

Psychology Postdoctoral Fellowship and Clinical Neuropsychology Residency Program



West Los Angeles VA Healthcare Center

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Director of Psychology Postdoctoral Training

Psychology Department (116B)

Building 401, Room A215

11301 Wilshire Blvd.

Los Angeles, CA 90073

Brochure hosted at: <http://www.losangeles.va.gov/trainee/>

Applications due: December 30, 2016
Fellowship year begins: September, 2017

Accreditation Status

The postdoctoral fellowship at the **West Los Angeles VA Healthcare Center** is not yet accredited by the Commission on Accreditation of the American Psychological Association. We are preparing to submit a **multiple-practice self-study** seeking accreditation in: (1) *Clinical Psychology* for our 1-year positions and, (2) seeking specialty accreditation in *Clinical Neuropsychology* for our 2-year neuropsychology Residency positions. Our fellowship/residency program is an active member of APPIC since 2009 with membership renewed in July of 2016.

Application & Selection Procedures

Application Process

The West Los Angeles VA Healthcare Center offers 1-year postdoctoral fellowship training in *Clinical Psychology* with 3 different areas of emphasis:

1. *Health Psychology* – 1 position open for 2017
2. *Trauma Psychology* – 1 position open for 2017
3. *Interprofessional Integrative Health* – 2 positions open for 2017
4. *Integrated Care for Homeless Veterans with Severe Mental Illness* Up to 2 positions open for 2017

We have three 2-year neuropsychology residency positions that are **NOT OPEN** for application this year but will be for 2018. These Clinical Neuropsychology Residency positions are described in the second half of this brochure, starting on page 24.

To be considered for any of our postdoctoral training program positions an applicant must:

Have completed all of the requirements for the doctoral degree, including internship and dissertation. The Department of Veterans Affairs requires that the applicant's doctoral degree and internship be completed at programs accredited by the American Psychological Association. To be eligible, you must be a US citizen. Also, please note that VA employment requires that males born after December 31, 1959 must have registered for the draft by age 26.

To apply, please submit the following documents:

NOTE: We require submitted applications to come through the APPA CAS portal (APPIC Psychology Postdoctoral Application Centralized Application Service – see web address below). For each of the 1-

year fellowship positions, the following documents will be requested and must be submitted through the APPA CAS portal. *Also, please note slight differences in the application requirements for the Clinical Neuropsychology positions, described below on **page 24** of this brochure.*

- Letter of Interest (LOI), specifying the position you are applying for along with a summary of educational, clinical and research experiences relevant to that emphasis area. In the LOI please include a statement about your current career goals in addition to your goals for fellowship training.
 - We are aware that some applicants may have overlapping interests and wish to apply for consideration in more than one track. In this case, the LOIs should be distinct and clearly targeted to the specific track.
- A recent copy of your Curriculum Vitae
- Three Letters of Recommendation
 - These letters should be from supervisors/mentors that are familiar with the work you've done in the emphasis track for which you're applying.
- Letter from your Internship Training Director verifying that you are expected to complete, or already have completed, your internship successfully
 - If your Internship Training Director is also writing a letter of recommendation for you, please **have them make sure it is clear that they are/were also your Internship TD** and that you are expected to successfully complete your internship.
- A letter from the chair of your dissertation committee detailing the status of your dissertation (including anticipated completion date). This letter should indicate that your doctoral degree has been, or will be, completed **before August 30, 2017**.
 - If your Dissertation Chair is also writing a letter of recommendation for you, please **have them make sure it is clear within the body of their letter** that you are expected to successfully complete your dissertation by August of 2017.
- Graduate transcripts.
 - You do **not** need to send undergraduate transcripts.

Submit these materials through the APPA CAS: <https://appicpostdoc.liaisoncas.com/applicant-ux/#/login> Complete the basic demographic, education, clinical training information and transcripts required of all applicants for all APPA CAS programs. Then select the appropriate program(s) (emphasis area) within the West Los Angeles VA Health Care System. APPA CAS allows you to request letters of recommendation electronically which are then uploaded by the letter writer. (Note: APPA CAS refers to letters of recommendation as "Evaluations").

For questions about application submission issues:

Steven Castellon, Ph.D., Director Psychology Postdoctoral Training

Email: Steve.Castellon@va.gov or scastell@ucla.edu

Phone: Steven Castellon (310) 268-3597 or Anna Okonek (310) 478-3711 ext 40301

Selection Process

We are seeking applicants who have strong skills in assessment, intervention, and clinical research, with specific interests and training in their chosen emphasis area. Applicants should also possess the personal characteristics necessary to function well as a doctoral-level professional in a medical center environment and in interdisciplinary treatment settings. Our selection criteria specifically

focus on background training and experience and the ability of the applicant to clearly articulate their training goals and professional aspirations that we feel are consistent with the VA mission. We seek the best fit between applicants and our training program.

Applications are reviewed by the Director of Postdoctoral Training (Dr. Steven Castellon), in addition to the relevant members of the fellowship selection committee. This committee is comprised of psychologists who serve as primary or delegated supervisors for each of the emphasis areas in which fellowships are being offered. [For the 2016-17 training year open positions (and training staff on selection committee) include: **Health Psychology** (Drs. Bailey, Chen, Himmelfarb, Kay, McCreary, and Zeller), **Trauma Psychology** (Drs. Booker, Boxer, Himmelfarb, Song, and Wettstein), **Integrative Health** (Drs. Serpa, Kay, and Chen), **Homeless Mental Health** (Dr. Schutz)] Following this review, highly ranked applicants are asked to participate in interviews, which may be either in-person or via telephone or video conferencing. After the interview process is complete, the selection committee again ranks the applicants and offers can then be extended to the top applicants for each of the open positions. When applicants are no longer under consideration, we strive to notify them of this as soon as possible.

This fellowship site agrees to abide by the APPIC policy that no person at this training facility will solicit, accept or use any ranking-related information from any fellowship applicant.

The postdoctoral fellowship program is not yet accredited by the Commission on Accreditation of the American Psychological Association. We are in the process of applying for accreditation. Inquiries regarding the accreditation of our postdoctoral program may be directed to:

Office of Program Consultation and Accreditation

American Psychological Association

750 First Street, NE

Washington, DC 20002-4242

Telephone: 202-336-5979

Fax: 202-336-5978

<http://www.apa.org/ed/accreditation>

Email: apaaccred@apa.org

The Department of Veterans Affairs is an Equal Opportunity Employer. Our fellowship program highly values cultural and individual diversity and welcomes applicants from all backgrounds.

Training Setting

The VA Greater Los Angeles (VAGLA) Healthcare System is one of the largest and most complex integrated healthcare facilities within the Department of Veterans Affairs. The VAGLAHS consists of a comprehensive tertiary care facility (West Los Angeles VA Healthcare Center), three ambulatory care centers, and 10 community-based outpatient clinics. In fiscal year 2014, VAGLAHS provided medical and mental health services to over 85,000 Veterans residing in the primary service area, including Los



Angeles County, which has the largest concentration of Veterans of any county in the United States. GLA provides comprehensive ambulatory and tertiary care to Veterans in five counties in Southern California, with 964 beds, over 5,000 employees and an annual operating budget of over \$900 million.

The Psychology Postdoctoral Training Program is housed at the West Los Angeles VA Healthcare Center. This tertiary care center is spread across an expansive 430-acre campus that includes approximately 150 buildings and is divided into a South and North Campus. The Psychology Department is embedded within the Department of Psychiatry and Mental Health and consists of 48 licensed clinical psychologists, many of whom are involved with training endeavors at the internship and postdoctoral level. Psychologists at the West Los Angeles VA occupy a variety of roles throughout the medical center, working in both inpatient and outpatient mental health and medical settings, with several involved in program leadership positions and the majority working in multi-disciplinary settings with allied mental health care professionals.

The West Los Angeles VA Healthcare Center is located in one of the most culturally diverse cities in the nation. The Veterans we serve represent a mixture of cultural, ethnic, socioeconomic, and individual diversity. Our overall Veteran population self-identified as 64% Caucasian, 27% African American, 5% Hispanic, 4% as Asian and 1% as Native American. While this group is approximately 90% male, there are several settings in which trainees can get experience working with female Veterans. There is also considerable diversity in terms of age, so although approximately 41% of our Veterans receiving care are over the age of 65, we also have nearly 15,000 OEF/OIF Veterans enrolled in GLA, with the vast majority under the age of 30.

West Los Angeles VA psychologists on the south campus work in settings that are primarily devoted to medical/surgical, integrated primary care and inpatient psychiatric services. These programs are located in either the main medical center building or in one of two newly-constructed, adjacent, modular buildings. South campus psychologists include those working within Health Psychology-Integrated Care, Physical Medicine & Rehabilitation, Geriatric Research, Education & Clinical Center (GRECC), and our Geriatrics clinical programs including Geropsychology and GEM/GRECC, described below. On the north campus, one or more psychologists work in the following programs: Community Living Center (CLC), comprised of our two 120-bed nursing home buildings; Domiciliary Residential Rehabilitation and Treatment Program (a 321-bed treatment program housed in two dormitory style buildings); Ambulatory Care mental health programs (e.g. Mental Health Clinic); substance abuse treatment programs including Addiction Treatment Clinic (ATC) and Recovery Treatment Center (RTC); the PTSD program; and the Neuropsychology and Assessment services. In addition, a number of treatment programs for patients with severe mental illness can be found on North campus, including the CBT for Psychosis Clinic, the Mental Health Intensive Case Management (MHICM) program, the Dual-Diagnosis Treatment Program (DDTP), the Psychosocial Rehabilitation for Severe Mental Illness, and the Mental Illness Research, Education and Clinical Center (MIRECC).

The Psychology Department at the West Los Angeles VA Healthcare Center has a strong commitment to, and long history of, providing training. Our Psychology Training Director, Dr. Anna Okonek, oversees our highly competitive (>170 applications annually) doctoral internship program. This program has been accredited by the American Psychological Association since 1979 and, at the most recent site visit (2010), received a full 7-year accreditation. Of Psychology Department staff, 31 serve as supervisors in our internship training program, and, of those, 19 also provide supervision in the fellowship program. In addition to training doctoral interns, the training program selects 4-6 practicum students each year, all of whom receive 9 months of supervised training on two different clinical rotations. Postdoctoral Fellows and Residents will have a chance to provide layered supervision to both our predoctoral interns and practicum students. All clinical supervisors in the postdoctoral residency/fellowship, doctoral internship, and practicum program are licensed clinical psychologists and complete biannual training and education in clinical supervision as mandated by the California Board of Psychology.

The Psychology Department at West Los Angeles VA enjoys close ties with both the UCLA Department of Psychology and the Department of Psychiatry & Biobehavioral Sciences at the David Geffen School of Medicine at UCLA. Many staff members, including the majority of those in training/supervising roles, hold clinical and/or academic appointments at local institutions, including UCLA, Pepperdine University, the University of Southern California, and the Fuller Graduate School of Psychology.

