a multidisciplinary treatment team

**Inpatient Psychiatry**

*Supervisory Psychologists: Sara Civetti, Psy.D. Gavin Shoal, Ph.D. & Heather Tree, Ph.D.*

This rotation offers interns the opportunity to participate in the evaluation and treatment of patients with severe mental disorders on the inpatient psychiatric unit at the Gainesville VA. This setting provides training experiences with Veterans suffering from acute psychological disturbances and substance use concerns. Trainees will spend three days per week on the inpatient unit and will function as part of an interdisciplinary team. Interns will conduct psychological and neuropsychological assessments which include diagnostic interviews, personality tests, and cognitive evaluations. They will also have the opportunity to participate in a variety of treatment modalities, including individual, group, and family therapy. The inpatient unit is a vibrant interdisciplinary team setting, in which psychologists are highly valued team members. Specific training opportunities for this rotation are described below.

**Inpatient Unit**

On the inpatient unit, the intern works with patients in need of stabilization during a crisis or decompensation, with typical diagnoses including schizophrenia, bipolar disorder, major depression, and posttraumatic stress disorder (PTSD), and with typical clinical problems involving acute psychoses, suicidality, homicidality, and comorbid substance use disorders. In this setting, the time frame for assessment and treatment of a patient is almost always short term (i.e., approximately 1-2 weeks). In addition to diagnostic and assessment opportunities, the intern will have the opportunity to participate in brief, solution-focused individual interventions that include motivational, skills-based, or psychoeducational evidence-based treatments, such as Motivational Interviewing for substance use disorders and components of evidence-based group therapy interventions like Life Skills Training for severe mental illness, as well as Cognitive Behavioral Therapy, Acceptance and Commitment Therapy, and Dialectical Behavior Therapy Skills Training for mood and personality disorders. Interns may also participate in a 4-week, transitional, skills-based support group for Veterans discharging from the inpatient unit that is designed to serve as a warm handoff and clinical bridging intervention during the critical time following discharge from an inpatient hospitalization. In addition, interns will have the opportunity to participate in neuropsychological assessments of cognitive dysfunction related to psychiatric illness, as well as of a wide range of neurological conditions. Interns will also participate in a cognitive training group experience that educates veterans about cognitive dysfunction typical in psychiatric illness and that teaches compensatory strategies in the areas of verbal learning/memory, prospective memory, attention/concentration, and executive functioning. Finally, there are multiple opportunities to participate in program development and evaluation.

**Structured Learning Experiences**

The internship program has wide array of seminars that are offered. Additionally, our Psychology Service is an approved APA CE provider; thus, many of the seminars and case conferences are eligible for CE credit. Because of the the proximity of The University of Florida (UF) and other VA's in the state, there is an ongoing menu of workshops, presentations, and seminars that are offered throughout the year at a variety of venues, such as our VA, UF, and other VA's both in person and by teleconference. Interns are welcome to use Authorized Absence (AA) to attend workshops off-site.

The content of our seminars and CE's fall into a number of broad areas that include but are not limited to: the application of theory and science to the professional delivery of psychological services; professional conduct and ethics; professional development; standards for providers of psychological services; cultural and individual diversity; a variety of evidence based interventions; principles of psychotherapy; supervision; crisis management; and job/fellowship search. Our CE series includes quarterly Diversity brown-bag luncheon meetings. Interns contribute to the selection of presentation topics each year as
they are asked to provide input into specific topics in which they have an interest and these requests are accomodated to the best of our ability.

Interns are required to develop and present three times during the course of the year – with their final presentation being a Case Conference that is included as part of our CE series.

**Requirements for Completion**

Interns are expected to abide by the APA ethical principles and relevant Florida Rules and Laws. Interns are expected to achieve minimal levels of achievement in all competency areas for each rotation. Specifically, interns are required to receive ratings of 3 (Able to perform with moderate supervision for clinical and administrative functions) for the first rotation, 4 (Able to function with minimal supervision for clinical and administrative functions) for the second rotation, and 5 (Able to enter the field as a postdoctoral fellow) for the third rotation. These ratings demonstrate that interns are performing in a manner consistent with their current level of training. Evaluation forms are based on the competency areas identified above and ensure that we are measuring performance in areas identified as being core to our training program. Supervisors complete mid-rotation evaluations for each intern to review progress toward the required level of achievement. The formal evaluation of intern performance occurs after each 4 month rotation and consists of evaluative input from supervisors and the Director of Training. In addition, interns have the opportunity to provide their evaluation of the rotation experiences and supervisors at the conclusion of each rotation. We encourage and model ongoing communication and informal evaluation of interns and of our training program throughout each rotation.

