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**Accredited by the  
American Psychological Association**

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## [INTRODUCTION](#)

Welcome to our internship brochure! We hope this document will answer your questions about what we have to offer. Our program, now in its 21st year, adheres to a generalist model and provides services to veterans (and their families) in a rural, predominately Appalachian culture.

## [PSYCHOLOGY SETTING](#)

The James H. Quillen VAMC Mental Health Service at Mountain Home provides an APA-accredited predoctoral internship. The facility employs 35 doctoral psychologists who serve patients in the out-patient clinics, acute-care hospital, domiciliary, and Community Living Center (CLC). Each of the 35 psychologists has a primary assignment to a specific program, such as Primary Care, Homeless Veterans Program, Geropsychology, Substance Use Disorders Program, Posttraumatic Stress Program, etc. Of the 35, 20 Psychologists are currently faculty members in our Internship Program.

We are especially proud to note that 10 Mountain Home internship graduates are employed on our staff of 35 psychologists. Also, 6 of the 35 have been at Mountain Home for 20 years or more, providing professional continuity, institutional memory, medical center leadership, and mature mentors for newer staff members.

Nearly all psychologists are involved in other pursuits like teaching, administrative duties, program coordination, or research. Monthly training sessions and scheduled business meetings help to promote a professional solidarity among this large and decentralized psychology staff. Interns are viewed as junior colleagues, and issues of professional identity development and work-life balance are at the forefront of the internship year.

Located on a park-like campus of more than 200 acres in Johnson City, Tennessee, the [James H. Quillen Veterans Affairs Medical Center](#) (VAMC) at Mountain Home is the primary medical and surgical teaching hospital for the [James H. Quillen College of Medicine](#) at [East Tennessee State University](#) (ETSU). Physician residency training programs in surgery, medicine, family medicine and psychiatry are actively involved in health care delivery, as are ETSU training programs in nursing and other health care professions. The various clinical departments in the hospital have long track records of commitment to training and to the promotion of an atmosphere conducive to interdisciplinary exchange and development. Built at the turn of the century, Mountain Home has been designated by the National Park Service as a National Historic Landmark. Only three other national homes for disabled volunteer soldiers have been awarded this distinction. The medical center won the Carey Award in 2013, meaning that we were identified as one of the top two VAMCs in the nation.

The Psychology Service was fully involved when this VA Medical Center affiliated with the College of Medicine. This involvement remains strong. Many psychologists hold clinical faculty

appointments with one or more departments of the medical school. Our service also has arrangements with the Child Consultation - ETSU Center of Excellence for Children in State Custody and the medical school's Family Medicine Clinic. These arrangements allow additional training opportunities in a non-VA setting.

## [ACCREDITATION STATUS](#)

The predoctoral internship at the Mountain Home, James H. Quillen VA Medical Center (Johnson City, TN) is fully accredited by the Commission on Accreditation (CoA) of the American Psychological Association (APA). We have been fully accredited since August 23, 1996, shortly after our internship program was first established. We were accredited for seven years in November 2015. Our next site visit will be held in 2022.

As an APA-accredited internship program, the faculty follows APA standards regarding prerequisites for predoctoral internship training. To address questions or concerns about the accreditation status of the internship program, applicants may contact the Committee on Accreditation at the following address:

Office of Program Consultation and Accreditation  
American Psychological Association  
750 First Street, NE Washington, DC 20002-4242  
Telephone: 202-336-5979  
Fax: 202-336-5978  
<http://www.apa.org/ed/accreditation>  
Email: [apaaccred@apa.org](mailto:apaaccred@apa.org)

## [PROGRAM STRUCTURE](#)

The internship program is administered through the Psychology section at James H. Quillen VAMC. A Training Committee, chaired by the Psychology Training Director, oversees admissions and evaluation procedures, training policy, rotation selections, and training goals for interns. The Committee meets monthly to execute administrative duties, set policy, monitor program developments, and facilitate a smooth and effective internship of the highest quality possible for each intern. General meetings of the Committee are open to interns.

The internship requires a minimum of 2,080 training hours, carries a stipend of \$24,014, and comprises 1 calendar year, beginning the week of the July 4th holiday. Other benefits include: health insurance coverage, paid vacation and sick leave, all federal holidays off, and 40 hours of paid professional leave. To provide a well-integrated model of predoctoral internship training, our program features:

1. The rotational system consists of three major rotations, each of which lasts four months. Interns work about three days a week in their major rotations.

2. Concurrently, interns select two minor rotations, lasting six months each. Interns work one day per week in their minor rotations.
3. Three non-VA, off-site rotations are available, one of which focuses on children.
4. Interns are given private offices, close to one another and to several supervisors.
5. Peer supervision (also known as “intern bonding time”) is from 3:30-4:30 pm the first Friday of the month, with other times available at the discretion of the interns.
6. Specific rotations are chosen by each intern, in conjunction with recommendations from internship faculty and the parent university. The most weight is given to interns’ preferences, with the additional goal of ensuring that interns round out any previously-missed major areas of practice. The faculty believe that interns should have experience with residential, seriously mentally ill, older, and substance using populations prior to graduation, in order to round out generalist training. Additionally, interns select an individual psychotherapy supervisor to work with for the entire year as they see longer-term therapy cases. This supervisor also functions as a professional mentor.
7. A year-long seminar series that combines didactic and clinical case material. Attendance is required.
8. Opportunities are made available for professional and personal growth via such activities as teaching, workshop presentations, supervision of a practicum student, research, and participation in professional conferences.
9. For a \$5 key fee for the year, interns have access to the employee gym.
10. Interns are encouraged to participate in activities held at JHQVAMC, including participation in our Multicultural Diversity Committee.

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## Major Rotations

### Domiciliary Care for Homeless Veterans

**Supervisor: Dr. Jerry Buchanan**

This program's mission is to address homelessness, maximize independent living, and enhance the quality of veterans' lives. The clinic offers assessment and intervention services for veterans who are homeless or at risk for becoming homeless. A multidisciplinary treatment team addresses physical and mental health, substance abuse, vocational, social, and housing needs related to homelessness. The psychologist's role on this team includes the provision of psychological assessment, consultation services, crisis intervention, group psychotherapy, program evaluation, and program development. For working with the homeless veteran population, the program relies heavily on group modalities that focus on the development of cognitive behavioral and problem solving skills. Currently, veterans complete a Directions Group, a Moving Forward Group, and Thinking Better Group, Finance Group, and a Transitions Group during their participation in the residential treatment program. The Moving Forward Group is an empirically based treatment intervention. Interns on this rotation should expect to be involved in the group treatment program. They may also conduct psychological assessments, provide individual psychotherapy, participate in staff meetings, and observe community efforts to address homeless issues.

This rotation can be selected as either a major or a minor rotation.

### Geropsychology Program

**Supervisor: Dr. Jacqueline Kracker**

The Geropsychology program is centered at the Community Living Center (CLC). The CLC is a 66-72 bed facility that treats veterans for long term care, short stay skilled nursing, short stay rehab, & hospice (hospice/palliative care team). You will have the opportunity to work with older veterans and issues of aging, and work with veterans of all ages who have complex health problems. Rotation activities include therapy for veterans and family members, a new Tai Chi group under development, dementia care through the STAR-VA program for dementia behaviors, improving the CLC environment of care, cognitive and other assessments (as opportunities occur), interdisciplinary work, staff education, and staff support. There may be opportunities to shadow other disciplines in providing care for older veterans. This rotation can be selected as a major or a minor.

### Post-Traumatic Stress Program (PTSP)

**Supervisors: Drs. Elizabeth Fitzgerald and Natalie Pickering**

The Post-Traumatic Stress Program (PTSP) is an outpatient specialty clinic devoted to the evaluation and treatment of posttraumatic stress disorder. The PTSP comprises a small, well-integrated, interdisciplinary staff

providing direct care to veterans and significant others. Program staff also provide consultation to other programs within the VAMC, as well as to Vet Centers in Johnson City and Knoxville.