Training Model and Program Philosophy

The mission of our Psychology Fellowship Training Program is to ensure advanced competence in the practice of professional psychology integrated with in-depth training and education in a specific area of emphasis. We believe that clinical training is ideally complemented by attending didactics and gaining research experience in an emphasis area and we have strong connections with various local academic institutions (especially the University of California, Los Angeles) that allow for research and educational collaboration.

Our developmental training model acknowledges and appreciates that our postdoctoral fellows will come with varying degrees of experience. We strive to build upon baseline skills and competency benchmarks acquired during the predoctoral internship. In practice, this equates to the fellow being granted more autonomy and responsibility over the course of their training in an organized sequence.

Our fellowship program is based on the scientist-practitioner model of training. The core concept of the fellowship is the understanding and application of scientific research/inquiry to the practice of clinical psychology. Our program emphasizes the application of current scientific knowledge to the professional delivery of services and this emphasis is reflected in the content of training experiences. These include training in evidence-based practices, participation in clinical research, a clinical research requirement and didactics offered through the VA and outside resources. At the completion of training, our fellows are expected to be prepared to obtain licensure as well as board certification in their area of emphasis.

Program Goals & Objectives

Program goals and objectives focus on developing competence in the following core areas:

1. Ethics and professional standards. Fellows will attain advanced knowledge and application of APA Ethical Principles and California laws and professional conduct.
2. Assessment. Fellows develop advanced, independent skills in assessment, including diagnosis, case conceptualization, interviewing skills, test administration, scoring, interpretation, integration of findings, as well as issues related to theory, ethics, and impact of ethnicity/culture.
3. Intervention. Fellows will strengthen their skills in psychological treatments, including conceptualization within at least two specific theoretical orientations, knowledge and application of evidence-based treatments, development of skills in individual and group modalities, and appropriate therapeutic interpersonal qualities.
4. Interdisciplinary consultation. Fellows will be able to function effectively and cooperatively with interprofessional team members, provide consultation, and contribute to team planning.
5. Integration of science and practice. Fellows will develop an advanced level of knowledge of evidenced-based practices, the ability to apply research literature to clinical practice, continued

development of critical thinking skills, and development and implementation of a research project during the fellowship year.

6. Cultural diversity and individual differences. Fellows will develop an advanced level of knowledge, awareness, and sensitivity to individual and cultural differences as they apply to assessment, intervention, research, the workplace and the health care system.
7. Clinical supervision. Fellows are expected to develop entry-level skills providing supervision to other psychology trainees, in a “layered” supervision context.
8. Professional development. Professional identity will develop through the acquisition of advanced skills in an area of emphasis and development of career goals toward that end, contributions to the professional and scholarly community, and progress toward licensure and board certification.
9. Knowledge of administrative and organizational practices. Fellows will gain experience in some aspect of administration, organization or management of psychology service delivery.

Program Structure

Each of our incoming fellows is chosen for training within one of our three specialized emphasis areas. The emphasis areas are further described below. The fellow trains in the clinic(s) that are associated with their particular emphasis area and will have assigned a primary supervisor who is an expert within that area. While there may be some occasions where supervision or consultation may be provided by other mental health specialists (e.g. psychiatrists, social workers), the vast majority of all of fellows’ clinical supervision will be received from licensed staff psychologists that work within each of the clinics.

FELLOWSHIP TRACKS

Health Psychology Track

(Please note that this is a **1-year Fellowship** and IS OPEN for applications in 2017)

This fellowship position is designed to provide advanced training in Clinical Psychology with an emphasis in Health Psychology. It includes required and elective experiences that develop advanced skills in consultation, treatment, and assessment in various inpatient and outpatient integrated health care settings. These settings include: *Mental Health – Primary Care Integration; Inpatient Acute Physical Rehabilitation Unit; Cardiopulmonary Rehabilitation; the MOVE Clinic; the Pain Clinic; Polytrauma Program/Traumatic Brain Injury (TBI) Clinic; Stress Management Program; Quit Smoking Program; and Women's Health Program.*

The well-established Health Psychology Program is staffed by six licensed clinical psychologists, all of whom provide training at the practicum, internship and fellowship levels. The fellow receives training and direct supervision in providing consultation to interdisciplinary treatment teams, typically informing how patient's psychological and cognitive strengths and weaknesses may impact treatment. Fellows will have a wide variety of assessment opportunities across their training rotations, including opportunities for cognitive screening and neuropsychological testing, objective psychological assessment, and use of a variety of symptom based rating scales and interviewing techniques. Interventions including individual and group evidence-based psychological treatments play a major role in the training experiences of the Health Psychology Fellow.

Fellows will complete a **required** 6 or 12-month rotation in Primary Care-Mental Health Integration and **required** 6-month rotation(s) in one or more of the behavioral health programs (Pain Clinic, Stop

Smoking, Cardiopulmonary Rehabilitation, or MOVE Clinics). Elective opportunities can be filled in from those rotations described below to best mesh with the fellow's career and training goals.

Required Experiences:

Primary Care-Mental Health (Dr. Chen): The Primary Care-Mental Health Integration program is based in the Primary & Ambulatory Care Clinic (PACC) where veterans are seen by primary care providers (physicians, nurse practitioners, and physician's assistants) for both general and preventive health care. A mental health team of providers is located in the PACC to meet the needs of those patients with mild to moderate mental health issues including depression and anxiety, PTSD, chronic illness/multiple medical problems, pain disorders, and substance abuse. The MHIC team consists of psychologists, psychiatrists, social workers, and nurses. Fellows working in Primary Care will have the opportunity to participate in a variety of clinical and educational activities including, CBT-based group therapy for depression and anxiety, initial intake evaluations, short-term individual interventions, clinical collaboration with MHIC and PACC team, and weekly didactic seminars.

Pain Clinic (Drs. Bailey and Kay): Fellow will work closely with psychologists who are part of an interdisciplinary pain treatment team (Rehabilitation Medicine, Anesthesiology, Nursing, and Psychiatry). The primary role of the psychologist in this setting is that of consultant to the treatment team based on an assessment of the patient's current psychological/personality functioning and biopsychosocial history. There are opportunities to assess patients with chronic and complicated pain problems. Pain patients who are candidates for interventional procedures (e.g. spinal cord stimulator placement or baclofen pump) undergo a comprehensive psychological assessment, including clinical interview, self-report measures, and administration of the MMPI-2. Thus, psychology trainees gain experience in the use and interpretation of screening, interview, and personality measures in the assessment of chronic pain. In addition to assessment, the pain psychology program also contributes to an interdisciplinary comprehensive pain rehabilitation program. Fellows may conduct evaluations of candidates for the program, provide group-based psychological treatment, and participate in interdisciplinary treatment plans. There may also be opportunities to provide group behavioral pain management to Veterans who struggle with addiction. Finally, brief individual therapy opportunities (i.e. CBT, or biofeedback) may be available as well.

Cardiopulmonary Rehabilitation (Dr. McCreary): Fellows serve as co-leader of the weekly "Coping with Illness" group. Patients share concerns about how to make lifestyle changes in response to the demands of dealing with coronary artery and pulmonary diseases. Patients are given the opportunity to discuss successful behavior changes as well as difficulties in coping with their health problems and are encouraged to become comfortable asking for and giving support. Interns also attend a weekly interdisciplinary staff meeting.

Quit Smoking Program (Dr. McCreary): The Quit Smoking program is a behaviorally-focused treatment that consists of self-assessment and education. Classroom topics include barriers to quitting, aids for cessation (nicotine patch, Zyban), and formulating a plan for quitting. Topics reviewed each session include handling cravings and urges, preventing relapse, and avoiding weight gain health services into primary care practice.

Stress Management Group for Cardiopulmonary Patients (Dr. McCreary): Patients attending the Cardiopulmonary Rehabilitation Stress Management group are taught skills in stress and

anger management. The six session program covers the relationship between stress and health, personality and illness (hostility), calming skills, goal setting, anger management and forgiveness training.

Electives can be chosen from clinical rotations/placements that will provide the fellow with skills and experience in consultation, assessment, education, and intervention with persons who have acute and chronic medical illnesses. Elective settings include:

1. **Inpatient Acute Physical Rehabilitation Unit (Dr. Zeller):** Fellows complete consultations on patients admitted for intensive physical rehabilitation of stroke, amputation, traumatic brain injury, and/or neurological or orthopedic disorders. Consultation can include diagnostic evaluation, psychological and neuropsychological assessment, short-term psychotherapy, and staff support and education. Fellows attend weekly interdisciplinary treatment rounds and family conferences.
2. **Long-Term Group Psychotherapy for Persons with Chronic Medical Illness (Dr. McCreary):** Fellows may serve as co-leaders for process-oriented groups focusing on relationship issues, quality of life, self-image, treatment adherence, coping and the interaction between emotions and health.
3. **MOVE Clinic (Dr. McCreary):** This is a nationwide, interdisciplinary VA program designed to treat obesity. Fellows participate in structured classes, teach behavior change skills for weight loss and provide group and individual counseling for weight management. In addition, fellows complete evaluations for patients being considered for bariatric surgery.
4. **Support Groups (Dr. Zeller):** Fellow will have the opportunity to serve as co-facilitator for support groups for persons with amputation and stroke. Fellows will gain knowledge and experience in group process, psychoeducation, support and transition to the community.
5. **Polytrauma/TBI Clinics (Drs. Castellon and Okonek).** The Polytrauma Program serves veterans and active duty military returning from OEF/OIF/OND who have multi-system injuries, including traumatic brain injury. The fellow participates in neurocognitive and psychological assessment, cognitive rehabilitation, individual, group, and family psychotherapy and education, interdisciplinary treatment team planning, consultation to the treatment team and in-service and community education.
6. **Oncology Clinics (Dr. Zeller):** The fellow will have an opportunity to work in the Hematology-Oncology Clinics, where mental health has become integrated into the veterans' routine evaluation and follow up. These brief assessments evaluate suicide risk, level of depression, gross cognition, and coping strategies. Veterans will be provided with psychoeducation, as well as treatment recommendations.

Trauma Psychology Track

(Please note that this is a **1-year Fellowship** and IS OPEN for applications in 2017)

This one-year, full-time, fellowship track will provide fellows with advanced training in Clinical Psychology and the opportunity to develop a thorough understanding of trauma and its treatment. The fellow will work with male and female veterans from all service eras, including returnees from Operations Enduring Freedom, Iraqi Freedom, and New Dawn (OEF/OIF/OND).

The trauma emphasis track is comprised of three required rotations (described below) providing complimentary training opportunities. Elective experiences can then be chosen from other rotations that tailor to the fellow's training goals, including those described above in our Health Psychology section.