**Facility and Training Resources**

The North Florida/South Georgia Veterans Health System Psychology Internship Program has a number of training resources available both intramurally and through the auspices of the University of Florida. Psychology Service has four full-time administrative positions to assist in providing clerical and technical support to Psychology Service and the internship program. All interns have access to office space where they see patients. Each office has a telephone, pager, digital recorder, and an individual Windows-based personal computer for in-office use.

Both the Lake City and the Gainesville VA Medical Centers maintain their own professional libraries, which are open to the interns, as is the 220,000 volume medical library at the J. Hillis Miller Health Center, which receives 2,000 periodicals. The University of Florida's libraries contain a total of 2.6 million bound volumes, which are available for reference. Literature searches and regional interlibrary loan services are also available through the VA medical library. Both audiotape and videotape capabilities are available through Psychology Service and the Medical Media Service. A videotape and audiotape library is also maintained. Most commonly used intelligence, personality, achievement, vocational, and neuropsychological tests are available in our test file. Some are also available in an automated administration and interpretation package. Windows-based computers with word processing, database, and statistical software are available. A computerized patient database permits patient scheduling, as well as retrieval of medical and biographic information.

**Administrative Policies and Procedures**

**Stipend, Hours, and Leave**

The internship is full-time for a year beginning the first pay period in July and ending the last week in June or the closest work day the following year. Interns are entitled to 10 Federal holidays and earn sick leave and vacations days at a rate of four hours each per two-week pay period. Interns may use Authorized Absence (AA) for their dissertation defense. Additionally, interns are able to utilize AA for workshops and presentations with advanced supervisory approval (a total of 5 days of AA will be considered during the training year). Interns with whom we match are encouraged to look into any specific State requirements for hours required on internship. Technically, our internship is a 2080 hour internship – but these hours
do not take leave into consideration (104 hours of Sick Leave, 104 hours of Annual Leave, 80 hours of Federal Holidays, and 40 hours of Authorized Absence). If a State in which you are interested in becoming licensed has specific hour requirements for internship, interns are responsible for ensuring they do not take more leave that would allow them to become license eligible.

Some interns elect to work more than 40 hours; however, if the intern's supervisor is not on site, the intern may not engage in any clinical activities. The intern may, instead, write reports, do professional readings, and/or work on their dissertations while at the medical center. Unfortunately, because of VA policy, interns may not earn compensatory time or overtime for working more than 40 hours in a given work week. Interns also may not leave the internship before June 30. Leaving prior to June 30 will result in the intern not receiving the entire stipend amount and may prevent us from being able to certify that the intern completed his/her internship.

VA Headquarters in Washington, DC, notifies us in January each year of the number of intern positions we will receive for the following internship year. For the current training year, we received six full-time positions, including one designated for the geriatric emphasis. We expect to receive a similar budget for next year. At the time of the update of this brochure, the current stipend is $26,166 per year. Federal income tax and FICA (Social Security) are withheld from interns’ checks. The United States Government covers interns for malpractice under the Federal Tort Claims Act.

**Training Staff**

**Chief**  
**GEORGE SHORTER, PH.D.**  
Auburn University, 2001  
Clinical psychology; dual-diagnosis; addictive disorders

**Assistant Chief**  
**JENNIFER W. ADKINS, PH.D.**  
Auburn University  
Behavioral family therapy; health psychology; OCD; PTSD

**Director of Training**  
**JEFFREY BATES, PH.D.**  
University of Georgia, 2003  
Assessment, Personality, Antisocial Personality Disorder, Forensic Psychology, Suicide Prevention

**Training Supervisors**  
**CARRIE AMBROSE, PH.D.**  
University of Mississippi, 2013  
Geropsychology, Behavioral Health, Residential Long-Term Care

