VA Puget Sound Health Care System American Lake Division

Psychology Doctoral Internship Program Brochure 2018 - 2019

Affiliated with the University of Washington
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TRAINING COMMITTEE

Allison Aosved, PhD
Chair, Psychology Training Committee
Director, Psychology Training

Jonathan Moore, PhD
Lead, Research Training

Zeba Ahmad, PhD
Lead, Diversity Training

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Lead, Assessment Training
Postdoctoral Preceptor

Mary Catherine Kane, PhD
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Lead, Education and Didactic Training

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Postdoctoral Preceptor

Lauren Hollrah, PsyD
Postdoctoral Preceptor

Annie Mueller, PhD
Postdoctoral Preceptor

Cody Bullock, PhD
Member-at-Large

Intern Liaisons (2017-2018)
Alex Torstrick & Tasha Wade

Resident Liaison(s) (2017-2018)
To be determined

Mark Reger, PhD
Chief of Psychology, Ad Hoc Member

Entrance, American Lake Division
ABOUT THE VA PUGET SOUND HEALTH CARE SYSTEM

Overview
With a reputation for excellence in caring for of our Nation’s Veterans, VA Puget Sound strives to lead the nation in terms of quality, efficiency, and public service. As the primary referral site for VA’s northwest region, VA Puget Sound Health Care System provides care for Veteran populations encompassing Alaska, Washington, Idaho, and Oregon. Since its inception, VA Puget Sound has distinguished itself as a leader in teaching, research, and patient care while earning prestigious recognition as part of the largest health care network in the country. We consider it our privilege to serve the health care needs of more than 80,000 Veterans living in the Pacific Northwest.

In addition to two divisions located at American Lake and Seattle, VA Puget Sound offers services at several community-based outpatient clinics. They are located in Bellevue, Bremerton, Federal Way, Mount Vernon, North Seattle, Port Angeles, and South Sound (Chehalis).

Mission
Honor America’s Veterans by providing exceptional and innovative care that improves their health and quality of life.

Vision
The Veterans Health Administration will continue to be the benchmark of excellence and value in health care. Our Mental Health Service strives to provide services reflective of the latest technologies in both patient-centered and evidence-based care. We provide this care in engaged, interprofessional teams who support learning, discovery, and continuous quality improvement. Our efforts also emphasize preventative and population health and contribute to the Nation’s well-being through education, research, and service in national emergencies.

Core Values
Compassion, Commitment, Excellence, Professionalism, Integrity, Accountability, Stewardship

More information on the VA Puget Sound Health Care System can be found at:
http://www.pugetsound.va.gov
ABOUT THE AMERICAN LAKE DIVISION

The VA Puget Sound Health Care System (VAPSHCS) is comprised of two divisions (American Lake and Seattle), each with its own set Psychology Training Programs. The American Lake Division of VAPSHCS is located in Lakewood, WA, a major suburb of Tacoma. Nestled along 1.8 miles of the beautiful American Lake shoreline with Mt. Rainier standing to the East, this Division enjoys one of the most beautiful settings in the VA system. The 378 acres of medical center grounds include 110 acres of natural habitat, 8 acres of lawns, and a 55-acre golf course.

The American Lake campus was founded in 1923 as the 94th Veterans Hospital built by the War Department for the provision of care to World War I Veterans. The Secretary of the Army authorized, under a revocable license, the Veteran Bureau's use of 377 acres of the 87,000 acre Fort Lewis Army Base property.

The planning committee chose a site on the western shores of American Lake and aspired to build a facility that was both functional and aesthetically pleasing. They chose a Spanish-American architectural style reminiscent of the United States early military structures, such as the Alamo. Many of the stucco and terra cotta buildings are listed on the National Register of Historical Buildings, and are still enjoyed by both patients and staff for their beauty.

The medical center was dedicated in 1924 and chartered with a single mission—neuropsychiatric treatment. On March 15, 1924, the first 50 patients were admitted to the hospital, by transfer, from Western State Hospital at Fort Steilacoom. Over the years, American Lake has grown from its original mission to a national leader in integrated health care. Psychologists, physicians, social workers, nurses and ARNPs, dentists, rehabilitative medicine, physician assistants, and auxiliary staff make up the more than 800 individuals employed at this campus.

American Lake’s Psychology Internship Training Program has been training doctoral psychology interns since the 1950s.
ABOUT THE TRAINING PROGRAM

Mission
Training provided through the American Lake Psychology Training Programs (Internship and Residency) supports the Mission of VA Puget Sound to “Honor America’s Veterans by providing exceptional and innovative care that improves their health and quality of life,” and the national VA Missions of patient care, education, research, and serving as back-up to the Department of Defense.

The Training Program has a specific mission, as captured in the following statement:
“It is the mission of the Psychology Internship Training Program at the American Lake Division of VA Puget Sound to ensure that Veterans and others across the nation have continuing access to highly qualified, ethical, and professional psychological staff who possess strong generalist skills, from a Scientist-Practitioner orientation, that is grounded in diverse clinical experiences, with sensitivity to and knowledge about the influence of ethnic, cultural, and individual differences on psychological services.”

Philosophy
It is our belief that excellence in health service psychology requires attention to ethics, diversity, science, and practice. The internship program at American Lake draws from the Scientist-Practitioner model, which requires the integration of science and practice. We subscribe to the belief that interns pursuing a career in clinical work should follow scientifically proven practices, and that those who become researchers should utilize clinical sensitivity and insight in designing and implementing their research.

Overview of the Training Program
The Doctoral Internship at American Lake provides supervised health service psychology experience to doctoral candidates in Clinical or Counseling Psychology who are enrolled in programs accredited by the Canadian Psychological Association (CPA), the APA CoA, or PCSAS.

Psychology Setting
The Psychology Service at the VAPSHCS is comprised of over 120 psychologists, 52 of whom are assigned to the American Lake Division. The Psychology Service, under the leadership of Dr. Mark Reger, is primarily affiliated with the larger Mental Health Service, though consists of staff that cut across service lines (e.g., Geriatrics and Extended Care, General Medicine Service, Anesthesiology, Rehabilitation Medicine). Internship training at the American Lake Division is provided by 52 doctoral-level psychologists, and supplemented by professionals from other disciplines. Psychologists work in clinical care programs, providing clinical, administrative, and/or research functions, depending on the needs of the particular program.

Program Aims
Our aims reflect our belief that a psychologist is defined both by specific training received and, more importantly, by the attitude with which clinical and research problems are approached. Our aims also support the VA’s broader mission of training psychologists competent and committed to practice in public service settings.
Our internship program is developed from the basic perspective that a health service psychologist should be broadly trained in accordance with the Profession-Wide Competencies (PWCs) defined by the APA. We believe a practitioner must be a generalist before he/she can be a competent specialist. To that end, internship training at American Lake is designed to provide clinical experience across the spectrum of psychological skills, while allowing for some experience in specialty or focus areas, as well as involvement in research. We expect each intern to participate in a range of placements that foster acquisition of PWCs, complement his/her individual training to-date, and further his/her professional development and career plans.

The intern should seek out and be exposed to a wide array of patients and problems, and should work with a variety of programs and supervisors. The intern is expected to further develop already-acquired PWCs. The intern is also expected to have exposure to, and/or direct clinical experiences with, patients that represent a cross-section of the diverse Veterans served at VAPSHCSs American Lake Division and to acquire sensitivity to, and knowledge of, cultural differences, as well as other individual differences that influence the manner in which services are provided.

The intern's transition from "student-in-training" to entry-level health services psychologist is as important to this program as the acquisition of technical skills. Interns are expected to develop professional relationships with other clinical staff and to participate as active and valuable members of the treatment team. Interns are partners in the development of training goals for their internship year.

The program has four overarching aims and the nine PWCs are addressed within those aims:

**Aims**

Our internship program’s major **aims** include:

1. Preparation for effective, entry level functioning in complex and comprehensive public service environments.
2. Development of professional identity that includes valuing justice, integrity, respect, and ethical practice.
3. Commitment to the appreciation, generation, and application of scientifically derived knowledge, including the integration of science with practice.
4. Commitment to and respect for individual and cultural diversity.

**Required PWCs**


**Intervention Skills**: Interventions designed to alleviate suffering, and to promote health and well-being of individuals, groups, and/or organizations. Integration of research and clinical expertise in the context of patient factors.
**Assessment Skills:** Assessment and diagnosis of problems, capabilities, and issues associated with individuals, groups, and/or organizations.

**Research:** Understanding of research, research methodology, techniques of data collection and analysis, biological bases of behavior, cognitive-affective bases of behavior, and development across the lifespan. Respect for scientifically derived knowledge. Generating research that contributes to the professional knowledge base and/or evaluates the effectiveness of various professional activities.

**Professional Values, Attitudes, and Behaviors:** Behavior and comportment that reflect the values and attitudes of psychology.

**Communication and Interpersonal Skills:** Practice conducted with personal and professional self-awareness and reflection, awareness of competencies and appropriate self-care. Relate effectively and meaningfully with individuals, groups, and/or communities.

**Individual and Cultural Diversity:** Possess and utilize awareness, sensitivity, and skills professional interactions with diverse individuals, groups, and communities who represent various cultural and personal background, and characteristics defined broadly and consistent with APA policy.

**Ethics and Legal Standards:** Awareness of legal issues and application of ethical concepts and behaviors regarding professional activities with individuals, groups, and organizations.

**Supervision:** Supervision and training in the professional knowledge base of enhancing and monitoring the professional functioning of others.

**Consultation and Interprofessional Skills:** Knowledge of key issues and concepts in related disciplines. Identify and interact with professionals in multiple disciplines. The ability to provide expert guidance or professional assistance in response to a client’s needs or goals.

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**Intern Preparation**

Incoming interns are required to be enrolled in doctoral programs in Clinical or Counseling Psychology that are accredited by the CPA, the APA CoA, and/or PCSAS. To be eligible to attend internship at American Lake, incoming interns must have adequate academic preparation, including that all coursework required for the doctoral degree must be completed prior to the start of the internship year, successful completion of any qualifying or comprehensive doctoral examinations, successful proposal of dissertation, be in good academic standing with the home graduate program, have provided face-to-face intervention to adult patients, have conducted face-to-face assessment with adult patients, have received individual supervision with direct observation of their graduate level clinical work, and meet the eligibility requirements for VA employment (see [https://www.psychologytraining.va.gov/eligibility.asp](https://www.psychologytraining.va.gov/eligibility.asp) for further details). However, because internship is part of the doctoral training requirement, interns must not be granted their degree by their academic institution prior to successful completion of the internship year.

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**Diversity Statement**

The Psychology Training Committee at the VAPSHCS, American Lake Division, is committed to fostering preparation for research and practice in a multicultural society among our trainees and
staff. We believe it is crucial to understand how facets such as race, ethnicity, language, sexual orientation, gender, age, disability, health status, socioeconomic status, education, and religious/spiritual views powerfully shape an individual's life and experience. Our Psychology Training Program is thus dedicated to creating an environment focused on increasing the knowledge of, and competence around, multicultural issues. In service of this aim, we formed a Diversity Committee which actively creates opportunities for our trainees and staff to discuss, experience, and learn about multiculturalism. We prioritize these opportunities as we believe that rich educational experiences are gained when we learn and work with people from a multitude of backgrounds. We welcome your participation in continuing to cultivate an inclusive workplace and community.

Administrative Policies and Procedures

**Leave:** See OAA national policies, as well as the Office of Personnel Management ([www.opm.gov](http://www.opm.gov)) for full information on leave and benefits for VA personnel. Authorized Absence may be applied for and is reviewed on an individual basis.

**Holidays and Leave:** Interns receive the 10 annual federal holidays. In addition, Interns accrue 4 hours of sick leave and 4 hours of annual leave for each full two week pay period as an Intern, for a total of 104 hours of each during the year.

**Privacy:** Our privacy policy is clear - we will collect no personal information about you when you visit our website.

**Due Process:** Impairment and grievance procedures are consistent with VA Human Resource regulations and outlined in the Psychology Internship Training Manual.

**Stipend:** Interns receive a competitive stipend paid in 26 biweekly installments. VA internship stipends are locality adjusted to reflect different relative costs in different geographical areas. The last stipend increase went into effect in February, 2010. Currently, the annual stipend at American Lake is $25,675.

**Benefits:** Internship appointments are for 2080 hours, which is full-time for a one year period. Start dates for the internships range from June 17 to September 1, with the specific start date decided by the Training Director at the site. At American Lake, the start date is July 24, 2018. VA Interns are eligible for health insurance (for self, spouses, and legal dependents) and for life insurance, just as are regular employees.

**Liability Protection for Trainees:** When providing professional services at a VA healthcare facility, VA-sponsored trainees acting within the scope of their educational programs are protected from personal liability under the Federal Employees Liability Reform and Tort Compensation Act 28, U.S.C.2679 (b)-(d).
THE TRAINING YEAR

Program Structure
The internship begins in late August every year. The dates for the 2018-2019 training year are July 23, 2018 through July 20, 2019. During the initial orientation to the training year, Interns become familiar with the various clinical/research programs and learn about specific training opportunities. They meet with the Training Director(s) to establish their needs and interests before choosing their rotations.

The program employs a four-month rotation structure, allowing for three rotations during the internship year. Rotations are based on a 40 hour work week, with training program requirements accounting for a portion of the overall time commitment. With few exceptions, all of the rotations will occur at the American Lake Division. To assure breadth, at least one rotation must focus primarily on psychological intervention, and no more than 2/3 of the training year may be focused primarily on neuropsychological assessment.

Diversity
The psychology training program at VAPSHCS, American Lake Division is sensitive to individual differences and diversity, and is committed to practice that is culturally sensitive. We value greatly the complexity and richness of cultural diversity, and strive to foster an environment that actively promotes diversity (e.g., age, disability, ethnicity, gender, gender identity, language, national origin, race, religion, culture, sexual orientation, or social economic status). Moreover, the concept of diversity is a central component of the internship training experience.

Training Experiences
A number of clinical and training opportunities exist within the program, including taking part in the American Lake’s Diversity Committee. This group is part of a national network of VA workgroups that challenge trainees and faculty alike in their awareness and implementation of individually and culturally informed best practices. Sensitivity to individual and cultural diversity is a PWC addressed in this program.

Community Experiences
The Pacific Northwest has a rich history of diversity. Washington State is home to over 60 Native American tribes, and has one of the highest concentrations (nationwide) of military personnel with Joint Base Lewis-McChord (Army/Air Force) just a few miles away from American Lake. Rich in the arts, the greater Puget Sound is home to a wide range of world class venues, to include Seattle Symphony, Pacific Northwest Ballet, Seattle Art Museum, Tacoma Museum of Glass, UW Arts Series, Seattle Men's & Women's Chorus, Bumbershoot, and Folk-life Festival, among many more. Activities in the region are as diverse as its people, spanning from Improv theatre, jazz clubs, and sports to ethnic and cultural celebrations, lectures, comedy, and other live performances.

Facility and Training Resources
As the American Lake Psychology internship program enjoys a long history of providing excellent training, it is well-integrated into the VA Puget Sound and VISN 20 Northwest Network training infrastructure. The full resources of VA Puget Sound, affiliated with the University of Washington,
are available to trainees in this program. The Psychology Training Program at American Lake has had training exchanges with Joint Base Lewis McChord and Western State Hospital, as well as the Seattle Division of the VAPSHCS, local Veterans Centers, and VA Community Based Outpatient Clinics. The Center for Education and Development at VA Puget Sound oversees all academic and continuing education activities for our facility, which includes over 1,600 academic trainees and more than 2,700 employees. There are two branch libraries as well as our medical media services.