PTSD Outpatient Services Team (POST) Program (Drs. Booker and Boxer). The POST program is a large outpatient program that provides mental health services to veterans with a primary diagnosis of PTSD from military-related experiences, primarily involving combat. This program averages 17,000 patient visits a year, and provides services by an interdisciplinary staff, which includes psychologists, psychiatrists, social workers, addiction therapists, and nurse practitioners. Although the focus of the program is the management and treatment of post-traumatic stress symptoms, many veterans enrolled in the POST program present with co-morbid Axis I and Axis II disorders, which are addressed by the program. The fellow has the opportunity to gain experience observing, evaluating and treating diagnostically complex patients where PTSD is the primary diagnosis. Fellows will have opportunities to receive didactic and experiential training in group and individual interventions for PTSD, including evidence based treatments such as CPT and PE. Additionally, targeted psychological assessment is a critical component in this rotation, where fellows will have the opportunity to conduct diagnostic assessment, brief trauma evaluations and interviews, neurocognitive screening, and personality testing.

personality testing.

Fellows will also receive training in applying trauma-specific, psychological interventions to patients with chronic medical conditions being considered for potentially traumatic, medical procedures (i.e., resection).

The fellow is anticipated to spend roughly 16 hours per week, for 6 months, in the POST clinic.

OEF/OIF Post Deployment Clinic/Veteran's Transition Center (Drs. Song and Wettstein). The fellow will receive thorough training and supervision in psychological assessment, psychological interventions (including individual and group evidence-based psychological treatments), and clinical consultation to members of a multidisciplinary patient aligned care team (PACT). The fellow will work closely with allied disciplines within the PACT – including primary care, psychiatry, psychology, social work, and nursing, to develop comprehensive and integrated treatment plans for all veterans served in the PDC/VTC. Fellows will provide consultation to the team on OEF/OIF veteran's psychological functioning and will also work closely with other VA programs including Polytrauma, Domiciliary Residential Rehabilitation, the PTSD Outpatient Services Team, Addiction Treatment Center, Mental Health Clinic, and other specialty mental health and medical programs throughout GLA and local Vet Centers to ensure continuity of care among providers in developing comprehensive care fitting the PACT model.

The fellow will develop expertise in assessment and treatment of psychological conditions often seen in those returning from Iraq and Afghanistan as part of the current Global War or Terrorism, including PTSD, Major Depressive Disorder, Substance-Use Disorders (SUD), Adjustment Disorders, and relational problems. Special focus will be provided in applying evidence-based therapies for the treatment of these conditions. Evidence-based interventions include CPT and PE for treatment of PTSD, Seeking Safety for PTSD/SUD, MI for substance use disorders, Family Therapy and CBT for mood and anxiety disorders and adjustment issues. Integrative Behavioral Couples Therapy (IBCT) for relationship/couples-oriented treatment.

Intervention skills will be taught through a combination of didactics, study of empirically supported treatment manuals, feedback on taped therapy sessions, experiential learning, and supervision from one of the two attending staff psychologists in the PDC. Skill in interdisciplinary team participation is acquired through experiential learning and supervision, with the current psychologists in the VTC/PDC

serving as role models. Fellows will also participate in the OEF/OIF VTC/PDC Mental Health didactics, created and led by Dr. Jacob Moussai, the Medical Director of the VTC/PDC.

The fellow is anticipated to spend roughly 2 days per week, for 12 months, on the VTC/PDC rotation.

Women's Health Program (Dr. Himmelfarb): The Women's Health Program is an interdisciplinary program that treats female veterans for medical and psychiatric conditions. The trauma track fellow will provide individual and group psychotherapy and psychological assessment to women with depression, military sexual trauma and a variety of other conditions. Fellows will have the opportunity to gain experience in Cognitive Processing Therapy (CPT) in individual and group settings. Services are also offered to meet the unique needs of returning female Iraq War veterans, who are being seen in increasing numbers in this program. The fellow will have a chance to participate in several of the following women's clinic groups:

- Anger Management
- CPT group for sexual trauma
- CPT group for combat trauma
- CBT Depression Group
- Emotion Management Group

The fellow is anticipated to spend roughly 8-12 hours per week, for 12 months, in the Women's Clinic.

Interprofessional Integrative Health – (two positions open)

(Please note this is a **1-year Fellowship** and IS OPEN for applications in 2017)

Two **one-year** positions are available in the Interprofessional Integrative Health Fellowship Program. This training track aims to enhance the interprofessional collaboration, communication, and teamwork that is so critical to successful Patient-Aligned Care Team (PACT) functioning by increasing awareness and understanding of the roles, ethics, and values of multidisciplinary treatment teams. Fellows will work collaboratively within Primary Care Clinic PACT settings as well as within other interprofessional medical/mental health teams that typically include medical physicians, psychiatrists, social workers, advanced practice nurses, pharmacists, and medical and psychiatry residents. This program, which includes Nurse Practitioners and Social Work students as well as Psychology Fellows, is based in the VA's first Integrative Health and Healing Center (IHHC) on the WLA campus.

Specialized training in evidence-based integrative health and wellness practices, as part of a generalist training in Health Psychology, is the heart of this program. Supervision and training in integrative mind-body practices will be provided, most particularly including Mindfulness Based Stress Reduction (MBSR). No prior experience with MBSR is required although demonstrated interest and proficiency in mindfulness based interventions is strongly preferred. Fellows will become responsible for the integration of evidence-based integrative behavioral health interventions into Primary Care as part of PACT-PCMHI-IHHC collaborative teams. The Postdoctoral Fellow will also: 1) provide a range of evidence-based clinical services for mental health conditions common to primary care settings and health behaviors affecting medical conditions, 2) participate in shared decision making on PACT teamlets providing patient centered care, 3) contribute to interprofessional collaboration through participation on the PACT-PCMHI-IHHC teams and, 4) engage in quality improvement research.

Clinical activities will likely include development of PACT-PCMHI-IHHC teams providing integrative health practices to multiple facilities across GLA including outreach to CBOCs using tele-health technologies.

Training Locations (for Interprofessional Integrative Health Track)

The training setting will extend to the two major ambulatory care centers within the VA Greater Los Angeles (GLA) service area: the Sepulveda Ambulatory Care Center (SACC) and the Los Angeles Ambulatory Care Center (LAACC). Fellows will provide services at both the WLA campus and one of the ambulatory care centers during training work week. Opportunities to provide wellness-based integrative practices via telehealth technologies will also be available as part of fellowship training experience.

Core Components

Primary Care Mental Health Integration (Drs. Chen, Kay, Jetton, Shutz): The Primary Care-Mental Health Integration program is based in the Primary & Ambulatory Care Clinic (PACC) and the Homeless Patient Aligned Care Team (H-PACT) where veterans are seen by primary care providers for both general and preventive health care. A mental health team of providers is co-located to meet the needs of those patients with mild to moderate mental health issues including depression and anxiety, PTSD, chronic illness/multiple medical problems, pain disorders, and substance abuse. The PCMH team consists of psychologists, psychiatrists, social workers, and nurses. Fellows working in Primary Care will be responsible for evaluation and assessment, individual and group therapies, team participation and consultation, didactics, and year-long research project. Some of the clinic opportunities include:

- Evidence-based treatments (e.g., CBT, IPT, MI and behavioral activation).
- Health Promotion/Wellness (e.g., smoking cessation, MOVE clinic, chronic pain, mindfulness-based stress reduction, and acceptance-based approaches).
- Curbside consultations and same day access services.
- Group/shared medical visits with patients and providers for diabetes management.
- Teaching and supervision providing in-service training and supervising pre-interns in Health Psychology.

Integrated Health and Healing (Dr. Serpa): GLA is a Center for Innovation site to explore the training of staff, dissemination, empirical basis and implementation of the mind-body, integrative medicine modalities of care so frequently requested by our Veteran consumers. The integrative, interprofessional Fellows will be central to these efforts. In the past few years, GLA has invested in the local staff training and certification for a variety of integrative modalities of care. Fellows will be trained in mindfulness interventions and will co-facilitate groups with a psychologist certified in MBSR. No prior experience with MBSR is required although a demonstrated interest in and experience with mindfulness based interventions is strongly preferred. The Interprofessional Integrative Health Trainees, which will include psychology fellows, advance practice mental health nurses, social work interns and psychiatry residents, will also have the option for training and direct clinical experience with programs in the Integrative Health and Healing Center (IHHC) including Yoga Nidra, Breathing-Stretching-Relaxation, Tai Chi, and other interventions with a promising evidence basis. The training goal is not simply to learn the intervention, but to utilize the specific skills of psychology to evaluate the evidence basis of an integrative intervention, work collaboratively across disciplines to establish appropriate training, dissemination in an integrated primary care setting, and quality improvement evaluation with related reporting. It is likely Fellows will also be involved in the design, dissemination, implementation, and evaluation of employee wellness interventions.

Integrated Care for Homeless Veterans with Severe Mental Illness: Center of Excellence in Primary Care Education, Integrated Academic Homeless Patient Aligned Care Team (CoE IA-HPACT)

(Please note that this is a **1-year Fellowship** and IS OPEN for applications in 2017)

The CoE IA-HPACT is a training program funded by the VA Center of Excellence that will provide fellows with advanced training in Clinical Psychology and the opportunity to develop a thorough understanding of the integrated treatment of homeless Veterans. The CoE IA-HPACT is an admixture of two extraordinary models: CoE IA-PACT and Homeless PACT. CoE IA-PACTs are training programs in which health professional trainees from separate disciplines to work together over the course of the year to form trainee-led interprofessional treatment teams, leading to immersive and transformative training in interprofessional healthcare. The HPACT treatment model provides wraparound medical, mental health, and social work services to homeless veterans from the time they come in off the street until they are stably housed. The Greater Los Angeles VA has the only CoE training program that is housed in an HPACT clinic (as opposed to a regular PACT clinic); said clinic is the largest and most complex Homeless PACT clinic in the entire VA system.

The fellows will work with male and female veterans from all service eras, who are homeless or in transitional housing programs through the VA and community. Fellows will receive advanced clinical training and supervision in the assessment, intervention, crisis management, and team management of Veterans with severe mental illness including Bipolar Disorder, Schizophrenia, severe Depression, PTSD, and co-occurring substance use disorders. Fellows will advance training in evidence-based group and individual interventions in preparation for independent practice. Psychology Fellows will gain experience in an integrated model of mental health and primary care delivery. They will develop working knowledge of the strengths and responsibilities of all team members, and coordinate regularly with staff to maximize Veterans' access to various resources.

The HPACT program consists of the integrated primary care and mental health teams that serve Veterans who are homeless, in transitional housing, or housed through VA-Supported Housing (VASH). Each of the three teams consist of two teamlets, each with a primary care provider, registered nurse care manager, and licensed vocational nurse. Each full team has one psychiatrist, a psychologist, a senior social worker, and a medical support assistant.

Fellows will complete a **required** 12-month rotation in the CoE IA-HPACT. The fellow's primary supervisor will be the psychologist assigned to the team. Opportunities will be available to work with additional psychology faculty within HPACT for specialized training in various areas of faculty expertise. Additional electives may be available through the Substance Use Disorder clinics.

Required Experiences:

Individual Psychotherapy: Psychology Fellows will maintain a caseload of individual psychotherapy patients. Therapeutic modalities will almost always be short-term evidence-based practices or EBP-informed treatments. Emphasis is on enhancing psychosocial functioning and

Clinical Assessment: Fellows will refine skills in initial diagnostic, suicide risk, and violence risk assessments. Though some opportunity for objective personality assessment may be available, a strong emphasis will be on refining diagnostic skills through the use of a skillful interview.