Interns participating with the PTSP team can expect to learn more about the wide range of PTSD-related clinical presentations by conducting PTSD intake/screening interviews, utilizing PTSD assessment measures, and writing intake reports. Interns will also be given the opportunity to learn Evidence Based Treatments (e.g. Cognitive Processing Therapy) by co-facilitating group CPT-C and by utilizing this modality with individual patients. Interns may have the opportunity to observe and receive training in other approved modalities (i.e. Prolonged Exposure) pending patient needs represented in the clinic at that time. Other psychotherapy group facilitation opportunities are available, such as Moral Injury Group (co-facilitated with chaplaincy), Treatment Group (psychoeducation), Partners Group (for partners of veterans diagnosed with PTSD), Anger Management for PTSD, and PTSD and Chronic Pain. Interns are invited to participate in daily PTSP interdisciplinary (psychiatrist, nurse practitioner, nurse, social worker, psychologists) team meetings, and all team members are available for further consultation within their specializations. Opportunities for participation may vary, pending presented clinic/patient needs at time of rotation.

### **Primary Care- Mental Health Integration (PC-MHI)**

**Supervisors: Drs. Erin Armour, Kat Barteck, Bill Finger, Amy Karbasi and Jessica Turner**

PCMHI clinicians and interns provide immediate access to clinical assessment and appropriate collaborative care and treatment for those experiencing mental health symptoms and behavioral health issues utilizing a co-located, same-day model of care. PCMHI reduces the development of more severe mental health symptoms through collaborative, interdisciplinary consultation and early identification of subclinical conditions. Interns on the PCMHI rotation function as co-located, integrated members of primary care teams. They complete brief functional interviews and provide feedback directly to the referring provider, triage and refer to appropriate specialty mental health clinics, provide individual short-term problem/solution-focused interventions targeted to reduce symptoms and improve health and quality of life, and provide longitudinal follow-up using structured, measurement-based assessment of progress utilizing the Behavioral Health Lab (BHL).

### **Psychology Consultation-Liaison Program**

**Supervisors: Drs. Christine Adler and Robert Hughes**

Psychology Consultation-Liaison is available as a major rotation with an emphasis in Oncology/Palliative Care (with Dr. Adler) or as a minor rotation in Neuropsychology (with Dr. Robert Hughes.)

Major rotation in C-L: Dr. Christine Adler provides supervision of interns' consultation to the 111-bed hospital, which includes acute, intermediate, and nursing care beds. Dr. Adler specializes in Health Psychology and Palliative Care, and consults with Medical, Extended, Ambulatory, and Palliative Care Clinics. Depending on their area of emphasis, the intern's duties may include a combination of therapy, assessment, and consultation with patients facing serious and/or life-threatening illness, their

families, medical center staff; psychological and behavioral assessment, pre-surgical psychological evaluations, crisis intervention, participation in illness and bereavement support groups, short-term psycho-therapeutic treatment, spiritual exploration, multi-disciplinary treatment, and program planning.

## **Psychosocial Recovery and Treatment Program (PRTP)**

### **Supervisors: Drs. Matthew Dwyer and Stephen Smith**

The Psychosocial Recovery and Treatment Program (PRTP) comprises a team of mental health professionals delivering psychosocial care in a residential setting. The target population is veterans who have been diagnosed with severe and persistent mental illness. The members of the PRTP team include a program coordinator (who is also a psychologist), two psychologists, three social workers, a psychiatric nurse practitioner, a psychiatrist, and a certified peer support specialist. The PRTP team's goal is to help veterans who have severe and persistent mental illness through provision of the following services:

- Frequent supportive contacts within the residential setting
- Psychological assessment, individual therapy, and group therapy
- Social skills training
- Assistance in establishing and reaching their own goals of recovery
- Education about their symptoms and how to seek assistance for them
- Educations about the recovery model, self-advocacy, and peer support
- Effective and proactive management of medications
- Education in use of community resources to maintain a healthy lifestyle
- Connection with as many resources as possible, including financial support, social support, physical support, emotional support, and spiritual support, to reach recovery and rehabilitation goals.

The purpose of these services is to reduce the number and length of psychiatric hospitalizations in patients with severe and persistent mental illnesses. The most frequent diagnoses in the PRTP are as follows: PTSD, bipolar, schizophrenia, schizoaffective disorder, and depression with psychosis.

The intern in the PRTP program will see veterans for psychotherapy and case management services. Supervision is provided in both direct and indirect formats. The intern will participate in groups and receive direct supervision. He or she will see individual patients and tape the sessions for indirect supervision. The intern will be involved in every stage of PRTP program. Additionally, the intern on this rotation can gain experience in the evidence-based treatment modalities of Prolonged Exposure (PE) and Cognitive Processing Therapy (CPT). The intern will work with the PRTP team regarding new referrals received, in order to determine the appropriateness of the referral. The intern and her or his supervisor will meet with the veteran for a screening appointment. The intern will then present the results of the screening to the team to determine admission into the program for the veteran. The intern will assist in developing treatment goals and desired outcomes with the veteran, the veteran's support system, and PRTP treatment team members. The intern will continue to work with the veteran and provide psychotherapy, psychoeducational, and case management services. Some interns will be provided the opportunity to initiate a time- limited psychoeducational group with the more stable veterans. The intern may also be involved in crisis intervention services BUT ONLY WITH SUPERVISION and primarily in an observational

role. It is not unusual for this rotation to have to provide a certification of need to the ER. The intern may observe this process in vivo, including the decision whether someone needs to be committed. Finally, the intern will also be involved in the administrative aspects of program management, patient care, program planning, and staff development. Groups that the intern will be able to observe and co-facilitate are social skills training for schizophrenia, CBT for depression and anxiety, cognitive processing therapy for PTSD, coping skills, and numerous groups devoted to psychosocial recovery from psychiatric illness. This is a highly integrated team who are devoted to the recovery of those with chronic and severe mental illness.

## **Substance Use Disorders Program (SUDP)**

### **Supervisor: Dr. Jerome Cook**

The Substance Use Disorders Program (SUDP) offers comprehensive training for a variety of populations suffering from substance use disorders. It is a multidisciplinary intensive outpatient treatment program for Veterans with substance use disorders. SUDP, under the supervision of Dr. Cook, comprises two segments. Treatment in Segment I is based on empirically supported interventions developed and tested during Project MATCH for the National Institute of Alcohol Abuse and Alcoholism. Cognitive-Behavioral Coping Skills structured group therapy offers treatment based on identification and practice of cognitive and behavioral changes that will facilitate abstinence and sobriety. Twelve-Step Facilitation structured group therapy emphasizes familiarization with twelve-step recovery program principles and participation in Alcoholics Anonymous/Narcotics Anonymous. In addition, group lectures provide information to Veterans on a wide range of alcohol and drug education topics. Segment II begins a transitional aftercare phase in which Veterans continue to address substance abuse issues while integrating a recovery program with work therapy and ongoing individual and/or group psychotherapy. Additional insight-oriented process group interventions are also utilized in this phase of treatment to help Veterans identify the underlying psychological and emotional determinants to their addictive disorders. Intern duties will include group and individual psychotherapy, screening, diagnostic assessments, formal psychological testing batteries, readings/self-study, case consultation, and learning to function as a full interdisciplinary team member in a residential substance abuse treatment environment.

This rotation can be selected as either a major or a minor rotation.

## **Minor Rotations**

### **Behavioral Medicine Electives**

#### **Supervisors: Dr. Myra Elder and/or Drs. Julie Culligan, Shelley Silvers, Chris Adler, Greg Gilliam**

An intern in this rotation will select a set of experiences designed to broaden his or her understanding of how psychologists contribute to various aspects of patient care within a large medical center.

Examples include (but are not limited to):

- Participating in the Health Promotion & Disease Prevention Program, under the direction of Dr. Julie Culligan, Health Behavior Coordinator. Program initiatives include:
  - the MOVE program for weight management and healthy lifestyle choices
  - the Nicotine Reduction program for community based outpatient clinics, via video-conferencing technology
  - during the 2013-2014 internship year, there is the opportunity to work on Dr. Culligan 's women's health/disease prevention grant, which will incorporate mindfulness-based interventions and tai chi
  - the option to learn to run the metabolic resting machines
  - the option to learn health behavior coaching
  - the option to learn the Stanford Chronic Disease Management protocol and attend an intensive, one-week training program on-site in early 2014
- Observing and participating in transplant (Dr. Chris Adler) and bariatric surgery (Dr. Culligan) evaluations.
- Observing and participating in the provision of rural mental health services through the Home Based Primary Care Program with Dr. Greg Gilliam. This will include exposure to the service delivery models of the Community Based Outpatient Clinics (CBOCs) in Southwest Virginia.
- Participating in the Interventional and Behavioral Pain Clinic, with Dr. Shelley Silvers. In addition to consultation/individual therapy experiences, this rotation may include:
  - Learning CBT for Chronic Pain (an evidence based therapy)
  - Participating in multidisciplinary treatment team meetings
  - Learning to conduct spinal cord stimulator treatment evaluations

As part of this rotation, an intern would be able to visit CBOCs, to work with psychologists providing the above services at those locations. Psychologists working in the above areas would provide supervision/oversight for the specific services provided, while Dr. Elder would provide more general supervision regarding the rotation's structure and the impact of the experiences on the intern.