In addition to the interprofessional core clinical staff and faculty, trainees receive support from administrative staff. Mental Health Service at American Lake has allocated necessary clinical space and equipment to insure high-quality training in the service of Veterans’ healthcare. There is dedicated office space as well as laboratory space in the research areas. State-of-the-art equipment made available for the training program include computers for staff, phones, video teleconference, fax machines, and copy machines. The medical record is completely computerized at this facility, so appropriate training and ongoing resources for using it effectively is available, as are a full selection of psychological assessment materials.
Research
While the primary focus of the internship year is the development and refinement of clinical skills, the internship program at American Lake adheres to the Scientist-Practitioner model of training. As such, a portion of the training year is focused on psychological research. Interns are required to develop a research project at the outset of the training year, in consultation with the Training Directors and Research Lead. Dissertation research is not an acceptable option for this training requirement. We define Research competency broadly and think of three categories of research. These include traditional research (e.g., RCTs, empirical projects requiring IRB review, generalization is expected), utilizing an implementation science (IS) framework to ask systems-based questions to evaluate models of care, and utilizing program evaluation and quality assessment/improvement (QA/QI) frameworks to illustrate clinical service challenges, opportunities, and potential solutions. Thus, an intern research project may take several forms, to include the following:

- Participate in an ongoing research project here at VAPSHCS (e.g., Mental Health Research, GRECC, etc.)
- Participate in an approved research opportunity connected to the intern’s home university (not dissertation)
- Conduct a meta-analysis in an area of the intern’s interest
- Complete a literature review and research methods section for relevant research that could be done here or taken to post graduate work
- Complete a grant proposal
- Complete an Implementation Science project to assess a systems level question
- Complete a Quality Assessment/Improvement project to assess a clinic/program level question
- Conduct an approved research project based off an open dataset (e.g., Pew Research Center, General Social Survey, etc.)

Interns may allocate up to four hours per week for research over the course of the training year, depending on the scope of their project. Interns must complete a research product (e.g., poster, presentation, or manuscript submission; grant submission; or, IS or QA/QI report) by early July and present their final project at the annual Research Colloquium – a part of the end-of-year psychology training retreat.

Service
Interns are asked to assist in the development and administration of the Training Program by participating in committees and activities. These opportunities include, but are not limited to, service on the Training Committee, service on the Diversity Committee, service on the Education and Didactic Committee, presentations to Psychology Service, participation in internship Interview Day, and/or assistance with development of orientation and training week for incoming interns.

Seminars and Other Educational Offerings
Education is an integral part of the training year, with a variety of opportunities available throughout the training year. Interns play an important role in shaping these didactic and other educational experiences by completing evaluation forms, participating in an end-of-year review with the Training Director(s), and active involvement with the Psychology Training Committee.
Intern Didactic Series
The intern Didactic Series is a weekly training experience comprised of a number of topics in the areas of professional development, administrative, clinical issues in psychology, culture and psychology, and current topics in clinical research. This is a **required** training activity. The intern Didactic Series is held every Tuesday from 15:00-16:30.

Psychology Service Seminar Series
The Psychology Service Seminar Series is a monthly continuing education program for the psychology faculty and trainees at the American Lake Division. Topics and presenters are quite varied, and are drawn from within the VA, nearby educational and governmental institutions, as well as from private practice. Interns may elect to give a presentation to the service during the course of the training year. This is a **required** training activity. The Psychology Service Seminar Series is held the 4th Wednesday of each month from 15:00-16:30.

Psychology Service (MHS) Journal Club
The purpose of the MHS Journal Club is to facilitate the review of a specific research study and to discuss implications of the study for evidence-based clinical practice. A journal club has been defined as an educational meeting in which a group of individuals discuss current articles, providing a forum for a collective effort to keep up with the literature. There are many advantages of participating in a journal club, including keeping abreast of new knowledge, promoting awareness of current clinical research findings, learning to critique and appraise research, becoming familiar with the best current clinical research, and encouraging research utilization. Interns are **required** to participate in the monthly MHS Journal Club, with each having the opportunity to lead one meeting over the course of the training year. The MHS Journal Club is held the 3rd Wednesday of each month from 15:00-16:30.

Intern Group Supervision of Supervision
Interns are additionally **required** to participate in a weekly competency-based group supervision of supervision series with their fellow interns. This is a special series on supervision and consultation whereby interns are afforded an opportunity to provide in-vivo peer supervision and consultation in concert with select senior psychologists in the program. This series is based on Falender’s Competency-Based Supervision model. The Intern Group Supervision of Supervision is held every Wednesday from 14:00 – 15:00.

Intern Group Supervision of Assessment
Interns are **required** to participate in a weekly group supervision of assessment series with their fellow interns. This is a special series on assessment whereby Interns are afforded an opportunity to develop their assessment competency via discussion, review of readings, role-play, and review of assessment case materials under the supervision of assessment supervisors in the program who take turns leading this supervision hour. The Intern Group Supervision of Assessment is held every Friday from 09:00 – 10:00.

Steven C. Risse Memorial Lecture Series
The Risse Lecture is an annual seminar co-sponsored by the Psychology Training Program at American Lake. This annual series provides half- and full-day trainings on a variety of mental health topics relevant to VA providers. This is a **required** training activity and usually takes place in the Fall.
UW Psychiatry Grand Rounds
Grand Rounds is a Department of Psychiatry & Behavioral Sciences Continuing Medical Education program, which consists of a series of educational lectures. Presenters at the Grand Rounds include both Department faculty and speakers from other institutions around the country. Grand Rounds typically occurs twice per month (generally every other Friday from 13:00 to 14:00). A yearly schedule, as well as access to the live telecast may be accessed at http://www.uwpsychiatry.org/education/grand_rounds/index.html. Attendance is optional.

Madigan Professional Development Series
The American Lake Psychology Training Program enjoys a strong training relationship with Madigan Army Medical Center, located at nearby Joint Base Lewis-McChord. American Lake interns are regularly invited to join active duty Army psychology interns’ and Residents’ educational and training experiences over the course of the training year. Participation in these events is optional.

Other Off-Site Training Opportunities
Additional off-site training opportunities are available over the course of the training year through the University of Washington, the Seattle Division of VAPSHCS, Western State Hospital, and other local trainings/experiences. In addition, Interns are encouraged to participate in unsponsored training and academic experiences, such as the APA annual conference and Washington State Psychological Association. These events may be approved for Administrative Leave on a limited case-by-case basis.

Intern Lunch
90 minutes per week is set aside for interns to meet and share concerns about issues of mutual interest. Interns are to be released from competing activities during this meeting time. The Psychology Training Committee strongly encourages interns to meet together; however, participation in the Intern lunch meeting is not required.

Supervision
Formal supervision (i.e., scheduled face-to-face individual contact) is provided for at least two hours per week. Two additional hours per week of structured supervision (group-based or individual) are also provided. Overall responsibility and coordination of supervision and training rest with the Psychology Training Directors at American Lake, in conjunction with Chief, Psychology Service.

Supervisors vary in their theoretical orientation and supervisory style. Each, however, is committed to providing a meaningful training experience, and provides supervision using the Competency Based Supervision framework (Falendar & Shafranske, 2004) that aligns with the APA Board of Educational Affairs (BEA) Guidelines for Clinical Supervision in Health Service Psychology http://www.apa.org/about/policy/guidelines-supervision.pdf. A supervision contract is negotiated between the intern and supervisor at the beginning of each rotation, addressing the content and goals of the rotation and focus of the supervisory sessions. The supervisor’s goal is to establish a collegial supervisory relationship in which both participants benefit professionally from the experience. A mid-rotation discussion between intern and supervisor addresses progress in meeting specified goals and allows for mid-course corrections as needed.
Evaluation
Each primary supervisor provides ongoing formative evaluation and two summative evaluations of the intern's performance, including integrating evaluative feedback from other supervisor's involved in the intern's training (e.g., secondary clinical supervisor, assessment supervisor, group supervision supervisor, research project mentor). One of the summative evaluations, occurring mid-rotation, focuses on the specific competencies required of all interns. The second evaluation is completed at the end of the rotation, and is based not only upon these competencies, but also upon the achievement of the agreed upon goals and professional performance expectations that served as the focus of supervision throughout the rotation. Both evaluations are discussed by the supervisor and intern. Copies of the end-of-rotation evaluations become part of the information sent to the intern's graduate director of clinical training, providing feedback about the internship year.

Both summative evaluations are retained after the internship is completed and provide a basis for letters of recommendation. Successful completion of the training year rests on successful completion of each rotation and the required training activities.

The intern provides an evaluation of the training experience at the mid-way point and at the end of each rotation. Further, at the end of the training year, the intern provides an overall evaluation of his/her internship experience. Both interim and final evaluations provided by the interns assist the program in its self-assessment process.

Supervisory staff meet monthly in the Psychology Supervisors’ Meeting to review intern progress as well as to discuss general issues related to the training program.

Training staff and interns meet monthly or as needed to discuss policy concerns and evaluation procedures.

Requirements for Successful Completion
Consistent with APA CoA expectations, we have identified clear minimum levels of achievement (MLAs):

**In order for interns to maintain good standing in the program they must:**

- Establish training goals and rotation objectives that are consistent with the Psychology Training Program's training goals
- For the first and second training rotations, obtain ratings of at least a “3” in all of the Competency Ratings areas on Supervisor's End-of-Rotation Evaluation
- Attend and actively participate in each of the required seminars and training activities described earlier in this manual
- Not be found to have engaged in any ethical, legal, or conduct violations

**In order for interns to successfully complete the program, they must:**

- Successfully complete the required three assessments
- Successfully complete the research project
- By the end of the third rotation, obtain ratings of “5” in all of the Competency Ratings areas on Supervisor’s End-of-Rotation Evaluation
- Not be found to have engaged in any ethical, legal, or conduct violations
- Deliver all signed evaluations and training logs (annual training goals, supervision contracts, rotation training goals, mid-rotation evaluations, end-of-rotation evaluations, log of internship activities [hours, didactic, assessment], research goals, mid-research evaluation, end-of-research evaluation, mid-year goals, and final internship report).
The American Lake Addiction Treatment Center (ATC) is an outpatient based specialty program focused on the treatment of substance use disorders as well as other co-occurring mental health diagnoses. The patient population is comprised of persons who have ongoing problems with alcohol and/or prescribed or illicit substances, with alcohol being the most common drug of choice. The population ranges widely in age and is ethnically and racially diverse; approximately 40% of the patients served in the ATC are legally mandated to treatment. Typically, our patients have substantial disruption in their significant relationships; most are divorced or separated. Many are unemployed and homeless. Concomitant medical problems related to substance abuse are common. Treatment offerings are individualized with the range of services provided being based on the patient’s identified recovery goals and readiness for change. Offerings may vary from abstinence monitoring on a weekly basis and weekly group therapy, up to intensive 12-week rehabilitation focused treatment with both group therapy and psychoeducational classes. The ATC also offers both office based and clinic based buprenorphine, as well as methadone via our Opioid Treatment Program.

Profession-Wide Competencies addressed on this rotation include: Ethics and Legal Standards, Individual and Cultural Diversity, Professional Attitudes, Values, and Behaviors, Communication and Interpersonal Skills, Assessment, Intervention, and Consultation and Interprofessional Skills.

Staff:
Drs. Elisia Yanasak, Alicia Wendler, Sareeta Beeram, and Sean Robinson are the supervising psychologists on this rotation.

Training:
An intern who chooses this rotation will have the opportunity to function as a member of the interprofessional treatment team delivering services to Veterans seeking care for substance use problems. The intern may serve as a co-therapist in one of the multiple intensive outpatient therapy groups that meet three times per week; will serve as a case manager for selected clients in the program; will work with selected patients individually utilizing a short-term therapy approach; will have the opportunity to participate in weekly support groups as a co-leader; and will conduct intake assessments for selected patients. Interested interns may also participate in our dual disorder group that is designed to address both the addiction and mental health needs of the patients with serious and persistent mental illness and co-occurring substance use disorders. In addition, the ATC program offers specialty groups in which an intern may choose to participate. Examples include a mindfulness meditation group, a support group for patients in our opioid treatment program, and Seeking Safety.

Supervision:
Interns will be provided with two hour of individual supervision per week and will attend weekly interdisciplinary team meetings. Direct observation is provided via co-therapy, live observation, and/or video tape review.

Capacity and Time:
This rotation can accommodate one intern at a time.
Monday
A.M.  Intake with Veteran entering substance abuse treatment

P.M.  Co-facilitate weekly support; Individual supervision; Individual therapy/case management; Treatment team meeting

Tuesday
A.M.  Co-facilitate intensive outpatient group; Individual therapy/case management

P.M.  Individual therapy/case management; Intern didactic series

Wednesday
A.M.  Individual consultation; Individual therapy/case management; Co-facilitate intensive outpatient group

P.M.  Individual therapy/case management; Group supervision; Psychology service seminar series/Journal club/Staff meeting/Peer consultation

Thursday
A.M.  Individual supervision; Individual therapy/case management; Co-facilitate intensive outpatient group

P.M.  Individual therapy/case management; ATC team meetings

Friday
A.M.  Individual supervision; Group supervision; Co-facilitate mindfulness based relapse prevention

P.M.  Research time
Interns on this rotation will be exposed to the core professional attitudes and values necessary for working with older adults, as well as major ethical concerns unique to this population. Working with older people, and those at end of life, requires a dedication to self-awareness in practice as well. Older age is itself a facet of diversity, and within this population are found others, to include physical and cognitive limits, as well as gender, ethnicity, LGBTQ status, religious status, and socioeconomic status. The rotation is based in the Geriatrics and Long Term Care Service. As such, interns are exposed to an interdisciplinary and team-based approach to care, in a medical setting. Clinically, this rotation provides experience in consultation and psychotherapy with an older adult population. Assessment opportunities arise, but these are secondary in nature. There are no opportunities for research on this rotation. However, we adhere to common standards and current grounding in established treatments and geropsychological theory. The rotation is best suited for an intern who plans to engage in older adult care to some extent (even if not exclusively) as her or his career proceeds.

This rotation was developed to meet the standards established in the Pikes Peak Competencies for geropsychology training. Program competencies specifically addressed within this rotation experience include Assessment, Intervention, Ethics and Legal Standards, Professional Communication, and Individual & Cultural Diversity.

Staff:
Dr. Douglas Lane is the supervising psychologist for Interns in this rotation. Other staff include the current geropsychology post-doctoral fellow.

Training:
Interns entering this rotation are expected to have already a solid grounding in psychotherapeutic work, with comfort using techniques from major theoretical orientations (CBT or ACT or IPT, etc). The intern will see inpatients, outpatients, and consult as part of treatment teams. Serving in a consultative role requires the intern to develop abilities in peer consultation and communication outside of traditional mental health disciplines. The intern is expected to generate a scholarly presentation for the Geriatrics and Extended Care journal club series. There are also didactic seminars available through the GRECC, MH Neuropsychology, and Geriatric Medicine.

Supervision:
Interns will be provided with two hour of individual supervision per week as well as 1 hour(s) of group supervision together with the geropsychology fellow. The fellow will also provide tiered supervision for the intern. Direct observation is provided via co-therapy, live observation, and/or video tape review. Dr. Lane also employs “shadowing” whereby the intern and Dr. Lane see patients together, in some circumstances.

Capacity and Time:
This rotation can accommodate one intern at a time. It is not open first rotation.
A Week in the Life...

