

# PSYCHOLOGY INTERNSHIP



LOUIS STOKES CLEVELAND  
DEPARTMENT OF VETERANS AFFAIRS MEDICAL CENTER

# PSYCHOLOGY INTERNSHIP PROGRAM

An APA Fully Accredited Program

**2005-2006**

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



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## **INTRODUCTION**

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

### **THE LOUIS STOKES CLEVELAND DEPARTMENT OF VETERANS AFFAIRS MEDICAL CENTER**

The Medical Center is one of the most diverse in the VA system. It is composed of two major hospital units, with 947 beds, two full service satellite outpatient clinics, and five community - based outpatient clinics located some miles apart. It provides comprehensive health care services to veterans and their families primarily from its Northeast Ohio catchment area. The patient population includes a broad spectrum of socioeconomic and ethnic groups. In a typical year, almost 13,000 veterans amass over a quarter of a million visits for mental health services at our facility. The Medical Center is also heavily invested in the training of professionals in health care and in basic and applied research. It is affiliated with the Case Western Reserve University School of Medicine. Residents and medical students train at the Medical Center in all major specialties. Affiliations are also maintained with a large number of universities for the training of professionals in a number of other health care disciplines including psychology, social work, nursing, dentistry, audiology and speech pathology, optometry, pharmacology, and nutrition. Over 1,000 students in the health care professions are trained yearly.



The Wade Park Campus (W) is located five miles east of downtown Cleveland, within University Circle, the major healthcare, educational, and cultural area of the city. Inpatient services include acute and intermediate medicine, surgery, psychiatry, substance abuse detoxification, spinal cord injury, geriatrics, neurology, and physical medicine and rehabilitation. Outpatient services focus on primary care with full support from specialty and subspecialty clinics. Special clinical programs and services include a Pain Clinic, a partial hospitalization Day Hospital program, outpatient mental health, substance abuse treatment, cardiothoracic surgery, renal dialysis, a sleep disorders laboratory, women's health, and CT and MRI. Innovative approaches to meeting healthcare needs and improving customer satisfaction of veterans include a short stay unit to facilitate ambulatory surgery, and a hoptel unit to provide temporary quarters for out of town patients and their families. The clinic and basic research program is among the largest in the Department of Veterans Affairs, with researchers known nationally and internationally for their contributions to science and a budget from all sources of ten million dollars. There are also two community based 'Vet Centers', providing readjustment counseling for Vietnam, Korea, and Operation Desert Storm veterans.



The Brecksville Campus (B) is located midway between Cleveland and Akron in the suburban community of Brecksville. In addition to a variety of inpatient units and clinics treating schizophrenia and mood disorders, it includes the Veterans Addiction Recovery Center, a comprehensive inpatient and outpatient substance abuse treatment program, and a Domiciliary, in which homeless veterans receive active rehabilitation. It is the site of the Center for Stress Recovery, which provides a coordinated program of clinical services, training and research for patients with posttraumatic stress disorder. A 195- bed Nursing Home Care Unit, part of the Medical Center's geriatric program, is also located at the Brecksville Unit.



The Canton Clinic (C) provides a range of outpatient medical, dental, mental health, and rehabilitation services to patients in the Canton, Ohio area.

The Youngstown Clinic (Y) serves the same need in the Youngstown, Ohio area.

## PSYCHOLOGISTS AT THE LOUIS STOKES VA

The Medical Center is now organized into six Service Lines, with most mental health programs clustered in the Mental Health Care Line and its Divisions of General Mental Health, Substance Abuse, Post-Traumatic Stress Disorders, Psychological Rehabilitation, Community Services, and Clinical Support. There are 40 professional psychologists who provide comprehensive services to patients and their families in the MHCL and the other Service Lines throughout the Medical Center. They serve as members of multidisciplinary treatment teams in psychiatric care, as consulting and unit psychologists in specialized medical units, and as coordinator or program manager of several patient care programs. Three psychologists are Division Managers within the MHCL. In addition to clinical and administrative duties, psychologists are also actively involved in research and training. There is thus a wide range of professional activities in which an intern may engage, and a large, diverse, and experienced staff with whom to interact. Discipline-specific professional activity, such as training programs, credentialing and privileging, and peer review are under the aegis of the Professional Chief Psychologist. The Director of Psychology Training manages the day to day features of the Psychology Internship Program.

## PSYCHOLOGY INTERNSHIP PROGRAM

**Training Model and Goals:** The Psychology Internship Program follows a "professional" model of training. It is designed to provide a sound basis for the intern's professional career whether that be as a generalist practitioner in clinical or counseling psychology or through subsequent postdoctoral training and specialization. The internship focuses on the acquisition and extension of clinical skills; development of the intern's professional role, identity, and demeanor; and socialization into the health service delivery environment. In addition, opportunities to become familiar with and/or do research on clinical phenomena are available and the possibility of developing responsible innovations in care is provided. During the program, exposure to a broad spectrum of techniques and wide variety of clients is provided to facilitate gaining experience in state-of-the-art practical knowledge in the field. By the end of the internship, it is expected that the intern will be able to function at the beginning professional level in the psychologist's core assessment, intervention, and decision-making functions.

**Training Assignments:** Training opportunities in the areas of mental health, health psychology, neuropsychology and geropsychology are offered. Within these areas rotation options enable the intern to gain experience in settings to which he or she has not been previously exposed. All rotations provide training in the core areas of assessment; individual, group and/or family therapy; and staff consultation. The emphasis varies with specific assignments. Rapid assessment, crisis intervention, brief therapeutic approaches, and consultation are more characteristic of the acute treatment settings, while therapeutic programming, psychosocial rehabilitation, behavioral and social learning approaches, reeducation and staff development are more characteristic of the extended care settings. On the basis of information from the student and his or her university Director of Training and discussions with the student regarding rotations and options in which he or she is interested, an internship program is formulated which meets the intern's training needs, assures a breadth of experience, and respects developing professional interests. The program will consist of three four-month assignments, plus a supplemental training option if indicated.

**Model Internship Tracks.** The internship Tracks described here provide the framework within which specific training rotations are developed in accordance with training needs and interests. In addition to providing general training, they prepare the intern for subsequent specialization at the postdoctoral level. The specific assignments or rotations (of four months each) are described in Appendix A. These descriptions should be consulted when considering the model tracks.

