

Psychology Internship Program



VA Connecticut Healthcare System: West Haven

Director of Predoctoral Training
Psychology Service/116B
950 Campbell Avenue
West Haven, CT 06516
(203) 932-5711 ext 2465

<http://www.connecticut.va.gov/>



Clinical Neuropsychology - MATCH Number: 118613
Clinical Health Psychology - MATCH Number: 118614
General Mental Health - PTSD and Complex Outpatient Mental Health - MATCH Number: 118615
General Mental Health - Addictions track - MATCH Number: 118616
General Mental Health- Severe Mental Illness (SMI) track - MATCH Number: 118617

Applications due: November 1, 2016

Accreditation Status

The predoctoral internship at the **VA Connecticut Healthcare System - West Haven** is fully accredited by the Commission on Accreditation of the American Psychological Association. The next site visit will be in **2020**.

Application & Selection Procedures

Students who meet the following eligibility criteria are invited to apply for internship with the Psychology Service, Department of Veterans Affairs, VA Connecticut Healthcare System, West Haven, CT.

In addition to the Eligibility Requirements listed on the VA psychology training homepage (<http://www.psychologytraining.va.gov/eligibility.asp>) and copied below, applicants for our predoctoral internship must meet several additional requirements:

Eligibility Requirements for all VA Trainees:

1. U.S. citizenship. VA is unable to consider applications from anyone who is not currently a U.S. citizen. Verification of citizenship is required following selection. All interns and fellows must complete a Certification of Citizenship in the United States prior to beginning VA training.
2. A male applicant born after 12/31/1959 must have registered for the draft by age 26 to be eligible for any US government employment, including selection as a paid VA trainee. Male applicants must sign a pre-appointment Certification Statement for Selective Service Registration before they can be processed into a training program. Exceptions can be granted only by the US Office of Personnel Management; exceptions are very rarely granted.
3. Interns and Fellows are subject to fingerprinting and background checks. Match result and selection decisions are contingent on passing these screens.
4. Doctoral student in good standing at an American Psychological Association (APA) or Canadian Psychological Association (CPA) accredited graduate program in Clinical, Counseling,

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or Combined psychology or Psychological Clinical Science Accreditation System (PCSAS) accredited program in Clinical Science. Persons with a doctorate in another area of psychology who meet the APA or CPA criteria for respecialization training in Clinical, Counseling, or Combined Psychology are also eligible.

5. Approved for internship status by graduate program training director.

Application Process

After a careful reading of the information in this document, describing the possible training rotations and making sure that you meet and accept our eligibility criteria, please complete the application process if you are interested in working with us for your internship year.

The application procedure then includes the following steps.

1. Complete the [APPIC](#) * online AAPI
2. In the AAPI Cover Letter, in the following order, with a space between each:
 - a. indicate the track(s) to which you are applying:
 - b. Indicate the interview dates you prefer (12/22/16, 1/5/17, 1/12/17)
 - c. provide an attestation that you have read and meet all eligibility requirements.
3. Three letters of recommendation, as part of the AAPI
4. ** All application materials must be submitted through the online AAPI and received by **November 1, 2016**.
5. Psychology staff will review all applications and will offer interviews to those who best match with our program and clinical tracks. Preference is given to applicants that have specific training and/or research experiences that are consistent with the type of work that is performed at VACHS. Notification of interview status will be sent by December 1. Once offered an interview, in nearly all instances, the interview date you select in the application form will be confirmed. The interview day includes a series of presentations in the morning beginning at 8:30 a.m. that provide an opportunity to learn more directly about the clinical and research settings and training opportunities. At late-morning, applicants spend time with current interns in their area of interest prior to the start of individual interviews with staff. We have found that this procedure is quite helpful to all concerned in making decisions about training preferences.

Position information:

1. The stipend for the training year is \$26,502. We typically provide stipends for nine students, and these are currently distributed in the following manner: General Mental Health - PTSD and COMH track (2), General Mental Health - Addictions track (1); General Mental Health- SMI track (1); Clinical Health Psychology (3); Clinical Neuropsychology (2).
2. Our anticipated start date is Monday, July 3, 2017.
3. This setting complies with all APPIC guidelines and prepares interns for licensing requirements in the State of Connecticut. Interns are encouraged to review licensing requirements in the States they ultimately hope to practice so that we can try to meet those additional expectations.

FOR FURTHER INFORMATION WRITE OR CALL

John Beauvais, Ph.D.

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Psychology Service/116B
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The VA Connecticut Healthcare System, West Haven Campus Predoctoral Internship Program is accredited by the American Psychological Association. For information regarding APA accreditation of this internship or other accredited internships, please write or call:

Office of Program Consultation & Accreditation

American Psychological Association

750 First Street NE

Washington, DC 20002-4242

202-336-5979

www.apa.org

Psychology Setting

VA Connecticut Healthcare System - West Haven Campus (VACHS) offers healthcare services to a diverse population of Veterans that are provided in a wide range of healthcare delivery settings.

VACHS is a Yale University School of Medicine affiliated education and training institution.

VACHS provides primary, secondary, and tertiary care services in multiple areas (e.g., medicine, geriatrics, neurology, surgery, and mental health) and also provides specialized services for specific clinical problems (e.g., blind rehabilitation, psychosocial rehabilitation for seriously mentally ill, geriatric rehabilitation, women's health care, psychological and pastoral counseling, alcohol and substance abuse treatment and auditory rehabilitation).

Several programs have been designated as Centers of Excellence (e.g., National Center for PTSD and the Mental Illness Research, Education and Clinical Center). Psychology staff are directly integrated into many of these clinical settings, but also serve these populations on a consultative basis. Like many other VA settings throughout the nation, our Psychology Service has recently experienced rapid growth. In addition to expanding our expert clinical staff, VACHS hosts an impressive complement of research psychologists supported through VA and other funding sources. Many of these research psychologists serve as clinical and/or research mentors for psychology trainees at VACHS. The credentials of psychologists at VACHS are exceptional and diverse. The majority of psychologists at VACHS hold academic appointments at Yale University and regularly contribute to peer-reviewed scholarly publications. The Psychology Training Program maintains full APA-accreditation and APPIC membership. Five internship tracks are available to graduate students depending on their interests and level of training. Within General Mental Health there are three tracks: PTSD and Comprehensive Outpatient Mental Health (COMH), Addictions, and Severe Mental Illness (SMI). Additionally there are separate Clinical Health Psychology and Clinical Neuropsychology tracks. At the fellowship level we have multiple post-doctoral training programs that many interns consider when making decisions about their advanced training (<http://www.connecticut.va.gov/careers/psychologytraining.asp>). In most training years, several students are also offered training at the practicum level, and these opportunities often fall within the Clinical Health Psychology and Clinical Neuropsychology rotations.