Clinical Geropsychology

Allison Jay
University of Colorado, Colorado Springs (PhD)

Monday
A.M. Supervision; Psychotherapy sessions - Blue Team Primary Care

P.M. Psychotherapy sessions - Blue Team Primary Care; Neuropsychology Seminar

Tuesday
A.M. Report writing; Geriatrics Journal Club; Interprofessional team meetings

P.M. Couples Dementia Group; Dementia Special Care Unit team meeting; Intern Didactic Seminar

Wednesday
A.M. Geriatrics Didactic; Dementia care unit intake evaluations; Psychotherapy sessions; Capacity evaluations; Assessments

P.M. GRECC seminar; Psychotherapy sessions - CLC; Assessment Supervision; Psychology service seminar series/Journal club/Staff meeting/Peer consultation

Thursday
A.M. Supervision; Report writing; Patient consultations

P.M. Family Caregiver Education Group; Report writing

Friday
A.M. Assessment supervision; Work on research project

P.M. Intern lunch; Work on Chief Intern projects/tasks
GERIATRIC NEUROPSYCHOLOGY

The Geriatric Neuropsychology rotation, housed in the Geriatric Research, Education and Clinical Center (GRECC), provides specialized experience in geriatric neuropsychological assessment in an outpatient, consultation-based clinic. The intern will gain specialized experience in assessing and treating patients with Alzheimer’s disease, the most common form of dementing illness, as well as other, less common forms of dementia. The GRECC team is based at the Seattle Division of VA Puget Sound and is multi-disciplinary and interprofessional (e.g., geriatricians, psychiatrists, psychologists, social work, pharmacy, endocrinology, and nursing).

This rotation addresses the following competencies: Assessment/Evaluation, Consultation and Interprofessional Skills, Intervention Skills, Individual and Cultural Diversity, Ethics and Legal Standards, Research, Communication and Interpersonal Skill, and Professional Values, Attitudes, and Behaviors.

Staff:
Dr. Emily Trittschuh is the primary supervisor for this rotation. Dr. Mark Reger may provide supervision for up to one case per month.

Training:
Rotation activities will include 1) Neuropsychological Evaluation of patients from the Memory Clinic sponsored by GRECC. Training in assessment will include chart review, an interview with the patient and collateral, administration of neuropsychological tests, scoring test results, and writing a consultative neuropsychological report. 2) An important part of our provision of clinical services is conducting an hour-long Feedback Appointment for the Veteran and their loved ones a few weeks after the evaluation. This session pulls together all the skills important to a clinical neuropsychologist – for example, providers give feedback on results (using lay language), conveyance of often difficult diagnoses, managing family dynamics, behavioral management, and even some memory skills training. Having an intern get to the point where they are the lead for all aspects of the Neuropsychological Evaluation and Feedback is a key goal. This will be achieved by an orderly progression of increasing responsibility based on demonstrated skill. 3) Co-Lead a Memory Skills psycho-educational group for older Veterans with PTSD. And 4) new for this training year, assist with TeleNeuropsychology Brief Evaluations.

The intern might travel to the Seattle division of VA Puget Sound one day per week (but never more) to take advantage of the full range of GRECC activities. Shuttle service from American Lake is available. Interns will be given the opportunity to participate in research projects, if they so desire. Finally, the intern will participate in GRECC didactic activities such as regular seminars, interprofessional activities, journal clubs, and case presentations. Prior experience in neuropsychological assessment is recommended.

Supervision:
Two hours of individual, face-to-face supervision are provided each week. Ad hoc supervision is readily available, as needed.

Capacity and Time:
This rotation can accommodate one intern at a time. GRECC will not be accepting a trainee during the first rotation of the 2018/19 year, but rotation placements are possible for second and third rotations.
Monday
A.M. Report writing; GRECC Team Meeting
P.M. Neuropsychology Seminar

Tuesday
A.M. Intern breakfast
P.M. Feedback session; Note/report writing; Intern Didactic Seminar

Wednesday
A.M. Neuropsychological Assessment; Assessment scoring; Feedback session
P.M. Individual Supervision; Intern check-in with Training Directors; Psychology service seminar series/journal club/staff meeting/peer consultation

Thursday
A.M. Assessment scoring; Report writing; Feedback session
P.M. Report writing; Feedback session

Friday
A.M. PTSD Memory Skills group; Note writing; Group assessment supervision
P.M. Research; Chief Intern projects/tasks

Kelly A. O’Malley
University of Colorado, Colorado Springs (PhD)
MENTAL HEALTH CLINIC

The Mental Health Clinic (MHC) is the specialty mental health service’s all-purpose mental health outpatient clinic, which serves patients reflecting the full spectrum of mental health needs. This patient population ranges widely in age and is ethnically and racially diverse; approximately one-third of patients are women. Among the patients served in the MHC, all diagnoses are represented (depression is most common, followed by anxiety) with the majority of patients presenting with co-morbid conditions. The MHC staff includes psychologists, nurses and advanced practice nurses, social workers, occupational therapists and psychiatrists.

Profession-Wide Competencies addressed on this rotation include: Assessment, Intervention, Ethics and Legal Standards, Individual and Cultural Diversity, Consultation and Professional Skills, Professional Attitudes, Values, and Behaviors, and Consultation and Interpersonal Skills.

Staff:
Drs. Carol Becker, Eric Clausell, Janna Fikkan, Anne Mueller, and Mark Soelling are the clinical supervisors for this rotation.

Training:
The intern’s core experiences on this rotation embody the essence of this training program’s generalist philosophy, emphasizing evidence-based individual, couples’ and group psychotherapy, psychological assessment, and psychological consultation with an interprofessional staff. The intern will engage in clinical assessment and treatment of our Veterans, will navigate ethical issues as they arise with our population, and will work with the diverse life experiences represented within our clinic. The intern will operate as a member of a Behavioral Health Interdisciplinary Program (BHIP) team.

Supervision:
Interns will be provided with two hours of individual supervision per week and will attend weekly interdisciplinary BHIP team meetings (to be assigned based on primary supervisor). Direct observation is provided via co-therapy, live observation, and/or video tape review.

Capacity and Time:
This rotation can accommodate two interns at a time.
Monday
A.M. Psychotherapy sessions; Integrative Behavioral Couples Therapy (IBCT minor) session
P.M. Psychotherapy sessions; Supervision

Tuesday
A.M. Clinic team meeting; Psychological assessment/report writing
P.M. Clinic intake; Intern Didactic Series

Wednesday
A.M. Supervision; Psychotherapy session or Diversity Mentor meeting; Work on research project
P.M. Psychotherapy session; Group Supervision of Supervision; Psychology service seminar series/journal club/staff meeting/peer consultation

Thursday
A.M. Supervision; Co-facilitate Cognitive Processing Therapy Group
P.M. Co-facilitate Acceptance and Commitment Therapy for Anxiety Group; Work on research project

Friday
A.M. Psychotherapy sessions; Group Assessment Supervision
P.M. IBCT session; Work on admin projects; Intern lunch
MHC NEUROPSYCHOLOGY

While MHC Neuropsychology is housed in the MHC, we are a generalist neuropsychology clinic that receives consults from throughout the hospital. Our most common referral sources are the Mental Health, Neurology, and Primary Care Service Lines. The patient population ranges from Veterans in their 20’s to those in their 90’s and is ethnically and racially diverse. In addition to our general outpatient clinic, we evaluate Veterans who are residing in the Community Living Center (CLC) either for long-term care or shorter-term respite care. We also see Veterans who are residing in the Domiciliary for various programs including intensive PTSD treatment, blind rehabilitation, and substance use treatment. We have a clinical database that can be used for QI opportunities (and potentially research).

Program competencies specifically addressed within this rotation include Assessment, Ethics and Legal Standards, Individual and Cultural Diversity, Consultation and Professional Skills, Professional Attitudes, Values and Behaviors, and Consultation and Interpersonal Skills.

Staff:
Supervisors on this rotation are Drs. Brett Parmenter and Troy Stettler. Ms. Shonn Devroy is the MHC Neuropsychology Psychology Technician.

Training:
Interns on the MHC Neuropsychology rotation will work primarily with one supervisor although might have opportunities to see cases with the other supervisor. The focus of this rotation is on neuropsychological assessment and the intern will be scheduled to see at least one case per week. This will include chart review, interview, testing, scoring, report write-up, and feedback. These are cases scheduled to see the supervisor, which allows for close supervision on every case. We follow a developmental model to supervision to allow the intern to take more of a lead in the cases seen as the rotation progresses. While on this rotation, interns are required to attend the weekly Neuropsychology Seminar, monthly Neuropsychology Journal Club, and monthly Neuropsychology Case Consultation.

Supervision:
Interns will be provided with two hour of individual supervision per week and will attend weekly interdisciplinary BHIP team meetings (to be assigned based on primary supervisor). Direct observation is provided via co-therapy, live observation, and/or video tape review.

Capacity and Time:
This rotation can accommodate one intern at a time.
A Week in the Life…

Amy Claxton
University of Massachusetts, Amherst (PhD)

Monday
A.M. Supervision; Neuropsychological Assessment

P.M. Neuropsychological Assessment; Neuropsychology Seminar

Tuesday
A.M. Mental Health Clinic Team Meeting; Assessment Scoring

P.M. Feedback session; Intern Didactic Seminar

Wednesday
A.M. Assessment report writing; Neuropsychological Assessment

P.M. Report and note writing; Intern Check-in with Training Directors; Psychology service seminar series/Journal club/Staff meeting/Peer consultation

Thursday
A.M. Supervision; Report writing; Feedback session

P.M. Feedback session; Neuropsychology Case Consultation; Neuropsychology Journal Club

Friday
A.M. Group assessment supervision; Work on research project

P.M. Intern lunch; work on Chief Intern projects/tasks
PAIN CLINIC

The pain clinic consists of a multidisciplinary team approach to chronic pain. There are two psychologists, a physician, a physical therapist, a physician assistant and two nurses who work together to administer comprehensive pain management care for veterans with complex chronic pain. The clinic practices from a Biopsychosocial approach, which drives much of the treatment. Mindfulness, ACT, and CBT are strong components in the clinic. The multidisciplinary approach to pain management consists of integrating disciplines to assess and treat pain through behaviorally based methods.

In participating in this rotation, the intern develops the following Profession Wide Competencies: Consultation and Professional Skills, Intervention, Individual and Cultural Diversity, Professional Attitudes, Values and Behaviors, and Consultation and Interpersonal Skills.

Staff:
Drs. Lauren Hollrah and Laura Tuck are the supervising psychologists on this rotation. Other staff include, Stephen Hedt, PA-C, Alex Wolfe, DPT, Kathy Rinehart, Pharm.D., and Bernard Canlas, M.D.

Training:
The rotation consists of educational classes for veterans about complex chronic pain, led by the PA and psychologist. There are also groups related Mindfulness based and ACT approaches to the management of chronic pain. In addition to individual sessions, the pain clinic also assesses veterans from a co-disciplinary standpoint where an intake and subsequent follow-ups are done with the PA and psychologist at the same time.

The Outpatient Functional Restoration Pain Program (oFRPP) is a 2 days a week program, four hours each day for 8 weeks. There are Physical Therapy groups, Psychology groups and Mind-Body groups led by each of the disciplines. This program was CARF accredited in September 2015. There will be the opportunity to work on preparing for reaccreditation and a CARF survey in the 2017-2018 academic year. There is also a Residential Functional Restoration Pain Program (rFRPP), which is a 5 week program, where the participants live in the Domiciliary on campus. Veterans attend programming from 9am to 3pm, which consists of physical therapy, psychology groups, mindfulness, relaxation, general health and holistic approaches to pain management. The intern will participate in leading groups, co-leading groups, providing individual therapy and co-disciplinary treatment. There will be many opportunities to learn what it is like to be a part of a multidisciplinary team, working closely with other disciplines and collaborating on patient care and program development.

Supervision:
Interns will be provided with two hour of individual supervision per week and will attend weekly interdisciplinary team meetings. Direct observation is provided via co-therapy, live observation, and/or video tape review. Trainees may also attend the Wednesday noon Rehabilitation Psychology didactics with Seattle via VTEL and the SCAN ECHO collaboration with the DOD for didactics and case presentations.

Capacity and Time:
This rotation can accommodate 1 intern at a time.
PROMOTING ACCESS THROUGH TELEMENTAL HEALTH (PATH)

The PATH Service is a clinical, educational, and research group that focuses on using technology to augment and improve access to mental health care. Clinically, PATH’s primary function is to provide mental health services via clinical video teleconferencing (CVT) to Veterans at community-based VA clinics or non-VA locations (e.g., home). Veterans receiving services through PATH have a variety of clinical presentations, but most typical include trauma-related, anxiety, and depressive disorders. The PATH Veteran population demographics are generally consistent with those of the entire VA Puget Sound mental health service population; however, the PATH population is notably more rural and white than this reference group—45.4% to 21.0% and 83.3% to 63.3%, respectively (the VA Puget Sound rural Veteran population is 84.4% white). A majority of PATH’s clinical services are in an individual format, but group options exist and will expand. PATH strongly emphasizes evidence-based psychotherapy. Assessments are primarily for diagnostic or measurement-based purposes. Research has a significant role in PATH. At any given time there may be a number of quality improvement or research projects underway.

This rotation addresses the following Profession Wide Competencies: Consultation and Professional Skills, Intervention, Individual and Cultural Diversity, Professional Attitudes, Values and Behaviors, Research, and Consultation and Interpersonal Skills.

Staff:
Dr. Russell McCann is the primary supervisor for this rotation. Clinically, the PATH Service comprises four psychologists, two psychiatrists, and a nurse care manager. These providers work across the American Lake and Seattle campuses, and many also telework, to include two providers teleworking from out of state.

Training:
The intern on the PATH Service rotation will learn how to provide mental health services via CVT and leverage other technologies in practice. The intern will have an opportunity to learn and apply treatments such as prolonged exposure therapy (PE), cognitive processing therapy (CPT), acceptance and commitment therapy (ACT), behavioral activation (BA), and cognitive behavioral therapy for insomnia (CBT-I). The intern will have an opportunity to learn and use assessments such as the Clinician-Administered PTSD Scale for DSM-5 (CAPS-5). The intern will participate in educational and research efforts.

Supervision:
Interns will receive two hours of individual supervision per week from Dr. Russell McCann. Interns with interest in ACT and/or CBT-I may receive additional supervision via CVT from Dr. Erika Shearer. This additional supervision does NOT count toward the internship individual supervision requirement. Direct observation of the intern’s clinical work may include co-therapy/assessment and or live observation. The intern may also capture audio from sessions to support treatment fidelity. The intern will take part in a weekly consultation meeting with the larger PATH Service.

Capacity and Time:
This rotation is able to accommodate up to one intern at a time, with the determining factor being space availability. This experience will likely be available most rotations.
A Week in the Life...

Promoting Access Through Telemental Health (PATH)

Jean Kim
University of Southern California (PhD)

Monday
A.M. Individual Supervision; Individual psychotherapy sessions

P.M. Academic PATH meeting (monthly); Administrative time; Individual psychotherapy sessions; Co-lead TMH Orientation group

Tuesday
A.M. Individual psychotherapy sessions; Co-lead TMH Orientation group

P.M. Individual psychotherapy sessions; Intern Didactic Series

Wednesday
A.M. Administrative time; Portland VAMC consultation/didactic; Individual psychotherapy sessions

P.M. TMH didactic (monthly); Administrative time; Supervision of Supervision; Psychology service seminar series/Journal club/Staff meeting/Peer consultation

Thursday
A.M. PE Therapy Consult group; Individual Supervision; Co-lead CBT for Insomnia group

P.M. Individual psychotherapy sessions

Friday
A.M. PATH team meeting; Assessment supervision; Administrative time

P.M. Intern lunch; Research
POSTTRAUMATIC STRESS DISORDER OUTPATIENT CLINIC (POC)

The POC is a specialized, outpatient clinic that provides evidence-based, trauma-focused treatment for Veterans who struggle with PTSD as a result of their military service. Treatment in the POC is largely group based, with a number of treatment options available to help prepare a Veteran for an evidence-based, PTSD-focused intervention. Such evidence-based, PTSD-focused interventions are most likely to be in an individual format. The POC patient population ranges widely in age and is ethnically and racially diverse; approximately fifteen percent of patients are women. Among the patients served in the POC, the majority of patients present with a primary diagnosis of military related PTSD, with many also presenting with co-occurring conditions.