Weekly Case Conference: Trainees and faculty from all disciplines meet weekly to develop an integrated treatment plan of an identified Veteran who would benefit from increased team support. Trainees will provide expertise and insight regarding how behavioral and psychological factors can affect treatment. Trainees will be expected to co-present a case with another trainee or staff member periodically and ask the audience for feedback regarding the case.

Didactic Conference: Fellows will have the opportunity to participate as audience and as facilitator for weekly didactic conferences. As facilitator, fellows will share an area of expertise with the audience, with particular attention paid to how other disciplines may integrate the information into their practice.

Quality Improvement: CoE trainees will be expected to complete a quality improvement seminar. They will complete performance improvement projects as an integrated team throughout the year. Potential projects may include plans to streamline Veteran flow through clinic, teambuilding exercises, or innovative treatment interventions.

Team Consultation: Psychology Fellows will serve as consultants to interdisciplinary team members. Reasons for consultation may include how to manage treatment-interfering behaviors, assessment of mental status, suicide risk assessment, motivational interviewing, engaging with patients who experience psychosis, etc.

Crisis Intervention/Triage: Fellows will develop advanced skill in the rapid assessment and triage of urgent walk-in appointments. They will strengthen skills in crisis intervention and management.

Group Treatment and Shared Medical Appointment: Fellows will facilitate group treatment offerings at the clinic. They will also participate in a shared medical appointment, which is an opportunity for a group of Veterans to meet with interdisciplinary team members to discuss the biopsychosocial aspects of a particular problem

PROGRAM STRUCTURE

At the outset of each training year, fellows will work closely with their mentors or primary supervisors and the Director of Postdoctoral Training (Dr. Castellon) to design a program consistent with the fellows' needs and interests and the program's goals and objectives. Mentors are matched with fellows based on the fellow's primary clinical and research interests. Individualized programs are developed in collaboration with the fellow to increase experience in and mastery of the 9 core competencies in generalist skills and the fellow's area of emphasis. At entry to the fellowship, supervisors and fellows together determine the level of the fellow's competency in areas including assessment, intervention, and consultation; self-rating forms are employed and discussed. Our program employs a developmental approach to training and supervision, where fellows gain increasing independence and responsibility as their knowledge and skills develop. This is based on the initial baseline assessment and ongoing formal and informal assessment of skills and abilities. Fellows are evaluated formally, on their work towards development of competencies and also asked to formally evaluate their supervisors and their training experiences. With this approach, there is flexibility to address areas that require more intensive training and also to identify and modify the fellow's learning objectives if needed. At the beginning of the year, supervisors work jointly with fellows to model and closely observe assessment and intervention skills. Fellows function at an increasingly higher level of independence as their skills and their experience

progress during the year. Supervision of predoctoral interns as well as of practicum students is an important part of the developmental process and a core competency skill during the training year(s).

RESEARCH

Our fellowship is based on the scientist-practitioner model and stresses the contribution of research to clinical practice. Our Healthcare Center is a major research facility and has excellent resources for basic and clinical research. All fellows are encouraged to participate in a clinical research project during the year consistent with their research interests. The research commitment is approximately 10-20% of the fellow's time and seeks to provide fellows with advanced training and experience in at least one major aspect of clinical research, such as design, conducting a study, statistical analysis, interpretation and communication of results. Program evaluation studies are encouraged as well. Fellows are asked to submit a written summary of their work at the end of the year.

TIME COMMITMENT

Fellows will be expected to spend 40-45 hours per week in training activities, including a minimum of 75% time on site.

SUPERVISION

Training in specific content areas is accomplished using a combination of methods including experiential learning, direct observation by supervisor, audio taping of sessions, clinical supervision, didactics and other educational activities, and focused readings. All fellows will be assigned a primary supervisor and will receive a minimum of 4 hours of supervision weekly, at least 2 of which will be direct, face-to-face clinical supervision.

EVALUATION

The Training Program strongly promotes consistent and ongoing feedback between trainees, supervisors, and the Training Committee.

The Postdoctoral Training Program will evaluate its effectiveness for meeting training goals and objectives through the following means:

- Supervisors' formal quarterly evaluations of the fellow's performance in core competency areas. Both the fellow and the supervisor sign all evaluations.
- Fellows' formal quarterly evaluations of clinical supervisors. Fellows provide written and verbal feedback to all of their clinical supervisors.
- Regular communication between the Director of Training and supervisors to discuss the fellows' performance and progress
- Mid-year progress review with the Director of Training
- Exit interview with the Director of Training
- Fellows' representation at Training Committee Meetings
- Seminar time set aside monthly for the Director of Training and Fellows to discuss programmatic issues
- End of year survey of experiences and quality of training, along with recommendations for program improvement. Feedback from the fellow's survey is discussed with supervisors and the Training Committee and used to for program improvement.
- One year post-fellowship program survey to assess program satisfaction, achievements, scholarly activities, licensure status and employment

- Regular programmatic review by the Training Committee
- Representation by the Department Chair and the Director of Training at the Graduate Medical Education Committee (GMEC). The GMEC provides oversight, monitoring and advisement on all aspects of graduate medical education and associated health programs sponsored by GLA and governs grievance procedures.

Training Experiences

HEALTH PSYCHOLOGY TRACK

This **one-year** fellowship position is designed to provide advanced training in Clinical Psychology with an emphasis in Health Psychology. It includes both required and elective experiences that develop advanced skills in consultation, treatment, assessment, and program evaluation opportunities in various inpatient and outpatient integrated health care settings. Our established Health Psychology Program is staffed by seven licensed clinical psychologists, all of whom provide training at the practicum, internship and fellowship levels. The fellow receives training and direct supervision in providing consultation to interdisciplinary treatment teams, typically informing how the patient's psychological and cognitive strengths and weaknesses may impact treatment. Fellows will have various assessment opportunities across their training rotations, including opportunities for cognitive screening and neuropsychological testing, objective psychological assessment, and use of a variety of symptom based rating scales and interviewing techniques. Interventions including individual and group evidence-based psychological treatments play a major role in the training experiences of the Health Psychology Fellow.

Fellows will complete required 6-month rotations in Primary Care-Mental Health Integration and Pain Clinic as well as required rotations in one or more of the behavior-change focused Cardiopulmonary Rehabilitation, Stop Smoking, or MOVE Clinics. Elective opportunities can be filled in from those rotations described below to best mesh with the fellow's career and training goals.

Primary Care-Mental Health (Dr. Chen): The Primary Care-Mental Health Integration program is based in the Primary & Ambulatory Care Clinic (PACC) where veterans are seen by primary care providers (physicians, nurse practitioners, and physician's assistants) for both general and preventive health care. A mental health team of providers is located in the PACC to meet the needs of those patients with mild to moderate mental health issues including depression and anxiety, PTSD, chronic illness/multiple medical problems, pain disorders, and substance abuse. The MHIC team consists of psychologists, psychiatrists, social workers, and nurses. Fellows working in Primary Care will have the opportunity to participate in a variety of clinical and educational activities including, CBT-based group therapy for depression and anxiety, initial intake evaluations, short-term individual interventions, clinical collaboration with MHIC and PACC team, and weekly didactic seminars.

Pain Clinic (Drs. Bailey and Robinson): Fellow will work closely with psychologists who are part of an interdisciplinary pain treatment team (Rehabilitation Medicine, Anesthesiology, Nursing, and Psychiatry). The primary role of the psychologist in this setting is that of consultant to the treatment team based on an assessment of the patient's current psychological/personality functioning and biopsychosocial history. There are opportunities to assess patients with chronic and complicated pain problems. Pain patients who are candidates for interventional procedures (e.g. spinal cord stimulator placement or baclofen pump) undergo a comprehensive psychological assessment, including clinical interview, self-report measures, and administration of the MMPI-2. Thus, psychology trainees gain experience in the use and interpretation of screening, interview, and personality measures in the

assessment of chronic pain. In addition to assessment, the pain psychology program also contributes to an interdisciplinary comprehensive pain rehabilitation program. Fellows may conduct evaluations of candidates for the program, provide group-based psychological treatment, and participate in interdisciplinary treatment plans. There may also be opportunities to provide group behavioral pain management to Veterans who struggle with addiction. Finally, brief individual therapy opportunities (i.e. CBT, or biofeedback) may be available as well.

Cardiopulmonary Rehabilitation (Dr. McCreary): Fellows serve as co-leader of the weekly “Coping with Illness” group. Patients share concerns about how to make lifestyle changes in response to the demands of dealing with coronary artery and pulmonary diseases. Patients are given the opportunity to discuss successful behavior changes as well as difficulties in coping with their health problems and are encouraged to become comfortable asking for and giving support. Interns also attend a weekly interdisciplinary staff meeting.

Quit Smoking Program (Dr. McCreary): The Quit Smoking program is a behaviorally-focused treatment that consists of self-assessment and education. Classroom topics include barriers to quitting, aids for cessation (nicotine patch, Zyban), and formulating a plan for quitting. Topics reviewed each session include handling cravings and urges, preventing relapse, and avoiding weight gain health services into primary care practice.

Stress Management Group for Cardiopulmonary Patients (Dr. McCreary): Patients attending Cardiopulmonary Rehabilitation Stress Management group are taught skills in stress and anger management. This brief, 6- session program covers the relationship between stress and health, personality and illness (hostility), calming skills, goal setting, anger management and forgiveness training.

Electives can be chosen from placements that will provide the fellow with skills and experience in consultation, evaluation, assessment, education, and intervention with persons who have acute and chronic medical illnesses. Elective settings include:

1. **Inpatient Acute Physical Rehabilitation Unit (Dr. Zeller):** Fellows complete consultations on patients admitted for intensive physical rehabilitation of stroke, amputation, traumatic brain injury, and/or neurological or orthopedic disorders. Consultation can include diagnostic evaluation, psychological and neuropsychological assessment, short-term psychotherapy, and staff support and education. Fellows attend weekly interdisciplinary treatment rounds and family conferences.
2. **Long-Term Group Psychotherapy for Persons with Chronic Medical Illness (Dr. McCreary):** Fellows may serve as co-leaders for process-oriented groups focusing on relationship issues, quality of life, self-image, treatment adherence, coping and the interaction between emotions and health.
3. **MOVE Clinic (Dr. McCreary):** This is a nationwide, interdisciplinary VA program designed to treat obesity. Fellows participate in structured classes, teach behavior change skills for weight loss and provide group and individual counseling for weight management. In addition, fellows complete evaluations for patients being considered for bariatric surgery.
4. **Support Groups (Dr. Zeller):** Fellow will have the opportunity to serve as co-facilitator for support groups for persons with amputation and stroke. Fellows will gain knowledge and experience in group process, psychoeducation, support and transition to the community.