Training Model and Program Philosophy

Our program is most compatible with a scientist-practitioner perspective in all our track programs, though scholar-practitioners, who find that their goals and interests match well with those of the training staff, may also be successful candidates. Within this framework, our basic learning model is to have each intern work with a wide variety of patients under close supervision in an apprenticeship model with increasing clinical responsibility over the course of the year. Interns participating in the predoctoral psychology internship training program are offered training experiences that encourage the development of professional and scientific skills/competencies, and the conduct of ethical practice and research. Skill development is consistent with state-of-the-art scientific inquiry and scholarship within a perspective that fosters the successful integration of science and practice.

Program Goals & Objectives

The overall goal of our training program is to prepare the predoctoral psychology intern with entry-level skills in Professional Psychology (e.g., scientists and teachers with strong clinical backgrounds), with generalist skills and competencies that are developed within multiple clinical emphasis areas (i.e., tracks). Our training is tailored to be consistent with the new Standards of Accreditation. At the beginning of the training year, students are provided with specific performance criteria for each of their rotations that are reflected in our evaluation form. These core competencies are fully consistent with the goals and purposes of psychologists as identified by the APA and CoA. At year's end, interns are expected to have met passing criteria in all competency domains and to be prepared for further specialized training or an entry-level position.

Program Structure

Our program structure varies depending on the training track and the interests of the intern. The major variations and opportunities are described below in the following order: Clinical Health Psychology, General Mental Health (Three tracks: PTSD/COMH, Addictions, and SMI), and Clinical Neuropsychology.

1. Clinical Health Psychology Track

The Clinical Health Psychology Section's focus is to develop a broad array of integrative clinical, research, and training programs to address the psychological aspects of physical health and disease.

The Section offers integrated and interdisciplinary training experiences in multiple settings within the medical center for various health-related problems including: pain management, obesity, smoking cessation and weight management, insomnia, management of chronic illness and disability, and coping with acute illness and hospitalization. Interns conduct clinical work exclusively within medical settings including primary care, the Pain Clinic, various inpatient units, and the Comprehensive Cancer Center. Several of the clinics are interdisciplinary. Activities, driven by a cognitive behavioral and biopsychosocial models, include: assessment, intervention (individual, group, family), psychoeducation and health promotion activities, provider education, and consultation/liaison work. The Section promotes the availability of timely, goal-oriented, brief, and collaborative services designed to be consistent with a fast paced, academic medical environment and contemporary models of reimbursement for cost-effective clinical services. The conduct of clinical research is an increasingly important component of the mission of the Section, and the availability of outcome data fosters perceptions of credibility and importance of the services. These elements are the cornerstones to our Clinical Health Psychology Section and its related clinical, research, and training activities.

Clinical Training Opportunities for Clinical Health Psychology Interns

Clinical Health Psychology – Primary Care Clinics: The Clinical Health Psychology – Primary Care Program is a primary focus and setting for trainees in our program. The Primary Care Program, because of its structure, provides trainees with the maximal opportunity to interact with the wide array of allied healthcare professionals that serve on associated Firms/Primary Care Clinics and treatment teams, following the interprofessional model. This includes physicians, nurse, medical technicians, social workers, rehabilitation specialists, dieticians, pharmacists, psychiatrists, geriatricians, and case managers. Trainees participate in the evaluation/assessment, treatment planning, and direct care of patients with co-morbid medical and psychological/adjustment issues using empirically-based individual and group interventions. This emphasis provides the trainee with an opportunity to design, implement, evaluate and facilitate, within a primary care medical setting, a variety of treatment efforts directed toward the identification and reduction of health risk related life-style (e.g., tobacco use, obesity, stress management). Implicit in this approach is the utilization of "stepped care" and the integration of medical and mental health services, consistent with the spirit of recent Agency for Healthcare Policy Research

guidelines. The task of the trainee will be to facilitate the development of more effective and efficient care programs that take advantage of the interprofessional nature of primary care and the wide range of healthcare providers involved in the care of the veteran.

Interdisciplinary Pain Management: This emphasis takes place within an interprofessional clinical, research and training program committed to the evaluation of the interaction of the physical, psychological, and sociological aspects of chronic pain problems and the development of mind and body integrated approaches to pain management. Evaluation, treatment planning, active intervention, and case management occur in outpatient settings. Opportunities for inpatient consultation also exist. Roles of the resident will include that of primary clinician and program manager within the context of an interprofessional team directed by a psychologist. In addition, specific clinical skills developed will include the conduct of a comprehensive cognitive-behavioral evaluation and provision of treatment within cognitive-behavioral and rehabilitation perspectives. This focus has a treatment process and outcomes research orientation, and residents are routinely involved as co-investigators on any of several funded research projects through the PRIME (Pain, Research, Informatics, Medical Comorbidities, and Education) Center, including roles as study therapists and opportunities for secondary data analyses of archived data. NOTE: These training opportunities are located primarily at VACHS-WH

MOVE! Weight Management Program: MOVE! is a national program that was developed by VA in response to efforts to address the obesity epidemic. MOVE is an interdisciplinary clinic that offers ongoing psychoeducational groups to promote long-term, effective weight management. This program provides ample opportunities for intraprofessional collaboration and mentoring, program development and evaluation, as well as participation in ongoing research collaborations.

Psychosocial Oncology: Clinical opportunities are available to deliver services within the Comprehensive Cancer Center (CCC) at VACHS. The CCC is accredited by American College of Surgeons and serves as the primary cancer care clinic at VACHS-WH. Opportunities in providing individual health psych services to veterans being treated for cancer are available as well as opportunities to provide group therapy and educational programs to the veterans and their families in the CCC Cancer Survivorship Center. This program offers additional opportunities for intraprofessional collaboration, program development and evaluation, and participation in ongoing research.

The Interdisciplinary Stroke Clinic: The intern provides a brief screen for outpatients who have experienced a stroke to assess biopsychosocial factors related to cardiovascular disease. Information provided by the assessment provides the basis for clinical recommendations as well as long-term integrative treatment planning with the interdisciplinary team comprised of Clinical Health Psychology, Pharmacy, Physical Therapy, and Neurology. To promote patient acceptance of recommendations and to facilitate adherence to behavior change, brief motivational interviewing and psychosocial educational interventions are often employed.

Inpatient Consultation–Liaison: Interns serve in a consultation role for inpatient medical and surgical units throughout the medical center. The consultation questions provide a wide range of experiences for the intern. Typical responsibilities include clinical evaluation, formulation of recommendations, development of an appropriate intervention strategy, and facilitation of communication among staff, patients, and family members.

Health Promotion Activities: In addition to working within our primary care and specialty care clinics, interns are also actively involved in various health promotion activities, including Smoking Cessation, Stress Management, Healthy Lifestyles/Weight Management, and periodic Health Promotion Outreach Programs such as “The Great American Smoke Out,” employee and patient health fairs, and various interdisciplinary patient education lecture series sponsored in conjunction with Hospital Education.