This rotation provides access to clinics and services that are not otherwise available to interns as a formal rotation. It allows them to obtain more information about various roles, assisting with future career directions and increasing marketability.

Evaluation criteria will be tailored to the chosen experiences. Interns can expect to gain increased competency in the areas of consultation-liaison, medical and mental health integration, assessment, and providing psychoeducation to groups.

**[Child Consultation - ETSU Center of Excellence for Children in State Custody \(COE\)](#)**  
**Supervisor: [Dr. Michele Moser](#)**

The ETSU COE is a TennCare grant funded organization that provides consultative and direct services for children with complex physical and mental health needs who are in state custody or at risk of state custody. The COE offers brief consultations, multidisciplinary comprehensive consultation conferences, and interdisciplinary comprehensive assessments for children and adolescents in custody and at risk of custody. The psychologist's role includes: completing comprehensive record reviews; participating in brief consultations to Department of Children's Services Staff (DCS); participating along with the COE child and adolescent psychiatrist in providing comprehensive consultations in the context of a multidisciplinary staffing that may include DCS staff, foster parents, biological parents, school personnel, court personnel, therapeutic services providers, and others; and participating as part of a multi-disciplinary evaluation team performing clinical interviews and targeted psychological assessment procedures as indicated. Interns can expect to be exposed to the complex systems that serve children and participate in the consultative activities of the COE. Additionally, the intern will be exposed to COE multisystem projects that target development of training collaboratives to train frontline service providers with specialized interventions for treatment of trauma and attachment problems in children.

### **Clinical Research– VAMC or ETSU**

#### **Supervisor: As arranged, from faculty listing**

Internship faculty are involved in research programs, in areas like post-traumatic stress, substance abuse, physiologic measures of stress, object relations, suicide, family conflict, psychotherapy outcome, dementia, and geriatric care. Intern duties will vary on this rotation, according to the needs of the given intern and the specific research program. Duties may include literature review, design input, running subjects, data analysis, or drafting articles for journal submission. It is the opinion of the internship faculty that interns should not be tackling new research projects until they have completed research for their dissertations. Therefore, this rotation may become an avenue through which an intern works to complete his or her dissertation research with the support and supervision of a qualified internship faculty member.

### **Compensation and Pension Program**

#### **Supervisors: Drs. Maureen Bibby and Denise Gross**

Compensation and Pension evaluations (C&Ps) are forensic assessments conducted with a veteran in order to determine if he/she has a functional impairment which is : a. interfering with his/her ability to work , b. affecting his/her family/social relationships and c. is related to his/her military service. A C&P examiner also makes recommendations concerning the degree of impairment found. These evaluations are performed with the veteran present, either in the office or through Telemental Health. The examination consists of an interview, review of progress notes, and a review of the veteran's history in his/her Claims File (C-file). This contains the veteran's claim, claim history, military service records and medical records. The intern has an opportunity to see a variety of clients and diagnoses. This minor rotation is an excellent opportunity to hone diagnosing skills as well as learn to write a clear, concise forensic report within a relatively short time period. Dr. Gross has expertise in neuropsychological

forensic assessment. This rotation is especially valuable for interns anticipating a career within the VHA system.

### **Couple and Family Therapy**

#### **Supervisor: Dr. Brian Abbott**

Interns rotating with Dr. Abbott will gain specialized instruction and clinical experience in the provision of couple and family therapy tailored to the unique needs of veterans and their families. The rotation is designed to accommodate interns with varying degrees of prior training in family therapy. Less experienced interns will have an opportunity to observe family sessions before picking up their own cases, whereas more experienced interns will have ample opportunity to work with complex cases. Interns choosing this rotation can expect to receive intensive supervision either through co-therapy or review of recorded sessions. They will learn to conduct a thorough assessment of couple/family functioning that informs case conceptualization and treatment planning. They will learn to think and conceptualize cases from a systemic perspective. Common clinical issues presented by couples/families in this rotation include the following: infidelity, post-deployment readjustment, blended family issues, sexual dysfunction, parenting problems, domestic violence, and family adjustment to medical illness. In particular, interns will gain an appreciation for the complex interplay between individual psychopathology and family functioning and how family therapy can serve as an effective primary and adjunctive treatment for many different types of mental health problems. Dr. Abbott currently serves as a consultant for the implementation of Integrative Behavioral Couple Therapy within the VA system. He is a licensed psychologist with extensive training in couple and family therapy. He currently serves as the Local Evidenced-based Psychotherapy Coordinator at the James H. Quillen VAMC. As such, interns rotating with Dr. Abbott will have the opportunity to learn about the implementation of other evidenced-based therapies throughout the VA. In addition to his activities in couple and family therapy, Dr. Abbott provides treatment of PTSD using Prolonged Exposure (PE) and facilitates groups for depression using Acceptance and Commitment Therapy (ACT).

### **Domiciliary Care for Homeless Veterans**

#### **Supervisor: Dr. Jerry Buchanan**

**Please see rotation description listed under major rotations.**

### **Family Medicine– College of Medicine, ETSU**

#### **Supervisor: Dr. Tom Bishop**

This diverse program offers a wide range of patients and training opportunities within a highly integrated interdisciplinary practice setting. Interns may elect to participate in one or more of the following areas: education, consultation, clinical services, and research. The ETSU Family Medicine Department emphasizes the development of patient-centered clinical interviewing skills. In the context of the overall internship rotation schedule, interns may participate in communication skills workshops for teachers or co-teach these skills to residents and medical students. Other teaching

opportunities include hospital and clinic consultation with medical students, residents, and faculty and small-group facilitation with medical students in a case oriented learning class. Additionally, there are opportunities to teach a short didactic at rounds to medical students and residents. On occasion there might be an opportunity to teach doctoral level psychology students in the ETSU Rural Primary Health Care Doctoral Psychology program. Consultation with medical staff relating psychosocial factors to illness and patient care is a primary focus. Individual psychotherapy is offered using behavioral medicine, cognitive-behavioral, family systems, and hypnotherapy approaches. Interns can expect to participate in both consultation and treatment, with regard to clinical problems such as substance abuse, HIV/AIDS, patient adherence to medical treatment recommendations, pain and stress management, chronic illness, depression, anxiety, grief, and other psychological problems presented by patients within primary care medical settings. Interns will also have the opportunity to participate in group medical visits. The supervisor has the capability to videotape psychotherapy sessions conducted by the intern, so that supervision can be provided in the form of videotape review and feedback. If interns have completed their dissertation research, they may also engage in ongoing research projects.

### **Neuropsychology**

#### **Supervisor: Dr. Robert Hughes**

Minor rotation in C-L: Dr. Robert Hughes, in collaboration with Ms. Linda Arsenault, Licensed Senior Psychological Examiner and Neuropsychology Clinic Coordinator, and with support from Dr. Sloan, leads the Clinical Neuropsychology Program and consults primarily with the Medical Service, Primary Care, Extended Care, and Psychiatry. The majority of consultations occurs with outpatients and encompasses a full range of assessment, consultation and brief interventions with patients (and families) with dementia, traumatic brain injuries, and a variety of neurological, medical, and psychiatric illnesses and co-morbidities.