## **I. MENTAL HEALTH TRACK**

The Mental Health Track provides training in assessment and intervention with a wide variety of psychiatric, behavioral, and environmental problems. It is designed to enable the intern to develop adequate skills in the differential diagnosis of psychopathological disorders and to develop and implement individualized treatment plans essential for successful intervention. Theoretical and therapeutic approaches will vary with the training setting and types of problems typically encountered, but all rotations generally provide experience in (1) psychological assessment, (2) individual interventions, including psychotherapy and cognitive approaches, (3) collective interventions (group, marital, and/or family), (4) case management, (5) vocational assessment and counseling, (6) multidisciplinary treatment team planning, and (7) patient education. Interns generally will concentrate in areas in which they have not gained extensive prior experience to broaden the scope of their diagnostic and treatment skills.

This program consists of two different rotations from the mental health area (Appendix A) that do not duplicate previous experience. The remaining assignment may be selected from among the health psychology rotations. Three mental health rotations may be selected where breadth of experience is not an issue, provided that one of these is in substance abuse.

## **II. HEALTH PSYCHOLOGY TRACK**

The Health Psychology Track encompasses clinical health psychology applications. This track meets requirements for health psychology internships promulgated by the Council of Directors of Health Psychology Training Programs. It offers training experiences in a variety of inpatient medical and surgical settings, including acute, intensive care, and rehabilitation units. In addition, participation in Primary Care Medical Clinics provides interns with broad experience in assessment and short and long-term care of medical outpatients and their families. Interns interested in this track must have adequate prior experience in mental health settings so that they will be able to recognize and manage common psychiatric syndromes, since they may coexist with medical problems. Coping with illness, as well as modifying health related behaviors through direct and focused interventions are emphasized.

Depending upon the rotations chosen, training experiences may include the following: (1) differential diagnosis of functional and organic contributions to symptoms, (2) crisis intervention with patients and families, (3) consultation-liaison activities with multi-disciplinary staff, (4) pain and stress management, (5) counseling for adjustment to chronic disease and disability, (6) individual and marital therapy, (7) vocational readjustment counseling, and (8) group intervention aimed at primary and secondary prevention. Interns who elect this track generally take two different rotations from the Health Psychology group (see Appendix) and a third from the Mental Health group. If they can demonstrate adequate post-practicum preparation in psychiatry and mental health, they may elect three Health Psychology rotations.

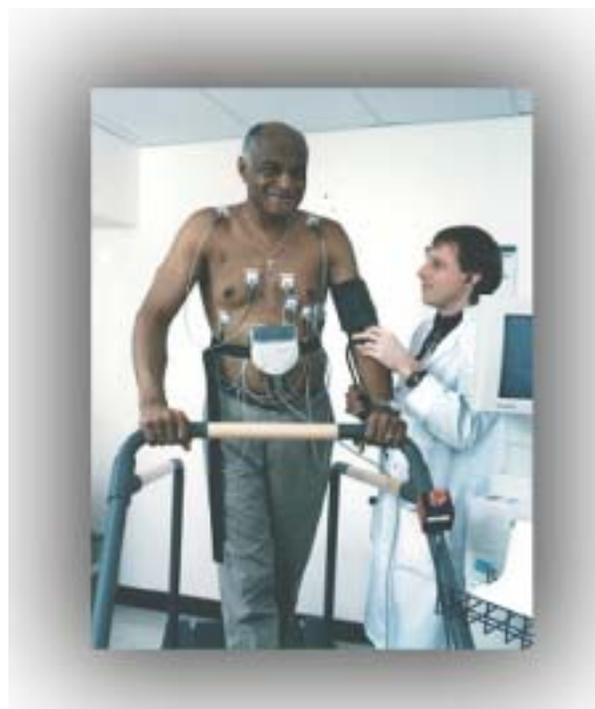
### **III. GEROPSYCHOLOGY TRACK**

Interns in the Geropsychology Track receive a broadly based training experience which includes both specific geropsychological work and more general training appropriate to the doctoral level. The intern pursues the following programmatic options:

- (1) The Geropsychology (W) rotation.
  - A second rotation with considerable experience with elderly patients such as Neuropsychology (W or B) or Long-Term Care (B).
  - A third rotation for breadth of training.
- (2) The Geropsychology (W) rotation
  - An Enrichment in either Palliative Care (W) or Bioethics (W).
  - Two additional rotations.

The other rotations (one if Neuropsychology is elected; two if the enrichment is selected) will be selected for breadth in a way that does not duplicate previous experience.

Thus, the intern will spend approximately one-half of his/her time over the year with elderly patients.



### **IV. NEUROPSYCHOLOGY TRACK**

The Neuropsychology Track affords both general clinical training and preparation for subsequent specialization at a postdoctoral level. The program offered meets the Division 40/ International Neuropsychological Society criteria for doctoral Neuropsychology internships. The Track consists of three potential sequences, the most appropriate of which is offered to matched Neuropsychology Track applicants, according to their prior training and experience.

In addition to one mental health rotation pursued for general training purposes, the sequence options are:

- (1) Two Neuropsychology rotations (W & B) and a neuropsychology enrichment.
- (2) Two Neuropsychology rotations (W&B) without the enrichment.
- (3) One Neuropsychology rotation (W & B), a second rotation in which there is substantial experience with neuropsychologically impaired populations (Geropsychology, Spinal Cord Injury, Pain Clinic), and a neuropsychology enrichment.

An external enrichment in neuropsychology research is offered at the Cleveland Clinic for up to 300 hours. The third rotation in a mental health area offers more generalized exposure to clinical work.

## ENRICHMENT OPPORTUNITIES

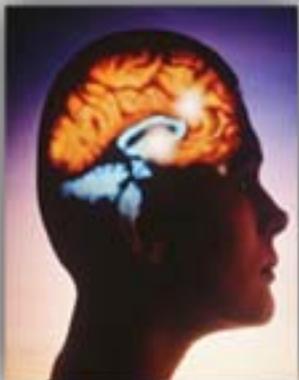
In addition to the three four-month rotations, interns are permitted to pursue a internal or external enrichment option during the year. External Enrichment options are best negotiated during the application process so that suitable arrangements with other training sites can be completed. Applicants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

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

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

## RESEARCH OPPORTUNITIES

***Dissertation Research:*** Interns not utilizing another enrichment option may be authorized up to 300 internship hours for doctoral Dissertation research. Approximately thirty percent of recent interns have conducted their research at our facility. The variety of settings and patients here facilitates data collection. A particularly large database is available in the Veterans Addiction Recovery Center. Research projects are also active in our neuropsychology, General Medicine Clinic, Pain Clinic, and Psychiatry. Psychology also maintains voluminous psychological testing archives in hard copy and computer files.