Audiology Clinic: The interdisciplinary Audiology Clinic offers a unique opportunity for interns and who are interested in audiologic disorder management. Veterans are particularly vulnerable to auditory disorders due to noise exposures, head and neck traumas, and a host of other risk factors known about Veterans’ health. The Veterans Benefits Administration (VBA) reports that, in Fiscal Year (FY) 2012,

tinnitus and hearing loss were the two most prevalent service-connected (SC) disabilities experienced by Veterans. Interns learn to provide group and individual cognitive-behavioral therapy, which is integrated with care by the audiologist within the Progressive Tinnitus Management (PTM), a hierarchical protocol that was tested via several clinical trials at this site. In addition, the Audiology and Speech Pathology Service in collaboration with the Otolaryngology Service has developed a new Cochlear Implant program which requires a psychologist as part of the Cochlear Implant team. The purpose of psychological evaluations for cochlear implant candidates is to assess cognitive functioning, motivation, expectations, psychological stability, and extended care resources. Interns learn to conduct cochlear implant evaluations. Opportunities for involvement with ongoing research projects in collaboration with the VA Portland's National Center on Rehabilitative Auditory Research (NCRAR) and other VA medical centers are available.

The Didactic Program

Clinical Health Psychology Seminar: Interns participate in a weekly Clinical Health Psychology Seminar that includes a wide range of clinical and research presentations by VA/Yale experts as well as Clinical Health Psychology Staff and Trainees.

The Seminar has three components:

- (1) a teaching seminar that includes formal presentations relevant to the theory and practice of Clinical Health Psychology
- (2) a clinical case conference consisting of discussions of an ongoing clinical case and/or an overview of relevant issues related to the practice of clinical health psychology
- (3) a research conference devoted to empirical presentations germane to clinical health psychology staff.

Research: Each intern is assigned a research mentor and is encouraged to collaborate on on-going research projects associated with their clinical activities. These include projects in primary care, chronic pain, smoking cessation, and health promotion. Interns can also generate novel research questions within our setting.

Other Activities: The intern may wish to pursue clinical and/or research interests that are not primary rotations within the Clinical Health Psychology Program (i.e., the Women's Clinic, Tinnitus Management, Comprehensive Cancer Center, etc.). Such interests are strongly supported when hospital resources are available. In addition, the Psychology Service, the Yale Department of Psychology, and the Yale School of Medicine offer a variety of weekly colloquia, clinical lunches, and continuing education programs that are available to interns.

2. General Mental Health

The General Mental Health (GMH) program is designed to provide the intern with opportunities to work with a diverse range of patients and clinical problems, in a wide variety of diagnostic and treatment modalities, including individual, group, and couples therapies, and guided by an array of theoretical orientations. Interns in GMH receive a broad training experience while allowing for some focus on an area of interest in a track. There are three tracks within GMH: PTSD/ Comprehensive Outpatient Mental Health, Addictions, and Serious Mental Illness. All tracks allot 50% clinical time for the year. Interns are able to work with individual and group treatment formats. The training program focuses primarily on clinical intervention.

All GMH interns will have a core clinical experience that constitutes 25% clinical time. This consists of year-long supervision, didactic, and research experiences including a weekly case conference also attended by Yale psychiatric residents. Interns will also receive six-month experiences in a CBT for

Depression Group, Acceptance and Commitment Therapy (ACT) Group, Screening Clinic, and Compensation and Pension. In addition, interns will have the opportunity to select minor rotations that constitute another 25% clinical time. A minimum of a six-month rotation is required for interns selecting a minor rotation from the PTSD/Mental Health track to allow for sufficient training in individual psychotherapy within this track.

A. PTSD/Comprehensive Outpatient Mental Health Track

Interns in the PTSD/Comprehensive Outpatient Mental Health Track will spend 50% of their clinical time in a yearlong training experience based in the outpatient mental health clinic and the PTSD/anxiety disorders treatment program. The goal of this track is to gain proficiency in the assessment, formulation, and treatment of a broad range of psychological disorders and comorbid conditions as they occur within a veteran population. Diverse clinical/theoretical perspectives are represented in the supervision of assessment and treatment activities, including cognitive-behavioral, psychodynamic, interpersonal, and integrative approaches, all evidence-based and recovery-oriented.

Interns carry a diverse caseload and typically assume full clinical responsibility for their patients under supervision. Treatment modalities include short- and long-term individual psychotherapy, couples and family therapies, and group therapies (options include CBT for depression or anxiety; DBT skills; anger management; trauma education/treatment-planning group). In the PTSD section, interns are trained in evidence-based manualized psychosocial treatments for PTSD and have the opportunity to interact and work with staff members of the National Center for PTSD. In the mental health section, interns gain competencies in a wide range of pathologies, particularly personality disorders, and acquire core skills in managing such processes as resistance, defense, and transference-countertransference.

The heart of this training program lies in the quality of our supervision: Our faculty are committed to training and values working with trainees, and they devote a great deal of attention to the supervisory process. Faculty are committed to helping each intern develop an awareness of his/her therapeutic style, acquire foundational and functional competencies, and develop as clinicians, scholars and psychologists. Interns have reported their appreciation of the depth of preparation that this internship track provides and find they are well prepared and competitive for entry-level jobs or advanced postdoctoral training.

Minor Rotations in PTSD/Comprehensive Outpatient Mental Health: Psychology interns in all tracks may have the opportunity to select a minor rotation in PTSD/Mental Health. These rotations are 25% clinical time and may be individual and/or group psychotherapy based. A minimum of a six-month rotation is required for interns selecting an individual psychotherapy minor rotation from the PTSD/Comprehensive Outpatient Mental Health track to allow for sufficient training within this track.

B. Addictions Track:

Interns in the Addictions Track will spend 50% of their clinical time in a yearlong training experience focused on Addictions Treatment. Interns will gain experience through 4-month rotations in intensive outpatient treatment, outpatient treatment, and residential settings. In all settings, interns will obtain experience in individual and group psychotherapy and individual case management. Additionally, Addictions Track interns will have yearlong individual and group psychotherapy experiences treating Veterans with a range of mental health concerns; most Veterans with substance-related disorders in the treatment settings have co-occurring mental health conditions such as depression, anxiety disorders, and PTSD. Interns may also select minor rotations that are 25% of clinical time.

Substance Abuse Day Program (SADP) Rotation (Dr. Pilkey): The Substance Abuse Day program is a 3-week intensive outpatient treatment program with services provided by an interprofessional team. The interprofessional team consists of Psychologists, Social Workers, Registered Nurses, Addiction Therapists, Art Therapists, and other trainees. Interns function as part of the team co-leading Cognitive Behavioral Therapy and Motivational Enhancement groups. Interns also serve as a case manager for assigned patients enrolled in the program.