Program competencies specifically addressed within this rotation include Assessment, Intervention, Ethics and Legal Standards, Individual and Cultural Diversity, Consultation and Interpersonal Skills, and Professional Attitudes, Values and Behaviors.

**Staff:**
Supervisors on this rotation are Drs. Noelle Balliett, Cody Bullock, Jennifer King, Dale Smith, and Alycia Zink. Dr. Bullock serves as an assessment supervisor for the internship program and thus is less available as a primary supervisor for this rotation.

**Training:**
The intern's core experiences on this rotation embody the essence of this training program's generalist philosophy, emphasizing evidence-based individual and group psychotherapy, psychological assessment, and psychological consultation with an interprofessional staff. The POC is staffed by six clinical psychologists, two clinical social workers, and two mental health counselors. Additional team members typically include interprofessional trainees (social work practicum student, psychology doctoral intern[s], and a psychology postdoctoral resident). Although the roles and functions of each team member may vary based on discipline and/or expertise, all staff from all disciplines are integral members of this interprofessional team. Each of the POC staff therapists is trained, formally or informally, in at least one of the following evidenced-based treatments with some trained in more: CPT, PE, Cognitive Behavioral Therapy for Insomnia (CBT-I), Exposure, Relaxation, and Rescripting Therapy-Military (ERRT-M), Acceptance and Commitment Therapy (ACT), and Unified Protocol (UP) for Transdiagnostic Treatment of Emotional Disorders.

**Supervision:**
Interns will be provided with two hours of individual supervision per week and will attend weekly interprofessional POC team meetings. Direct observation is provided via co-therapy, live observation, and/or video tape review.

**Capacity and Time:**
This rotation can accommodate one to two interns at a time, with the limiting factor for a second intern being office space in the clinic to accommodate patient care provided by more than one intern.
A Week in the Life…

PTSD Outpatient Clinic (POC)

Sandy J. Lwi
University of California, Berkeley (PhD)

Monday
A.M. POC Psychology evaluation (Intake)
P.M. Psychotherapy sessions; Treatment planning sessions

Tuesday
A.M. Psychotherapy sessions; Supervision; Co-lead Unified Protocol group
P.M. Psychotherapy session; Intern Didactic Seminar

Wednesday
A.M. Psychotherapy sessions; Co-lead PTSD 101 group; Team meeting
P.M. Psychotherapy sessions; Supervision of supervision; Psychology service seminar series/Journal club/Staff meeting/Peer consultation

Thursday
A.M. POC Psychology evaluation (Intake)
P.M. Research

Friday
A.M. Assessment supervision; Psychotherapy sessions
P.M. Intern lunch; Psychotherapy sessions; Supervision
PRIMARY CARE MENTAL HEALTH INTEGRATION (PCMHI)

The Primary Care Mental Health Integration (PCMHI) team provides consultation and collaborative care alongside primary care staff to Veterans with mild to moderate mental health conditions and behavioral health concerns. This multidisciplinary team setting offers same-day access to Veterans enrolled in primary care services, facilitates psychoeducational classes and group therapy, and provides brief, evidence-based, individual therapy to meet a variety of Veterans' needs. Trainees can expect to gain experience with brief functional assessment, risk assessment, treatment planning, intervention skills, consultation, and team-based collaborative care. The PCMHI team serves a diverse population with varying cultural, educational, and religious backgrounds.

Profession Wide Competencies addressed on this rotation include: Assessment and Intervention, Individual and Cultural Diversity, Research, Ethical and Legal Standards, Communication and Interpersonal Skills, Professional Attitudes, Values and Behaviors, and Consultation and Interprofessional Skills.

Staff:
Primary supervisors for PCMHI include: Drs. Josh Breitstein, Emily DiNatale, Amee Epler, Mary-Catherine Kane, Lori Katz, Jason Katzenbach, and Burton Kerr. Additional consultants on rotation include: Ms. Candy Campbell, Ms. Kris Delicana, Ms. Traci Donals, Dr. Liz Hirschhorn, Dr. Hedy Rougeau, and Dr. Luz Starck.

Training:
This rotation is focused on brief, functional assessment and evidence-based therapies. An intern on this rotation may engage in a number of ongoing quality improvement projects, where trainee participation is encouraged at all stages, including project development. The intern will also be exposed to common ethical and legal issues including risk assessment, end-of-life, vulnerable adult status, third-party mandated reporting, ability to make medical decisions, navigating Federal versus State codes, and privacy and confidentiality. Consultation and collaboration with primary care staff are also an integral part of this rotation, including contributing to team meetings and formal didactic opportunities, and team-based treatment planning and interventions.

Supervision:
Interns will be provided with two hours of individual supervision per week and will attend weekly PCMHI team meetings. Direct observation is provided via co-therapy, live observation, and/or video tape review.

Capacity and Time:
This rotation can accommodate two interns at a time.
Monday
A.M. Same day access clinic

P.M. Individual supervision; Co-facilitate ACT for Chronic Pain group

Tuesday
A.M. Individual therapy/follow-up appointments; Informal consultation with PCMHI and Primary Care staff; Rotation Administrative Time

P.M. Individual therapy/follow-up appointments; Intern Didactic Series

Wednesday
A.M. Team meeting; Same day access clinic

P.M. Group supervision; Psychology service seminar series/journal club/staff meeting/peer consultation

Thursday
A.M. Individual supervision; Individual therapy/follow-up appointments; Consultation with PCMHI and Primary Care staff

P.M. Individual therapy/follow-up appointments; Individual supervision for minor rotation

Friday
A.M. Group supervision; Individual therapy/follow-up appointments

P.M. Intern lunch; Research
PSYCHOSOCIAL REHABILITATION AND RECOVERY CENTER (PRRC) / SERIOUS MENTAL ILLNESS

The PRRC/SMI rotation includes opportunities for individual psychotherapy, group psychotherapy, psychological assessment, and consultation with other members of Veteran’s treatment team (e.g., psychiatrists, addictions treatment, inpatient psychiatry, etc.). Research can be included through involvement in quality improvement projects within the PRRC and/or MHICM (Mental Health Intensive Case Management) program. The SMI population often offers significant opportunities to consider ethical and legal standards in the context of psychiatric crises and psychosocial stressors. Individual and cultural diversity is addressed through work with a specialty population (SMI) with Veterans from a range of cultural backgrounds and ages. Additionally, the PRRC receives consults for treatment of complex cases that often benefit from psychological assessment, allowing interns the opportunity to focus on psychological assessment, if desired, on this rotation.

Profession-Wide Competencies addressed on this rotation include: Research, Ethical and Legal Standards, Individual and Cultural Diversity, Communication and Interpersonal Skills, Professional Attitudes, Values and Behaviors, Consultation and Interpersonal Skills, Assessment, and Intervention.

Staff:
Dr. Kristin Gayle and Dr. Ross Melter are the supervising psychologists on this rotation. Other staff include Al Marshall, Peer Support Specialist and soon a social worker, Magdaline Hatzikazakis.

Training:
Interns will be responsible for individual therapy, group therapy, case management, and psychological assessment of Veterans with serious mental illness. The balance of the above activities are driven by intern’s rotational goals and desired experiences. Additionally interns will work within a multidisciplinary team with opportunities to consult with Veterans’ psychiatrists and other members of their treatment team.

Supervision:
Interns will be provided with two hours of individual supervision per week as well as 2 hours of group supervision (assessment, supervision). Supervisors will offer additional supervision as needed. Direct observation is provided via co-therapy, live observation, and/or video tape review.

Capacity and Time:
This rotation can accommodate one intern at a time.
Monday
A.M. MHICM meeting/observation; Individual therapy cases
P.M. Coping with Voices group; Individual therapy cases

Tuesday
A.M. ACT group; Individual supervision
P.M. Individual therapy cases; Intern Didactic Series

Wednesday
A.M. Team meeting; Women’s Healthy Connections group
P.M. Meeting with training directors; Group supervision; Psychology service seminar series/Journal club/Staff meeting/Peer consultation

Thursday
A.M. STAIR group; PRRC Assessment
P.M. Individual therapy cases; Individual supervision

Friday
A.M. 2nd STAIR Group; PRRC Assessment
P.M. Intern lunch; Research
SUBSTANCE TREATMENT AND RECOVERY (STAR) PROGRAM

The Mental Health Residential Rehabilitation Treatment Program (MHRRTP) serves clinically complex Veterans who struggle to maintain stability in an outpatient setting. The environment fosters a sense of resiliency as residents participate in daily activities with Veterans in all MHRRTP programs. The STAR Program is the largest of the MHRRTP programs and will allow trainees to develop in-depth skills for treating Veterans with substance use disorders (SUDs) and other psychiatric conditions. The STAR Program serves both female and male Veterans who are struggling in achieving their recovery goals related to substance use on an outpatient basis. Our focus is to address all areas of recovery, including mental health, physical health, recreational goals, and psychosocial stressors. Veterans participating in this program range in age, race and ethnicity, substances of choice, combat exposure, and military branch of service, among other diverse factors. The STAR program utilizes an interprofessional treatment team, including both psychologists and social workers, as well as a physician assistant, nurse, and occupational therapist. Ancillary providers include a recreation therapist, psychiatrist, and chaplain.

Training Program competencies specifically addressed within this rotation include Ethics and Legal Standards, Individual and Cultural Diversity, Professional Attitudes, Values, and Behaviors, Communication and Interpersonal Skills, Intervention, and Consultation and Interpersonal Skills.

Staff:
Drs. Troy Robison and Zeba Ahmad-Maldonado are the supervising psychologists in this rotation.

Training:
An intern would be expected to function as a full member of the interprofessional team and would be involved in all aspects of this rotation, which includes facilitating treatment groups, providing individual psychotherapy, and conducting case management. An intern would have exposure to multiple evidence informed treatments such as Cognitive Behavioral Therapy for SUD, Acceptance & Commitment Therapy, Motivational Interviewing, and Mindfulness Based Relapse Prevention (MBRP). Interns would also gain understanding of the psychological and neurobiological aspects of substance use and how to incorporate this understanding into clinical intervention for SUD. In addition to STAR specific programming, the intern may be able to, depending on his/her interest, co-facilitate a Seeking Safety group for Veterans across MHRRTP programs and have greater involvement with the domiciliary environment through attending Dom-wide staff meetings and community meetings. By the end of this rotation, an intern can expect to be familiar with the range of evidenced informed treatments and rehabilitative services for Veterans diagnosed with SUDs, experiencing with addressing concerns arising in the milieu, experience with psychological assessments, and consultation with interprofessional staff. Discussion about managing personal reactions to conducting treatment with challenging Veterans will also be discussed during this rotation.

Supervision:
Interns will be provided with two hours of individual supervision per week and additional group supervision via Dr. Robison and/or Dr. Ahmad-Maldonado, along with additional supervision as needed. Direct observation is provided via co-therapy, live observation, and/or video review.

Capacity and Time:
This rotation can accommodate one intern at a time.
Monday
A.M. General Residential Rehabilitation Treatment Program (RRTP) meetings; STAR team meeting with Veterans; MBRP group
P.M. Emotion Management group; STAR team meeting; Individual therapy

Tuesday
A.M. STAR team meeting with Veterans; Impact group; CBT Relapse Prevention group
P.M. Intake assessment; Individual supervision; Intern Didactic Series

Wednesday
A.M. General RRTP meetings; STAR team meetings with Veterans; MBRP group
P.M. Admin time; Group supervision; Psychology service seminar series/Journal club/Staff meeting/Peer consultation

Thursday
A.M. STAR team meeting with Veterans; CBT Relapse Prevention group
P.M. Individual therapy; Admin time; Individual supervision

Friday
A.M. General RRTP meetings; STAR team meeting with Veterans; Planning group
P.M. Intern lunch; Individual therapy; Research; Diversity Mentorship
VETERANS INTENSIVE PTSD (VIP) PROGRAM

The Veterans Intensive PTSD (VIP) program is the residential PTSD program serving Veterans with chronic or complex PTSD, along with other co-occurring disorders, who need a higher level of care than traditional outpatient. The VIP program is part of the larger Mental Health Residential Rehabilitation Treatment Program (MHRRTTP). The treatment environment is robust and multifaceted. Interventions are holistic, focusing on recovery from the individual level (e.g., individual therapy using evidence based approaches), all the way up to the systemic level (e.g., engaging a therapeutic milieu as an intervention.) Treatment is rigorous, as Veterans are expected to engage in multiple forms of therapy at once, and strengths-based, drawing from Veterans' personal resources. Veterans participating in this program range in age, race and ethnicity, co-occurring disorders, combat exposure, and military branch of service, among other diverse factors. All Veterans in this program have experienced some form of military related trauma, and most have additional childhood trauma.

Training Program competencies specifically addressed within this rotation include Ethics and Legal Standards, Individual and Cultural Diversity, Professional Attitudes, Values, and Behaviors, Communication and Interpersonal Skills, Intervention, Assessment, and Consultation and Interpersonal Skills.

Staff:
Drs. Margaret Schwartz Moravec and Julie Sharrette are the primary supervising psychologists in this rotation. Drs. James Dillon and Michelle Loewy are the secondary supervising psychologists. Day to day, open door consultation, is available and expected with all staff, to include Recreational therapy: Mani Dhami, Social Work: Bryndis Njardvik and Nursing: Susan Reeves.

Training:
An intern would be expected to function as a full member of the interprofessional team and would be involved in all aspects of this rotation, which includes facilitating treatment groups, providing individual psychotherapy, and conducting psychological evaluations. An intern would have exposure to multiple evidence based treatments such as Prolonged Exposure therapy and Cognitive Processing therapy. Additional training opportunities in transdiagnostic approaches (e.g., Skills Training in Affective and Interpersonal Regularion/STAIR) and trauma informed care are available (e.g., Adaptive Disclosure). Participation in measurement based care to guide treatment planning is expected for all interns. In addition to VIP specific programming, the intern may be able to, depending on his/her interest, have greater involvement with the domiciliary environment through participation in MHRRTTP-wide interventions and meetings. An intern would be expected to attend Dom and VIP meetings each week. In addition to clinical training opportunities, an intern would have the option to participate in program evaluation as an opportunity to blend clinical training and administrative responsibilities and will participate in team led journal discussions.

Supervision:
Drs. Schwartz Moravec and/or Dr. Sharrette will provide two hours of individual supervision per week. Additional individual supervision is provided, as needed, with Drs. Dillon and/or Loewy. Direct observation is provided via co-therapy, live observation, and/or video review.

Capacity and Time:
This rotation can accommodate one intern at a time.
# A Week in the Life...