### **Psychology Program Evaluation**

#### **Supervisors: Various Faculty**

Program evaluation is the application of social research tools that contribute to decisions on installation, continuation, expansion, certification, or moderation of programs (Online Psychology Dictionary). As Dr. Steve McCutcheon stated at the 2016 APPIC Membership Conference, “we [psychologists] are uniquely positioned to use our research training to provide program evaluation data to drive healthcare decisions. Interns have many opportunities to practice this skill, which is highly transferable to future employment. Examples include measuring outcome metrics and medical cost offset, evaluating access barriers, updating policies and program materials, and providing data for continuous quality improvement projects. The supervisor and activity will vary, depending on the program. Interns should select 1-2 programs to focus on during this rotation. Options include: PC-MHI, MOVE, PRTP, and PTSP. Other program options may be available on a case-by-case basis.

## **Spinal Cord Injury Clinic**

**Supervisor: Dr. Erin Armour**

The James H. Quillen Veterans Affairs Medical Center Spinal Cord Injury (SCI) Clinic is an approved support clinic of the tertiary SCI clinic in Augusta, Georgia and is the only Augusta support clinic approved by the National SCI Program to provide complete annual evaluations for veterans with spinal cord injuries. During the Spinal Cord Injury Clinic minor rotation, the psychology intern will function as a member of an inter-disciplinary team, which includes a physician, as well providers from nursing, nutrition, social work, kinesiotherapy, and prosthetics. As part of this inter-disciplinary team, the intern will work directly with other providers to assist veterans with spinal cord injuries, multiple sclerosis, and ALS not only adjust psychologically to their disabilities, but to live the highest possible quality of life with them. The intern will attend weekly team meetings to review and discuss scheduled appointments. The intern will have the opportunity to ask pertinent medical and social work related questions, and shadow Polytrauma and other SCI providers. The intern will also complete 2-5 psychosocial evaluations per week of veterans with spinal cord injuries, multiple sclerosis, and/or ALS; including assessment of history of injury or diagnoses, as well as how the veteran's diagnosis potentially impacts mood, completion of activities of daily living, and/or perceived quality of life. Opportunities to provide individual, marital, family and group therapy will also likely be available, upon veteran request for such psychological services. Finally, through required readings, supervision, and direct patient contact; the intern will have the opportunity to learn about the biculturalism and models of disability; and how a veteran's subscription to these models can influence psychological and functional adjustment to disabilities.

## **Substance Use Disorders Program (SUDP)**

**Supervisor: Dr. Jerome Cook**

**Please see rotation description listed under major rotations.**

## **Supervision – ETSU Behavioral Health and Wellness Clinic**

**Supervisors: Drs. Peggy Cantrell and Jon Webb**

The Behavioral Health and Wellness Clinic is the departmental training clinic for ETSU's APA-accredited doctoral program in clinical psychology. Within this minor rotation, an intern will spend the first several weeks on didactics focusing on an evidence-based supervision model, and then he or she will begin to provide supervision and agency documentation for graduate student therapists. The clinic treats children, adults, and seniors living in Northeast Tennessee. Common presenting problems include: depression, anxiety, trauma exposure, sexual orientation/attraction, identity development, learning problems, and family systems issues. This rotation can be especially valuable for interns who hope to supervise doctoral students and/or interns in their careers. This minor rotation will be offered on Mondays and only for the first six months of the internship year (July-December).

## APPLICATION AND SELECTION PROCESS

Applicants must be U.S. citizens in good standing with and recommended for internship by an APA-accredited Ph.D. or Psy.D. program in clinical or counseling psychology, and they must have completed 3 full years of graduate study leading to the doctorate. The applicant must demonstrate interests and goals that are consistent with the internship program, the ability to apply assessment and intervention knowledge in clinical areas, appropriate ethical conduct, the interpersonal skills necessary for the professional practice of psychology, and sufficient research skills as evidenced by dissertation progress.

The James H. Quillen pre-doctoral psychology internship requires 1,000 hours of supervised clinical experience. Under the category of assessment, the internship looks for a variety of assessment experience that includes traditional objective and projective assessment. Although the faculty would prefer that applicants have exposure to projective assessment, we will consider candidates without this experience. The number of integrated reports expected is based on applicant group averages for prior years.

The faculty strongly prefers applicants who have their dissertation proposal approved by the start of the internship.

The preceding criteria serve as general guidelines for rating applicants and are not fixed rules. Faculty must rely upon their professional judgment in making decisions about intern applicants.

Applications are accepted through November 1. The Quillen VA Medical Center in which our training program resides is an Equal Opportunity Employer; we are committed to ensuring a range of diversity among our training classes, and we select candidates representing different kinds of programs and theoretical orientations, geographic areas, ages, racial and ethnic backgrounds, sexual orientations, disabilities, and life experiences. All things being equal, consideration is given to applicants who identify themselves as veterans, as members of historically underrepresented groups on the basis of racial or ethnic status, as representing diversity on the basis of sexual orientation, or as representing diversity on the basis of disability status. These factors may be indicated on the application, if an applicant wishes to do so.

This internship program participates in the Matching Program administered by National Matching Services Inc. (NMS) on behalf of the Association of Psychology Postdoctoral and Internship Centers (APPIC). Only those applicants who participate in the Match can be matched to our internship program. All applicants must obtain an applicant agreement package from NMS and register for the Match in order to be eligible to match. Applicants can request an applicant agreement package from NMS through their web site at <http://www.natmatch.com/psychint/> or by e-mail at [psychint@natmatch.com](mailto:psychint@natmatch.com).

Applicants may contact NMS at either of the following addresses:

National Matching Services Inc.  
20 Holly Street, Suite 301  
Toronto, Ontario  
Canada, M4S 3B1  
Telephone: (416) 977-3431  
Fax: (416) 977-5020

Or

National Matching Services Inc.  
P.O. Box 1208  
Lewiston, NY 14092-8208  
Telephone: (716) 282-4013  
Fax: (716) 282-0611

Acceptances and notification procedures follow the Association of Psychology Postdoctoral and Internship Centers (APPIC) Match 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. APPIC Match Policies are available on the APPIC web site: <http://www.appic.org>.

For purposes of the Internship Matching Program, the program code number for the James H. Quillen VA Psychology Internship Program is: 156111.

The internship program utilizes the AAPI Online application forms that are available at the APPIC website. Applicants will access the AAPI Online via the "Applicant Portal," which means that they will use their internet browser to create an account, enter information into the various fields of the AAPI, and ultimately submit their completed application to internship sites. Once an applicant has completed all aspects of the application, she/he chooses the "designated" sites to which the application is submitted electronically.

The AAPI Online website is: [http://www.appic.org/match/5\\_3\\_match\\_application.html](http://www.appic.org/match/5_3_match_application.html).  
At that website, full instructions are available for use of the APPIC Online.

## [Application Checklist](#)

Each applicant is required to submit a complete set of application materials, including the following:

1. A completed AAPI application form, including the Academic Program's Verification of Internship Eligibility and Readiness. We do not require any supplemental materials.
2. Curriculum Vitae.
3. Three letters of evaluation from individuals familiar with recent academic and clinical performance.
4. Official transcripts of all graduate training.
5. Faculty will screen applicants for personal interviews. The faculty will then offer, to selected applicants, an opportunity to interview in-person with our faculty and to see our facilities. The latest interview notification date is December 15. Interviews will be scheduled during the months of December and January. An applicant may contact the Psychology Training Director by e-mail or at (423) 979-2893 to inquire about an interview or the status of his or her application. An in-person interview is not required for acceptance into this internship. Telephone interviews with the Psychology Training Director and selected faculty members can also be arranged.

The appointment to an intern position is contingent upon the individual's application being cleared through a national data bank to screen for possible ethical and legal violations and the individual passing a pre-employment physical exam. Interns must pass employment screenings through the Health and Human Services, Office of Inspector General, List of Excluded Individuals and through the National Practitioner Health Care Integrity and Protection Data Bank, as well as a fingerprint check, before their appointment becomes official. Interns must also pass a pre-employment physical completed by a VA hospital before they can begin the internship.

Finally, it is important to note that a Certification of Registration Status, Certification of U.S. Citizenship and Drug Screening are required to become a VA intern. The Federal Government requires that male applicants to VA positions who were born after 12/31/59 must sign a Pre-appointment Certification Statement for Selective Service Registration before they are employed. It is not necessary to submit this form with the application, but if you are selected for this internship and fit the above criteria, you will have to sign it. All interns will have to complete a Certification of Citizenship in the United States prior to beginning the internship. We will not consider applications from anyone who is not currently a U.S. citizen. The VA conducts drug screening exams on randomly selected personnel as well as new employees. Interns are not required to be tested prior to beginning work, but once on staff they are subject to random selection as is other staff.