***Applied Clinical Research:*** Research opportunities are available on most rotations. Interns may devote up to eight hours per week to developing and implementing a clinical research project pertinent to their assignment or to participating in ongoing research. Consultation and assistance are regularly available from the Psychology staff, a research psychologist at the Medical Center, and faculty from nearby affiliated universities. Major research areas include substance abuse, gambling disorders, pain management, neuropsychology, and schizophrenic cognition.

## **SUPERVISION**

Our approach to supervision follows an apprenticeship model, with the intern assigned to one primary staff psychologist for supervision and training during each rotation. Supervision is individualized to meet the intern's needs and level of professional development. Throughout the internship, we strive to treat interns as emerging professionals and colleagues. The long tradition of internship training at our facility (over 35 years) ensures ready acceptance of interns by Medical Center staff.

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



## EDUCATIONAL OPPORTUNITIES

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

**Inservice Education:** Interns attend the periodic Psychology Inservice Education Programs, These half-day and full-day workshops are presented by nationally recognized faculty or prominent local professionals. Since 1989, Psychology and now Mental Health Service has been accredited by APA as a sponsor of Continuing Education programs, enhancing our ability to attract distinguished presenters. Psychology has cosponsored a number of programs with the Cleveland VA Learning University whose up-to-date facility is located at our Brecksville Campus. The Learning University sponsors workshops and teleconferences for the development of professional staff in a seven-state region. Some of these are of interest and available to interns. Relevant presentations are offered by other services and treatment units such as Grand Rounds, Social Work, the Veterans Addiction Recovery Center and the Office of Geriatrics and Extended Care, and interns are encouraged to attend these as schedules permit. The Regional Learning Resource Center, also located at Brecksville, has an extensive collection of books, journals, and audiovisuals available for intern use. Computerized literature searches and a national network of interlibrary loan are also available.

**Stipend.** Interns receive \$18,750 for the year. Interns are appointed for a minimum of a year and a day, thus making interns eligible for health and other benefits. Annual and sick leave are also accrued, and interns are not on duty for paid Federal holidays.

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

## **APPLICATION PROCEDURES**

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

**Robt. W. Goldberg, Ph.D., ABPP**  
**Director of Psychology Training**  
**Mental Health Care Line GMH (B)**  
**Brecksville Unit, Building 5**  
**Louis Stokes Cleveland DVAMC**  
**10000 Brecksville Road**  
**Brecksville, OH 44141**

### **The following are required from the applicant:**

1. A completed APPIC Uniform Application Form and all supporting attachments.
2. An OF-612 application form for Federal employment.
3. An SF306 Declaration form for Federal employment.
4. At least one letter of recommendation from a psychologist who has directly supervised the applicant's clinical work.
5. Our brief supplementary Questionnaire permitting the applicant to indicate Track and Rotation preferences.
6. Interviews on site or by phone. We encourage but do not require on site interviews.
7. Official transcripts of graduate and undergraduate work.
8. Any additional supporting material the applicant wishes to submit (e.g. curriculum vitae, work samples, published articles, additional recommendations).

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

**Please see the attached appendices for updates and additional information.**

Completed applications should be received by **DECEMBER 7**.

Telephone inquiries about our program are invited at **(216) 791-3800 ext.4992**. We encourage application by qualified minority group members. We participate in the current Association of Psychology Postdoctoral and Internship Centers Match Program and observe their policies, practices, and deadlines. We do not preallocate any internship positions to particular universities. Inquiries about accreditation status may also be made to the American Psychological Association, **(202) 336-5974**.

The full range of internship rotations (of four months each) outlined below are ordinarily available each year. The Supplement Update of this brochure (Appendix B insert) will identify any rotation that may be unavailable and describe new rotations and enrichment opportunities as they develop. The symbols (B), Brecksville and (W), Wade Park are used to indicate the site of an intern's training on a given rotation. The symbol (B, W) or (W, B) indicates that the rotation training is organized across both hospital campuses, with the primary site identified by the first of the two letters.

The training rotations are as follows:

## **I. MENTAL HEALTH AND SUBSTANCE ABUSE ROTATIONS**

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

### **PSYCHIATRY DAY HOSPITAL (W)**

The Psychiatry Day Hospital, coordinated by a psychologist, consists of a multidisciplinary team representing psychology, psychiatry, nursing, and social work. The target patient population is the seriously mentally ill (e.g., schizophrenia, mood disorders, anxiety disorders, other psychotic disorders). In this rotation, the intern is considered a full member of the team. The intern's responsibilities would include case management, treatment planning, discharge planning, crisis intervention, individual therapy, co-facilitation of group therapy, consultation with inpatient wards, intake assessments, conducting psychological evaluations and providing feedback to the team and patient on the results, and writing reports.

The Day Hospital typically manages approximately 15 patients at a time. The Day Hospital strives to help the severely mentally ill patient reduce the frequency of inpatient hospitalizations, decrease the length of stay on acute psychiatry wards, transition from inpatient to outpatient status, and improve compliance with medical interventions. Group therapies offered include anger management, coping skills training, medication management, and stress management with relaxation skills training. The psychology intern would have an excellent opportunity to strengthen clinical skills while being exposed to a broad psychiatric population. The intern would increase knowledge of psychotropic medications and interventions with a psychotic population.



## **PSYCHIATRY UNIT (W)**

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

In other instances, interventions are more time-limited and crisis-oriented. Interns gain exposure to a wide variety of treatment modalities, which may include individual psychotherapy, process and psychoeducational groups, and behavioral contracting.

## **LONG TERM CARE (B)**

Services are provided as a member of a multidisciplinary team on a 29-bed psychiatric long-term milieu as well as thorough consultation on the Nursing Home Care Unit. The rotation emphasizes mental health care of individuals who cannot participate in more intensive inpatient treatment programs but have problems living in this community. While the majority of residents are elderly, opportunities to work with younger individuals with psychiatric and neurological disorder exist. Neuropsychological assessment experience is also available.



## **CENTER FOR STRESS RECOVERY (B)**

The Center for Stress Recovery (CSR) provides a specialized intensive treatment program for veterans suffering posttraumatic stress disorder. The PTSD may be the result of the veteran's war experiences, sexual trauma and/or domestic violence. The patient population consists of combat and noncombat male and female veterans from WW II to the present. In addition to suffering from PTSD, these veterans may present with co-morbid conditions such as: sleep disturbance, anxiety disorders, mood disorders, as well as personality disorders. Appraisal and treatment are based on a blending of the most current cognitive, behavioral, interpersonal, and dynamic interventions being applied to chronic PTSD and its associated problems.