Outpatient Addiction Recovery Services Clinic (OARS) Rotation (Drs. Decker, Lozano, Meshberg-Cohen): The Outpatient Addiction Recovery Services Clinic (OARS) provides outpatient, long-term, individual and group psychotherapy for veterans with a primary diagnosis of substance-related disorder, most often severe in nature. Interns will have opportunities to provide Substance Use Screening services, a range of group psychotherapy treatments, individual psychotherapy, and individual case-management. Interns will participate on an interprofessional team including Psychologists, Psychiatrists, Social Workers, Addiction Therapists, Clinical Specialists, Registered Nurses, Peer Specialists, and trainees from other disciplines.

Psychosocial Residential Rehabilitation Treatment Program (PRRTP) (Drs. Franco, Martino, and Steinberg):

The PRRTP serves veterans who are struggling with serious mental illness and/or substance use disorders, and who are homeless or living in conditions not conducive to recovery. The program provides coordinated services in a safe, supportive, and sober residence with an emphasis on connection to long-term outpatient services. Interns will have the opportunity to serve as a member of an interprofessional team providing individual clinical case management, conducting intake evaluations, and facilitating treatment groups.

Minor Rotations in Addictions Treatment: Psychology interns in all tracks may have the opportunity to select a minor rotation in Addictions treatment based in the Substance Abuse Day Program, the Outpatient Addiction Recovery Services clinic, or the Psychosocial Residential Rehabilitation Treatment Program. These rotations are 25% clinical time. Interns will be provided many of the same individual and group treatment training opportunities afforded to the Addiction Track intern.

C. Serious Mental Illness (SMI) Track

Interns in the SMI Track will spend 50% of their clinical time in training experiences focused on different facets of psychosocial rehabilitation and recovery for individuals with serious mental illness. For the full year, interns will carry a small case-load of clients with SMI through the mental health clinic, which provides short and longer-term individual, couples, family and group therapies. Additionally, interns will be placed in 3 four-month long major rotations, described below.

Community Reintegration Program (CRP) Rotation (Drs. Bullock and Crutchfield): The CRP program is part of the Errera Community Care Center, which also houses community-based intensive case management, vocational, and supported housing programs. In this milieu setting, interns will work with interdisciplinary treatment teams that include psychologists, social workers, recreation therapists, peer specialists, nurses and occupational therapists. CRP is a group-focused program and offers a variety of psychoeducation and psychotherapy groups including Social Skills Training for Schizophrenia and Illness Management and Recovery, both evidence based practices for serious mental illness. Interns will perform screening, case presentation, case management, and strength-focused care planning with a caseload of between 4-6 Veterans diagnosed with SMI. Interns will also co-facilitate three different weekly psychoeducation/psychotherapy groups. Interns have some latitude in what groups they can co-facilitate. In past years, interns have co-facilitated groups focused on addiction psychoeducation, cognitive therapy, anger management, anxiety, and pain management. If interested, interns may also work collaboratively with CRP staff to develop a new group or revamp an existing one. Interns also attend a monthly ECCC inservice/training seminar. Interns receive a total of 5 hours of supervision per week, which includes individual as well as interdisciplinary team group supervision.

Inpatient Unit/8-East Rotation (Dr. Stacy): On this rotation, interns will attend daily interdisciplinary rounds, where they receive referrals and provide information about Veteran progress. Interns have approximately 6-8 hours of direct clinical contact, with some flexibility in the amount of individual and group therapy they provide. At a minimum, interns are expected to carry an individual caseload of two Veterans, providing individual solution-focused therapy, relapse prevention, and motivational interviewing. Interns will also lead or co-facilitate groups on the inpatient unit. Interns have the latitude to begin their own groups, co-facilitate groups with other trainees, or assist in facilitating existing groups. Additional rotation experiences include participating and co-facilitating weekly Recovery Rounds, attending the

monthly meeting of the Inpatient Recovery Committee, attending family meetings, and developing a small recovery project. Past examples of recovery projects include creating a staff training, developing a new group, or creating an intervention to increase group attendance.

Cognitive Rehabilitation Rotation (Dr. Fiszdon): This rotation focuses on different approaches to psychosocial rehabilitation. Interns on this rotation will receive a range of experiences. 1) Cognitive Skills Clinic (mandatory), which receives referrals for brief treatment from both mental health and primary care providers. Interns will be involved in clinic intake evaluations, as well as providing individual compensatory cognitive training. Interns will also lead or co-lead psychoeducation classes focused on providing information about cognitive impairments in older age and ways of optimizing cognitive function. 2) Giant Steps Program (mandatory), which provides ongoing group psychoeducation, art therapy, other structured activities and general support to Veterans who are in treatment in the Mental Hygiene Clinic. Interns will participate in this program one afternoon per week, during which they will be expected to learn about art therapy approaches to rehabilitation, will take an active role in co-leading groups, and will develop and lead their own psychoeducation groups. 3) Ongoing psychosocial treatment development and evaluation research (optional). As time and interest permits, interns may also be able to observe and/or deliver psychosocial treatment research interventions and assessment procedures, including neuropsychological batteries and semi-structured symptom or diagnostic interviews. 4) Incentive Work Therapy Program (optional). This therapeutic program available to Veterans receiving services in the Mental Hygiene Clinic provides time-limited work experiences within the medical setting. Interns have the opportunity to be involved in clinic intake evaluations, job placements, ongoing work evaluation and supports, and weekly groups.

Minor Rotations in SMI: Psychology interns in all tracks may have the opportunity to select minor rotations in CRP, Cognitive Rehabilitation or Cognitive Neuroscience and Rehabilitation (described below in Neuropsychology track description). Minor rotations are 25% clinical time, with effort taken to provide experiences in the rotation components of most interest.

Additional GMH Minor Rotations:

DBT Skills Group: 12 month rotation on a weekly skills group for Veterans with strong emotions and impulsive behavior using Linehan's Dialectical Behavior Therapy Skills Training Manual. Trainees gain experience in working effectively with emotionally dysregulated Veterans using DBT principles and strategies: balancing acceptance and change approaches, leading and co-leading a structured skills training group, assigning and reviewing skills practice ('homework'), assessing and problem-solving barriers to skills practice, and enhancing Veterans' motivation for applying their new skills. This training experience includes an intensive summer seminar on DBT theory and application, weekly group supervision using DBT peer consultation team format, development of skills for consulting to peers on clinical issues, and individual assessment sessions. By rotation end, trainees will acquire the skills and knowledge to lead or start a DBT skills group program.