**Duck Pond at entrance to JHCVAMC Campus**  
Photo by Stephen Smith, Psy.D.

## **Training Model and Program Philosophy**

The Psychology Internship Program adheres to a generalist model of education and training. The internship faculty provides an intensive training experience to predoctoral psychology interns. In all experiential activities in our training program, we promote the development of a strong, professional identity that incorporates critical thinking, ethical practice, multicultural sensitivity, and self-reflectivity. We believe that sound clinical practice develops from an understanding of empirical knowledge and critical, scientific thinking. We want to encourage interns to develop professional attitudes and skills that will enable them to help effectively those whom they serve and to do so in an ethical manner. We desire to promote competency in dealing with issues of individual and cultural diversity. We encourage interns to develop professional skills in self-reflectivity. The essential characteristics of this model involve development of interlocking skills to foster a career-long process of psychological service.

## **Program Goals and Objectives**

We believe this generalist model to be an effective one for training interns and for promoting the advancement of psychology as a profession. The goals of our training program are in keeping with this generalist training orientation. They are as follows:

- Goal 1. Interns will develop the clinical and professional skills to practice psychology competently as a generalist.
- Goal 2. Interns will obtain a diverse range of clinical training experiences to enable them to function competently as generalists.
- Goal 3. Interns will demonstrate competent skills in scientific inquiry, in critical thinking, and in integrating scientific knowledge into current practice situations.
- Goal 4. Interns will develop competent skills in professional behavior and ethical practice.
- Goal 5. Interns will demonstrate professionally competent behavior in dealing with individual and cultural diversity.
- Goal 6. Interns will demonstrate professionally competent behavior in self-reflectivity.

The faculty selected 8 core competencies that define psychological skills that interns learn in our generalist model of training. These areas are (a) psychological assessment, (b) psychological intervention, (c) consultation/liaison, (d) teaching/education, (e) scientific inquiry/critical thinking, (f) professional behavior/ethical practice, (g) individual and cultural diversity, and (h) self-reflectivity.

The first 4 core competencies represent basic psychological skills that are taught as part of the generalist model. The latter 4 core competencies can be considered as attitudinal frameworks that apply to all practice situations and that must be incorporated within the process of all psychological interventions. These competencies are taught not in the abstract but rather as they apply to specific problems encountered in psychological practice. See the list below for a description of the 8 core competency areas and skills.

## **Core Competencies and Skills**

### ***Psychological Assessment***

Ability to discern referral question, implement appropriate assessment, use interview techniques, perform test administration, interpret assessment findings, write reports, and give feedback to patient and referral source.

### ***Psychological Intervention***

Ability to do appropriate goal setting, develop a formulation of the case, select an intervention strategy, handle therapy content, handle therapy process, and demonstrate case management skills.

### ***Consultation/Liaison***

Ability to discern referral question, develop a formulation of the case or situation, choose an appropriate strategy, implement interventions, make appropriate documentation, give feedback to referral source, and participate in ward or clinic activities.

### ***Training/Education***

Ability to demonstrate knowledge of teaching and supervisory methods, develop teaching and supervisory goals, apply teaching and supervisory skills, show knowledge of content area(s), make professional presentations, assess teaching and supervisory outcomes, and provide constructive feedback.

### ***Scientific Inquiry/Critical Thinking***

Ability to conceptualize cases or situations, demonstrate knowledge of different theoretical perspectives, use critical evaluation of empirical research in specific areas of training, integrate research knowledge into practice, show awareness of potential sources of bias, design and implement constructive clinical interventions, design and implement constructive programmatic interventions, evaluate clinical outcome data, and evaluate program outcome data.

### ***Professional Behavior/Ethical Practices***

Ability to accept supervision, follow supervisory directions, show a positive professional attitude toward assignments, develop good relationships with professionals, peers, and patients; communicate clearly and directly through oral and written expression, exhibit professionalism (i.e., dependability, timeliness, judgment, poise, etc.), recognize and articulate ethical dilemmas, adhere to professional ethics, and maintain professional boundaries.

### ***Individual and Cultural Diversity***

Ability to develop awareness of assumptions, values, and biases of one's own culture, race, and ethnicity; recognize limitations in diversity awareness, articulate a clear understanding of the different world views of others, demonstrate knowledge of diversity issues and their impact upon the provision of psychological services, relate effectively with persons in situations that involve individual and cultural diversity, design and implement assessment and intervention strategies that integrate relevant factors of individual and cultural diversity, collaborate with interdisciplinary staff regarding diversity issues, evaluate the impact of diversity on the provision of services, and promote and advocate for multicultural sensitivity within the institutional setting and the community.

### ***Self-Reflectivity***

Ability to engage willingly in self-evaluation, make accurate assessment of strengths, make accurate assessment of weaknesses, listen openly to constructive feedback, integrate self-knowledge into practice, assess consequences of actions, and seek supervision and consultation appropriately in problem situations.

## Multicultural Diversity



Intern class of 2015-2016

### Supervision

Frequent formal supervision is a high priority of the James H. Quillen VAMC internship program. Each intern should receive a minimum of 4 hours per week of regularly scheduled supervision, of which 2 hours are on an individual basis. On average, our interns obtain over 5 hours of supervision weekly. Some faculty will supervise via a hands-on approach of having interns collaborate in their clinical sessions. All internship faculty are expected to be flexible enough with their time to allow for unscheduled, informal supervision opportunities.

Our goal is that each intern will have 2 faculty supervisors who qualify as mentors. Mentors provide interns with professional role models whom they may observe performing professional activities and with whom they may discuss professional issues or problems. Mentors are operationally defined from ratings derived from the interns and faculty rating forms.

### Time Allocation

A minimum of 25% of the intern's time, or 520 hours, must involve patient care. Formal supervision will account for at least 200 hours of the training experience but possibly as much as 300 hours (approximately 15%). This will entail a minimum of 4 hours of formal supervision per week. The allocation of formal supervision time is as follows:

- ✚ 1 hr. per week Individual Supervision (Major Rotation)
- ✚ 1 hr. per week Individual Supervision (Minor Rotation)
- ✚ 1 hr. per week Administrative/Supportive Group Supervision
- ✚ 1 hr per month (at minimum) Peer Group Supervision
- ✚ 1 hr. per week Individual Supervision (Long Term Psychotherapy)

Another 250 hours should be devoted to didactic training (12%). Research/reading, staff meetings, and administrative duties may comprise 250 hours (12%) of the interns' time. Administrative duties unrelated to patient care are not generally assigned to interns.

## Intern Evaluations

With regular monitoring and communication, problems or deficiencies that arise may be resolved quickly before becoming compounded. Interns have a right to be kept regularly informed of their progress throughout the program.

Interns will receive written mid-point and end-point evaluations by their rotation supervisors. At these designated times, interns will also complete self-assessments. The development of self-reflectivity is a critical aspect of interns' work with supervisors and of the internship training process. Interns complete self-assessments of their performance as part of the evaluation process.

During the year, interns will not only receive but also have the opportunity to provide evaluative data. At the end of each rotation, interns submit formal ratings of the site and supervision received on the Rotation and Supervisor Evaluation Form. Interns also provide ratings and comments regarding each session in the year-long internship seminar series.

## Other Training Experiences

### Seminars

Seminars will be held most Fridays throughout the internship year. The topics are divided into 8 series. The specific seminar topics are as follows:

- Psychological Assessment (*e.g., Neuropsychological Assessment, Projective Assessment, MMPI-II & Rorschach Integration*)
- Psychological Interventions (*e.g., Dynamic Psychotherapy, Acceptance and Commitment Therapy, Cognitive Therapy, Common Factors/Integration of Empirically Based Treatments*)
- Professional Practice (*e.g., Private Practice, Job Hunting, Suicide Prevention, Psychopharmacology, Supervision, Multidisciplinary Consultation*)
- Multiculturalism & Diversity (*e.g., Psychosocial Recovery Models, Disability Awareness, Appalachian Culture, Deployment Psychology & Family Issues, Psychotherapy with LGBTQ Clients*)
- Forensic Psychology (*e.g., Compensation & Pension Examinations, Forensics Series*)

- Health Psychology (e.g., *Health Behavior Coaching, Oncology and Psychology, Pain, Dementia, Sexual Issues & Psychotherapy*)

Interns are required to attend and participate in the seminars. Seminar sessions will combine didactic material with a focus on specific case illustrations. Some faculty will present their own clinical cases for discussion.