This eclectic approach relies heavily on establishing a clear symptom picture for each individual veteran and generating objectives tailored to meet his or her needs. In developing a symptom profile and diagnoses, the assessment process includes structured interviews, self-report instruments, and traditional psychological protocols focusing on personality dynamics. Outcome research is an integral part of the unit activities, and many of the assessment instruments are also used as pre-post outcome and follow-up measures. Interns can expect to be primarily involved in the residential treatment program for male veterans where patients attend the CSR Day Hospital for ten weeks, five days a week, while living at the Medical Center. While there is a heavy concentration on group psychotherapy, interns will also have the opportunity to engage in marital and individual therapy. Also available will be the opportunity to gain skills in completing assessment protocols and writing reports. Formal and informal supervision is ample, and interns will find themselves in constant consultation with other staff concerning their patients.



## **WOMEN VETERANS TRAUMA TREATMENT PROGRAM (B)**

As part of the PTSD Division, the Women Veterans Trauma Treatment Program is designed to meet the unique needs of women who are experiencing emotional difficulties as the result of traumatic experiences in the military. These experiences may include combat support assignment, sexual harassment, sexual assault, or other military-related trauma. The program provides individual and group psychotherapy, education, community outreach, referral services, and a research component.



## **COMPREHENSIVE HOMELESS CENTER-VOCATIONAL SERVICES (B)**

The Comprehensive Homeless Center has been recognized as a National Center of Excellence. The Center includes a 91 bed Domiciliary, a Transitional Residence Program located in an apartment building on the West Side of Cleveland as well as the Vocational Rehabilitation Section which utilizes the work programs and other resources to facilitate the rehabilitation of veterans with a wide variety of impairments. The Therapeutic Work Program Team recently won a “Scissors Award” begun by the Undersecretary of Veterans Affairs to recognize programs which cut red tape and costs by working as a team to increase efficiency. This rotation offers opportunities to learn about the psychosocial rehabilitation of veterans with substance abuse, severe mental illness and physical impairments, most having a combination of impairments. Interns would have experiences in all three of these programs as the psychologist serves as Clinical Coordinator for the Psychosocial Division of the Mental Health Care Line and provides services to all three programs and supervises the clinical staff who can provide additional learning about their roles. The rotation is especially rich for an intern interested in Vocational Rehabilitation.

The intern would be exposed to many community resources and the Veterans Benefits Administration’s Vocational Rehabilitation Program as well since the Veterans Healthcare Administration’s vocational rehabilitation program has a “Memorandum of Understanding” which provides for services to be provided by VHA for VBA Vocational Rehabilitation patients receiving “Chapter 31” benefits. Opportunities for group therapy, individual therapy, psychological assessment, psychosocial assessment, rehabilitation planning, consultation, and coordination with community agencies are available to the intern.

The intern will also be exposed to planning, administering, coordinating and leading in the provision of mental health services. Interns are also exposed to Vocational Rehabilitation Counselor Interns and Social Work Interns who are assigned to this area as well as to the multidisciplinary team providing the psychosocial rehabilitation services.



## **VETERANS ADDICTION RECOVERY CENTER (VARC)**

Substance abuse rotations are in the **VETERANS ADDICTION RECOVERY CENTER (VARC)**, which offers a variety of programs for veterans who have a substance dependence or impulse control disorder. Veterans participating in VARC complete a thorough assessment, followed by treatment recommendations and subsequent treatment. In addition to primary treatment for substance dependence, there are specialized programs: Gambling Treatment Program; Opioid Substitution Program, Women Veterans Addictive Behavioral Treatment program; a program for veterans who are diagnosed with an addiction disorder and a serious mental illness, Recovery Skills Program for veterans who are highly impulsive and high on negative affectivity and could benefit from a behavioral/didactic approach, and a program for Vietnam veterans diagnosed with both Post Traumatic Stress Disorder and an addiction disorder/disorder of impulse control.

All treatment programs are considered outpatient treatment. Although some residential beds are available, the majority of veterans will complete treatment from the community. All programs follow a primary care model where veterans' medical and treatment needs are identified and addressed.

## **ADDICTIVE DISORDERS ASSESSMENT UNIT (B)**

This program provides comprehensive biopsychosocial assessment of the patient, which serves as the basis for triaging into a appropriate treatment program. It has both inpatient and outpatient components. There is the availability of three levels of care: (1) a post-detoxification step down unit with some medical care and (2) a self care unit for people who need structure of other environmental needs. Additionally, (3) outpatients may come in for three to four consecutive days for assessment.

The time per assessment ranges from three to seven days. Addictive disorders are complex problems affecting many areas of an individual's life, and often co-occur with other forms of psychological disturbance. As a result interns are exposed to a wide range of patients and disorders, including gamblers, women, Vietnam veterans with PTSD, and dual diagnosis patients. Interns are involved in psychological assessment by specialized questionnaires and other instruments and in formulating treatment recommendations for patients. Additionally interns are strongly encouraged to do an enrichment on a treatment team on the alcohol/gambling Rehabilitation Unit to provide additional experience in the therapy of addicted patients.



## **GAMBLING TREATMENT PROGRAM (B)**

This 30-old program, the first in the nation addressing gambling as an addictive disorder, draws referrals nationally, including from the Department of Defense. It includes 8 residential rehabilitation beds with a 28-day length of stay, aftercare and outpatient services. The program is headed by a psychologist and has its own program evaluation staff. Research and scholarly activity on the database of over 800 pathological gamblers has been presented at national and international forums. Interns serve as co-therapists in daily group psychotherapy as well as supplemental individual work as needed. They are encouraged to participate in the ongoing research program.

## **TRANSCEND PROGRAM (B)**

Transcend is a Substance Abuse Division program for Vietnam veterans who have both addictive disorders and combat-related posttraumatic stress disorder (PTSD). Treatment is implemented in two phases. Phase one consists of three months of intensive residential treatment consisting of both group and individual sessions. Patients are provided comprehensive treatment which includes: trauma processing; the development of relapse prevention, anger management, emotional expressiveness and problem solving skills; art therapy; relaxation training ; the exploration of values and spiritual issues; nutrition education; exercise; community service projects; and vocational goal setting. Phase two reinforces and enhances skills learned during phase one and requires one year of weekly aftercare sessions. Treatment is comprised of educational, skill building and psychotherapy components and is designed to meet the goals of the program which include the reduction of PTSD symptoms, the maintenance of an addiction free life-style and the development of effective coping strategies. Psychotherapy is guided by a detailed manual, which blends cognitive-behavioral, psychodynamic, and existential theoretical approaches to treatment. Outcome research is an essential component of the program and provides the basis for treatment modification and improvements. Psychology interns are considered to be an integral part of the treatment team and this rotation will offer the opportunity to gain skills in assessment procedures, better understand the implementation of research protocols, and provide for the improvement of group and individual psychotherapy skills.