**Veterans Intensive PTSD (VIP) Program**

<table>
<thead>
<tr>
<th>Day</th>
<th>A.M. Activities</th>
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<tr>
<td>Monday</td>
<td>Daily RRTP meeting; VIP team meeting; Individual therapy</td>
<td>Distress Tolerance group; Assessment report writing; Intern Didactic Series</td>
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<td>Tuesday</td>
<td>Daily RRTP meeting; Individual therapy; Consultation with VIP team members</td>
<td>Living with Emotions group; Intake; Administrative Time</td>
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<tr>
<td>Wednesday</td>
<td>Daily RRTP meeting; VIP team meeting; Process group; Individual supervision</td>
<td>Individual therapy; Group supervision; Psychology service seminar series/Journal club/Staff meeting/Peer consultation</td>
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<tr>
<td>Thursday</td>
<td>Daily RRTP meeting; Individual supervision; Treatment planning meeting with Veterans</td>
<td>Research; Assessment</td>
</tr>
<tr>
<td>Friday</td>
<td>Meeting with Diversity Mentor or with Assessment Supervisor; VIP team meeting; Process group; Individual supervision</td>
<td>Intern lunch; Individual therapy; PTSD 101; VIP community meeting</td>
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*June Ashley
University of Denver (PhD)*
TRAINING FACULTY

Zeba S. Ahmad-Maldonado, PhD is the Program Manager for the Substance Treatment and Recovery (STAR) Program in the MHRRTTP. She received her Ph.D. in Clinical Psychology from Seattle Pacific University, completing her doctoral internship at the Louis Stokes DVAMC in Cleveland, Ohio. She is licensed to practice in Washington state and is a Clinical Instructor in the Department of Psychiatry and Behavioral Sciences at the University of Washington. Dr. Ahmad’s theoretical orientation is Cognitive Behavioral. Dr. Ahmad was certified in Cognitive Behavioral Therapy for Substance Use Disorders (CBT for SUD) through the VA in 2015. She is a trained consultant for the national CBT for SUD training program through the VA. At American Lake, Dr. Ahmad is the Chair of the Diversity Committee, a Committee serving under the Training Committee. Dr. Ahmad has a special emphasis on diversity related issues.

Derek Anderson, PhD is a psychologist in the Rehabilitation Care Service. He obtained his PhD in Clinical Psychology from Ohio State University and is licensed in Washington state. He completed his doctoral internship at the Seattle VA and postdoctoral residency in Rehabilitation Psychology at the Seattle VA. Clinically, he is interested in adjustment to chronic disabilities and currently conducts brief outpatient neuropsychological assessments as well as provides individual and group psychotherapy. His intervention approaches are guided by empirically supported treatments, including Cognitive Behavioral Therapy (CBT), Behavioral Activation, Acceptance and Commitment Therapy (ACT), Motivational Interviewing (MI) and Problem-Solving Therapy techniques to promote mood management, pain management, and optimize response to disability within a rehabilitation setting. As for research, he is most broadly interested in examining response to chronic medical conditions or acquired disability among patients and their family members. His most recent research efforts have included examining mood and social support among patients with limb loss. Additionally, he has been serving as a study therapist for an ongoing grant-funded, multi-site, group intervention for chronic pain management.

Allison C. Aosved, PhD is a Staff Psychologist in the PTSD Outpatient Clinic (POC) and the Director of Psychology Training Programs at the American Lake Division of VA Puget Sound. She earned her degree in Clinical Psychology from Oklahoma State University. She completed a doctoral internship at the Seattle Division of VA Puget Sound and postdoctoral residency at the National Center for PTSD, Pacific Islands Division. Dr. Aosved currently serves as both a trainer and consultant for the National VA Prolonged Exposure (PE) dissemination initiative. Dr. Aosved served as the secretary for the national VA Psychology Training Council (2012-2016) and is currently serving as an Association of Psychology Postdoctoral and Internship Centers (APPIC) board member (2015-2018). She was recognized in 2017 by the VA Section of APA’s Division 18 with the Outstanding Training Director Award. Her diversity interests include addressing the needs of underserved populations (including women and LGBT veterans), social justice, and ensuring evidence-based interventions are culturally accessible to veterans. Her professional interests also include Behavioral and Cognitive Psychology, clinical supervision and training, dissemination of evidence-based interventions, program evaluation and quality assurance specific to implementation of evidence-based treatments, and sexual violence prevention.

Noelle Balliett, PhD is a psychologist in the POC. She received her Ph.D., in clinical psychology from The University of Tulsa. She completed her doctoral internship at the Bay Pines VA Medical Center and her postdoctoral residency in evidence-based psychotherapy in the Anxiety Disorders Clinic at the VA San Diego Healthcare System. She is licensed in the state of Washington. Her research focuses on the treatment of trauma related nightmares; the role of sleep in the development and maintenance of PTSD; treatment dissemination; and the impact of sleep on treatment engagement and effectiveness. Her clinical interests include treatment of PTSD and
nightmares, use of evidence-based interventions, and culturally informed care. She serves as a national trainer for Exposure, Relaxation, and Rescription Therapy for trauma-related nightmares, and serves locally as the Vice Chair of Education for the Psychology Internship Program at American Lake.

**Carol Becker, PhD, ABPP** is a psychologist in the Mental Health Clinic (MHC) and licensed in Washington state. She received her doctorate in Clinical Psychology from Pacific Graduate School of Psychology at Palo Alto University. She completed her doctoral internship at the Louis Stokes Cleveland VA and her postdoctoral residency in PTSD at the Memphis VA. Her areas of clinical interest include trauma-focused treatments, survivors of childhood physical and sexual abuse, and couples therapy. She is a certified provider Cognitive Processing Therapy (CPT), Integrative Behavioral Couples Therapy (IBCT), and PE. She is currently completing certification requirements for CBT for Depression (CBT-D) and serves as the Interim Team Lead and Program Manager for the Mental Health Clinic.

**Sareeta Beeram, PsyD** is a psychologist with the Addictions Treatment Center (ATC). She received her PsyD in Clinical Psychology from Nova Southeastern University. She completed her doctoral internship at the VA Eastern Kansas HealthCare System and is licensed in the state of Kansas. Dr. Beeram’s theoretical orientation is Cognitive Behavioral. She completed the Motivational Enhancement Therapy (MET) training program through the VA in 2015 and serves as a national consultant for the MI/MET training programs. At American Lake, Dr. Beeram serves Veterans in both the outpatient addiction treatment program and the office-based buprenorphine treatment program. She is a member of the American Lake Suicide Risk Reduction Committee. Her professional/research interests include diagnosis and treatment of co-occurring disorders and the role of motivation in engagement and treatment.

**Richard E. Beth, PhD** is a staff psychologist in the Mental Health Psychiatric Assessment and Clinical Care (PACC) Intensive Outpatient Program (IOP) Clinic. He received his PhD in Clinical Medical Psychology from the University of Alabama at Birmingham. He completed his doctoral internship at Vanderbilt University –Veterans Affairs Internship in Clinical Psychology. His postdoctoral residency in Clinical Psychology was at Birmingham Psychiatry. He is licensed in the state of Alabama. His theoretical orientation is generally behavioral, and with training in ACT, Interpersonal Psychotherapy (IPT), PE, and advanced training in Eye Movement Desensitization and Reprocessing (EMDR), and Clinical Hypnotherapy. His professional interests include general clinical practice and trauma work.

**Joshua Breitstein, PsyD** is a psychologist in the Primary Care Mental Health Integration (PCMHI) Clinic. He attended The Georgia School of Professional Psychology, earning his PsyD in 2008. While attending his graduate program, he earned a 2-year Health Professions Scholarship in the United States Army. He completed internship and post-doctoral training at Madigan Army Medical Center where he was trained as a clinical psychologist with a specific emphasis on military psychology. He served on active duty from 2007 to 2011, completing one deployment to Iraq from 2010 to 2011 as the psychologist assigned to the 85th Combat Stress Control Detachment. Dr. Breitstein holds active psychology licenses in Colorado and Washington state. His theoretical orientation is cognitive behavioral within an interpersonal framework. Dr. Breitstein received advanced training in sleep medicine at Madigan Army Medical Center. He brings diversity experience working with active duty military populations across all branches of service. Dr. Breitstein clinical and research interest is in the area of sleep medicine. He enjoys mentoring and supervising interns providing trainees with a diverse understanding of military culture and its impact on cognition and behavior. Dr. Breitstein also enjoys training interns in
various aspects of sleep medicine and applying these principles to treatment in a primary care setting.

**Cody L. Bullock, PhD** is a clinical psychologist at the VAPSHCS, American Lake Division, POC. He received his PhD from Pacific Graduate School of Psychology at Palo Alto University, with an emphasis in Neuropsychological Assessment. He completed his doctoral internship at Heartland Behavioral Health Hospital through the Ohio Psychology Internship Program, and his postdoctoral residency through the San Francisco VA Medical Center, specializing in Rural Psychology. Dr. Bullock is licensed in Washington state and provides supervision for both clinical practice and psychological assessments. He has completed VA rollout trainings in both MET and PE. He has enjoyed serving on a variety of workgroups to include staff education on the DSM-5 as well as clinical considerations of Washington state cannabis legalization, implementation of Contingency Management for substance abstinence, clinical care peer reviews of Suicide Behavior Reports, and most recently joining the Training Committee. His theoretical orientation is primarily CBT-based and he has interest in incorporating technology into clinical practice and in making Excel Spreadsheets for pretty much anything for which there is a reason to create one.

**Eric R. Clausell, PhD** is a psychologist in the MHC. He is licensed in Washington state. Dr. Clausell received his PhD in Clinical-Community Psychology from the University of Illinois at Urbana-Champaign. He completed his doctoral internship at Palo Alto VA Health Care System and his postdoctoral residency at Stanford University’s School of Medicine. Dr. Clausell received advanced training on internship and residency in Couples Therapy and CBT Interventions. His theoretical orientation is cognitive behavioral within an integrative framework. He identifies as a generalist clinically and specializes in couples and family interventions. He is certified through the VA in IBCT and provides training and clinical supervision in this therapeutic modality. His professional interests include clinical training and mentoring of interns and residents, particularly in family interventions. In addition, Dr. Clausell is also interested in the role of diversity in clinical practice, particularly LGBT Veteran concerns. He currently serves on the Diversity Committee and is a Diversity Mentor for current trainees.

**James R. Dillon, PhD** is a psychologist in the Veterans Intensive PTSD (VIP) Program. Dr. Dillon earned his Ph.D. in Clinical Psychology at the University of Missouri-St. Louis. He completed his doctoral internship at the Jerry L. Pettis Memorial Veterans Medical Center in Loma Linda, CA and his postdoctoral residency in Interdisciplinary Treatment of Substance Abuse at the VAPSHCS, Seattle Division. His theoretical orientation is integrative, a blend of cognitive behavioral, interpersonal, and acceptance-based approaches. Dr. Dillon is licensed in the state of Washington. His professional interests include trauma and PTSD, the influence of culture on psychological development, gender, mindfulness, and LGBT issues.

**Emily Dinatale, PhD** is a psychologist in the PCMHI Clinic. She attended East Carolina University and completed doctoral internship at Charlie Norwood Veterans Affairs Medical Center/Medical College of Georgia Consortium. She completed postdoctoral residency at the Salem Veterans Affairs Medical Center in Virginia. She has been licensed in North Carolina since 2015. Clinical interests include promoting health management behaviors. Research interests include development and assessment of novel behavioral interventions for diabetes and weight management in underserved populations.

**Natalie Dong, PhD, ABPP** is a board-certified rehabilitation psychologist. She is the Deputy Chief, Psychology Service and served as the Interim Chief, Psychology Service from December 2014 to October 2015. Dr. Dong is the Director of the Center for Polytrauma Care and the VISN 20 Polytrauma Clinical Program Manager. She received her PhD from the Graduate School of
Psychology Fuller in 2000. She completed her doctoral internship at the VA Los Angeles Ambulatory Care Center and her postdoctoral residency in Rehabilitation Psychology at Los Angeles County Rancho Los Amigos National Rehabilitation Center in Downey, CA. She provides program administration, management, and clinical services in the Center for Polytrauma at both the Seattle and American Lake Divisions of the VAPSHCS. She is licensed as a psychologist in the states of Washington and California. Her clinical interests are in acquired and traumatic brain injury and adjustment to physical disability. Dr. Dong has served as a Member-at-Large to the Executive Committee of APA Division 22 and currently serves as the Secretary and the Oral Examination Coordinator on the Board of Directors of the American Board of Rehabilitation Psychology. Dr. Dong is an alumni of the APA Leadership Institute for Women in Psychology and a member of the 2016-17 Executive Potential Program sponsored by the VA Corporate Employee Development Board.

Heather Dumser, PsyD is a geropsychologist in Home-Based Primary Care (HBPC). She received her PsyD in Clinical Psychology and Certificate of Gerontology at Pacific University. She completed her doctoral Internship at Edith Nourse Rogers Memorial VAMC in Bedford, MA with specialty in geropsychology. For her postdoctoral residency, she specialized in palliative care and psycho- oncology at Clement J. Zablocki VAMC in Milwaukee, WI. She is licensed to practice psychology in Washington state since 2015. Her theoretical orientation is integrative, predominantly incorporating CBT, ACT, and mindfulness. Her clinical interests and specialties include end-of-life issues, anticipatory grief, loss and trauma, bereavement, aging, adjustment to chronic illnesses (particularly Veterans with ALS), caregiver burden, and PTSD in older adults. She has been trained to provide PE and also in adapting PTSD treatment to older adults, including the Late-Onset Stress Symptomatology (LOSS) protocol.

Amee J. Epler, PhD is the Program Manager of the PCMHI Clinic at the American Lake campus. She received her PhD in Clinical Psychology from the University of Missouri-Columbia. She completed her doctoral internship at the University of Mississippi Medical Center/VA Consortium in Jackson, MS. She is licensed in the states of Mississippi and Washington. Her theoretical orientation is primarily behavioral within a dialectical framework. Dr. Epler has received advanced training on internship and as a VA Staff Psychologist in Dialectical Behavior Therapy (DBT), PE, CPT, ACT for Depression (ACT-D), Problem Solving Therapy, CBT for Insomnia (CBT-I), and MI. Her professional interests include brief interventions for primary care settings, health behavior change, and integrated care models.

Janna L. Fikkan, PhD is the Associate Director of Psychology Training and a staff psychologist in the MHC. She received her PhD in Clinical Psychology from the University of Vermont. She completed her doctoral internship at Duke University Medical Center and her postdoctoral residency in health psychology at Duke Integrative Medicine. She is licensed in both North Carolina and Washington state and is Assistant Clinical Professor in the Department of Psychiatry and Behavioral Sciences at the University of Washington. Her theoretical orientation is primarily behavioral within an interpersonal framework. Dr. Fikkan received advanced training on internship and fellowship in mindfulness and acceptance-based therapy approaches, including DBT. She is a national consultant for the IPT for Depression VA dissemination effort and serves on the Executive Committee of the VA Psychology Training Council. Her professional interests include training and mentoring of interns and residents and professional development of women in the field of psychology. Dr. Fikkan co-chairs the Women in Leadership SIG for the Association of VA Psychology Leadership.

Daniel J. Fischer, PhD is a psychologist in the MHC. He is licensed in Washington state. Dr. Fischer received his PhD in Clinical Psychology from the University of New Mexico. He completed
his doctoral internship at the VAPSHCS, American Lake Division and his postdoctoral residency in the Center for Excellence in Substance Abuse Treatment and Education (CESATE) at VAPSHCS, Seattle Division. Dr. Fischer has received advanced training in the practice and education of MI and is a member of the Motivational Interviewing Network of Trainers (MINT). He is certified through the VA in CPT and is completing certification in IPT. His theoretical orientation is cognitive behavioral and he identifies as a generalist clinically. His professional interests include issues related to client engagement and retention as well as the training and dissemination of empirically based practices. Additionally, Dr. Fischer serves on the Education Committee.