Other training opportunities afforded the interns are monthly Psychology in-service presentations, Grand Rounds (in Medicine, Gerontology and Psychiatry), and seminars with Psychiatry residents. Interns may participate in additional optional seminars or professional presentations, as agreed upon by their rotation supervisors and the Psychology Training Director. Each intern presents a topic of scholarly work or research at one of the monthly Psychology In-Services during the internship year.

The faculty in the Psychology Internship Program offer training to psychology interns in multiple empirically based treatment models (including Prolonged Exposure, Acceptance and Commitment Therapy, Motivational Interviewing, Integrative Behavioral Couple Therapy). These models are taught within the context of the intern seminar series, rotation assignments, and individual supervision.

Along with the focus on special populations within the Intern Seminar Series, interns attend a series of seminars in culturally competent psychotherapy. Interns may also participate in the Multicultural Diversity Committee to evaluate, plan, implement, and monitor our efforts to become a more culturally competent organization. They also complete a multi-cultural diversity project designed to enhance their understanding of diversity issues.

## **Multicultural Diversity Project**

Each year, the interns complete a multicultural diversity project of their choosing that is designed to enhance their understanding of diversity issues. Consultation with training faculty and other providers is encouraged. This project is often presented as an in-service to the psychology staff to help promote diversity openness and awareness within internship training and throughout mental health services at the James H. Quillen VAMC.



### **Examples of Past Projects:**

- Updated internship materials and programmatic structure to increase awareness and use of local multicultural resources
- In-Service: Understanding the “Q” in LGBTQ
- In-Service: How to Handle Client Prejudice in Therapy
- Created updated TMS Module on Cultural Competency that is required each year for all James H. Quillen VAMC staff

Along with the focus on multicultural diversity within the Intern Seminar Series, all interns participate in weekly group supervision with emphasis on concepts such as military, VA, and

Appalachian culture. In addition, interns participate in a monthly Journal Club in which they read and discuss articles related to diversity as a means of exploring interns' multicultural experiences during the internship year.

Interns are also encouraged to be active members on the Multicultural Diversity Committee to evaluate, plan, implement, and monitor JHQVAMC efforts to become a more culturally competent institution. A part of this committee's focus is finding presenters who can instruct our staff and trainees on multicultural concepts at the monthly Psychology in-services.

## **Requirements for Completion**

### **Minimal Standards**

Supervisors evaluate intern performance on the Intern Evaluation Form at the end of a rotation, which provides a rating scale for the 8 core competencies and their specific skill areas. They rate interns on 5-point Likert scales, according to whether or not interns' performance meets standards.

Supervisors meet monthly to review and to discuss intern progress in the Psychology Training Committee. Supervisory level 4 is the expected exit level for interns graduating from the internship program, with the exception of some specialized areas of practice. At this level of supervision, the intern needs occasional supervision; competency is attained at the entry level psychologist position with continued supervision recommended; documentation of supervision on site is required while in training status; direct observation is not required.

### **Exit Criteria**

To complete the internship program successfully, an intern must meet the following minimum requirements:

- ✚ Completion of 2080 hours of internship training.
- ✚ A minimum of 520 hours of patient care.
- ✚ A minimum average of 4 hours of supervision per week, at least 2 hours of which will include individual supervision.
- ✚ Completion of all rotation and supervisory assignments designated by the Psychology Training Committee.
- ✚ Achievement of standards expected of an intern in this program on the competency-based evaluations of the Intern Evaluation Form.
- ✚ Satisfactory resolution of all remedial training plans.
- ✚ Completion of a multicultural diversity project.
- ✚ Attainment of requirements for functioning in an entry-level psychologist position as a generalist practitioner.
- ✚ Employee's Clearance of Indebtedness – There are several departments that you will either need to call or visit in person to clear station.

## Locality and Diversity Awareness

The James H. Quillen VAMC is located in Johnson City, Tennessee (pop. 63,815), and with neighboring cities Bristol and Kingsport, comprises metropolitan area of 0.5 million people known as the Tri-Cities. Johnson City is a thriving university town with a commercial emphasis on management, professional, and service occupations. Service and retail industries predominate the local economy. Low crime rates, moderate climate, ease of commuting, low cost of living, scenic beauty, and a friendly small-town ambiance are all desirable factors reported by those who have been attracted here. The surrounding area is rural, mountainous, and beautiful, with a rich historical past, a vibrant Appalachian culture, and exceptional outdoor recreation opportunities. Five Tennessee Valley Authority (TVA) lakes, 10 ski slopes, whitewater rafting, and the Appalachian Trail are less than an hour away by car. Smoky Mountain National Park is within 2 hours' drive. The immediate area also provides symphony orchestras, community theater, ballet, numerous Appalachian folk festivals, and a surprising abundance of restaurants and retail shopping. The VA Medical Center is located approximately 100 miles from Knoxville, Tennessee, and approximately 65 miles from Asheville, North Carolina.

Although the faculty is cognizant of the relatively homogenous ethnicity of the population in East Tennessee, we strive to address diversity issues and have made self-education and staff education in diversity awareness a formal part of our program efforts. As the area continues to diversify, the staff has made efforts to increase access for mental health services to more traditionally stigmatized populations to include female veterans, those with cognitive deficits, and those identifying as LGBTQ or transgender. In addition, interns have a variety of opportunities to work with veterans and other local populations with physical limitations, homelessness, low socioeconomic status, and limited education / literacy. We teach our faculty supervisors and interns to incorporate sensitivity to individual and cultural diversity into what they do on a practical, clinical level. We established a Multicultural Diversity Committee 16 years ago to help monitor and promote our awareness as a culturally competent organization. We regard multicultural competence as essential to the mission of the Psychology Service.

The Office of Diversity Management and Equal Employment Opportunity (DM&EEO) provides leadership in creating and sustaining a diverse workforce free of discrimination at the Department of Veterans Affairs. For more information, visit the Web site at Office of Diversity and Inclusion, U.S. Department of Veterans Affairs. The Office of Diversity and Inclusion offers guidance to VA facilities on implementing activities for special observances at <http://www.diversity.hr.va.gov/calendar/index.htm>.

- Sue, W. D., Carter, R. T., Casas, J. M., Fouad, N. A., Ivey, A. E., Jensen, M., LaFromboise, T., Manese, J. E., Ponterotto, J. G., & Vazquez-Nutall, E. (1998). The multicultural counseling competencies. In *Multicultural counseling competencies: Individual and organizational development* (pp. 35-46). Thousand Oaks, CA: Sage Publications.
- Sodowsky, G. R., Kuo-Jackson, P. Y., & Loya, G. J. (1997). Outcome of training in the philosophy of assessment: Multicultural counseling competencies. In D. B. Pope-Davis & H. L. K. Coleman (Eds.). *Multicultural counseling competencies: Assessment, education and training, and*

supervision (pp. 3-42). Thousand Oaks, CA: Sage Publications.

## **Administrative Policies and Procedures**

### **Due Process in Action: The Identification and Management of Intern Problems or Impairment**

The Intern Training Manual provides interns and faculty a definition of impairment, a listing of possible sanctions, and an explicit discussion of due process procedures. Also included in these due process procedures are important considerations for remediation of problems or impairment, as well as detailed appeal and grievance procedures. The Psychology Training Director and the Assistant Psychology Training Director cover these issues with interns during intern orientation. The documents are available upon request.

### **Privacy Policy**

*We will not collect any personal information from you when you visit our website.*

### **Self-Disclosure**

In the supervision of interns, the faculty believes that an intern's awareness and use of self are important professional tools for facilitating interpersonal interactions. We believe that forming a positive working alliance is an indispensable ingredient in any helping relationship. We encourage interns to explore and understand those qualities and characteristics that they bring to each interpersonal encounter. We want interns to recognize, improve, and employ personal qualities that will assist them in forming effective working relationships with patients, peers, faculty, staff, and other members of the community.