## **RECOVERY SKILLS PROGRAM (B)**

The Recovery Skills Program (RSP) is a comprehensive treatment programs for all Axis I and II "dually diagnosed" patients except those with schizophrenia. Both male and female patients are selected psychometrically by high levels of negative affectivity and impulsively. Thus, the modal diagnosis is borderline personality disorder, but many of the other Axis II conditions are present along with PTSD, bipolar disorder and major depression. The intern has exposure to this wide array of diagnostic conditions among veterans at every phase of recovery. First there is the fast-paced initial phase of Primary Treatment (this includes eight group and one individual session weekly). Then, for selected graduates who are prepared to do intensive interpersonal work as it relates to childhood experiences, there is an Intensive Cohort phase. Third, there is the working-through of weekly group and individual meetings in the Continuing Care phase. The approach to treating these varied individuals eclectic, hut the RSP is significantly influenced by Dialectical Behavior Therapy. Thus, patients are trained in basic skills from a program manual. These include a variety of skills to increase mindfulness, deal with emotions, control impulses, and improve interpersonal relationships.

The Psychology Intern is an integral part of the team and is involved in all aspects of treatment. He / she would conduct skills groups, be a co-therapist in group psychotherapy, conduct weekly individual sessions, and case manage clients. Several briefing and debriefing meetings occur daily among RSP team members, along with weekly interdisciplinary consultation meetings. Overall, the RSP rotation entails hard work and encourages self-development, creativity, and humor.

## **WOMEN VETERANS ADDICTION RECOVERY PROGRAM (B)**

This is a specialized program designed to meet the needs of women veterans who have developed a compulsively or dependence on behaviors involving the use of chemical substances, relationships, sexuality, gambling, stealing, eating/dieting, or other behaviors resulting from a failure to resist destructive impulses. Concomitant issues of mood disorders, anxiety disorders (predominantly PTSD/ASD), personality disorders (predominantly borderline), and issues of abuse/trauma are a major focus of treatment. Psychotherapeutic interventions incorporating psychodynamic, cognitive, and behavioral approaches, as well as psychoeducational skill acquisition sessions are offered in both group and individual formats. These interventions are supplemented by the use of a structured program manual. The program consists of a 28-day residential track, a 28-day day hospital track, and an intensive aftercare component.



## II. HEALTH PSYCHOLOGY ROTATIONS

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



participates in the Behavioral Medicine ambulatory block clinics, which focus on teaching medical residents better interview techniques and include didactic lectures on psychosocial issues in medicine. The intern also participates in the Morbid Obesity Clinic (a multidisciplinary psychoeducational group for weight loss), an HIV Support Group, and a Preventive Medicine Clinic ( a resident teaching clinic where patients are assessed and treated for tobacco abuse, obesity, and non-adherence). Interns are also invited to attend various lectures, case conferences, and journal clubs sponsored by the Department of Medicine. Research opportunities are available.

### **PAIN MANAGEMENT CENTER (W)**

The Pain Management Center is a Section of the Anesthesiology Service at Wade Park. There is a strong emphasis on regional anesthetic interventions. Besides Anesthesiology, the core treatment team is drawn from the Nursing and Psychology professions. The Psychology Section of the program is involved in the behavioral/psychometric assessment of new patients for the purpose of evaluating appropriateness for opioid analgesics, spinal cord stimulation, and other implantable devices. The electroanesthetic techniques of Transcutaneous Nerve Stimulation and Neuroprobe are executed by the Psychology Section. Although the model of the Center is primarily consultative, there is opportunity for the psychology intern to follow select patients on a time-limited basis for behavioral management of pain utilizing techniques such as relaxation training, biofeedback and hypnosis. The intern will also be involved in co-directing the psycho education groups that cover topics such as electrotherapy modalities, pharmacologic principles and cognitive/physiologic self-regulative techniques. While independent research is not a requirement of the rotation, the field of pain management provides many opportunities for investigation, and this is encouraged.

## **CARDIOLOGY/BIOETHICS (W)**

An apprenticeship model of training is followed. Interns observe and assist while gaining rotation-specific knowledge and skills. As they develop expertise and confidence in the setting they assume more responsibility. By the end of the rotation, they can expect to function as independent members of the teams with indirect supervision. Rotation experiences include:

*Congestive Heart Failure/Heart Transplant Clinic:* A multidisciplinary Cardiology program developed to assess and treat patients with moderate to severe failure, this primary care outpatient clinic is designed to enhance patients' quality of life and optimize functioning. When indicated, patients are evaluated for heart transplant candidacy. Psychology interns are responsible for evaluation of patient risk factors, coping resources, and compliance. They develop treatment programs in close collaboration with the team cardiologist, dietitian, exercise physiologist, and nurses, utilizing both individual treatment and a monthly psychoeducational group. When transplant is indicated, interns prepare comprehensive psychosocial evaluations to aid referral hospitals in determination of transplant candidacy and work with team members to provide post-transplant care.

*Cardiac Rehabilitation Program:* A program designed to meet the rehabilitation needs of patients who have had heart attacks, bypass surgery, or defibrillator implantation. Patients and families are seen individually for assessment of risk factors, compliance problems, and anxiety and depression related to heart disease. Groups, which are also open to family members, focus on risk factor, stress, and weight reduction. Hospital and home based exercise are an integral part of this program.

*Critical Care Consultation:* Provides interns with broad exposure to the psychosocial problems of hospitalized, critically ill patients and their families. Interns function as members of the multidisciplinary CCU/MICU Team, and make weekly rounds. They gain experience in assessing and treating a variety of problems including: acute anxiety and depression, delirium, pain and bereavement. They also address the psychosocial ramifications of high technology medicine as members of the Home Ventilation Team and through providing Bioethics consultation.

*The Bioethics Program:* Permits psychology interns to assist patients, families, and staff when there is conflict about treatment decisions, including those related to limitation or withdrawal of life support. Issues commonly addressed include: decisional capacity, problems in communication, surrogacy, and informed consent. Facilitating resolution of staff/family/patient conflict is central to the consultation process. Bioethics Committee participation provides interns with administrative experience in policy development and quality improvement activities as well as the opportunity to do multidisciplinary ethics education and research.