5. **Polytrauma/TBI Clinics (Drs. Castellon and Okonek).** The Polytrauma Program serves veterans and active duty military returning from OEF/OIF/OND who have multi-system injuries, including traumatic brain injury. The fellow participates in neurocognitive and psychological assessment, cognitive rehabilitation, individual, group, and family psychotherapy and education, interdisciplinary treatment team planning, consultation to the treatment team and in-service and community education.
6. **Oncology Clinics (Dr. Zeller):** The fellow will work in the Hematology-Oncology Clinics where mental health assessment has become integrated into the veterans' routine evaluation and follow up. These brief assessments evaluate suicide risk, level of depression, cognition, and coping strategies. Veterans are provided with psychoeducation as well as relevant treatment recommendations.

Health Psychology/Integrated Care Rotation Goals (minimum requirements):

1. Successfully function as part of an interdisciplinary medical team. *(Serve as the primary mental health consultant on 20-25 cases for a medical team; Participate in interdisciplinary treatment team meetings and provide feedback to team members.)*
2. Develop advanced skills in the evaluation of and psychological and neurocognitive issues in medical patients. *(Complete a minimum of 10 psychological evaluations, 5 neuropsychological evaluations, including treatment planning; provide feedback about testing/assessment to the patient and treatment team.)*
3. Develop advanced skills in providing individual and group treatments for medical patients. *(Co-lead a psychotherapy or support group for medical patients, or co-lead an educational group for medical patients, and select an appropriate treatment modality and provide short-term intervention for at least 6 patients.)*
4. Apply the clinical research literature to assessment and intervention in health psychology. *(Focused readings in health psychology and health promotion; attend health psychology presentations at the Postdoc/Intern Seminar.)*
5. Address issues of individual and cultural diversity and physical disability in assessment, treatment, and consultation. *(Increase knowledge through readings, supervision, and case discussion; attend didactic presentations.)*

TRAUMA PSYCHOLOGY TRACK

In this **one-year fellowship** track, fellows acquire skills in the areas of assessment, intervention, and interdisciplinary treatment planning, as well as gain clinical research experience with persons suffering from posttraumatic stress symptoms or disorders.

Assessment skills will be taught through didactics, structured trainings, experiential learning and direct observation, and clinical supervision. Fellows will gain experience in measuring current psychological distress (eg. degree of PTSD, depressive and anxiety symptoms), tracking change in distress during treatment, and in comprehensively assessing Axis I and Axis II conditions integrating clinical interview information with data derived from psychological testing (e.g. MMPI-2, MCMI-3, CAPS, Trauma Symptom Inventory etc). Fellows interested in further developing their skills in neurocognitive assessment, will have the opportunity to do so either within their required rotations or by taking on cases in Assessment Lab or Neuropsychology.

Intervention skills will be taught and developed through didactics, study of empirically supported therapy manuals, feedback on taped therapy sessions, experiential learning, and clinical supervision. In all three of the required rotations/settings, the fellow will receive training in both individual and group interventions. Opportunities to provide couples therapy are possible as well, while rotating through the PDC (with Dr. Wettstein). Fellows will be trained in a variety of evidence supported treatments including Cognitive Processing Therapy (CPT), Prolonged Exposure (PE), and Seeking Safety.

Postdoctoral fellows will learn research skills through didactics, participation in research project meetings, administering research assessments and protocols, supervision, and experiential learning. Postdoctoral fellows will be encouraged to complete a small project leading to a publishable article during their training year and will be encouraged to collaborate with other researchers.

Training will be provided in the following clinical programs:

PTSD Outpatient Services Team (POST) Program (Drs. Booker and Boxer). The POST program is a large outpatient program that provides mental health services to veterans with a primary diagnosis of PTSD from military-related experiences, primarily involving combat. This program averages 17,000 patient visits a year, and provides services by an interdisciplinary staff, which includes psychologists, psychiatrists, social workers, addiction therapists, and nurse practitioners. Although the focus of the program is the management and treatment of post-traumatic stress symptoms, many veterans enrolled in the POST program present with co-morbid Axis I and Axis II disorders, which are addressed by the program. The fellow has the opportunity to gain experience observing, evaluating and treating diagnostically complex patients where PTSD is the primary diagnosis. Fellows will have opportunities to receive didactic and experiential training in group and individual interventions for PTSD, including evidence based treatments such as CPT and PE. Additionally, targeted psychological assessment is a critical component in this rotation, where fellows will have the opportunity to conduct diagnostic assessment, brief trauma evaluations and interviews, neurocognitive screening, and personality testing.

OEF/OIF Post Deployment Clinic/Veteran's Transition Center (Drs. Song and Wettstein). The fellow will receive thorough training and supervision in psychological assessment, psychological interventions (including individual and group evidence-based psychological treatments), and clinical consultation to members of a multidisciplinary patient aligned care team (PACT). The fellow will work closely with allied disciplines within the PACT – including primary care, psychiatry, psychology, social work, and nursing, to develop comprehensive and integrated treatment plans for all veterans served in the PDC/VTC. Fellows will provide consultation to the team on OEF/OIF veteran's psychological functioning and will also work closely with other VA programs including Polytrauma, Domiciliary Residential Rehabilitation, the PTSD Outpatient Services Team, Addiction Treatment Center, Mental Health Clinic, and other specialty mental health and medical programs throughout GLA and local Vet Centers to ensure continuity of care among providers in developing comprehensive care fitting the PACT model.

The fellow will develop expertise in assessment and treatment of psychological conditions often seen in those returning from Iraq and Afghanistan as part of the current Global War or Terrorism, including PTSD, Major Depressive Disorder, Substance-Use Disorders (SUD), Adjustment Disorders, and relational problems. Special focus will be provided in applying evidence-based therapies for the treatment of these conditions. Evidence-based interventions include CPT and PE for treatment of PTSD, Seeking Safety for PTSD/SUD, MI for substance use disorders, Family Therapy and CBT for mood and anxiety disorders and adjustment issues.

Intervention skills will be taught through a combination of didactics, study of empirically supported treatment manuals, feedback on taped therapy sessions, experiential learning, and supervision from one of the two attending staff psychologists in the PDC. Skill in interdisciplinary team participation is acquired through experiential learning and supervision, with the current psychologists in the VTC/PDC serving as role models. Fellows will also participate in the OEF/OIF VTC/PDC Mental Health didactics, created and led by Dr. Jacob Moussai, the Medical Director of the VTC/PDC.

Women's Health Program (Dr. Himmelfarb): The Women's Health Program is an interdisciplinary program that treats female veterans for medical and psychiatric conditions. The trauma track fellow will provide individual and group psychotherapy and psychological assessment to women with depression, military sexual trauma and a variety of other conditions. Fellows will have the opportunity to gain experience in Cognitive Processing Therapy (CPT) in individual and group settings. Services are also offered to meet the unique needs of returning female Iraq War veterans, who are being seen in increasing numbers in this program. The fellow will have a chance to participate in several of the following women's clinic groups:

- Anger Management
- CPT group for sexual trauma
- CPT group for combat trauma
- CBT Depression Group
- Emotion Management Group

Trauma Track Training Goals (minimum requirements):

1. To develop a fundamental knowledge of trauma etiology, treatment, and recovery. *(Didactic presentations, individual supervision, focused reading, experiential learning, case conferences)*
2. To develop skill in providing individual and group therapy for individuals with post-traumatic emotional and behavioral symptoms. *(Provide short, medium and long-term evidence based psychotherapeutic interventions for persons where posttraumatic stress is the primary focus of treatment. This includes providing individual therapy to at least 15 individuals and leading at least 4 different types of group interventions within the various trauma-focused treatment programs.)*
3. To develop skills in evaluating men and women of all ages with trauma as a primary or secondary diagnosis. *(Complete a minimum of 25 mental health initial assessments or other programmatic intake procedures for persons presenting with posttraumatic stress as a main focus of treatment. Conduct at least 5 comprehensive, integrated, psychological assessments that include multiple modalities of information acquisition, including psychological testing, symptom rating scales, and clinical interview data).*
4. Development of consultation expertise and multi-disciplinary treatment team experience. *(Serve as psychological consultant when requested by other team members. Actively participate in multi-disciplinary team meetings and develop a complete understanding of other team members' roles).*
5. Actively participate in providing layered clinical supervision to achieve a deeper understanding of cases. *(Understands basic supervision concepts and principles, and the developmental process of clinical supervision. Develop experience with identifying the current needs of students and/or interns they supervise, and provides developmentally appropriate feedback to supervisees)*
6. To develop research skills in the area of trauma.

(Didactics in individual supervision, participation in research project meetings, administering research protocols. Postdoctoral fellows will be encouraged to complete a small project leading to a publishable article during their training year and will be encouraged to collaborate with other researchers.)

INTERPROFESSIONAL HEALTH TRACK

Training experiences, including goals and minimum requirements, within this recently funded training track are still being developed. It will be a **one-year training experience**, and, as noted above (pgs 14-15), fellows acquire skills in the areas of assessment, intervention, interdisciplinary treatment planning, teaching and/or supervision, and clinical research (which may include program evaluation as well). We will update this section when training experiences and goals/requirements become further fleshed out.

DIDACTICS/SEMINARS

Didactics include a seminar held weekly on Wednesday afternoon (Assessment Seminar) and three monthly seminars or lecture series (Diversity Seminar, Evidence-based Psychotherapy Lecture Series, and the Fellowship Seminar and Journal Club). In addition to these core didactic experiences, fellows often will avail themselves of many other optional educational opportunities. A sampling of these include, weekly Mental Health Grand Rounds, weekly Neurobehavior Seminars, occasional UCLA Department of Psychology workshops, VA-sponsored trainings, other departmental rounds and conferences, UCLA Grand Rounds, UCLA Neuroscience seminars, and licensure seminars. Attendance at optional educational activities is at the discretion of the training staff and the fellow's mentor.

Assessment Seminar meets every Wednesday afternoon. Led by Drs. Hinkin, Castellon, and Zeller, the seminar is designed to enhance foundational skills in both neuropsychological and psychodiagnostic assessment. Segments will cover test background, selection, administration, reliability and validity, and interpretation, as well as the assessment interview, multicultural factors, ethics, and test limitations. Topics in neuropsychological assessment will include neuroanatomy for the clinical/counseling psychologist, neurological diseases and disorders, neuropsychological manifestations of psychiatric disorders, and classic neurobehavioral conditions. Special topic of interests such as aging, treatment/rehabilitation, research, professional issues, and career development will also be covered. Clinical case material is used throughout the seminar to highlight and supplement coursework, and will include intern case presentations.

Diversity Seminar, led by Drs. Grace Rosales and Yong Song, meets monthly with the purpose of increasing the fellows' cultural competence by examining the dimensions of the cultural self and others. This understanding is used to inform clinical interpretations, treatment goals, and relationships with patients. Case discussions, didactic presentations and experiential practice are used to achieve these objectives. Guest lecturers are invited to speak on such topics as the gay and lesbian community, the transgender community, physical disability, aging, the immigrant experience, ethno-pharmacology, cultural issues in psychological assessment, and other areas of interest as identified by the internship and fellowship class.