LGBT/Diversity: The emphasis on this rotation is on learning to be an advocate and learning the tools to create change in a large system. Potential opportunities include the following: LGBT committee monthly; Co-facilitate LGBT group weekly; Diversity committee monthly Planning and development for diversity seminar for interns; Provide consultation on cases and provider education; Case discussion as needed; and Focus groups and gap analyses.

3. Clinical Neuropsychology Track

Brief History and Structure

The Clinical Neuropsychology Training program has a history dating back to 1975. The over-riding goal of this track is for students to develop entry-level skills as a Clinical Psychologist, with specialty training in Neuropsychology, in preparation for advanced post-doctoral training or for initial job placements in medical center settings or academic neuropsychology. This is accomplished through 1) the recruitment

and selection of interns who have the appropriate interest and academic background, and 2) a year-long series of didactics and experiential training with an apprenticeship model.

The two most critical aspects of training in Clinical Neuropsychology at the West Haven Campus of the VA Connecticut Healthcare System are 1) the breadth and variety of the patient population/clinical questions; and 2) exposure to multiple tools and approaches in the clinical work. While cerebrovascular disorders, and the dementias (cortical and subcortical) have represented the most common referral types, patients with blast injury, multiple sclerosis, tumor, head trauma, chronic learning disability, and deficits possibly secondary to substance abuse are common. Both quantitative and qualitative components to clinical assessment are utilized. The advantages of each approach are emphasized in individual cases depending on the diagnostic, prognostic, follow-up, or rehabilitation questions being answered.

The Clinical Neuropsychology Section consults with inpatient services including Psychiatry, Geriatrics and General Medicine. However, patients are primarily scheduled for outpatient evaluations on referral through the many clinics within the hospital. Interns gain expertise in the assessment of patients with various limitations, which the neuropsychologist is challenged to circumvent in order to provide clinical insights. All appropriate radiological and neurological diagnostic procedures (EEG, MRI, CT, etc.) are readily available. This setting offers a superb learning experience for psychology interns interested in the psychological aspects of neurological disorders or the "borderland" between neurology and psychiatry. The study of human brain-behavior relationships, the diagnosis and description of CNS dysfunction using neuropsychological techniques, recommendations for remediation strategies and/or recommendations for specialty referrals for selected patients are the focus of this internship. Research opportunities are plentiful, and we have been engaged in recent projects involving the relationship between PTSD/TBI and cognitive functions and the nature of cognitive functions in medical populations (e.g., Multiple sclerosis and Hepatic Encephalopathy).

Clinical Neuropsychology Consultation Clinic

While the program has traditionally focused on work with neurology and geropsychiatry patients, interns work with a variety of individuals with wide ranging problems during the training year. Extensive experience in neuropsychological evaluation for diagnostics, treatment effects, and rehabilitation planning is provided. While feedback is offered to every patient, referrals for counseling, remediation, and rehabilitation are frequently made. Exposure to both standardized and process-oriented approaches to neuropsychological assessment is provided, though the primary clinical work utilizes a core battery comprised for utility with the disparate patient population served. Dr. Beauvais currently serves as the director of this clinic.

Behavioral Research Assessment and Integrative Neuropsychology Clinic (BRAIN), is a referral clinic which integrates comprehensive neuropsychological assessment with clinical research to exemplify the role that science can and should play in clinical practice. To achieve these goals, the clinic provides the means to conduct clinical neuropsychological research and to coordinate with other primary investigators within VACHS to incorporate neurocognitive assessment into their ongoing research projects. Current projects include the examination of Traumatic Brain Injury and its impact on sleep, cognition, pain, and psychological disorders, the creation of measures assessing effort and symptom magnification, the examination of subtle social cues on test performance, and the use of administrative data to determine referral patterns for neuropsychological assessment. However, the makeup of the ongoing projects within any year is variable. The clinic also provides numerous opportunities to participate in multidisciplinary projects and work in cutting edge technologies. The clinic also maintains a continuously updated database from which projects can be conceptualized and initiated. It is hoped that trainees will be able to experience the way in which research activities can be incorporated into their clinical practice to improve the field while allowing for a richer career experience. Trainees are able to generate their own research ideas or participate in ongoing research projects to complete their research requirements. Joseph Kulas, Ph.D., ABPP, currently serves as the director of this clinic.

The Eastern Blind Rehabilitation Center – Rotation

At the Eastern Blind Rehabilitation Center, veterans generally participate in a four-to six-week inpatient rehabilitation program centered around increasing independence in many skill areas in the context of

vision loss. Opportunities include neuropsychological evaluation, group work, and general intake screenings. These allow identification of needs and goals for further intervention, as well as areas of weaknesses and strengths for further development. Interns may have the opportunity to elect other training experiences, including brief supportive individual psychotherapy and/or assistance with administrative functions within an interdisciplinary team environment. Dr. Beenken serves as the supervisor of this rotation.

Cognitive Neuroscience and Rehabilitation Rotation: This rotation combines functional and neuropsychological assessment, individualized cognitive rehabilitation intervention, and enriching research opportunities involving cognitive and translational neuroscience. Over a 4-month minor rotation it is expected that the intern will complete intake assessment, integrated reports, and treatment plans for 3-4 individuals referred to the Cognitive Skills Clinic. The intern will then serve as primary therapist for these cases over a 10-12 session treatment period. Treatment is individualized to meet the needs of our clients, who represent diverse clinical, demographic, and functional backgrounds, and include combinations of behavioral-activation, motivational, cognitive-behavioral, compensatory, and computer-based rehabilitation techniques. Clinical training and supervision occur in a vibrant research environment, with active projects including studies of pharmacologic enhancement of cognitive remediation in schizophrenia, development of brain-computer interface (BCI) technology for memory training, and electroencephalographic (EEG) recording in healthy and clinical samples under various experimental conditions. Based on intern interest and availability, additional training opportunities may include EEG set-up, bio-signal processing, and independent research paper projects supported by laboratory data and resources. The overarching goal of training is to enhance understanding of human cognition as a multi-faceted biopsychosocial construct, the assessment of cognitive function from behavioral, metacognitive, and neurophysiologic perspectives, and the translation of laboratory science to clinical practice. Dr. Johannesen currently serves as the supervisor of this rotation.

Clinical Neuropsychology Seminar

The Clinical Neuropsychology Seminar is a weekly series that covers a number of academic, clinical, and research issues in Clinical Neuropsychology (the specialty profession that focuses on the behavioral manifestation of brain function/dysfunction). Topics will provide advanced training in brain-behavior relationships, including overviews of functional neuroanatomy, neurological diseases (e.g., cerebrovascular disease, traumatic brain injury), clinical syndromes (e.g., aphasia), ancillary neurodiagnostic procedures (e.g., neuroimaging, EEG), and professional issues in neuropsychology. Lectures will be delivered by prominent clinicians and researchers from diverse settings in order to provide a broad base of learning perspectives. The seminar also incorporates monthly journal clubs and (optional) trips to attend brain cuttings at Yale.