## **NEUROPSYCHOLOGY SECTION (W & B)**

Neuropsychology rotations are available at either the Wade Park or Brecksville Campuses. In contrast to the Wade Park Campus (with emphasis on Neurology, rehabilitation, and case management), at the Brecksville Campus there is greater emphasis on differential diagnosis in patients whose primary diagnoses are psychiatric but who typically have additional neurological complications. There is a substantial emphasis on required background readings in neuroscience and related fields as well as readings conceptually targeted to particular cases and their relevant differential diagnostic issues. Considerable time is spent delineating cognitive mechanisms underlying impaired performance and how this relates to neuroimaging, radiological, neurological and neuropsychiatric data. Research opportunities are available at the Cleveland Clinic Foundation and our own facility.

## **GEROPSYCHOLOGY (W)**

Interns in the geropsychology rotation gain experience in the assessment, care and management of the elderly veteran in different settings. Psychological services are provided to a 12-bed inpatient Geriatric Evaluation and Management (GEM) Unit and to the outpatient medical Geriatric Clinic. To varying degrees, interns are involved in psychological and neuropsychological assessment of the patients. Individual, marital and family therapy are frequently utilized to help veterans and their families cope with a wide variety of difficulties including medical, neurological and psychiatric illness. Interns also help staff manage and treat patients more effectively by direct intervention, counseling or staff training. Interns are able to build and maintain therapeutic relationships with patients in this rotation. Interns learn to address issues specific to the aging population, including issues success competency, placement, grief and loss, dementia, behavioral issues, and psychosis.



## SPINAL CORD INJURY AND DISORDERS UNIT (W)

This is a new designated Center of Excellence for comprehensive medical care and rehabilitation of veterans with spinal cord injuries (SCI). This rotation offers experience in providing psychological services to people with disabilities, including diagnostic evaluation, psychotherapy process and psychoeducational groups, and behavioral contracting. Interns will become familiar with the medical aspects of SCI as well as the acute and long-term psychological problems associated with this disability, such as depression, anxiety, and substance abuse. The rotation emphasizes working within an interdisciplinary team in order to promote positive treatment outcomes and program development. Interns interested in acute medical or rehabilitation settings may benefit from the rotation.



**LOUIS STOKES CLEVELAND VA MEDICAL CENTER  
PSYCHOLOGY INTERNSHIP PROGRAM  
BROCHURE SUPPLEMENT 2005-2006**

**APPENDIX B  
PROGRAM UPDATE**

**Address**

Send application materials to:

Robt. W. Goldberg, Ph.D., ABPP  
Director of Psychology Training  
Mental Health Care Line GMH (B)  
Brecksville Unit, Building 5  
Louis Stokes Cleveland DVAMC  
10000 Brecksville Road  
Brecksville, OH 44141

**Basic Information**

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

Office of Program Consultation and Accreditation  
American Psychological Association  
750 First Street N.E.  
Washington, D.C. 20002-4242  
Phone: (202) 336-5974

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

**Internship Requirements**

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

**Applicant Interviews**

All applicants who have a completed set of application materials (i.e. including all documents such as references) by our deadline of DECEMBER 7 will be offered onsite interviews. The interview process takes a half-day and there will be several dates offered, on a first come first serve basis. That is, if your preferred date is already filled to our capacity when you contact us, you will need to choose another date where we have slots open. Onsite interviews are NOT required by our Program and, empirically, attending an onsite interview does not increase your probability

of matching with us. You will be informed of interview dates no later than DECEMBER 15 and communication with you regarding this will be e-mail, so PLEASE INCLUDE E-MAIL ADDRESSES (both at campus and during holiday break) on your AAPI material.

**Clarification: Tracks and Rotations:**

This is a clarification of the term “track” and “rotation” as they are used in accompanying materials and in our internship.

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

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

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

## APPENDIX C QUALIFICATIONS AND INTERESTS OF PARTICIPATING STAFF

**ABOOD, Laura M., Ph.D.**, University of New York at Binghamton, 1993. Assignment: Geriatric Medicine (Geriatric Outpatient Clinic and Geriatric Evaluation and Management Unit), and Hepatitis C Clinic. Theoretical orientation: eclectic, primarily cognitive-behavioral and family systems. Clinical specialization: geriatric behavioral medicine; individual, marital and family therapy; sexual dysfunction; multicultural issues. Teaching and supervision interests: aging, psychotherapy. Professional organizations: American Psychological Association, Ohio Psychological Association, Gerontological Society of America.

**ADAMS, Nancy L., Ph.D.**, Ohio University, 1981. Diplomate-Clinical Neuropsychology (ABPP). Assignment: Neurology and Neurosurgery Services; Neuropsychology Program. Theoretical orientation: syndrome oriented approach to neuropsychology, cognitive behavioral approach to therapy. Clinical specialization: neuropsychological assessment, short-term individual and family therapy for neurologically impaired patients, consultation. Publications: neuropsychology, medical psychology. Research interests: memory in neurologically impaired patients; cognitive deficit in-patients with caudate lesions; cognitive deficits in-patients undergoing carotid endarterectomies. Professional organizations: American Psychological Association, International Neuropsychological Society, Cleveland Neuropsychological Society. Teaching and internship supervision interests: neuropsychology.

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

**BERMAN, Susan P., Ph.D.**, University at Buffalo, 1991. Assignment: Program Manager, Dual Diagnosis Programs and Recovery Skills Program. Theoretical Orientation: psychodynamic. Clinical specialization: individual and group psychotherapy, addictions. Professional organizations: American Psychological Association, Ohio Psychological Association. Teaching and supervision interests: individual and group psychotherapy, psychodynamic psychotherapy, addictions.

**BONDESON, Mark, Psy.D.**, Illinois School of Professional Psychology, 1992. Certificate of Proficiency in Treatment of Alcohol and Other Psychoactive Substance Use Disorders (APA College of Professional Psychology). Assignment: Manager, Substance Abuse Division. Theoretical orientation: eclectic. Clinical specialization: substance abuse. Research interests: chemical dependency. Professional Organizations: Ohio Psychological Association, American Psychological Association. Teaching and supervision interests: substance abuse.