Fellowship General Seminar and Journal Club, led by Dr. Steven Castellon, meets bi-weekly, features guest speakers on topics related to professional development and a Journal Club – with presentations led by fellows and Dr. Castellon centered on clinical and professional issues of importance to all fellows.

The Evidence-Based Psychotherapy Seminar, facilitated by Dr. Okonek, meets monthly and features a variety of guest speakers discussing state-of-the-art evidence-based interventions relevant to the VA setting. The seminar includes presentations on interventions such as Acceptance and Commitment Therapy, CBT for Psychosis, CBT for Pain, Cognitive Processing Therapy, Prolonged Exposure, biofeedback, and Motivational Interviewing. The seminar format includes formal didactics and group discussion.

In addition to the required and optional seminars listed above, the following training activities are available to all fellows:

- Access to training activities offered to interns and practicum students
- Weekly neurosciences lectures at the Semel Institute for Neuroscience & Human Behavior at UCLA that emphasize theoretical and conceptual issues
- Weekly VA Neurobehavior seminars presenting research and clinical data on neurobehavioral syndromes and cases highlighting unusual disorders
- VA Memory Disorder and Neurobehavioral Clinics in which case presentations are discussed by neurologists, neuropsychologists, and psychiatrists
- Clinical pathology (i.e., brain cutting) conferences
- Weekly GLA Mental Health Grand Rounds featuring a wide range of topics presented by local and national presenters
- Weekly UCLA Grand Rounds
- Weekly Pain Clinic lecture series
- GRECC lectures, seminars and workshops
- MIRECC lectures, seminars and workshops
- Courses required for California licensure, provided at no cost by arrangement with the Semel Institute at UCLA
- Psychology Department-sponsored continuing education workshops (3 offered each year) on special topics of interest including law and ethics, supervision, diversity, PTSD, psychopharmacology, assessment, psychopathology and contemporary treatments
- VA-sponsored workshops and courses in such topics as rehabilitation, bioethics and Palliative Care

Requirements for Completion

In order to maintain good standing and, ultimately, complete the postdoctoral fellowship program, fellows are expected to:

1. Fully abide by the APA Ethical Principles and Code of Conduct as well as all VA policies, rules and regulations.
2. Obtain an average rating of "Progressing Well" in each of the six core competency areas, with no serious ethical violations or transgressions identified.
3. Meet all administrative requirements.
4. Complete 2080 hours of supervised professional experience (SPE), to be completed in one year of full-time training. [Two year fellowships will require completion of 4160 hours of SPE].
5. Achieve satisfactory performance in all clinical competency areas and at the completion of the fellowship term (final rotation rating), the Fellow has received ratings of "Competent" (which is

anchored as “performing at level of entry-level psychologist, no supervision needed, knows when to consult”), in all competency areas.

Additionally, we expect all fellows to be “progressing well” (midterm) and then to be rated fully “competent” (final rating) on the following general competencies listed below. Of course, there are additional requirements listed in each fellowship track (described above).

1. Demonstrate an advanced knowledge and application of ethical principles and professional conduct to clinical practice and research.
 - Participate in formal training in professional and ethical standards.
 - Gain experience and proficiency through supervised clinical experiences.
2. Demonstrate advanced knowledge and skills in psychological assessment.
 - Attend the Neuropsychology and Psychology Assessment Seminar and present at least two assessment cases.
 - Participate in at least two comprehensive assessments (for Health and Trauma Fellows) during the training year, in addition to the assessment requirements in clinics.
3. Demonstrate an advanced ability to conduct individual and group psychotherapy.
 - Follow at least 5 psychotherapy cases (for Gero/Neuro and Polytrauma Fellows)
 - Gain experience in at least two significantly different theoretical orientations.
 - Lead, supervise, or co-lead at least two psychotherapy or psychoeducation groups.
4. Demonstrate the ability to function as a member of an interdisciplinary team.
 - Complete at least one rotation as an active participant in an interdisciplinary team setting.
 - Develop and coordinate treatment planning within an interdisciplinary treatment team.
5. Demonstrate an advanced proficiency in clinical research and the ability to integrate scientific literature into clinical practice.
 - Apply research findings in treatment decisions, case discussions, and research presentations.
 - Participate in a clinical research project during the fellowship year(s).
 - Present ongoing research at the seminars or local/national conferences.
 - Attend seminars and workshops on clinical research topics.
6. Understand and apply knowledge of individual and cultural diversity to assessment and treatment.
 - Attend presentations on individual and cultural diversity.
 - Demonstrate knowledge of individual and cultural diversity as they apply to assessment and treatment of a diverse population.
7. Develop entry-level skills in clinical supervision.
 - Participate in presentations on clinical supervision.
 - Provide supervision to at least 2 practicum-level or internship trainees during the fellowship.
8. Continued development of one's professional development through:
 - Acquire advanced skills in area of emphasis.

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- Contribute to the professional and scholarly community through research, advocacy or education.
 - Make progress toward licensure and/or board certification.
9. Gain knowledge of administrative and organizational practices
- Participate in the administration, organization or management of psychology service delivery
 - Present the project to Psychology staff and trainees.



Clinical Neuropsychology Postdoctoral Residency Program

West Los Angeles VA Healthcare Center

Steven Castellon, Ph.D.
Psychology Department (116B)
Building 256, Room 245A
11301 Wilshire Blvd.
Los Angeles California, 90073
(310) 268-3597

<http://www.psychologytraining.va.gov/westlosangeles/>

Accreditation Status

The Postdoctoral Residency Program in Clinical Neuropsychology at the West Los Angeles VA Healthcare System (WLAVAHS) is not currently accredited by the Commission on Accreditation of the American Psychological Association. A self-study is being prepared for submission seeking specialty accreditation in Clinical Neuropsychology.

Our Psychology Postdoctoral Training Program is a full member of the [Association of Psychology Postdoctoral and Internship Centers \(APPIC\)](#).

Application Due Date: Our program is NOT ACCEPTING APPLICATIONS for 2017. We anticipate that three positions will be open in 2018.

Application and Selection Procedures

The Residency program in Clinical Neuropsychology begins in September of 2016. This is a two-year full-time program with VA benefits. Current stipend/salary is \$47,049 for Year One, increasing to \$49,592 for Year Two. Our program is organized to provide two full years of postdoctoral training, however, advancement to the second year is contingent on successful completion of first year requirements.

We are recruiting for three Neuropsychology Residency positions in 2016: **(1) Traumatic Brain Injury/ Rehabilitation Neuropsychology, (2) Geriatric Neuropsychology, (3) General Neuropsychology**. Each of these positions is based at the West Los Angeles VA Medical Center.

Eligibility

Minimum qualifications include U.S. citizenship, completion of all requirements for the doctoral degree, including internship and dissertation. The Department of Veterans Affairs requires that an applicant's doctoral degree and internship be completed at programs that have been accredited by the American Psychological Association. Also, please note VA employment requires that males born after December 31, 1959 must have registered for the draft by age 26.

Postdoctoral Residents are subject to fingerprinting and background checks. Selection decisions are contingent on passing these screens. Also, VA conducts drug screening exams on randomly selected

personnel as well as new employees. Residents are not required to be tested prior to beginning work, but once on staff they are subject to random selection for testing as are other employees.

The VA West Los Angeles Clinical Neuropsychology Postdoctoral Residency program seeks and values diverse experiences and backgrounds as the building blocks of a rich training environment. Our program emphasizes respect for trainees, patients, and staff members representing all forms of diversity, including (but not limited to) race, ethnicity, religion, gender, sexual orientation, disability, marital status, veteran status, and political affiliation. Residents are entitled to equal treatment in selection decisions and freedom from harassment or unfair treatment. The program seeks to admit trainees from diverse backgrounds while selecting the most qualified candidates. As such, individuals from diverse backgrounds are strongly encouraged to apply. The VA is an Equal Opportunity Employer and the training program follows institutional guidelines in this regard.

Application Materials

The program will use the APPIC centralized postdoctoral application system (APPA CAS <https://appicpostdoc.liasoncas.com/>).

Applicants should use the APPA CAS to submit the following:

1. A Letter of Interest, including the Track(s) in which you are interested ([see below for descriptions](#)). Please indicate in your letter how our training program fits with your career goals.
2. Curriculum Vita
3. Three Letters of Recommendation
4. In addition to your three letters recommendation, we require a separate letter from your Graduate School Program, Director of Training specifying current dissertation status and projected timeline for completing all requirements for the doctoral degree. If you have already completed your degree, a copy of your diploma or other indication from your graduate program is acceptable.
5. Graduate transcripts.
6. Two sample neuropsychological evaluation reports with all patient/client identifying information redacted.

Application materials must be received by **January 8, 2016**.

Please contact the Psychology Postdoctoral Training Director, Dr. Steve Castellon via electronic mail at Steve.Castellon@va.gov or scastell@ucla.edu or by phone at (310) 268-3597 with any questions about the application process.

Selection Procedures

The selection committee for is composed of the Neuropsychology Training Group, a 10-member group of supervisors (see below) that includes the Psychology Training Director (Dr. Anna Okonek), as well as the Postdoctoral Residency Director (Dr. Steve Castellon). Current Residents participate in the interview process but do not have an evaluative role, with their main role helping to inform applicants about the program and their experiences as trainees.

The selection committee evaluates the following criteria: (1) Breadth and quality of prior general clinical training, (2) Quality and extent of specialized training in clinical neuropsychology, (3) Strength of letters of recommendation, (4) Quality and scope of research productivity, (5) A clear and thoughtful writing style in application materials and sample reports, (6) Goodness of fit between applicant's professional goals and program training objectives, and (7) Evidence of personal maturity and accomplishments. Successful candidates typically have substantial academic and clinical experience in neuropsychology, with preference given to candidates who have completed doctoral and internship training that meets the Houston Conference guidelines in Clinical Neuropsychology (for details, see http://www.theaacn.org/position_papers/houston_conference.pdf).

Historically, the majority of our interviewing of top applicants has taken place on site – at the West Los Angeles VA. However, we will also try to be available to interview applicants at the Annual Meeting of the International Neuropsychological Society, in Boston, Massachusetts (February 3-6, 2016). We can also conduct interviews by telephone or by video teleconferencing should travel to our site or to INS Boston not be feasible. Following interviews, the Neuropsychology Training Group will again rank order applicants and an offer will be extended to the top applicant for each training track (TBI/Rehab; Gero-Neuro; General). Offers will be extended as soon as possible after committee consensus. If offers are not accepted, we will continue to extend offers down the rank-ordered list until the positions are filled. We expect to extend offers by mid-to-late February.

Training Setting

The VA Greater Los Angeles (VAGLA) Healthcare System is one of the largest and most complex integrated healthcare facilities within the Department of Veterans Affairs. The VAGLAHS consists of a comprehensive tertiary care facility (West Los Angeles VA Healthcare Center), three ambulatory care centers, and 10 community-based outpatient clinics. In fiscal year 2014, VAGLAHS provided medical and mental health services to over 85,000 Veterans residing in the primary service area, including Los Angeles County, which has the largest concentration of Veterans of any county in the United States. GLA provides comprehensive ambulatory and tertiary care to Veterans in five counties in Southern California, with 964 beds, over 5,000 employees and an annual operating budget of over \$900 million.