The faculty is committed to promoting intern development, respecting intern privacy, and avoiding the misuse of power that can accompany multiple roles. Towards these ends, the faculty supervisors respect the ability of interns to choose what personal information is appropriate for disclosure to faculty. There are exceptions to this general rule. In some situations, it is necessary for faculty to evaluate or obtain assistance for interns whose personal problems prevent them from performing their training activities or professional duties in a competent manner or whose behavior may pose a threat to self or others. In these situations, the faculty may ask for personal information in order to make a responsible decision. In so doing, the faculty members will follow guidelines for remediation and due process described in the program manual. Although the faculty recognizes that interns may need or benefit from psychotherapy, supervisors do not establish therapy relationships with interns or with anyone with whom such an arrangement would create a potentially harmful or exploitative dual relationship.

## PSYCHOLOGY TRAINING STAFF



**Kneeling** (left to right): Dr. Brian Abbott, Dr. Jerome Cook

**Standing First Row:** Dr. John Mosier, Chief of Psychology; Dr. Jacqueline Kracker; Dr. Shelly Silvers; Dr. Laura Kelly (no longer a member); Dr. Myra Elder, Psychology Training Director; Dr. Christine Adler; Linda Arsenaault, MA; Janice Bennett, Program Support Clerk (Volunteer)

**Standing Second Row:** Dr. Megan McPherson; Dr. Maureen Bibby; Dr. Caryn Glosch (no longer here); Dr. Silas (Greg) Gilliam; Dr. Rodney Sullivan; Dr. Jerry Buchanan; Dr. Robert Hughes

**Not Pictured:** Dr. Bert Allen; Dr. Erin Armour; Dr. Kat Barteck; Dr. Thomas Bishop; Dr. Andrew Bloch; Dr. Elizabeth Cates; Dr. Richard Chinouth; Dr. Julie Culligan; Dr. Genevieve Davis; Dr. Matthew Dwyer; Dr. William Finger; Dr. Elizabeth Fitzgerald; Dr. Denise Gross; Dr. Joel Hillhouse; Dr. Kerry Holland; Dr. Amy Karbasi; Dr. Michele Moser; Dr. Natalie Pickering; Dr. Sherry Robbins; Dr. Patrick Sloan, Deputy ACOS for Mental Health Services; Dr. Stephen Smith; Dr. Karina Stewart; Dr. Jessica Turner

## Training Staff Profiles

\* Denotes fulltime VA staff.

† Denotes faculty who are licensed.

‡ Denotes faculty who are provisionally licensed.

§ Denotes those Psychologists designated as Health Service Providers by the State of Tennessee.

**Abbott, Brian, Ph.D.,** \* †§ Texas A&M University, College Station, TX, 2005, Staff Psychologist, VA-wide consultant on Integrative Behavioral Couple Therapy and Coordinator, Evidenced-based

Psychotherapy Program

**Professional interests:** Couple and family therapy, understanding link between interpersonal and intrapsychic process, treatment of trauma and personality disorders

**Personal hobbies and activities:** Exploring Appalachia, hiking, skiing, and spending time with family

***Adler, Christine M., Ph.D., \* †§*** SUNY at Albany, 1989, Assistant Chief, Psychology Service; Staff Psychologist, Consultation-Liaison (Health Psychology)

**Professional interests:** Meaning-making in grief and loss; coping with life-threatening illness.

**Personal hobbies and activities:** Exercise, travel and time w/family, volunteer work with American Cancer Society & Local Organ Procurement Agency

***Armour, Erin, Psy.D.,\* †§*** Wright State University School of Professional Psychology, 2012, Staff Psychologist

**Professional interests:** Animal-assisted therapy, adjustment to illness and disability, intimate partner violence, and the impact of nutrition on mental health

**Personal hobbies and activities:** Cooking, reading, writing, singing, hosting potlucks, and community service

***Arsenault, Linda, M.A., L.S.P.E., \* †*** East Tennessee State University, 1992, Licensed Senior Psychological Examiner, Neuropsychology Clinic Coordinator

***Barteck, Katherine, Psy.D.,\* †§*** Loyola University Maryland, 2012, Staff Psychologist, Transgender Health Facility Lead

**Professional interests:** Interpersonal process approach, primary-care psychology, chronic pain management, family dynamics, transgender care, and cultural competency

**Personal hobbies and activities:** Family time, hiking, bike riding, and general craftiness

***Bibby, Maureen, Ph.D., \* †§*** Auburn University, 2001, Staff Psychologist, Compensation and Pension Clinic

**Professional Interests:** Forensic assessment

**Personal interests and hobbies:** Time with family and friends, involvement in church, reading

***Bishop, Thomas, Psy.D., †§*** Wheaton College, 1998, Psychologist, Family Medicine Clinic, Quillen College of Medicine

**Professional interests:** Primary care psychology, pediatric psychology, spirituality and health, rural health, sports psychology, and the teaching/instruction in medicine.

**Personal hobbies and activities:** Running, hiking, camping, and anything that takes me outside.

***Bloch, Andrew H., Psy.D. \* †§*** The Wright Institute, 2012, Staff Psychologist, Primary Care-Mental Health Integration Program

**Professional Interests:** Sleep disorders, Acceptance & Commitment Therapy

**Personal hobbies and activities:** Hiking, eating, worrying

**Buchanan, Jerry, Ph.D.,** \*†§ University of Southern Mississippi, 1984, Assistant Psychology Training Director, Psychology Service; Staff Psychologist, Homeless Veterans Program

**Professional interests:** Training and supervision, men's issues, dual diagnoses; homelessness, mental health crisis response; diversity issues; integrative approaches to psychotherapy

**Personal hobbies and activities:** Bicycling, hiking, running, camping, cars, poetry, history, and family outings/adventures

**Chinouth, Richard W., Pharm. D.,** † University of Tennessee College of Pharmacy, 1980, Neuroscience Specialist, Eli Lilly and Company

**Cook, Jerome, Ph.D.,**\*†§ Vanderbilt University, 1992, Staff Psychologist, Substance Use Disorders Program

**Professional interests:** Psychology of addictive behavior; motivational interviewing; prevention and management of disruptive behavior; PTSD; mental health crisis response; ex-prisoners of war

**Personal hobbies and activities:** Soccer, outdoor activities, bluegrass music, German language/literature

**Culligan, Julie, Ph.D.,** \*†§ SUNY at Buffalo, 1997, Health Behavior Coordinator, Primary Care; Mental Health Clinic

**Professional interests:** Wellness behavior, motivation, health psychology

**Personal hobbies and activities:** NIA, dancing and playing with my children, drumming, music, and nutrition and fitness

**Davis, Genevieve, Ph.D.,** \*† University of Memphis, 2011, Evidence Based Psychotherapist

**Professional interests:** combat stress, PTSD, couples/families, insomnia/nightmares, LGBT issues

**Personal hobbies and activities:** festivals, outdoor activities, live music, animals (any and all), ethnic foods/unique restaurants, traveling, learning new hobbies (having a firm product at the end of some hard work)

**Dwyer, Matthew, Ph.D.,** \* † University of Kentucky, 2005, Staff Psychologist, Psychosocial Recovery Treatment Program

**Professional interests:** Trauma and recovery, clinical supervision, group therapy

**Personal hobbies and activities:** Skiing, hiking, astronomy, automobiles

**Elder, Myra Q., Ph.D.,** \*†§ Temple University, 1996, Psychology Training Director, Staff Psychologist, Behavioral Medicine Elective; Psychology Leadership/Administration

**Professional interests:** The integration of psychology within Primary Care, rural mental health care, military trauma and its intersection with Appalachian culture

**Personal hobbies and activities:** Military history, watching two children in multiple sporting events, chauffeuring said children all over town, occasional sleep

**Finger, William, Ph.D., \*†§** University of Missouri-Columbia, 1989 Coordinator, Primary Care-Mental Health Integration Program

**Professional interests:** Health Psychology (diabetes, spinal cord injury, chronic illness, sexuality)

**Personal hobbies and activities:** Kayaking, home brewing

**Fitzgerald, Elizabeth Ph.D., \*†§** Adler University, Chicago, 2005, Clinical Psychologist, Designated HSP (Acting Coordinator PTSP)

**Professional interests:** Nutritional psychology, somatic psychology, consciousness studies, empathy, hypnosis, integrative medicine, psychophysiology, and the role of community/social support in mental health

**Personal hobbies and activities:** International radio/podcast listening, volunteering, hiking, making things, gardening, music and singing, short stories, cooking, traveling, yoga, meditation, and speaking Irish (poorly)

**Gilliam, Silas (Greg), Ph.D., \*†§** Loyola University (Chicago), 1989, Staff Psychologist, HBPC and Compensation and Pension Program

**Professional interests:** Psychotherapy, weight management, coping with chronic illness

**Personal hobbies and activities:** Meditation, travel, time with family, theater, good restaurants.

**Gross, Denise K, Psy.D.** Florida Institute of Technology 1989, Staff psychologist/ neuropsychologist. Mental Health Coordinator Compensation and Pension Program.