Additional Rotations

Students in Clinical Neuropsychology are also trained in other clinical settings (e.g., Clinical Health Psychology working in the Stroke Clinic and/or General Mental Health tacks for eight to ten hours a week) to broaden and complement their internship experience.

Training Experiences

Seminars and Didactics:

The clinical training activities within each specialty track are buttressed by a combination of formal didactic seminars and informal, one-to-one teaching during the course of regular supervisory meetings. Formal seminars that all interns are required to attend include: a core seminar, a diversity seminar, journal club, and our monthly Psychology Colloquia. In each training track there are specialty experiences such as a clinical neuropsychology seminar and a clinical health psychology conference and didactics/seminars in each of the general mental health tracks. Frequently, students give clinical and research presentations in these seminars. All students are further encouraged to attend lectures, seminars, and Grand Rounds offered through Yale University (the schedule of offerings is updated and made accessible to all students).

Research Mentorship:

In addition to clinical work and supervision, interns will be expected to specify a goal for empirical research or scholarly activity involving collaboration and mentorship with one of our faculty. They will be given up to 4 hours each week to work on this goal. By the end of the training year, each intern will be expected to provide a specific product of this collaboration, such as a formal presentation as part of one of our existing seminars or conferences, a presentation at a regional or national meeting, or a completed draft manuscript for publication (research may include work on the intern's dissertation). Ongoing research opportunities may exist for interns to become involved.

Requirements for Completion

In the beginning of the training year, students are provided with specific performance criteria for each of their rotations reflected in our evaluation form. **Exit criteria for internship:** For the last evaluation period, no competency item can be rated below a "4" for a trainee to pass the internship. This score represents readiness for practice at the entry level (i.e., supervision on advanced cases or related work; autonomous judgment). Grievance procedures will be followed if a trainee disputes any competency rating.

In addition to developing clinical competencies, maintaining good standing within the program also necessitates certain levels of professional behavior. Interns and students are expected to appear and conduct themselves as professionals. For example, during working hours, interns will be mentally and physically capable of executing job functions. Patients and staff shall be treated with dignity and respect. The APA ethical guidelines and HIPPA regulations will be strictly adhered to, especially in matters of confidentiality of information, non-exploitation of patients and avoiding conflicts of interests. Additionally, interns are responsible for conforming to all other Medical Center and Office of Personnel Management regulations concerning conduct and behavior.

Facility and Training Resources

Our physical plant is under near constant upgrade and we currently experience 1) adequate space, 2) availability and utility of hospital computers that access the computerized medical record, support word processing, and allow internet based research; 3) an excellent clinical library with literature search and opportunity to utilize the extensive holdings of Yale University both directly and through interlibrary loan; 4) more than adequate testing materials for psychodiagnostic and neuropsychological assessment.

Administrative Policies and Procedures

Authorized Leave Policy:

In addition to OAA regulations for Annual and Sick leave, interns may request leave for academic/research purposes (e.g., attendance at professional and/or scientific meetings, meetings related to dissertation). Typically, up to one week of such leave can be approved. Such academic leave can be approved as "authorized absence" and is considered part of your training experience. Exactly when leave may be taken is to be worked out with your supervisory psychologists and should be discussed well in advance. For authorized absence, paperwork will need to be filled out and approved at least two weeks prior to traveling.

Due Process/Grievance Procedure Policies:

At the beginning of the training year, all interns are given a copy of our Due Process Policy and Grievance Procedures. This document provides interns and staff a definition of problematic behavior and impairment, a listing of possible sanctions and an explicit discussion of the due process procedures. Also included are important considerations in the remediation of problems or impairment. The grievance procedures policy provides guidelines to assist interns who wish to file complaints against staff members. It also explains the process if a supervisor has a concern regarding a student that does not fall under the inadequate performance (i.e., Due Process). These policies are available, in advance, by request.

Training Staff

There are 85 professionals comprising the Psychology Service clinical and research staff at the West Haven campus. The staff represents a variety of orientations, and psychology interns will have an opportunity to be supervised by different staff members. In addition, some consultation/supervision is often available from medical staff and Yale consultants during the year of training. A brief capsule description of current interests of many members of both clinical and research staff follows:

Lynette J. Adams, Ph.D., has clinical interests in underserved populations. She is currently the Women Veterans Program Manager. She is also the director of the LGBT Psychology Fellowship and facilitates the diversity seminar series for interns.

Jessica A. Barber, Ph.D., has broad clinical interests in health psychology. Her research interests include the integration of mental health services within medical clinic care settings, hospital systems/service delivery with a focus on program development and evaluation, and psychosocial oncology.

John E. Beauvais, Ph.D., has clinical and research interests in the area of Clinical Neuropsychology. He is actively researching the neuropsychological and psychological aspects of neurologic illness, predictors of driving in the elderly, and innovative approaches to assessment in visually impaired populations (e.g., the Tactile Wisconsin Card Sorting Test). He serves as the Ethics Consultation Coordinator for VA Connecticut and is a current Co-Chair of the National Psychology Professional Standards Board.

Beth Beenken, Ph.D., specializes in clinical neuropsychology, providing evaluation for various populations including those with sensory impairments or alterations. In addition, she has interests in brief and eclectic psychotherapeutic interventions. Research and publications have been focused on cognition, structural neuroimaging, sensory and electrophysiological functioning in schizophrenia.

Laura Blakley, Ph.D. is a staff psychologist who is based in Geriatrics and Extended Care, where she provided clinical care within the inpatient and outpatient palliative care programs, as well as the interdisciplinary ALS clinic. Dr. Blakley has clinical and research interests in compassion fatigue and provider burnout, and she is active in the supervision of predoctoral interns and postdoctoral residents in our Clinical Health Psychology training programs.

Joshua S. Bullock, Ph.D., has clinical and research interests in serious mental illness and psychosocial rehabilitation. Clinical and supervisory activities include individual and group psychotherapy in outpatient and day program settings, as well as supervision of interns in the Community Reintegration Program rotation.

Matthew M. Burg, Ph.D., has research interests in cardiovascular behavioral medicine. This specific focus is on the relationship of psychological (e.g., anger, depression), psychosocial (e.g., social support, spirituality), and psychophysiological (e.g., stress reactivity) factors to a number of CHD endpoints. Ongoing projects focus on predictors of, and recovery from myocardial infarction, mechanisms underlying mental stress provoked ischemia and arrhythmia, and determining the role depression phenotypes associated with poor prognosis after myocardial infarction. Current randomized clinical trials include testing of a patient-preference, stepped-care treatment for depression after acute coronary syndrome, and testing stress management to reduce risk of arrhythmia provoked shock in implantable cardioverter defibrillator patients.