The Psychology Postdoctoral Training Program is housed at the West Los Angeles VA Healthcare Center. This tertiary care center is spread across an expansive 430-acre campus that includes approximately 150 buildings and is divided into a South and North Campus. The Psychology Department is embedded within the Department of Psychiatry and Mental Health and consists of 48 licensed clinical psychologists, many of whom are involved with training endeavors at the internship and postdoctoral level. Psychologists at the West Los Angeles VA occupy a variety of roles

throughout the medical center, working in both inpatient and outpatient mental health and medical settings, with several involved in program leadership positions and the majority working in multi-disciplinary settings with allied mental health care professionals.

The West Los Angeles VA Healthcare Center is located in one of the most culturally diverse cities in the nation. The Veterans we serve represent a mixture of cultural, ethnic, socioeconomic, and individual

diversity. Our overall Veteran population self-identified as 64% Caucasian, 27% African American, 5% Hispanic, 4% as Asian and 1% as Native American. While this group is approximately 90% male, there are several settings in which trainees can get experience working with female Veterans. There is also considerable diversity in terms of age, so although approximately 41% of our Veterans receiving care are over the age of 65, we also have nearly 15,000 OEF/OIF Veterans enrolled in GLA, with the vast majority under the age of 30.

West Los Angeles VA psychologists on the south campus work in settings that are primarily devoted to medical/surgical, integrated primary care, and inpatient psychiatric services. These programs are located in either the main medical center building or in one of two newly-constructed, adjacent, modular buildings. South campus psychologists include those working within Health Psychology-Integrated Care, Physical Medicine & Rehabilitation, Geriatric Research, Education & Clinical Center (GRECC), and our Geriatrics clinical programs including Geropsychology and GEM/GRECC, described below. On the north campus, one or more psychologists work in the following programs: Community Living Center (CLC), comprised of our two 120-bed nursing home buildings; Domiciliary Residential Rehabilitation and Treatment Program (a 321-bed treatment program housed in two dormitory style buildings); Ambulatory Care mental health programs (e.g. Mental Health Clinic); substance abuse treatment programs including Addiction Treatment Clinic (ATC) and Recovery Treatment Center (RTC); the PTSD program; and the Neuropsychology and Assessment services. In addition, a number of treatment programs for patients with severe mental illness can be found on North campus, including the CBT for Psychosis Clinic, the Mental Health Intensive Case Management (MHICM) program, the Dual-Diagnosis Treatment Program (DDTP), the Psychosocial Rehabilitation for Severe Mental Illness, and the Mental Illness Research, Education and Clinical Center (MIRECC).

The Psychology Department at the West Los Angeles VA Healthcare Center has a strong commitment to, and long history of, providing training. Our Psychology Training Director, Dr. Anna Okonek, oversees our highly competitive (130-160 applications annually) predoctoral internship program. This program has been accredited by the American Psychological Association since 1979 and, at the most recent site visit (2010), received a full 7-year accreditation. Of Psychology Department staff, 31 serve as supervisors in our internship training program, and, of those, 19 also provide supervision in the fellowship program. In addition to training predoctoral interns, the training program selects 4-6 practicum students each year, all of whom receive 9 months of supervised training on two different clinical rotations. Postdoctoral Fellows and Residents will have a chance to provided layered supervision to both our predoctoral interns and practicum students. All clinical supervisors in the postdoctoral residency/fellowship, predoctoral internship, and practicum program are licensed clinical psychologists and complete biannual training and education in clinical supervision as mandated by the California Board of Psychology.

The Psychology Department at West Los Angeles VA enjoys close ties with both the UCLA Department of Psychology and the Department of Psychiatry & Biobehavioral Sciences at the David Geffen School of Medicine at UCLA. Many staff members, including the majority of those in training/supervising roles, hold clinical and/or academic appointments at local institutions, including UCLA, Pepperdine University, the University of Southern California, and the Fuller Graduate School of Psychology.

Training Model and Program Philosophy

The Neuropsychology Postdoctoral Residency is structured to provide advanced clinical, didactic, and research experiences during the course of a two-year, full-time program. Although we fully expect the

Resident will be able to function at an advanced level following their first year of residency, the second year builds upon the competencies developed during the first year. During the second year of training residents participate in increasingly more advanced and/or specialized and complex training experiences requiring greater autonomy and responsibility as well as assuming greater participation in administration, research, and supervision activities. Training experiences, from the first day of residency through the final day of Year 2, serve to deepen knowledge of brain-behavior relationships, develop expertise in the evaluation and treatment of neurological syndromes and their sequelae, and continued professional development through increasing involvement in direct supervision of pre-doctoral trainees, work on administration/management of neuropsychology and neurobehavioral clinics, and leadership roles within multi-disciplinary treatment teams. Greater depth of supervised clinical experiences are possible over the course of the residency than would be possible, for example, on internship (e.g. wider variety of patients, more complicated cases, or cases requiring specialized skill sets).

At the outset of each training year, Residents meet with their primary supervisor and with the Residency Training Director to complete an evaluation designed to assess his/her general neuropsychological skills. Information from this evaluation identifies the Resident's prior experiences, strengths, areas for growth, and training goals. This information is used to help guide assignment to training experiences targeting development of seven competency areas. Typically within the first few months of beginning the program, the Resident chooses a research mentor with whom they'd like to complete a research project. The Neuropsychology Training Group (supervisors specifically involved with the Neuropsychology Residency), as well as the broader Psychology Training Committee, both meet regularly to discuss Resident's progress through the program and developing of neuropsychological competencies.

At the beginning of each major clinical training rotation, the Resident and rotation supervisors develop a formal individualized training plan that discusses and sets forth training objectives, required activities, and caseload guidelines. Formal evaluations are completed at the midpoint and upon completion of all training rotations.

Our Neuropsychology Residency Program has three Training Tracks: 1. **General Neuropsychology**, 2. **Geriatric Neuropsychology**, and 3. **Polytrauma/Rehabilitation Psychology**. Each track is comprised of both required and elective clinical experiences. The required training placements within each track are described below and elective experiences in the section following.

Clinical Neuropsychology Training Experiences

We have three positions open for application in 2016. Each training track involves participation in required training experiences as well as selection of elective experiences.

Required Clinical Rotations: Polytrauma/Rehabilitation Psychology

1. **Polytrauma/TBI Neuropsychology.** Residents receive advanced training within our Polytrauma Network Site (PNS), with emphases in neuropsychology and rehabilitation. Polytrauma (i.e. multi-system injury including traumatic brain injury) has been identified as a national priority for veterans' health care and there is significant need for Polytrauma Psychology services including neurocognitive and psychological assessment, innovative treatments, as well as consultation and research. Residents serve as an integral member of the interdisciplinary Polytrauma team working with veterans from Operations Enduring Freedom, Iraqi Freedom, and New Dawn (OEF/OIF/OND).

The resident receives training and direct supervision in neuropsychological and psychological assessment, interventions including individual and group evidence-based psychological treatments, and cognitive rehabilitation. Additionally, the fellow will work closely with allied disciplines of the Polytrauma Program including Physiatry, Speech and Language Pathology, Occupational Therapy, Physical Therapy, Social Work, Nursing, Blind Rehabilitation and Vocational Rehabilitation Specialists to develop a comprehensive treatment plan for the veteran. Residents will provide consultation to the team on the veteran's neurocognitive and psychological areas of strengths and weakness, and how these inform and impact treatment. It is expected that residents will also have the opportunity to participate in education inside and outside of the VA about brain injury. Residents will have opportunities to participate in ongoing research projects or program development, program evaluation and layered clinical supervision of psychology interns and practicum-level trainees. *Supervisors:* Steve Castellon, Ph.D. and Anna Okonek, Ph.D.

2. **Inpatient Acute Physical Rehabilitation Unit:** Residents complete consultations on patients admitted for intensive physical rehabilitation of stroke, amputation, traumatic brain injury, and/or neurological or orthopedic disorders. Consultation typically involves neurocognitive or psychological evaluation and assessment of decision-making capacity. Also, resident will acquire experience providing short-term psychotherapy and staff support and education regarding patient's cognitive and/or psychological condition. *Supervisor:* Michelle Zeller, Psy.D, ABPP-CN.
3. **Neuropsychology Assessment Laboratory.** The NAL handles most non-specialty (e.g. Polytrauma or TBI Clinic) neuropsychological assessment referrals for the large medical center. Although most of the evaluations are done on an outpatient basis, there is also opportunity for inpatient assessment within this training rotation as well. Residents have the opportunity to evaluate patients with a wide variety of neurological disorders including Alzheimer's disease, vascular dementia, head injury, substance-induced cognitive disorders, toxic/metabolic encephalopathy, seizure disorder, severe mental illness, and subcortical dementias such as Parkinson's disease and HIV-associated dementia. Residents are exposed to a hypothesis testing/process approach to neuropsychological evaluation and develop competence in test selection, administration, scoring and interpretation, and report writing. Most patients receive feedback on testing results, providing excellent opportunities to help patients (and/or their families or treatment teams) use testing results to help inform their treatment plans. Residents have the opportunity to provide layered supervision to predoctoral interns and practicum students rotating through the NAL. Clinical training is supported by a strong didactic base that includes: 1). Weekly Neuropsychology Case Conferences offering basic theory designed to develop skills in clinical case interpretation; 2). Weekly neurosciences lectures at the UCLA Semel Institute that emphasize theoretical and conceptual issues; 3). Weekly Neurobehavior seminars presenting research and clinical data on neurobehavioral syndromes and cases highlighting unusual disorders; 4). Memory Disorder and Neurobehavioral Clinics in which case presentations are discussed by neurologists, neuropsychologists, and psychiatrists; and 5). Clinical pathology (i.e., brain cutting) conferences. *Supervisor:* Charles Hinkin, Ph.D., ABPP-CN.

Required Clinical Rotations: Geriatric Neuropsychology

1. **Geropsychology Program:** This program emphasizes training opportunities in aging, cognition, and mental health. Residents will receive training in cognitive screening and psychiatric outpatient care for older adults through the Geropsychiatry Outpatient Clinic. This interdisciplinary setting trains

students from a variety of mental health and medical disciplines, including Geriatric Psychology, Geriatric Psychiatry, Geriatric Medicine, Pharmacy, and Social Work. The Geropsychiatry Outpatient Clinic is one of the primary training rotations for the UCLA Geriatric Psychiatry Fellowship Program and thus offers excellent opportunity for interprofessional education and collaboration. Residents will work with veterans from diverse socioeconomic and racial/ethnic backgrounds who have mental health and/or neurocognitive disorders, including depressive disorders, anxiety-spectrum disorders, bipolar disorder, schizophrenia, and various dementias. Training opportunities include brief and more comprehensive neuropsychological assessment, psychiatric interviewing and mental status exams, individual and group psychotherapy (structured and process-oriented). Because many older veterans have co-morbid medical, psychiatric and psychosocial problems, a broad biopsychosocial approach to care is used in these settings. In addition to training in the Geropsychiatry Outpatient Clinic, elective experiences include providing neurocognitive screening and evaluation in a primary care setting, and providing consultative mental health services in community nursing homes.
Supervisor: Sheryl Osato, Ph.D.