Kristin Gayle, PhD is the Program Director for the Serious Mental Illness (SMI) programs and a psychologist in these programs. The SMI programs include the Psychosocial Rehabilitation and Recovery Center (PRRC) and Mental Health Intensive Case Management (MHICM). She received her PhD in Clinical Psychology from Seattle Pacific University in 2009 after completion of internship at the New Jersey VA Health Care System. She began working at the VAPSHCS, American Lake Division following graduation in 2009. She is licensed in Washington state. Her theoretical orientation is integrative, relying heavily on cognitive-behavioral and interpersonal frameworks. Her professional interests include recovery-oriented treatment, changing cultures to provide more recovery-oriented treatment, and the treatment of serious mental illness.

Elizabeth W. Hirschhorn, PhD is a geropsychologist in the PCMHI Clinic. She earned her PhD in Clinical Psychology from the Catholic University of America. She completed her doctoral internship at the VA Salt Lake City Health Care System and her postdoctoral residency in geropsychology at VAPSHCS, American Lake Division. She is licensed in the state of Washington. Her theoretical orientation is primarily behavioral and informed by geropsychological theory. Her professional interests include interprofessional care, utilization of mental health services by older Veterans, and the integration of technology into mental health care. She is a member of the Diversity Committee.

Lauren Hollrah, PsyD is a clinical pain psychologist in the Pain Clinic at the VAPSHCS. She earned her doctoral degree in Clinical Psychology from Pacific University. She completed her doctoral internship at the Northampton VAMC in Northampton, MA and her residency at a multidisciplinary pain management clinic, Progressive Rehabilitation Associates, in Portland, OR. She also helped to develop a multidisciplinary pain management program for Peace Health Southwest Hospital. She has developed an Outpatient Functional Restoration Pain Program that is the only CARF accredited pain program for VISN 20, housed at the American Lake Campus. Dr. Hollrah specializes in the behavioral treatment of chronic pain and the psychological issues that arise from chronic health conditions. Her primary theoretical orientation is ACT. She received specialized training in ACT on internship and residency and continues to be involved in ACBS and the implementation of ACT in the Pain Clinic. She is also certified in CBT for Chronic Pain (CBT-CP). She is licensed in both Oregon and Washington state. Her professional interests include the development of Functional Restoration Programs, and utilization of chronic illness management skills like mindfulness, stress management, yoga, and helping Veterans work toward an active and vital life.

Carrie Holtzman, PhD is a staff psychologist with the Western Telemental Health Network (WTN) and Promoting Access to Telehealth (PATH) teams. She received her PhD in Clinical Psychology from Emory University. She completed her doctoral internship and a postdoctoral residency specializing in trauma recovery at the Durham VA Medical Center in Durham, NC. She is licensed in the state of North Carolina since 2016. Her theoretical orientation is primarily cognitive-behavioral, with an emphasis on interpersonal factors. She has completed VA certification requirements in CPT and IPT-D. Additional clinical interests include provision of evidence-based
treatments via telehealth modalities, with particular interest in mindfulness-based treatments including DBT and ACT. Her professional interests include training and supervision, and she is a member of the Association of VA Psychology Leadership.

**Scott Hunt, PhD** is a psychologist in the Psychiatric Assessment and Clinical Care (PACC) Unit. He received his PhD in Clinical Psychology with a concentration in Neuropsychology from Fielding Graduate University. He completed both his doctoral internship and a postdoctoral research residency at the VAPSHCS, American Lake Division. Dr. Hunt's clinical orientation is integrative and his clinical interests are in emergency mental health, psychodiagnostics, and assessment. His research at the VA has ranged from biomedical research into antidepressant augmentation to aspects of religiousness in marital quality.

**Mary-Catherine Kane, PhD** is a psychologist in the PCMHI Clinic at the American Lake campus. She completed her Ph.D. in Counseling Psychology at Western Michigan University. Her doctoral internship was at the VA Medical Center, Battle Creek MI. She is licensed in the state of Washington. Dr. Kane has received advanced training on internship and as a VA Staff Psychologist in CBT-D, CPT, and MI. In addition to her clinical responsibilities, she is the Associate Program Director of Psychology in the Center for Excellence in Primary Care Education at VAPSHCS. Her professional interests include enhancing interprofessional learning and implementation of integrated care, program development and evaluation, health behavior change, and brief interventions for primary care settings.

**Lori Katz, PhD** is a psychologist in the Women’s Mental Health Clinic-PCMHI. She received her BS degree from the University of California, Berkeley, and her double major PhD (Clinical and Social/Personality) from the University of Massachusetts, Amherst. She completed her doctoral internship at VA Long Beach Healthcare System. Her primary interests are assessing and treating Military Sexual Trauma, women’s health issues, and integrative care. She draws from cognitive-experiential and attachment theoretical models. She is licensed in the state of California.

**Jason Katzenbach, PhD** is a psychologist in the PCMHI Clinic. He received his PhD in Counseling Psychology from Brigham Young University. Prior to coming to American Lake, Dr. Katzenbach worked as a postdoctoral residency in integrated primary care mental health at the WJB Dorn VA Medical Center in Columbia, SC, and completed his doctoral internship at the Boise VA Medical Center in Boise, ID. He is currently licensed in Washington state. Dr. Katzenbach’s clinical interests include short-term psychotherapy, health behavior change, chronic pain management, practical use of psychotherapy outcome data to improve treatment, evidence-based group process, career counseling, and integrating recovery and well-being focused interventions into clinical practice. Dr. Katzenbach’s theoretical orientation is integrative and incorporates aspects of ACT, Existential Therapy, and Client Centered Therapy.

**Burton “T” Kerr, PhD** is the Director of Primary Care Mental Health Integration for the VAPSHCS and is a psychologist in the PCMHI clinic at American Lake. He received his PhD in Clinical Psychology from Brigham Young University. He completed his doctoral internship at Walter Reed Army Medical Center, Washington DC and postdoctoral training in Clinical Health Psychology at Tripler Army Medical Center, in Honolulu, HI. Dr. Kerr served 8 years as a psychologist and as an officer with the U.S. Army. He is licensed in the state of Idaho. His theoretical orientation is primarily behavioral. He has experience in general mental health, primary care mental health, and health psychology, more specifically in the areas of sleep medicine, diabetes, and chronic pain.

**Simon Kim, PhD** is Section Director of Community and Residential Care Services and Chief of Mental Health Residential Rehabilitation Treatment Program (MHRRTP). Dr. Kim completed his
Ph.D. in Clinical Psychology at Georgia State University, his internship at VA Palo Alto and was a postdoctoral resident in Clinical Psychology at Stanford University. Prior to joining the VAPSHCS in 2012, he worked at the VA Palo Alto Health Care System managing their Substance Abuse RRTP. His areas of professional interests include empirically based treatment and assessment for SUDs, dual-diagnosis and brief intervention, multicultural competence/diversity issues, psychotherapy integration, and supervision.

Jennifer C. King, PhD is the co-occurring substance use/PTSD specialist and serves as the liaison between the POC and ATC. She received her PhD in Clinical Psychology (with an emphasis in forensic psychology) from Palo Alto University and completed her doctoral internship at VA St. Louis Health Care System. She is licensed in Kansas. Her theoretical orientation is integrative with a foundation in cognitive behavioral. Dr. King completed the VA rollout training in PE in 2015. Her professional interests include co-occurring substance use and PTSD in the Veteran population, evidence-based treatments, particularly PE, “killing” and combat trauma specifically, harm reduction, age of substance use initiation and its implications, psychological assessment, and offender rehabilitation.

Douglas Lane, PhD, ABPP is a geropsychologist assigned to the Geriatrics and Extended Care Service. He also is a Clinical Associate Professor in the Department of Psychiatry and Behavioral Sciences of the University of Washington School of Medicine. Dr. Lane is President-Elect of the Society for Clinical Geropsychology/APA Division 12-2. He completed a PhD in Clinical Psychology through the University of Kansas, doctoral internship training in the United States Army Medical Department, and a postdoctoral residency in psychology through the Yale University School of Medicine. He is board-certified in Geropsychology and Clinical Psychology by the American Board of Professional Psychology (ABPP), and is a member of the ABPP/American Board of Geropsychology itself. In 2017, he began offering postgraduate training in Health Professions Education through the University of Glasgow School of Medicine He is licensed in Washington state. His clinical areas of interest are psychotherapy with older adults and especially psychotherapy integration, dementia care, resiliency factors and aging including spirituality, and coping with neurological disorders.

Michelle Loewy, PhD is the Program Manager for the VIP program and the Lead for Women’s Mental Health at VAPSHCS. She received her PhD in Counseling Psychology from the State University of New York at Buffalo. She completed her doctoral internship at VA Western New York Healthcare System. Dr. Loewy serves as the facility lead for Measurement Based Care within the Mental Health Service line. Her primary interests are related to clinical program evaluation, team development, implementing system changes, trauma-informed care, and women’s mental health. Her theoretical orientation is integrative, drawing from feminist, systems, behavioral, and interpersonal theories. She is licensed in the state of New York.

Russell McCann, PhD is Deputy Director of the PATH Service. Dr. McCann received his PhD in Clinical Psychology from Seattle Pacific University. He completed internship at Washington State University Counseling and Testing Services and his postdoctoral residency in Military Research Psychology at the National Center for Telehealth and Technology. Dr. McCann is a licensed psychologist in Washington state. Dr. McCann specializes in mental health services delivered via clinical video teleconferencing (CVT). He has a broad interest in using technology to augment and facilitate access to mental health care. Dr. McCann has been trained in the use of Behavioral Activation, CPT, PE, and Virtual Reality Exposure Therapy (VRET). Dr. McCann is an acting assistant professor with the Department of Psychiatry and Behavioral Sciences at the University of Washington and maintains an academic focus on the use of technology in mental health care.
Dr. McCann’s administrative duties center around the management and expansion of telemental health operations.

**Ross Melter, PsyD** is a psychologist in the PRRC. He received his PsyD in Clinical Psychology from the Wright Institute in Berkeley, CA. Dr. Melter completed his doctoral internship at the San Bernardino County Department of Behavioral Health and postdoctoral residency at the VA Palo Alto Health Care System with emphasis in Psychosocial Rehabilitation (PSR). His theoretical orientation is integrative and draws from interpersonal, behavioral, and mindfulness-based modalities. Dr. Melter has received advanced training in the application of evidence-based psychotherapies with SMI populations. He is a VA certified provider in Social Skills Training for Schizophrenia and is involved with national dissemination efforts to spread awareness of recovery principles. Dr. Melter’s professional interests include stigma reduction, recovery from acute SMI, community integration, self-advocacy, and concealable disabilities.

**Jon T. Moore, PhD** is a psychologist in the Compensated Work Therapy/Transitional Residence (CWT/TR) program. He received his PhD in counseling psychology from the University of Louisville. He completed his doctoral internship at the Cincinnati VAMC and continued his training in substance use and homeless rehabilitation as a postdoctoral resident at the VA Palo Alto. Clinically, Dr. Moore uses a Feedback-Informed Treatment framework with theoretical rationales that primarily stem from Emotion-Focused Therapy and interpersonal foundations. Dr. Moore researches dogmatic/biased thinking styles as well as secular and religious groups’ mental health and spirituality. Dr. Moore is currently using program evaluation data from residential programs to identify the mechanisms of change for Veterans. He also serves as the Research Chair within the Training Committee and as an assessment supervisor. Dr. Moore is licensed in Washington state.

**Annie Mueller, PhD** is a geropsychologist in the MHC. She received her PhD in Clinical Psychology with curricular emphasis in aging from the University of Colorado at Colorado Springs. She completed both her internship in clinical psychology and postdoctoral residency in geropsychology at the VAPSHCS, American Lake Division. Her theoretical orientation is integrative, with emphasis on cognitive behavioral, existential, and humanistic approaches to care. She recently completed the VA certification requirements for CBT-D). Her clinical interests include aging and mental health, late life anxiety, end-of-life care, caregiving, chronic illness and disability, and telemental health. She currently serves on both the Training Committee and the Diversity Committee, and is the preceptor for the geropsychology postdoctoral residency. She is licensed in Washington state.

**Sarah Noonan, PhD** is a clinical neuropsychologist in Rehabilitation Care Services, working primarily within the Center for Polytrauma Care. She earned her PhD in Clinical Psychology, with a specialization in Neuropsychology, from the San Diego State University/University of California, San Diego joint doctoral program. She completed her internship and postdoctoral residency within the VA Boston Healthcare System, where she received advanced clinical training in neuropsychological assessment, cognitive rehabilitation, and evidence-based treatments for PTSD, and conducted research within the Boston Attention and Learning Laboratory and the VA Boston Neuroimaging Research Center. She is licensed in Washington state. Her professional interests include mTBI/concussion diagnosis and treatment in combat Veterans, holistic cognitive interventions, and neuroplasticity.

**Brett Parmenter, PhD, ABPP** is a clinical neuropsychologist in the MHC. She attended the University of Kansas and completed her doctoral internship at Yale University School of Medicine. She completed a postdoctoral residency in clinical neuropsychology at the University at
Buffalo/SUNY School of Medicine and Biomedical Sciences. She has been licensed in Washington since 2006. Clinical Interests include multiple sclerosis, medical factors that affect cognition, and cognitive effects of serious and persistent mental illness. Research interests include cognitive functioning in multiple sclerosis, performance and symptom validity testing, and traumatic brain injury in veterans. Dr. Parmenter serves as Secretary and Chair of the Development Committee for the American Academy of Clinical Neuropsychology Foundation. She also is an active work sample reviewer for the American Board of Clinical Neuropsychology. She is a Clinical Associate Professor in the Department of Psychiatry and Behavioral Sciences at the University of Washington.

Jessica Peltan, PhD is the Acting Program Manager for the Domiciliary Care for Homeless Veterans (DCHV) program. She received her PhD in Clinical Psychology from Idaho State University. She completed her doctoral internship and postdoctoral residency at VA Pittsburgh Health Care System. Postdoctoral fellowship was in the area of substance use and trauma, specifically military sexual trauma. She is licensed in the state of Washington. Dr. Peltan utilizes a MI and cognitive behavioral approach. Dr. Peltan is a consultant for the MI/MET VA initiative and is a member of the MINT. She also was certified in CPT through the VA in 2013. Her professional and research interests include Veteran populations, substance use disorders, residential treatment, MI, and assisting Veterans in returning to stable employment and housing. In addition, Dr. Peltan is a mentor for the diversity mentorship program and a member of the diversity committee. She completed the VAPSHCS Leadership Development program and is a member of the Leadership VA class of 2017.

Greg Reger, PhD is the Deputy Associate Chief of Staff, Mental Health, at VAPSHCS and an Associate Professor in the Department of Psychiatry and Behavioral Sciences at the University of Washington. He received his PhD in Clinical Psychology from Fuller Theological Seminary in 2004 and completed his psychology internship at Walter Reed Army Medical Center. He is an Army Veteran and deployed to Iraq in support of Operation Iraqi Freedom in 2005. Dr. Reger spent 5 years as a civilian employee with the Department of Defense (DoD) leading teams designing, and evaluating technology in support of psychological health. His research has focused on the development and evaluation of virtual reality, mobile applications, and other innovative technologies for psychological purposes. He is currently funded to evaluate a virtual reality patient to support provider training in motivational interviewing. Dr. Reger also led the VA/DoD team that designed the PE Coach mobile application and was recently funded to explore how providers are using the features of the app and to develop an intervention to increase full adoption of the application.