**JOHN AUERBACH, PH.D.**  
State University of New York at Buffalo, 1988  
Attachment theory, intersubjectivity theory, relational approaches to psychotherapy, PTSD

**JASON DEMERY, PH.D., ABPP-CN**  
University of Florida, 2004  
Relationship between Serum Biomarkers of brain injury severity and neuropsychological outcome, Neuropsychological outcome following traumatic subarachnoid hemorrhage, The neuropsychology of domestic murder.
**SARA CIVETTI, PSY.D.**
Florida Institute of Technology, 2014
Substance Use Disorders, SMI, Personality Disorders

**CHRISTIAN DOW, PH.D.**
Rosalind Franklin University of Medicine, 2007
Cognitive patterns in Epilepsy and pseudoseizures; Dementia; TBI

**ELIZABETH DIZNEY, PSY.D.**
Forest Institute of Professional Psychology, 2001
Eating disorders and obesity, food addiction, personality disorders

**JULIUS GYLYS, PH.D.**
Ohio University, 2000
Primary care clinical and health psychology; smoking cessation; rural behavioral health; interpersonal psychotherapy

**ERICA HOFFMANN, Ph.D.**
Bowling Green State University, 2012
Health behaviors, weight management, Motivational Interviewing

**THOMAS HUNDERSMARCK, PH.D.**
Temple University, 1991
PTSD; personality disorders; family and couples therapy; substance abuse disorders

**TIMOTHY KETTerson, PH.D.**
University at Albany, State University of New York, 2000
Medical psychology, Primary Care Behavioral Health, Geropsychology

**KEVIN M. LANCER, PH.D.**
University of Nevada, Las Vegas, 2006
Primary care clinical and health psychology; psychoneuroimmunology; geropsychology; psychotherapy; performance enhancement

**VALERIE LAROCco, PH.D.**
University of Indianapolis, 2009
PTSD, Substance Use Disorders, Chronic Pain

**WANDAMARIA LOPEZ, PH.D.**
St. Louis University, 1990
Clinical psychology; PTSD; domestic violence; personality disorders; military mental health; individual, family and group psychotherapy

**MERLE MILLER, PH.D.**
University of Oklahoma, 2008
Geropsychology, Behavioral Management related to dementia, Staff empowerment and team building, Culture Transformation

**CARLY OSTROM, PH.D.**
Gallaudet University, 2014
Geropsychology, Deafness, American Sign Language, (3) Behaviorism, (4) Strengths-based approaches/compensatory strategies
JULIA OWEN-SHOAL, PSY.D
*Florida Institute of Psychology, 2006*
PTSD; Substance Use Disorders, Health Psychology, Recovery Model, Assessment and outcome measures

JASON PICKREN, PSY.D.
Nova Southeastern University, 2007
Substance Use Disorders, Recovery Model

KHALIL SAKALLA, PH.D.
University of North Dakota--Grand Forks, 2004
Geropsychology; health psychology; Mental Health Clinic

KIMBERLY SHAW, PH.D.
*University of Miami, 1989*
Clinical/Research Interests: Interpersonal Neurobiology, Medical Traumatic Stress, Late-Onset Stress Symptomatology  Health Psychology; Behavioral Health; Couples and Family Interventions; Geropsychology; Palliative Care

GAVIN SHOAL, PH.D.
University of Kentucky, 2005
Substance use disorders; substance abuse etiology; PTSD; health psychology

VALERIE SHORTER, PH.D.
Ohio University, 1999
Health psychology; primary care psychology; rehabilitation psychology

MICHELLE SMITH, PH.D.
Jackson State University, 2013
Clinical Health/Medical Psychology, Chronic Pain Management, Health Disparities and Barriers to Physical and Mental Healthcare Utilization

CHRISTOPHER N. SOZDA, PH.D.
University of Florida, 2013
Dementia, Stroke, Movement Disorders, TBI, ADHD/LD

HEATHER TREE, PH.D.
University of Kansas, 2009
mTBI, Multiple Sclerosis, Neuropsychological Assessment practices

LISA WATSON, PSY.D., MPH
Georgia Southern University, 2016
Chronic Disease Prevention, Treatment of Grief, Cultural Influences on Health