Annie C. Chang, Ph.D., has broad clinical interests in clinical neuropsychology. Her current research interests include cross-cultural neuropsychology, post-traumatic stress disorder and its associated resilience factors, traumatic brain injury, and dementia. She currently oversees the neuropsychology service at VA Connecticut's Newington Campus.

Audra Crutchfield, Ph.D., is a psychologist based in the Community Reintegration Program. Her clinical interests center on serious mental illness, particularly psychotic disorders and major affective disorders, psychosocial rehabilitation, and evidence-based interventions for individuals with SMI. Research interests include program development/evaluation of treatments for SMI as well as how deficits in social cognition and neurocognition impact the recovery and community functioning of Veterans with serious mental illness.

Suzanne E. Decker, Ph.D. is a psychologist in the Outpatient Addiction Recovery Service and at the Mental Illness Research, Education, and Clinical Center (MIRECC). She has clinical expertise in Dialectical Behavior Therapy, behavioral activation, and behavioral couples therapy for substance use. Dr. Decker's research interests are in DBT and skills-based treatments, suicide prevention, and the implementation of evidence-based therapies. She also has studied efforts to train clinicians in evidence-based addiction treatments.

Robert Denkin, Ph.D. is the Director of Mental Health in the Compensation and Pension Department. He has clinical interests in the assessment and treatment of PTSD, with a focus on combat-related PTSD. In addition, Dr. Denkin's background as a clinician and a supervisor has included assessment and treatment of mental illness in forensic settings; specifically working with incarcerated populations.

Jason C. DeViva, Ph.D., is a clinical psychologist in the PTSD/anxiety disorders treatment program. He also serves as the military sexual trauma coordinator for VA Connecticut. His specific interests are evidence-based therapies for PTSD, strategies for increasing treatment utilization, and the relationship between sleep and trauma.

Lisa Fenton, Psy.D., is a clinical psychologist in the PTSD/anxiety disorders program. She also serves as a consultant for the CBT for Depression arm of the VA's National Evidence-Based Psychotherapies program, and as a member of the National Center for PTSD research team. She has extensive experience with clinical trial research and clinical applications of evidence based treatments.

Joanna Fiszdon, Ph.D., is the director of the Cognitive Skills Clinic (part of the GMH Cognitive Rehabilitation Rotation) and the Director of the Psychosocial Rehabilitation section of the Psychology Service. Dr. Fiszdon's research interests focus on: neurocognition, social cognition, and other factors affecting functional outcomes, as well as the development and evaluation of behavioral interventions for individuals with psychotic disorders. Dr. Fiszdon is actively involved in peer-reviewed research, and has several funded ongoing studies, including a clinical trial evaluating the efficacy of a group-based social cognitive intervention, a treatment development trial of an individually-administered social cognitive intervention, and a trial of motivational enhancement for cognitive rehabilitation.

Christine Franco, Ph.D. has research and clinical interests in the field of addictions, specifically within the area of gambling and gambling treatment. Her current clinical work includes individual psychotherapy and rehabilitative recovery and support for veterans diagnosed with co-occurring mental health and substance use disorders.

Lisa M. Frantsve-Little, Ph.D., has broad clinical interests in health psychology, including sexual dysfunction, health promotion, and the integration of mental health services into primary care settings. She currently oversees the Smoking Cessation Clinic at VA Connecticut's West Haven Campus.

Les R. Greene, Ph.D., has clinical and research interests in and publishes extensively in the areas of group dynamics, group psychotherapy, object relations theory, and severe psychopathology. He currently writes on the integration of psychotherapy practice and research.

Ilan Harpaz-Rotem, Ph.D. is the National Director of the VA PTSD specialty treatment programs evaluation and the Residential Rehabilitation Treatment Programs (RRTP) at NEPEC at the office of Mental Health Operations. He also serves as the Director of the Advanced Fellowship in Mental Illness Research and Treatment. His clinical and supervisory duties are associated with the Posttraumatic Stress Disorder and co-occurring disorders. He has a special interest in evidence-based treatments for PTSD. Dr. Harpaz-Rotem's research interest includes: PTSD, mental health service research, psychotherapy outcomes research, and human attachment during adolescence and early adulthood.

Carol C. Hendricks, Ph.D., is a clinical psychologist with clinical, supervisory and research interests in the provision of health and wellness services to patients with severe and chronic mental illnesses. She is the Director of The Wellness Center at the Errera Community Care Center, which provides physical fitness training, nutritional counseling and health psychology interventions.

J. Serrita Jane, Ph.D., has research interests in personality disorders and addiction. She also has interests in gerontology and psychotherapy.

Jason K. Johannesen, PhD is clinical psychologist trained in neuropsychology and psychiatric rehabilitation. He conducts a program of research combining psychophysiological measures and cognitive science experimentation to understand mechanisms of information processing affected in psychosis-spectrum disorders, with application to early detection of illness in high-risk individuals, cognitive remediation, and novel drug discovery. He provides cognitive rehabilitation services and trainee supervision in the treatment of Veterans presenting a range of psychiatric and neurologic conditions.

Robert D. Kerns, Ph.D., has broad clinical and research interests in the area of clinical health psychology and behavioral medicine with specific interests in chronic pain and pain management. He is Director of the Pain Research, Informatics, Multi-morbidities, and Education (PRIME) Center, a VA Health Services Research and Development Service Center of Innovation that studies interactions between pain and associated chronic conditions and behavioral health factors to develop and implement effective interventions that can reduce pain, its negative impacts on emotional and physical functioning, and overall

disease burden by employing principles of medical informatics, behavioral science, and health services research.

Anne Klee, Ph.D., CPRP, is the Director of Peer Support Services and the Interprofessional Fellowship in Psychosocial Rehabilitation. She has clinical and research interests in psychosocial rehabilitation, peer support, supportive housing and health promotion among individuals with serious mental illness.

Joseph F. Kulas, Ph.D., ABPP, is a board certified clinical neuropsychologist whose clinical interests encompass broad areas including traumatic brain injury, dementia, and epilepsy. Research interests include the cognitive impact of chronic epilepsy, neural network models of traumatic brain injury, psychometric properties of neuropsychological measures, anxiety, and increasing the role of science in medicine.

Christine Lozano, Psy.D. is a clinical psychologist in the Outpatient Addiction Recovery Service. Dr. Lozano's clinical and research backgrounds encompass behavioral medicine, including: substance use, binge eating disorder, chronic pain and chronic illness. Her clinical orientation is cognitive-behavioral, using motivational enhancement.

Steve Martino, Ph.D. is the Chief of the Psychology Service and Professor of Psychiatry at the Yale University School of Medicine. He provides training and supervision in motivational interviewing. He has an extensive addictions research background that has focused on psychotherapy development, treatment integrity rating, clinical supervision, treating dually diagnosed patients, and adapting motivational interviewing for special populations. In addition, he studies strategies to promote the implementation of evidence-based practices in community program and medical settings.