Mark Reger, PhD is the Chief of Psychology and an Associate Professor in the Department of Psychiatry & Behavioral Sciences at the University of Washington. He completed his doctorate in Clinical psychology at the Rosemead School of Psychology at Biola University, his internship at the American Lake Division of VAPSHCS, and a three-year NIH NRSA postdoctoral RESIDENCY at the VAPSHCS and the University of Washington School of Medicine. Prior to joining the VA, Dr. Reger worked as the Deputy Director for the DoD’s National Center for Telehealth & Technology (T2), located at Joint Base Lewis-McChord, WA. He provided senior oversight for six Divisions involved with the research, development, and implementation of technologies to provide behavioral health solutions, assessment, and support to service members, veterans and their families. Dr. Reger’s clinical work is focused on geriatric neuropsychology. His research centers on military and veteran suicide prevention. He led the development and implementation of the DoD’s suicide surveillance system, and co-authored the DoD’s official annual suicide surveillance report for the last seven years. Dr. Reger has served as the principal investigator for multiple large studies including a large federally-funded epidemiological study of military and Veteran suicide.
He has extensive experience conducting clinical trials, and has authored more than 50 peer-reviewed articles and book chapters on topics including military suicide, PTSD, telepsychology, neuroendocrinology and research ethics.

Sean M. Robinson, PhD is a psychologist with the ATC at American Lake. Dr. Robinson received his PhD in Clinical Psychology from Nova Southeastern University specializing in addiction and MI. He completed his doctoral internship from Central/Western Massachusetts VA and his postdoctoral residency in quality improvement, leadership, and research for addictive behaviors within the North Texas VA Healthcare System. He is currently licensed in the state of Alabama. Dr. Robinson’s theoretical orientation is patient-centered/cognitive behavioral and he is trained in CPT, MI, CBT-I, and CBT-SUD. Dr. Robinson remains active in research (with publications focusing on assessment, diagnostic nosology, psychometrics, and patient-centered advocacy) as well as quality improvement projects (having received his Green Belt certification from Lean Six Sigma in 2017).

Troy Robison, PhD is a psychologist in for the STAR Program in the MHRRTP. He completed his PhD in Clinical Psychology at Ohio University, his doctoral internship at the Cincinnati VA Medical Center, and is licensed in the state of Washington. His approach to psychotherapy is primarily humanistic, with specific interests in mindfulness based interventions and the incorporation of neurobiology into psychological treatments for addiction. He also provides Behavioral Couples Therapy for SUD and gambling addiction treatment in the ATC.

Margaret Schwartz Moravec, PhD is a psychologist in the VIP Program. Dr. Moravec received her PhD in Counseling Psychology from the University of Houston, completed her internship at American Lake VA, and then worked as a postdoctoral resident in Trauma/Anxiety Disorders at the Houston VA. She returned to the Pacific Northwest to work in the Veterans Intensive PTSD Program, and currently serves on the psychology training committee at American Lake as preceptor for the Trauma and Substance Use in Residential Treatment Fellowship, as well as serving in the role of Supervisor Enrichment Lead. She is also the Evidence Based Psychotherapy Coordinator at American Lake. She has successfully completed VA rollout trainings in CPT and PE. Her clinical interests include: combat and Military Sexual Trauma, working with Women Veterans, interpersonal process approaches, and group therapy processes. She identifies with psychodynamic, interpersonal, and cognitive behavioral theoretical orientations. She is licensed in the state of Kansas.

Julie Sharrette, PsyD is a psychologist in the VIP Program. She received her PsyD in Clinical Psychology from Nova Southeastern University. She completed her doctoral internship at Western State Hospital in Washington. She has been licensed in Washington State since 2007. Her theoretical orientation is primarily cognitive behavioral. Dr. Sharrette began her training and career with an emphasis in forensic psychology by conducting pre-trial evaluations in the courts and jails. She was involved in research on trauma throughout graduate school and eventually gravitated to clinical work at Joint Base Lewis McChord. There, she worked as a psychologist providing assessment and treatment to active duty soldiers. Dr. Sharrette then became employed at Boise VAMC, working as a psychologist and team lead for the PTSD Clinical Team and PTSD Residential Program. She is trained in CPT, PE, EMDR, and ERRT-M. Her professional interests include psychological assessment, treatment of complex trauma and moral injury, and work with transgender populations.

Erika M. Shearer, PhD is a staff psychologist on the PATH team. She received her PhD in Clinical Psychology from the University of Nevada, Reno and completed her doctoral internship at the VA Puget Sound Health Care System – American Lake Division. She completed a
postdoctoral residency in Rural and Telemental Health at the VAPSHCS, Seattle Division. She is licensed in Washington since 2015. Her theoretical orientation is primarily third wave cognitive behavioral interventions and she primarily utilizes Evidenced Based Psychotherapies to include: ACT, CBT-I, PE, and CPT. She is a national consultant for the ACT-D VA Training and Dissemination effort. Her research interests include mindfulness and acceptance strategies in the treatment of psychological issues related to chronic medical conditions, pain, and all things related to telemental health.

**Dale E. Smith, PhD** is the Program Manager of the POC. He received his doctorate in social psychology from the University of Florida and completed the University of Washington’s Respecialization Postdoctoral Training Program in Clinical Psychology. He completed his doctoral internship in the Psychiatry and Behavioral Sciences Department at the University of Washington School of Medicine, and has been licensed in Washington since 1992. He has held faculty positions at the University of Florida, the American University, and the University of Washington prior to his clinical licensure and has held a number of administrative positions since assuming the role of the program director of the specialized outpatient PTSD clinic at American Lake. He is also the lead mentor for the VISN 20 PTSD Mentoring Program. Dr. Smith’s diversity interests include how beliefs are shaped by sociopolitical cultures within and across time, and his professional interests include the psychology of trauma. He is also interested in the delivery of patient care and treatment outcomes.

**Mark Soelling, PhD, ABPP** is a staff psychologist in the MHC. He received a PhD in Clinical Psychology from the California School of Professional Psychology, Fresno campus. He completed a postdoctoral residency in Community Psychology through the Department of Psychiatry and Behavioral Sciences, University of Washington School of Medicine. Dr. Soelling is licensed in Washington and received his board certification through ABPP in Clinical Psychology. His theoretical orientation is cognitive behavioral; areas of interest include general mental health, major mental illness, combat stress control, and civil commitment. Dr. Soelling is a Clinical Associate Professor, University of Washington School of Medicine, and former chair of the State of Washington Examining Board of Psychology.

**Troy J Stettler, PsyD** is a neuropsychologist in the MHC. He earned his PsyD in Clinical Psychology from Pacific University, OR. He completed his doctoral internship at the Pittsburgh VA and a two-year postdoctoral residency in Clinical Neuropsychology at the Loma Linda VA. He is licensed in the state of California. Clinical/research interests include performance validity testing and utilization of neuropsychology within the VA system. He is also interested in differing approaches to neuropsychological feedback.

**Emily Trittschuh, PhD** is a clinical neuropsychologist with the Geriatric Research, Education, and Clinical Center (GRECC). She completed her PhD in Clinical Psychology at Northwestern University with a doctoral internship at Brown University. Her postdoctoral residency was in Neuropsychology at the Northwestern University Feinberg School of Medicine’s Cognitive Neurology and Alzheimer’s Disease Center. Licensed in the states of Illinois and Washington, she is an Associate Professor in the Department of Psychiatry and Behavioral Sciences at the University of Washington. Her clinical interests involve early diagnosis of neurodegenerative disease and her research has focused on the prevalence/incidence of Mild Cognitive Impairment, aging, dementia, late effects of head injury and GWAS studies of AD phenotypes. She leads a Clinical Demonstration project (VISN 20) which is focused on Dementia Education and Memory Skills training for older Veterans with PTSD. She is a member of the national VA Dementia Education Workgroup and is Chair of the VAPSHCS Psychology Professional Standards Board. She is on the Alzheimer’s Association King County Advisory Board.
Ruth Varkovitzky, PhD is a psychologist in the Western Telemental Health Network (WTN). She received her PhD in Clinical Psychology from Northern Illinois University, followed by an internship at the Cincinnati VA Medical Center and postdoctoral residency (PTSD-emphasis) at the Raymond G. Murphy VA Medical Center in Albuquerque, New Mexico. She is licensed in Washington, and is a Clinical Assistant Professor in the Department of Psychiatry and Behavioral Sciences at the University of Washington. Dr. Varkovitzky’s role in the WTN is to provide evidence-based treatment using the telehealth modality. She also has an interest in outcomes research, specifically related to PTSD and transdiagnostic treatment approaches. Her theoretical orientation is primarily cognitive behavioral with consideration of the impact of community and systems on mental health. Within WTN, she implements UP, PE, Skills Training in Affective and Interpersonal Regulation, UP for the Treatment of Transdiagnostic Disorders, and CBT-I. Her professional interests include provision of mental health services for women Veterans, training/supervision, and multicultural issues.

Alicia M. Wendler, PhD is a psychologist with the ATC. She received her PhD in Counseling Psychology from the University of Missouri-Kansas City. She completing her doctoral internship at the VA Eastern Kansas HealthCare System and is licensed in the state of Kansas since 2008. Dr. Wendler's theoretical orientation is integrative and she has completed several VA training rollouts: CPT, MI, and CBT-D. She serves as a national consultant for the VA CBT-SUD dissemination initiative. At American Lake, Dr. Wendler serves Veterans in both the outpatient addiction treatment program and the office-based buprenorphine treatment program. She is a member of the American Lake Women’s Mental Health Consultation Group. Dr. Wendler’s professional/research interests includes treatment for comorbid substance use and mental health disorders, gender-specific programming for women Veterans, program evaluation, and clinician self-efficacy.

Amanda Ernst Wood, PhD is a Mental Health Research psychologist a VAPSHCS and a Clinical Associate Professor with the Department of Psychiatry and Behavioral Sciences, University of Washington School of Medicine. Dr. Wood received her PhD in Clinical Psychology from the Graduate School of Psychology at Fuller Theological Seminary. She completed her doctoral internship at the VAPSHCS, American Lake Division, and her postdoctoral residency in Chronic Mental Illness and Neuropsychology at the University of Washington/VAPSHCS. She is currently licensed in the state of Washington. Dr. Wood’s research interests include pharmacogenetics, provider burnout, and the treatment substance abuse, depression, and PTSD.

Elisia Yanasak, PhD is the Program Manager of the ATC at VAPSHCS, American Lake Division. She received her PhD at the University of Houston in 2002. She completed her doctoral internship at VAPSHCS, American Lake Division. She completed her postdoctoral residency in the interdisciplinary treatment of substance abuse at the Center of Excellence in Substance Abuse Treatment at VAPSHCS, Seattle Division. She has been licensed in Washington state since 2004. Her theoretical orientation is primarily cognitive behavioral. Her clinical interests include the treatment of male and female Veterans diagnosed with substance use and comorbid psychiatric disorders. Her research interests include Evidence Based Treatment of SUDs.

Alycia S. Zink, PhD is a staff psychologist in the POC. She received her PhD in Clinical Psychology from California School of Professional Psychology with a dual emphasis in Clinical Health Psychology and Neuropsychology. She completed her doctoral internship at John D. Dingell VA Medical Center in Detroit, MI and a two-year postdoctoral residency in neuropsychology at the VA Northern California Health Care System, Martinez. She is licensed in California and Hawaii. Her theoretical orientation is primarily third wave cognitive behavioral
interventions. Dr. Zink primarily utilizes Evidenced Based Psychotherapies such as ACT, DBT, PE, and CPT. She is a national consultant for the ACT-D VA Training and Dissemination effort, the VA VISN 20 Regional Trainer for ACT-D, and serves as the President for the Association of Contextual Behavior Science Special Interest Group for the Department of Veteran’s Affairs. Her professional interests include training and mentoring of interns and residents, program development/quality improvement in mental health settings, and working with female Veterans. Research interests include treatment approaches for adult survivors of childhood trauma and all things related to ACT.
## ALUMNI

### 2017 Graduates

- **University of South Florida**
  - VA Postdoctoral Residency, PTSD and Polytrauma, Salt Lake City
- **Washington University, St. Louis**
  - University of Wisconsin-Madison School of Medicine and Public Health/Alzheimer’s Disease Research Center
- **University of Toledo**
  - VA Postdoctoral Residency, CESATE Addictions, Seattle Division
- **Seattle Pacific University**
  - VA Postdoctoral Residency, PCMH, Seattle Division
- **University of Southern California**
  - VA Postdoctoral Residency, Telehealth, Seattle Division
- **University of California, Berkley**
  - VA Postdoctoral Fellowship, Research, Dementia
  - MIRECC, San Francisco
- **University of Colorado, CS**
  - VA Postdoctoral Residency, Geropsychology, Boston
- **University of Arizona**
  - Postdoctoral Residency, Sleep Medicine, Stanford

### 2016 Graduates

- **University of Northern Illinois**
  - Postdoctoral Fellowship, Research, Emory University
- **Case Western Reserve University**
  - VA Postdoctoral Residency in Geriatric Neuropsychology
- **Seattle Pacific University**
  - VA Postdoctoral Residency, Telehealth, Seattle Division
- **University of Missouri, Columbia**
  - VA Postdoctoral Residency, PTSD, Minneapolis
- **Arizona State University**
  - VA Postdoctoral Residency, PCMH, Phoenix
- **University of Denver**
  - Postdoctoral Residency, Integrated Primary Care, Denver
- **University of Tulsa**
  - VA Postdoctoral Residency, PTSD, Central Arkansas
- **Idaho State University**
  - Postdoctoral Residency, Kaiser Permanente Central Valley Consortium

### 2015 Graduates

- **University of New Mexico**
  - VA Postdoctoral Residency, CESATE Addictions, Seattle
- **University of Kentucky**
  - VA Postdoctoral Residency, Pain/PCMH, American Lake
- **University of Nevada, Reno**
  - VA Postdoctoral Residency, Telehealth, Seattle
- **University of Maryland**
  - Private Clinical Postdoctoral Residency
- **University of Nevada, Las Vegas**
  - Postdoctoral Neuropsychology Residency
- **University of Oregon**
  - Postdoctoral Clinical Residency
- **University of Alabama**
  - VA Postdoctoral Residency, Geropsychology, Pittsburgh
- **CSPP San Francisco**
  - Postdoctoral Research Residency

### 2014 Graduates

- **University of Colorado, CS**
  - VA Postdoctoral Residency, Geropsychology, American Lake
- **University of Colorado, CS**
  - VA Postdoctoral Residency, Geropsychology, American Lake
- **University of Maryland**
  - Psychologist position at VA Puget Sound
- **University of North Texas**
  - VA Postdoctoral Residency, Addictions, Dallas
- **University of Mississippi**
  - VA Research Fellowship, Ann Arbor
- **University of Nevada, Reno**
  - VA Postdoctoral Residency, Telehealth, Seattle
- **University of Wisconsin, Madison**
  - VA Postdoctoral Residency, Primary Care, Portland
- **Ohio University**
  - Seeking employment
2013 Graduates

Nova Southeastern University
McLean Hospital/Harvard Medical School fellowship in Neuropsychology

University of Northern Colorado
Postdoctoral Research Fellowship Joint Base Lewis McChord

University of Oregon
Postdoctoral Residency, Stanford University

University of North Texas
VA Postdoctoral Residency, Geropsychology, Boston

University of Houston
VA Postdoctoral Residency, PTSD, Houston

Ohio University
VA Postdoctoral Residency, Clinical Psychology, Loma Linda

Linda
APPLICATION PROCEDURES

The doctoral internship at **VA Puget Sound - American Lake** is accredited by the Commission on Accreditation (CoA) of the American Psychological Association. The next site visit will be during the **2022** academic year. The CoA can be contacted at:

APA Commission on Accreditation  
750 First Street, NE  
Washington, DC 20002-4242  
(202) 336-5979  
Email: apaacred@apa.org  
Web: www.apa.org/ed/accreditation

American Lake is an APA accredited program currently with eight funded positions. This equal opportunity program is open to all qualified students (who are US citizens) from APA-accredited, CPA-accredited, and/or PCSAS-accredited clinical, counseling, and combined professional-scientific graduate programs and abides by the selection procedures used by APPIC (APPIC Site # 1623).