Clerical Staff

OTILIA TORRES-GARCIA
Secretary

JACK MCKENZIE
Program Support Clerk, PCT
Trainees

2017-2018 Internship Class

Colorado State University
Florida Institute of Technology
Florida State University
Florida State University
The Virginia Consortium Program in Clinical Psychology
Regent University

2016-2017 Internship Class

University of Northern Colorado
Nova Southeastern University
University of Florida
University of Kentucky
University of Florida
Florida Institute of Technology

2015-2016 Internship Class

University of Alabama
Nova Southeastern University
University of Central Florida
Spalding University
Florida Institute of Technology
Georgia Southern University

2014-2015 Internship Class

Wichita State University
Regent University
University of Georgia
University of Tennessee
Texas Tech University
Jackson State University

2013-2014 Internship Class

University of Alabama
Alliant University
Gallaudet University
University of Kansas
Pacific Graduate School of Psychology
Regent University
2012-2013 Internship Class

University Alabama at Birmingham
University of Memphis
Jackson State University
University of Kentucky

2011-2012 Internship Class

University of Florida
Nova Southeastern University
Argosy University, Atlanta
Florida Institute of Technology

2010-2011 Internship Class

Clark University
Florida Institute of Technology
University of Nevada, Reno
Tennessee State University

2009-2010 Internship Class

Nova Southeastern University
University of Central Florida
University of North Texas
Virginia Consortium Program in Clinical Psychology

2008-2009 Internship Class

University of Florida
University of Louisville
University of Alabama at Tuscaloosa

2007-2008 Internship Class

Argosy University, Phoenix
Fielding Institute
Carlos Albizu University
University of Oklahoma

2006-2007 Internship Class

West Virginia University
Nova Southeastern University
Indiana State University
Argosy University, Phoenix

2005-2006 Internship Class

Florida Institute of Technology
Duke University
Texas Tech University
Nova Southeastern University
Local Information

The North Florida/South Georgia Veterans Health System is headquartered at the Malcom Randall VA Medical Center in Gainesville and is located adjacent to the University of Florida, an institution of more than 35,000 students.

The North Florida/South Georgia Veterans Health System is affiliated with the J. Hillis Miller Health Center at the University of Florida, located directly across the street. This complex consists of the Shands Teaching Hospital and the Colleges of Dentistry, Health Professions, Medicine, Nursing, Pharmacy, and Veterinary Medicine. All VA programs are administered by the Director, Associate Director, and Chief of Staff and are coordinated jointly with the University of Florida's Vice President for Health Affairs and the appropriate colleges and faculty.

The Malcom Randall VA Medical Center is situated among the gentle hills of North Central Florida in a scenic, tree-canopied community of 100,000 residents. Located midway between the Atlantic Ocean and the Gulf of Mexico, Gainesville has a relatively mild climate suitable for year-round enjoyment of sports and its varied lakes and recreation facilities. Interestingly, Gainesville has more bicycle paths than any other city in the United States. Gainesville is serviced by air, bus, and train lines. Gulf- and Atlantic-coast attractions are within a two-hour drive of the medical center. These include Orlando attractions, such as Disney World, Universal Studios, and Sea World. Also nearby are Busch Gardens and Cypress Gardens. The larger metropolitan areas of Tampa, St. Petersburg, Orlando, and Jacksonville are equally accessible.
Culturally, Gainesville is enhanced by the University of Florida and the Center for the Performing Arts. Entertainers who have performed in Gainesville recently have run the gamut from Matchbox Twenty, Lenny Kravitz, Smashmouth, and the Rolling Stones to Ray Romano, Elton John, and Bill Cosby to nationally renowned symphonies and Broadway plays. Gainesville also supports a nationally known art festival, a community band, a civic chorus, the University symphony, and dance groups. The Florida Museum of Natural History, the Samuel P. Harn Museum of Art, and a number of excellent theater groups which includes the Hippodrome State Theater provide considerable diversity.

Additional information regarding eligibility requirements (with hyperlinks)

- 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](https://www.sss.gov/Registration/Why-Register/Benefits-and-Penalties)

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

(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.