**Professional Interests:** Neuropsychology of behavior, neuropsychological assessment with focus on dementia and TBI, psychological assessment, diagnostic evaluation

**Personal interests:** hiking/camping, spending time with my family and dogs, Humane society volunteer activities, enjoying local events

**Hillhouse, Joel, Ph.D., †§** SUNY at Albany, 1989, Professor of Community Health, East Tennessee State University

**Holland, Kerry, Ph.D., †§** University of Missouri-Columbia, 1994, Clinical Director, East Tennessee State University Doctoral Psychology Program

**Hughes, Robert B., Ph.D., \*†§** Texas Tech University, 1979, Staff Psychologist, Neuropsychology Clinic

**Professional interests:** Brain injury assessment and cognitive rehabilitation; individual, marital and Christian counseling (private practice)

**Personal hobbies and activities:** Traveling and reading

**Karbasi, Amy, Psy.D., \*†§** Xavier University, 2012, Clinical Psychologist

**Professional interests:** Primary Care-Mental Health Integration; Brief Treatment Models; Post-Deployment OEF/OIF/OND Issues; Group Therapy

**Personal hobbies and activities:** Hiking, exercising, baking, exploring the area

**Kracker, Jacqueline, Ph.D.,** \*†§ University of Tennessee, 2007, Staff Psychologist, Community Living Center

**Professional interests:** Coping with chronic illness and functional decline; Caregiver support; Cognitive assessment to support treatment

**Personal hobbies and activities:** Mindfulness, woodworking, gardening, reading, and home remodeling

**McPherson, Meagan, Psy.D.,** \*† The Wright Institute, Berkeley, CA, 2011, Staff Psychologist, Mental Health Clinic

**Professional interests:** Forensic and neuropsychological assessment, traumatic brain injury and rehabilitation psychology, psychiatric presentations of neurocognitive disorders, and evidenced-based approaches to compensation and pension examinations

**Personal hobbies and activities:** Slow walks with my Great Pyrenees puppy, porch swings, desserts, California wineries, and going to bed early

**Moser, Michele R., Ph.D.,** †§ Miami University (Ohio), 1992, Director and Psychologist, Center of Excellence for Children in State Custody, East Tennessee State University, Assistant Professor, Department of Psychiatry and Behavioral Science

**Professional interests:** Children's mental health and child welfare, dissemination of evidenced based practices in children's mental health, and trauma and attachment in children

**Personal hobbies and activities:** Reading and being active in the Intermountain Psychological Association

**Mosier, John W. III, Psy.D.,** \*†§ Pepperdine University, 2002, Staff Psychologist, Chief of Psychology Service

**Professional interests:** Substance abuse/addictive disorders; tx of co-occurring PTSD and SUD; clinical intervention with spinal cord patients; behavioral medicine; relational and holistic approaches to psychotherapy; and working with LGBT populations

**Personal hobbies and activities:** Weight resistance training; hiking and outdoor recreation/sports, geographically inspired travel, politics/current events, and cultivating the relationships in my personal life

**Pickering, Natalie, Ph.D.,** \* †§ University of Louisville, 2013, Staff Psychologist, PTSP Clinic

**Professional interests:** Trauma treatment, specifically issues related to moral injury. Couples therapy. Interface between psychology, theology, philosophy. Facilitating the psychological well-being and member care of humanitarian and NGO workers.

**Personal hobbies and activities:** Time with family, running, hiking, cooking, reading, church activities.

**Robbins, Sherry L., M.D.,** † Quillen-Dishner College of Medicine, 1989, Assistant Professor of Clinical Medicine at ETSU, within the Department of Family Medicine, Co-Editor of *Tennessee Family Physician* journal, and full time caregiver to my mother.

**Professional interests:** Family Medicine as a specialty, preventative medicine, rural medicine, Appalachian culture and medicine, and death and dying issues (especially communication and coping skills).

**Personal hobbies and activities:** Photography, creative writing, crafts, genealogy and Appalachian folklore.

***Silvers, Shelley, Ph.D.,*** \*†§ Northern Illinois University, Coordinator, Multidisciplinary Pain Management Program

**Professional interests:** Management of chronic severe pain, treatment of panic disorder/OCD.

**Personal hobbies and activities:** Cooking, weightlifting, boating

***Sloan, Patrick, Ph.D.,*** \*†§ Ohio University, 1978, Deputy Chief of Staff for Mental Health; Psychology Administration

**Professional interests:** Neuropsychology and PTSD

**Personal hobbies and activities:** Sports, golf

***Smith, Stephen C., Psy.D.,*** \*†§ Wright State University, 2005, Coordinator, Psychosocial Recovery and Treatment Program, Supervisor, Community Reintegration Specialist

**Professional interests:** Assessment and therapy with persons with severe and persistent mental illness; peer counseling role, Appalachian culture and identity

**Personal hobbies and activities:** Helping coach my son's wrestling team, driving my truck, jogging with my Weimaraner

***Stewart, Karina, Ph.D.,*** \*†§ Nova Southeastern University, 2000, PC-MHI Psychologist

**Professional interests:** PTSD, Anxiety Disorders, integrating primary care and psychology.

**Personal hobbies and activities:** None listed

***Sullivan, Rodney, Ph.D.,*** \*†§ Southern Illinois University, 1979, Staff Psychologist, Polytrauma Clinic, and private practice

**Professional interests:** Neuropsychology, Polytrauma

**Personal hobbies and activities:** Fishing

***Turner, Jessica Ph.D.,*** \*†§ East Tennessee State University, 2013, Staff Psychologist

**Professional interests:** Intimate Partner Violence; Women's Health

**Personal hobbies and activities:** Running, knitting, reading; cooking

## Program Quality Measures

We have often been able to successfully place interns in career paths that match our internship training model. See the listings below for the first-year, post-internship placements for the past 4 years.

Program	Degree	Post-Internship Activities
<b>2016 Graduates</b>		
Washington State University	Ph.D. Clinical	Post-doctoral Fellowship, VAMC (focus on Psychosocial Rehabilitation)
Purdue University	Ph.D. Counseling	Staff Psychologist, Military Medical Center
Indiana State University	Psy.D Clinical	Post-doctoral Fellowship, VAMC (focus on PTSD)
University of Tennessee	Ph.D. Clinical	Post-doctoral Fellowship, University Psychological Clinic
<b>2015 Graduates</b>		
East Tennessee State University	Ph.D. Clinical	Post-doctoral Fellowship, VAMC
Ball State University	Ph.D. Counseling	Post-doctoral Fellowship, Private Sector
Pala Alto University	Ph.D. Clinical	Private Practice
Indiana State University	Psy.D. Clinical	Post-doctoral Fellowship, VAMC (focus on women and LGBT Veterans)
<b>2014 Graduates</b>		
Auburn University	Ph.D. Clinical	Post-doctoral Fellowship, VAMC (focus on rural populations)
University of Iowa	Ph.D. Counseling	Post-doctoral Fellowship, Private Sector
Florida Institute of Technology	Psy.D. Clinical	Post-doctoral Fellowship, VAMC
University of Notre Dame	Ph.D. Clinical	Post-doctoral Fellowship, VAMC
<b>2013 Graduates</b>		
University of Louisville	Ph.D. Counseling	Private practice
University of Louisville	Ph.D. Clinical	Post-doctoral Fellowship, VAMC
Illinois Institute of Technology	Ph.D. Clinical	Post-doctoral Fellowship, Private Medical Center