**APPIC Match Codes**

The doctoral internship program at American Lake is a generalist program. However, due to our Clinical Neuropsychology and Geropsychology training experiences, many people wishing to specialize in those areas apply to our program each year. Thus, the program has three distinct match codes, all are within our generalist program, but the Clinical Neuropsychology and Geropsychology match codes merely guarantee one rotation over the course of the internship year with an emphasis in one of those aforementioned specialties.

<table>
<thead>
<tr>
<th>Description</th>
<th>Code</th>
<th>Number of Positions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Generalist Program</td>
<td>162311</td>
<td>6</td>
</tr>
<tr>
<td>Generalist Program – Geropsychology Rotation</td>
<td>162312</td>
<td>1</td>
</tr>
<tr>
<td>Generalist Program – Clinical Neuropsychology</td>
<td>162313</td>
<td>1</td>
</tr>
<tr>
<td>Rotation</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Intern Recruitment and Selection**

The procedures for Intern recruitment and selection include development of an internship selection committee composed of American Lake psychologists. The committee is responsible for careful review of applications to the internship program. Each application is reviewed by two psychologists for goodness-of-fit which is determined by strength in a variety of categories, including research skills, scholarly productivity, dissertation progress, diversity, intervention experience with adults, assessment experience with adults, quantity and quality of supervision received, evidence of interpersonal and communication skills, and academic rigor of the doctoral program. The application review ratings are discussed by the full committee and these result in determining interview offers. Interviews are conducted, typically at our on-site interview day, by American Lake psychologists and postdoctoral Residents using a standardized set of questions. The final rank list is determined by a combined score of the application review mean score and interview mean score with the former being weighted more heavily than the latter.
Internship Admissions, Support, and Initial Placement Data
Historically, this program has received applications at a ratio of 25:1 from highly qualified candidates for the limited number of internship positions. Our selection criteria include "goodness of fit" between the intern's interests and the training we offer, training experience, academic credentials, writing skills, and dissertation status. We seek a diversity of backgrounds and theoretical orientations among the interns we choose.

<table>
<thead>
<tr>
<th>Date Program Tables are updated</th>
<th>August 25, 2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>Briefly describe in narrative form important information to assist potential applicants in assessing their likely fit with your program. This description must be consistent with the program's policies on intern selection and practicum and academic preparation requirements:</td>
<td></td>
</tr>
<tr>
<td>The procedures for Intern recruitment and selection include development of an internship selection committee composed of American Lake psychologists. The committee is responsible for careful review of applications to the internship program. Each application is reviewed by two psychologists for goodness-of-fit which is determined by strength in a variety of categories, including research skills, scholarly productivity, dissertation progress, diversity, intervention experience with adults, assessment experience with adults, quantity and quality of supervision received, evidence of interpersonal and communication skills, and academic rigor of the doctoral program. The application review ratings are discussed by the full committee and these result in determining interview offers. Interviews are conducted, typically at our on-site interview day, by American Lake psychologists and postdoctoral Residents using a standardized set of questions. The final rank list is determined by a combined score of the application review mean score and interview mean score with the former being weighted more heavily than the latter.</td>
<td></td>
</tr>
<tr>
<td>Does the program require that applicants have received a minimum number of hours of the following at time of application? If Yes, indicate how many:</td>
<td></td>
</tr>
<tr>
<td>Total Direct Contact Intervention Hours</td>
<td>YES</td>
</tr>
<tr>
<td>Total Direct Contact Assessment Hours</td>
<td>YES</td>
</tr>
<tr>
<td>Describe any other required minimum criteria used to screen applicants:</td>
<td></td>
</tr>
<tr>
<td>Applicants must have successfully proposed their dissertation. Applicants must meet the eligibility qualifications for psychology training within the Department of Veterans Affairs: <a href="https://www.psychologytraining.va.gov/eligibility.asp">https://www.psychologytraining.va.gov/eligibility.asp</a>. good academic standing at an APA approved graduate program in clinical, counseling, or professional-scientific psychology, completion of all basic course work, completion of all basic requirements for the doctoral degree except for the dissertation, although we strongly encourage people to complete their dissertations prior to internship, certification by the applicant's Director of Clinical Training (DCT) of readiness for internship (a form for this purpose is provided in the APPIC application forms), U.S. Citizenship, completion of our application materials, at least four years of pre-internship graduate training by the time the internship begins. <strong>Note:</strong> All applicants who are male U.S. citizens born after December 31, 1959 who are not otherwise exempt must show proof of Selective Service registration as part of their VA application. <strong>Acceptance of interns is contingent upon the results of a background check and possible drug screening.</strong></td>
<td></td>
</tr>
</tbody>
</table>
Characteristics of Successful Applicants
Data from the 2017 – 2018 class:

<table>
<thead>
<tr>
<th>Characteristics</th>
<th>Mean</th>
<th>Minimum</th>
<th>Maximum</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adult Intervention Hours</td>
<td>690</td>
<td>386</td>
<td>1098</td>
</tr>
<tr>
<td>Adult Assessment Hours</td>
<td>274</td>
<td>111</td>
<td>606</td>
</tr>
<tr>
<td>Adult Integrated Assessments</td>
<td>14</td>
<td>3</td>
<td>42</td>
</tr>
<tr>
<td>Supervision Hours</td>
<td>498</td>
<td>265</td>
<td>840</td>
</tr>
<tr>
<td>Peer Reviewed Publications</td>
<td>4</td>
<td>1</td>
<td>9</td>
</tr>
</tbody>
</table>

Support

Financial and Other Benefit Support for Upcoming Training Year*

<table>
<thead>
<tr>
<th>Benefit Support</th>
<th>2017-2018</th>
</tr>
</thead>
<tbody>
<tr>
<td>Annual Stipend/Salary for Full-time Interns</td>
<td>$25,675</td>
</tr>
<tr>
<td>Annual Stipend/Salary for Half-time Interns</td>
<td>NA</td>
</tr>
<tr>
<td>Program provides access to medical insurance for intern?</td>
<td>Yes</td>
</tr>
</tbody>
</table>

If access to medical insurance is provided:

<table>
<thead>
<tr>
<th>Benefit Support</th>
<th>2017-2018</th>
</tr>
</thead>
<tbody>
<tr>
<td>Trainee contribution to cost required?</td>
<td>Yes</td>
</tr>
<tr>
<td>Coverage of family member(s) available?</td>
<td>Yes</td>
</tr>
<tr>
<td>Coverage of legally married partner available?</td>
<td>Yes</td>
</tr>
<tr>
<td>Coverage of domestic partner available?</td>
<td>No</td>
</tr>
<tr>
<td>Hours of Annual Paid Personal Time Off (PTO and/or Vacation)</td>
<td>104</td>
</tr>
<tr>
<td>Hours of Annual Paid Sick Leave</td>
<td>104</td>
</tr>
<tr>
<td>In the event of medical conditions and/or family needs that require extended leave, does the program allow reasonable unpaid leave to interns/residents in excess of personal time off and sick leave?</td>
<td>Yes</td>
</tr>
</tbody>
</table>


*Note. Programs are not required by the Commission on Accreditation to provide all benefits listed in this table

Initial Post-Internship Positions Data

<table>
<thead>
<tr>
<th>Preceding 3 Cohorts</th>
<th>2013-2016</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total # of interns who were in the 3 cohorts</td>
<td>24</td>
</tr>
<tr>
<td>Total # of interns who did not seek employment because they returned to their doctoral program/are completing doctoral degree</td>
<td>0</td>
</tr>
<tr>
<td>Community mental health center</td>
<td>1</td>
</tr>
</tbody>
</table>

PD  EP
<table>
<thead>
<tr>
<th>Setting</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Federally qualified health center</td>
<td></td>
</tr>
<tr>
<td>Independent primary care facility/clinic</td>
<td></td>
</tr>
<tr>
<td>University counseling center</td>
<td></td>
</tr>
<tr>
<td>Veterans Affairs medical center</td>
<td>16</td>
</tr>
<tr>
<td>Military health center</td>
<td></td>
</tr>
<tr>
<td>Academic health center</td>
<td></td>
</tr>
<tr>
<td>Other medical center or hospital</td>
<td>1</td>
</tr>
<tr>
<td>Psychiatric hospital</td>
<td></td>
</tr>
<tr>
<td>Academic university/department</td>
<td>1</td>
</tr>
<tr>
<td>Community college or other teaching setting</td>
<td></td>
</tr>
<tr>
<td>Independent research institution</td>
<td></td>
</tr>
<tr>
<td>Correctional facility</td>
<td></td>
</tr>
<tr>
<td>School district/system</td>
<td></td>
</tr>
<tr>
<td>Independent practice setting</td>
<td>3</td>
</tr>
<tr>
<td>Not currently employed</td>
<td>1</td>
</tr>
<tr>
<td>Changed to another field</td>
<td></td>
</tr>
<tr>
<td>Other</td>
<td></td>
</tr>
<tr>
<td>Unknown</td>
<td></td>
</tr>
</tbody>
</table>

Note: “PD” = Postdoctoral residency position; “EP” = Employed Position. Each individual represented in this table should be counted only one time. For former trainees working in more than one setting, select the setting that represents their primary position.

**EEO and Prohibited Discrimination**

VA does not tolerate discrimination, including workplace harassment, based on race, color, religion, national origin, sex (including gender identity, transgender status, sexual orientation, and pregnancy), age, disability, genetic information, marital/parental status, political affiliation, or retaliation for opposing discriminatory practices or participating in the discrimination-complaint process. This applies to all terms and conditions of employment, including recruitment, hiring, promotions, transfers, reassignments, training, career development, benefits, and separation.

VA’s Office of Resolution Management (ORM) is responsible for administering an impartial and effective complaints management process to receive, investigate, and resolve, if possible, complaints of employment discrimination at the earliest possible stage. Employees may report allegations of discrimination to ORM at (888) 737-3361. The regulations governing the Federal EEO complaint process are found in 29 CFR Part 1614.

**Applications and Interviews**

Applicants wishing to visit and evaluate the American Lake program may do so at an Interview Day scheduled each year in early January. Several training sites in the region coordinate their schedules for the same week in January. For the coming year, Interview Day at American Lake is scheduled for January 3, 2018, from 08:00 to 16:30. Interview Day will consist of presentations by our rotation faculty, meeting the current interns for Q&A, touring our facility, and having two 30
minute interviews with faculty members. Required application materials must be submitted by **NOVEMBER 2, 2017**.

These include:

1. Completed APPIC Application
2. Graduate Transcripts
3. Three Letters of Recommendation
4. Vita
5. Certification of Readiness for Internship by Training Director (Form is included in the APPIC application.)
6. Follow AAPI online application procedures.

**Contacting current Interns**
Current Interns are one of the best sources of information about our training program. We strongly encourage applicants to talk with current Interns about their satisfaction with the training experience. Please feel free to email the Training Director or Associate Director and request to speak with an Intern. Your request will be forwarded to the current interns and an Intern will contact you.

Questions about the residency programs and application process can be directed to the training director, Dr. Aosved: **Allison.Aosved2@va.gov**; or to our Associate Director of Training, Dr. Fikkan: **Janna.Fikkan@va.gov**.
NORTHWEST LIVING

The American Lake Division of the VA Puget Sound Health Care System is located in Lakewood, a city of about 59,000 people. Located within Pierce County (population of 831,928), Lakewood is 15 miles from downtown Tacoma and 45 miles from Seattle.

The population of the greater Puget Sound region is approximately 3.9 million. The Puget Sound holds two of the United States’ busiest ports: the Port of Seattle and the Port of Tacoma. As such, the area has historically been an international hub for transportation, shipping, and industry. It is now also known for being the home of high technology development, the aerospace industry, and its military bases, including Joint Base Lewis-McChord (JBLM). In fact, the American Lake Division shares its border with JBLM, a joint military base of the United States Army and Air Force located in Pierce and Thurston Counties in Washington. JBLM has more than 25,000 soldiers and civilian workers. The post supports over 120,000 military retirees and more than 29,000 family members living both on and off post.

Housing

According to Zillow, the median 3 bedroom house price in Tacoma is around $270,000, though there is considerable range depending upon neighborhood. The median studio rental price is $1400/month; median 1 Bedroom rental price is $1200/month; median 2 Bedroom rental price is $1300/month; median 3 Bedroom rental price is $1500/month.

Some interns prefer to live in Seattle and commute to Tacoma. King County (in which Seattle is located) real estate and rental prices are higher than Pierce County (in which Tacoma is located). In Seattle proper, the median 3 bedroom house price is around $726,000. The mean studio rental price in Seattle is $2100/month; median 1 Bedroom rental price is $1800/month; median 2 Bedroom rental price is $2400/month; median 3 Bedroom rental price is $2700/month.

Climate

The area enjoys a temperate marine climate with rare summer and winter extremes. Rainy days are frequent during the winter months, averaging about 40 inches of rain per year. There are usually at least a few days of snow during the winter months, though the accumulation is typically minimal. Summers in this region are delightful, with average temperatures in the high 70s with minimal humidity.
Transportation
Most employees commute by car from Tacoma, about 30 minutes from American Lake, but many commute from Seattle, Olympia, and the surrounding areas. There is a free shuttle that runs between the Seattle and American Lake VA campuses to which Veterans and employees have access. The local bus system provides regular transportation throughout the Tacoma area. There is also a commuter rail that connects Tacoma to Seattle, though it does not operate on weekends. Seattle-Tacoma International Airport, 35 miles away from the American Lake VA, provides worldwide travel through many commercial airlines on frequent schedules. Amtrak provides transit from Vancouver, BC to Portland, OR (and beyond), and there are also several bus lines connecting these cities as well.

Recreational Activities
The Pacific Northwest has abundant opportunities for any outdoor activity imaginable. The scenic beauty of the Cascade and Olympic Mountain ranges, Puget Sound and its islands, state parks, and the four National Parks within the Pacific Northwest are all easily accessible. "Sea level to ski level in two hours" is no exaggeration! Point Defiance is a 760 acre park within the city of Tacoma, which offers miles of forested trails, a public beach with kayak rentals, gardens, an off leash dog park, a zoo and aquarium, and a living history museum. Cougar Mountain and Tiger Mountain parks near Issaquah are also great areas for hiking, biking, or trail running enthusiasts. Puget Sound has 20,000 shoreline miles with bays, coves, and islands with plentiful opportunities for boating, fishing, and clamming. Mount Rainier (14,400 ft), Crystal Mountain, Alpental, Snoqualmie Pass, and other nationally known winter sports areas are within 75 to 100 miles. There are more than 15 public golf courses within 20 minutes driving time from the Medical Center, most of which are open year round.

Entertainment, Culture, and the Arts
Tacoma and Seattle have many fine restaurants and nightspots affordable on an intern's stipend. The Pacific Northwest is known for good theater, and Tacoma is no exception. Community and college playhouses abound, and there are a multitude of music venues offering concerts and shows of every genre imaginable. Tacoma also has an independent movie theater, the Grand Cinema, which offers film festivals throughout the year. Spectator sports of all kinds are available within the Seattle-Tacoma area, including college and professional baseball, basketball, soccer, and football, as well as horse, automobile, and hydroplane racing. The Tacoma and Seattle area hosts a diverse array of cultural history and arts venues ranging from museums to theaters to community parks and gardens. Some museums have free admission days, such as the first Thursday of every month in Seattle and the third Thursday of every month in Tacoma. There is also an abundance of local farmer's markets throughout Tacoma and Seattle, many of which are open throughout the year.