Sarah Meshberg-Cohen, Ph.D., is a clinical psychologist with a background in behavioral medicine, and specializes in the treatment of substance use disorders, chronic depression, anxiety disorders, and dual diagnosis. Her clinical work utilizes evidence-based treatments, including cognitive behavioral therapy, motivational enhancement, and interpersonal therapy including cognitive behavioral analysis system of psychotherapy (CBASP). Her research focuses on improving EBTs for substance use disorders and co-occurring psychiatric disorders.

Maria E. Niculete, Ph.D., is a clinical psychologist in the PTSD Residential Rehabilitation Treatment Program and the Local Evidence-Based Psychotherapy (EBP) Coordinator. She specializes in the treatment of PTSD with Prolonged Exposure and Cognitive Processing Therapy, CBT for Insomnia, and opioid overdose prevention education. Her current research is focused on evaluation of the VA's Opioid Overdose Education and Naloxone Distribution (OEND) program.

Erin O'Brien, Psy.D., has research interests include psychotherapy outcome research, personality disorders assessment and treatment, and substance abuse disorders. As examples, specific research projects in which she has been involved include the effect of therapist use of humor in therapy, treatment of borderline personality disorder, a longitudinal study of course and stability of personality disorders, and treatment of alcoholism.

David T. Pilkey, Ph.D. is the Director of the Substance Abuse section of the Psychology Service and Deputy Director of the Substance Abuse Firm and Director of the Substance Abuse Day Program. He has research and clinical interests in the field of addictive behaviors, with a particular emphasis in addictions treatment, evaluation, and training.

Noel B. Quinn, Ph.D. is the Health Behavior Coordinator (HBC) for VA Connecticut, as well as the co-director of the Health Psychology Postdoctoral Fellowship and Associate Director for the Center of Excellence (COE) in Primary Care. Dr. Quinn is responsible for coordinating health behavior change programs throughout VACT (including MOVE) and providing hospital-wide education in motivational interviewing and provider communication skills. Her research is broadly based within integrated primary care, and examining outcomes associated with self-perceptions of health.

Sandra G. Resnick, Ph.D., is Associate Director of the Department of Veterans Affairs Northeast Program Evaluation Center (NEPEC), where she is responsible for the national program evaluation of the Compensated Work Therapy (CWT) program and oversees the national dissemination and implementation of supported employment. She conducts research in several areas of psychiatric rehabilitation, and has clinical interests in the application of positive psychology for those with severe mental illness.

Caroline J. Schmidt, Ph.D., is a staff psychologist who has clinical and research interests in auditory disorders. She supervises trainees interested in providing cognitive-behavioral therapy for tinnitus, hearing loss adjustment strategies for Veterans, and conducting cochlear implant candidacy evaluations. Her current research focuses on interdisciplinary, psychological interventions for tinnitus. She is also interested in the comorbidities of auditory disorders with mental health disorders.

John Sellinger, Ph.D., is a staff psychologist and the Director of Training for the Clinical Health Psychology postdoctoral residency program. Dr. Sellinger's primary clinical interest is in psychosocial interventions for chronic pain. His clinical activities are within the context of several pain programs throughout the hospital. These include the Interdisciplinary Pain Clinic, the Opioid Reassessment Clinic, the Pain Rehab School, and the Veteran's Pain Education Program. Dr. Sellinger provides clinical supervision to health psychology interns and postdoctoral residents in each of these settings, and he serves as a member of the leadership team in the interdisciplinary pain management program. Dr. Sellinger's research interests are in chronic pain and obesity, including development and testing of integrated treatment models for these conditions.

Meaghan Stacy, Ph.D., is the facility Local Recovery Coordinator. She coordinates the screening clinic and consults with teams and programs (e.g., the inpatient unit) to promote the provision of recovery-oriented care. Her clinical interests center on severe mental illness, particularly psychotic disorders and major affective disorders, psychosocial rehabilitation, and evidence-based interventions for individuals with SMI. Her academic interests include program development and evaluation, systems change and consultation, as well as factors that impact the recovery and community integration of Veterans with severe mental illness.

Howard Steinberg, Ph.D., is the Program Director for the Psychosocial Residential Rehabilitation Treatment Program (PRRTP), which serves homeless veterans seeking treatment for substance abuse and other mental health problems. He has clinical and research interests in the areas of addictive behaviors, dual diagnosis, and cognitive behavioral interventions.

Valerie Weissner, Ph.D. specializes in Neuropsychology. She currently supervises clinical Neuropsychology interns and fellows in the Neuropsychology Consultation Clinic, and supervises Health Psychology and Neuropsychology interns in the Interdisciplinary Stroke Clinic. She is currently involved in research examining performance validity and cognitive functioning in PTSD. Past research interests include cognitive and functional performance in Multiple Sclerosis.

Wayne Zito, Psy.D., has research background in the area of vocational and cognitive remediation for individuals diagnosed with schizophrenia. Clinical and supervisory activities include outpatient group and individual psychotherapeutic interventions for patients diagnosed with SMI and severe personality disorders.

Trainees

The Clinical Psychology Internship Program at VACHS has been quite successful in meeting our desired goal of training professional psychologists. To begin with, interns have chosen to come to our facility from all over of the United States. Recent cohorts have had students from schools located in Arizona, California, Missouri, Mississippi, Kentucky, Massachusetts, New York, Illinois, Indiana, Florida, Virginia, Pennsylvania, Rhode Island, Texas, Alabama, Kansas, Maryland, Michigan, New Jersey, and Connecticut. Further, upon completing the internship, our students have an excellent track-record of

going on to highly respected and prestigious post-doctoral positions in their chosen area of interest. Currently, VA Connecticut – West Haven has approximately 18 funded fellowships in a variety of settings. Most placements fall within one of our four primary fellowship programs (a description of these can be accessed on our VA training homepage). Many interns have chosen to continue their training at our facility in one of these training areas or by being selected to work on a research grant with one of our staff psychologists.

Local Information

Quintessentially New England, Connecticut is a great place to live. The New Haven area offers a wide variety of local restaurants, theater, and entertainment, including the birthplace of the hamburger, two recent winners of Food Network’s “cupcake wars,” and the Yale Repertory Theater. We have four seasons of weather that allow for a multitude of sporting and recreational activities on Long Island Sound (visible from campus) and in nearby parks and nature preserves. The VA campus at West Haven is only minutes from Yale University, 76 miles from New York City, and only 145 miles from Boston with easy access to New York and Boston by train. For more information about living in Connecticut and our surrounding area, please visit the following websites:

The State of Connecticut Tourism Website

www.ctvisit.com

Yale University

www.yale.edu