**CARROL, Edward N., Ph.D.**, University of Delaware, 1979. Assignment: Director of Pain Psychology, Pain Management Center. Theoretical orientation: physiologic, pharmacology, behavioral. Clinical specialization: electroanesthetic and pharmacological control of cancer pain. Publications: multimodal management of cancer pain, management of pain by transcutaneous nerve stimulation, conventional and neurprobe sensation seeking. Research interests: development of a multi-drug analgesic regimen for end-stage cancer pain, neurprobe blockade of radicular pain, outcome evaluation of pain Clinic efficacy, sensation seeking trait and its effect on response to pain therapy. Professional interests outside of VA: designer of and consultant to pain management center in private sector GM & S hospital. Professional organizations: International Association for the Study of

Pain, Midwestern Pain Society, Diplomat of the American of Pain Management. Teaching and supervision interests: assessment and multimodal management of respondent (organic) pain.

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

**CLOWER, Martha, Ph.D.,** Case Western Reserve University, 1991. Assignment: Program Coordinator, Dialectical Behavior Therapy Program, PTSD Division., Theoretical Orientation: Psychodynamic, cognitive/behavioral. Clinical specialization: Post-traumatic stress disorder, Dialectical Behavior Therapy, diagnosis and treatment of Axis II disorders, geropsychological treatment. Research interests: treatment of PTSD in elderly combat veterans, normal adult development and outcome research. Publications: Group psychotherapy for older adults; patient manual for the treatment of PTSD in WWII and Korean veterans.

**DELAMATRE, James, Ph.D.,** University of Akron, 1995. Assignments: Coordinator for Mental Health Compensation and Pension Evaluations, Wade Park and Brecksville Outpatient Clinics, Benefits and Employee Evaluations. Theoretical orientation: Integrative eclectic, Clinical specializations: assessment, health psychology. Publications and research interests: clinical use, theoretical validity, and psychometric properties of assessment instruments. Professional activities outside the VA: Adjunct Assistant Professor, Cleveland State University involved with various Ohio Department of Education Research Projects. Teaching and supervision interests: assessment and evaluation, individual and group psychotherapy.

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

**DONOVAN, Beverly, Ph.D.,** Kent State University, 1993. Assignment: Program Coordinator, Transcend Program, Substance Abuse Division. Clinical Specialization: Post-traumatic stress disorder; individual and group psychology, addiction rehabilitation counseling. Theoretical Orientation: Eclectic, with a blend of cognitive-behavioral, psychodynamic and existential perspectives. Research Interests: PTSD treatment including outcome research and traumatic nightmare reduction preliminary variables affecting PTSD symptomology, PET scan of brain blood flow among trauma veterans and addiction treatment. Professional Organizations: International Society of traumatic Stress (ISTSS), Ohio Psychologists Association.

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

**FINNERTY, Jennifer, Psy.D.,** Forest Institute of Professional Psychology, 2002. Assignment: Program Coordinator, Recovery Skills Program. Theoretical Orientation: Cognitive-Behavioral. Clinical Specialization: Personality Disorder Assessment and Treatment, Addictive Disorders Treatment, Individual and Group psychotherapy.

Research Interests: Dual Diagnosis. Professional Organizations: American Psychological Association. American Psychological Association, Division 50: Addictions, Teaching and Supervision interests: Cognitive-Behavioral treatment, Dual diagnosis assessment and treatment.

**GOLDBERG, Robert W., Ph.D.**, University of Michigan, 1971. Diplomate-Clinical (ABPP), Diplomate-Forensic (ABPP). Assignment: Director of Psychology Training. Theoretical orientation: psychodynamic. Clinical specialization: individual and group psychotherapy, psychological assessment, forensic psychology, psychoanalytic theory. Publications: history of professional psychology, negative outcomes of therapy, personality assessment, ego development and object relations. Research interests: Rorschach validity, malingering. Academic appointments: Adjunct Associate Professor of Psychology, Kent State University; Adjunct Assistant Professor of Psychology, Case Western Reserve University; Clinical Assistant Professor of Psychiatry, Case Western Reserve University, School of Medicine. Professional activities outside of the VA: independent practice; President-Elect, APA Division 18 (Public Service); past Corresponding Secretary, American Board of Forensic Psychology; past Secretary, Board of Directors, Association of Psychology Postdoctoral and Internship Centers; President, APA Division 18 (Public Service); Past Chair, VA Section 3, APA Division 18; Editor, The ABPP Specialist; Editor, APPIC Newsletter. Professional organizations: American Psychological Association, Ohio Psychological Association, American Academy of Forensic Psychologists (Fellow), Academy of Clinical Psychologists (Fellow), American Psychology-Law Society. Teaching and internship supervision interests: psychodynamic psychotherapy, projective assessment, forensic consultation.

**HARMON, Julie, Ph.D.**, Wayne State University, 1992. Assignment: Coordinator, Psychosocial. Rehabilitation (SMI). Theoretical Orientation: cognitive-behavioral with appreciation for psychodynamic underpinnings. Clinical specialization: psychosocial rehabilitation programming for seriously mentally ill; psychological assessment (cognitive, personality, projective, and diagnostic); individual and group psychotherapy; child assessment. Research interests: treatment outcome in addictive behaviors, classification and treatment outcome in schizophrenia. Presentations/Publications: assertive community treatment, treatment outcome in cocaine addicts, neuropsychological functioning in Tourette's Syndrome. Professional organization: American Psychological Association. Teaching and supervision interests: clinical diagnostic assessment, including use of the Rorschach; psychosocial rehabilitation and treatment of chronic, seriously mentally ill; individual and group psychotherapy.

**JOLLY, Jacqueline, K. Ed.D.**, University of San Francisco, 2000. Assignment: Clinical Coordinator and Vocational Rehabilitation Section Manager for the Psychosocial Rehabilitation Division of the Mental Health Care Line. Provide services to and clinical supervision for staff working as a multidisciplinary team with veterans substance abuse, severe mental illness, physical impairments, or some combination. Theoretical orientation. Cognitive-Behavioral, Family and Organizational Systems, Brief Psychodynamic such as Time-Limited Dynamic Psychotherapy (TLDP). Clinical Specialization: Expressive Arts, dual diagnosed and seriously mentally ill, Assessment, counseling & guidance and psychotherapy with individual, family, couples and groups. Research: Nonverbal Creative Abilities in Cognition as Predictors of Coping Response Patterns in Schizophrenia and in Schizo-affective and Bipolar disorders, Dissertation, MIMH-funded study of psychotic spectrum disorders focused on the neurocognition, symptom syndrome, electrophysiology, brain imaging, hematology, and biochemical characterization of community-dwelling outpatients with schizophrenia, psychotic mood disorders, and substance-induced psychotic disorders, epidemiological research project implementing and conducting Stanford Violence Prevention and Substance Use/Abuse Prevention Survey and Youth Risk Behavior Survey to middle and high school students funded by the department of public health. Outcomes research focused on the development of computer generated language and learning programs in the area of childhood learning disorders funded by Scientific Learning Corporation and the use of Brief Therapy in treatment of dual or triple diagnosed (major mental illness, substance dependence, HIV positive, terminal) at University of California San Francisco AIDS Health Project, and Brain and Attention in Substance Abusers with Posttraumatic Stress Disorder using neuroimaging and psychophysiological methodology.

Teaching and internship supervision interests: prevention, psychotherapy, counseling complex clients, expressive arts, research topics, clinical skills & Training course, behavioral learning theory, Jung, approaches to dreams & psychodynamic theory/control mastery copurse.

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

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

**LIEBENTHAL, David M., Ph.D.**, Northwestern University, 1980. J.D. University of Chicago, 1965. Assignment: Program Manager, Substance Abuse Program. Theoretical orientation: psychodynamic, cognitive, interpersonal. Clinical specialization: individual and group psychotherapy; staff development, training, and, supervision; program development. Professional presentations: post-traumatic stress disorder; dealing with anger in patients, and dealing with therapists' feelings of anger at clients; stress management. Professional activities outside of the VA: private practice. Professional organizations: Cleveland Psychological Association, Society for Traumatic Stress: Studies, Society of Psychologists in Addictive Behaviors, Cleveland and Chicago Bar Associations. Teaching and supervision interests: group psychotherapy, dual diagnosis, post-traumatic stress disorder.

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

**MCCUTCHEON, Kevan, Ph.D.**, University of Cincinnati, 1989. Assignment: Coordinator, Intensive Outpatient Program and Team Leader, Women's Trauma Treatment Program for PTSD Services, Center for Stress Recovery. Theoretical orientation: Eclectic. Linehan-trained in dialectical behavior therapy. Clinical specialization: Application of mindfulness to individual and group psychotherapy, development and manualization of Dialectical treatment of veterans with PTSD, character disorders, and/or addictions; couples therapy. Publications and presentations: Matching treatment to personality characteristics in addiction treatment, post traumatic stress disorder (treatment outcome and process predictors of outcome, the structure of trauma, debriefing and supervision, assessment, MMPI correlates, construct validity, stressor criterion). Professional Organizations: American Psychological Association, Ohio Psychological Association. Teaching and supervision interests: psychodynamic, psychotherapy and dialectical behavior therapy, parallel process, post-traumatic stress disorder. Professional activities outside the VA: private practice.

**MCGOVERN, Robert H., Ph.D.**, Case Western Reserve University, 1977. Assignment: Assessment Unit, Substance Abuse Division. Theoretical orientation: eclectic. Clinical specialization: assessment, medical psychology, hypnosis, neuropsychological assessment. Research interests: AIDS education, psychopathology

of the aged, family issues related to AIDS. Professional organizations: International Society for AIDS Education. Activities outside VA: Member, Board of Trustees, AIDS Housing Council of Greater Cleveland; Member, Patients' Rights Committee, Cleveland AIDS Commission: Member, Speakers' Bureau. Health Issues Taskforce: Co-facilitator, Significant Other Support Group for People with AIDS. Teaching and supervision interests: psychological aspects Of Physical disability, psychological and social issues related to AIDS, neuropsychological assessment.

**PADIN-RIVERA, Edgardo Ph.D.**, Vanderbilt University 1987, Acting Chief Professional Psychologist; Acting Manager, General Mental Health. Clinical specialization: PTSD interventions; addiction rehabilitation counseling. Research interests: change and intervention variables in group processes; variables associated with addiction and compulsive behaviors; PTSD Interventions. Professional Associations: International Society for Traumatic Stress Studies (ISTSS). Teaching and supervision interests: PTSD treatment, group process; systems consultation; addiction and compulsive behaviors; alternative intervention paradigms.

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

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

**RUGLE, Loreen J., Ph.D.**, Kent State University, 1990. Assignment: Gambling Treatment Program. Theoretical Orientation: Eclectic, combining cognitive and psychodynamic object relating perspectives. Clinical specialization: Addictions, group and individual psychotherapy. Publications: Pathological gambling, Attention Deficit Hyperactivity Disorder and gambling, psychodynamic treatment of gamblers, genetic factors, impulse disorders, neuropsychological assessment. Research interests: Treatment of pathological gambling, impulsivity and addiction. Neurophysiological vulnerability for development of addiction, subtypes of pathological gamblers, trauma and addiction. Professional activities outside the VA: Clinical Editor, Journal of Gambling Studies. Professional organizations: Trustee, Ohio Council on Problem Gambling; American Psychological Association; National Council on Problem Gambling. Teaching and internship supervision interests: Addictions, group and individual therapy for treatment of addiction.

**SHURELL, Richard, J., Ph.D.**, Kent State University, 1979. Assignment: Mood Disorders Section: Nursing Home Care Unit. Theoretical orientation: eclectic. Clinical specialization: individual assessment and treatment, forensic psychology, suicidology, consultation on high-risk patients, couples therapy. Educational activities: team building, stress management, prevention and management of disruptive behavior, dealing with anger and aggression, coping with difficult people. Professional activities outside of the VA: Private practice. Professional organizations: American Psychological Association. Internship supervision interests: individual and couples therapy, psychological assessment.

**STRAUSS, Gerald J., Ph.D.**, Kent State University, 1990. Assignment: General Internal Medicine, Palliative Care Team, Women's Health Clinic, Morbid Obesity Clinic. Theoretical orientation: eclectic 'cognitive-behavioral'. Clinical specialization: health psychology with emphasis in promotion of healthy behaviors, smoking cessation, weight reduction, stress management, and treatment of psychological factors affecting physical health; death and dying issues, grief/bereavement, and organizational stress staff support. Preceptor,

General Medicine resident Ambulatory Clinic (Preventive Medicine). Research interests: biobehavioral risk factors, psychosocial interventions to improve functional status of cancer patients, stages of change and motivations affecting health behaviors, work stress and healthy behaviors, morbid obesity, psychological factors in the treatment of diabetes. Professional activities outside the VA: Private practice with emphasis on health psychology and exercise/sports psychology. Professional organizations: American Psychological Association, Ohio Psychological Association (Task Force Chair on Prescription Privileges), Society of Behavioral Medicine, Akron Area Professional Psychologists, Ohio Prescribing Psychologists Association. Professional interests: prescription privileges for psychologists. Teaching and internship supervision interests: health psychology.

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

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