2. **Geriatric Medicine:** The Geriatric Medicine rotation provides training in neuropsychological and psychological assessment, brief psychotherapy and team consultation in both inpatient (AGT) and outpatient (GRECC) medical geriatric settings. The program is linked with the UCLA Geriatric Medicine Fellowship, one of the top rated geriatric training sites in the country. The Acute Geriatric Team (AGT) oversees 8 inpatient beds for medically ill older adult (over 65 years of age) Veterans, located in the main hospital (Building 500). Fellows are part of the interprofessional treatment team, which includes physicians, social workers, occupational therapists, physical therapists, dieticians, optometrists, pharmacists and nurses. The Fellow reviews the medical chart of AGT patients to identify the presence or risk for cognitive, psychological, or functional decline. As needed, patients are assessed for medical decisional capacity, ability to live independently, delirium, dementia, and mood disorders, and other active psychiatric disorders. Brief supportive therapy and psychoeducation is provided as needed. Interdisciplinary team rounds occur 2 days/week. Because the AGT strives to discharge patients safely and efficiently, the pace is fast and there is a strong emphasis on interdisciplinary team communication and collaboration. GRECC (Geriatric Research, Education, and Clinical Centers) is an outpatient clinic with a census of approximately 400 patients. Fellows attend weekly didactics with the interprofessional medical treatment team. The Fellows primary responsibility is neuropsychological assessment, treatment planning, and feedback with patients and their families. Typical diagnoses include cerebrovascular disease, Alzheimer's Disease, Mild Cognitive Impairment, and depression. The Fellow also co-facilitates two groups aimed at promoting cognition, one for healthy older adults (Brain Training), and one for Veterans with Mild Cognitive Impairment/mild dementia (Memory Group). The Brain Training group is a psychoeducational program aimed at enhancing healthy brain functioning in aging. Group sessions focus on teaching participants about factors that can impact cognition, including the normal aging processes, nutrition, exercise, stress, and depression. It also teaches and assists participants in practicing mnemonic strategies and compensatory techniques to enhance their memory in daily life. The Memory Group follows a similar format, but is geared towards older adults who have been diagnosed with a Neurocognitive disorder. The GRECC team is active in research and is currently studying interventions to assist caregivers, tele-medicine, and diabetes management. Dr. Melrose has a VA funded Merit Review project to examine neuroimaging correlates of amnesic Mild Cognitive Impairment and Alzheimer's Disease.
Supervisor: Rebecca Melrose, Ph.D.

3. **Veteran's Cognitive Assessment and Management Program (V-CAMP):** V-CAMP provides interdisciplinary assessment, diagnostic services, and ongoing care for Veterans with neurocognitive

disorders and their caregivers. With a primary target of increasing access and quality of care to rural Veterans, the primary method of service delivery is clinical video telehealth to local CBOCs, though some in person assessment is conducted based on patient preference and/or clinical appropriateness. Services include: diagnostic assessment (clinical interview, screening), neuropsychological assessment, medication management, behavioral assessment and intervention, and comprehensive care management. For neuropsychology residents, primary clinical duties include clinical interviewing, conducting cognitive screening, comprehensive neuropsychological assessment, and developing treatment plans and/or recommendations for optimal function and safety. This service offers the unique opportunity for neuropsychology residents to provide ongoing follow up to allow for exposure to the clinical course of various neurocognitive disorders. V-CAMP providers work closely with CBOC clinicians, social work care managers, and community resources to provide integrated and comprehensive care. Additional didactic opportunities include a bi-monthly training focused on brain-behavior relationships as applied to cognitive, behavioral, emotional, and functional symptoms in neurocognitive disorders in older adults. *Supervisors:* Kate Harrell, Ph.D.; Lindsay Embree, Ph.D.

4. **Neuropsychology Assessment Laboratory.** The NAL handles non-specialty (e.g. Polytrauma or TBI Clinic) neuropsychological assessment referrals for the large medical center. Although most of the evaluations are done on an outpatient basis, there is also opportunity for inpatient assessment within this training rotation as well. Residents have the opportunity to evaluate patients with a wide variety of neurological disorders including Alzheimer's disease, vascular dementia, head injury, substance-induced cognitive disorders, toxic/metabolic encephalopathy, seizure disorder, severe mental illness, and subcortical dementias such as Parkinson's disease and HIV-associated dementia. Residents are exposed to a hypothesis testing/process approach to neuropsychological evaluation and develop competence in test selection, administration, scoring and interpretation, and report writing. Most patients receive feedback on their testing results, providing excellent opportunities to help patients (and/or their families or treatment teams) use testing results to help inform their treatment plans. Residents have the opportunity to provide layered supervision to predoctoral interns and practicum students who are rotating through the NAL. Clinical training is supported by a strong didactic base that includes: 1). Weekly Neuropsychology Case Conferences offering basic theory designed to develop skills in clinical case interpretation; 2). Weekly neurosciences lectures at the UCLA Semel Institute that emphasize theoretical and conceptual issues; 3). Weekly Neurobehavior seminars presenting research and clinical data on neurobehavioral syndromes and cases highlighting unusual disorders; 4). Memory Disorder and Neurobehavioral Clinics in which case presentations are discussed by neurologists, neuropsychologists, and psychiatrists; and 5). Clinical pathology (i.e., brain cutting) conferences. *Supervisor:* Charles Hinkin, Ph.D., ABPP-CN

Required Clinical Rotations: General Neuropsychology

1. **Neuropsychology Assessment Laboratory.** The NAL handles non-specialty (e.g. Polytrauma or TBI Clinic) neuropsychological assessment referrals for the large medical center. Although most of the evaluations are done on an outpatient basis, there is also opportunity for inpatient assessment within this training rotation as well. Residents have the opportunity to evaluate patients with a wide variety of neurological disorders including Alzheimer's disease, vascular dementia, head injury, substance-induced cognitive disorders, toxic/metabolic encephalopathy, seizure disorder, severe mental illness, and subcortical dementias such as Parkinson's disease and HIV-associated dementia. Residents are exposed to a hypothesis testing/process approach to neuropsychological evaluation and develop competence in test selection, administration, scoring and interpretation, and report

writing. Most patients receive feedback on their testing results, providing excellent opportunities to help patients (and/or their families or treatment teams) use testing results to help inform their treatment plans. Residents have the opportunity to provide layered supervision to predoctoral interns and practicum students who are rotating through the NAL. Clinical training is supported by a strong didactic base that includes: 1). Weekly Neuropsychology Case Conferences offering basic theory designed to develop skills in clinical case interpretation; 2). Weekly neurosciences lectures at the UCLA Semel Institute that emphasize theoretical and conceptual issues; 3). Weekly Neurobehavior seminars presenting research and clinical data on neurobehavioral syndromes and cases highlighting unusual disorders; 4). Memory Disorder and Neurobehavioral Clinics in which case presentations are discussed by neurologists, neuropsychologists, and psychiatrists; and 5). Clinical pathology (i.e., brain cutting) conferences. *Supervisor*: Charles Hinkin, Ph.D., ABPP-CN

2. **Veteran's Cognitive Assessment and Management Program (V-CAMP):** V-CAMP provides interdisciplinary assessment, diagnostic services, and ongoing care for Veterans with neurocognitive disorders and their caregivers. With a primary target of increasing access and quality of care to rural Veterans, the primary method of service delivery is clinical video telehealth to local CBOCs, though some in person assessment is conducted based on patient preference and/or clinical appropriateness. Services include: diagnostic assessment (clinical interview, screening), neuropsychological assessment, medication management, behavioral assessment and intervention, and comprehensive care management. For neuropsychology residents, primary clinical duties include clinical interviewing, conducting cognitive screening, comprehensive neuropsychological assessment, and developing treatment plans and/or recommendations for optimal function and safety. This service offers the unique opportunity for neuropsychology residents to provide ongoing follow up to allow for exposure to the clinical course of various neurocognitive disorders. V-CAMP providers work closely with CBOC clinicians, social work care managers, and community resources to provide integrated and comprehensive care. Additional didactic opportunities include a bi-monthly training focused on brain-behavior relationships as applied to cognitive, behavioral, emotional, and functional symptoms in neurocognitive disorders in older adults. *Supervisors*: Kate Harrell, Ph.D.; Lindsay Embree, Ph.D.
3. **Polytrauma/TBI Neuropsychology.** Residents receive advanced training within our Polytrauma Network Site (PNS), with emphases in neuropsychology and rehabilitation. Polytrauma (i.e. multi-system injury including traumatic brain injury) has been identified as a national priority for veterans' health care and there is significant need for Polytrauma Psychology services including neurocognitive and psychological assessment, innovative treatments, as well as consultation and research. Residents serve as an integral member of the interdisciplinary Polytrauma team working with veterans from Operations Enduring Freedom, Iraqi Freedom, and New Dawn (OEF/OIF/OND). The resident receives training and direct supervision in neuropsychological and psychological assessment, interventions including individual and group evidence-based psychological treatments, and cognitive rehabilitation. Additionally, the fellow will work closely with allied disciplines of the Polytrauma Program including Physiatry, Speech and Language Pathology, Occupational Therapy, Physical Therapy, Social Work, Nursing, Blind Rehabilitation and Vocational Rehabilitation Specialists to develop a comprehensive treatment plan for the veteran. Residents will provide consultation to the team on the veteran's neurocognitive and psychological areas of strengths and weakness, and how these inform and impact treatment. It is expected that residents will also have the opportunity to participate in education inside and outside of the VA about brain injury. Residents will have opportunities to participate in ongoing research projects or program development, program

evaluation and layered clinical supervision of psychology interns and practicum-level trainees.
Supervisors: Steve Castellon, Ph.D. and Anna Okonek, Ph.D.

Elective Clinical Rotations

In addition to these required training experiences, our program offers the opportunity for elective experiences within several other, highly relevant, training settings within neuropsychology and/or medical psychology:

- 1. Inpatient Acute Physical Rehabilitation Unit:** Residents complete consultations on patients admitted for intensive physical rehabilitation of stroke, amputation, traumatic brain injury, and/or neurological or orthopedic disorders. Consultation typically involves neurocognitive or psychological evaluation and assessment of decision-making capacity. Also, resident will acquire experience providing short-term psychotherapy and staff support and education regarding patient's cognitive and/or psychological condition. *Supervisor:* Michelle Zeller, Psy.D, ABPP-CN.
- 2. Veteran's Cognitive Assessment and Management Program (V-CAMP):** The V-CAMP provides interdisciplinary assessment, diagnostic, and ongoing care for Veterans with neurocognitive disorders and their caregivers. With a primary target of increasing access and quality of care to rural Veterans, both clinical video teleconferencing and telephonic communication strategies are utilized for service delivery. Services include: diagnostic assessment, neuropsychological assessment, medication management, behavioral assessment and intervention, and comprehensive care management. Veterans and caregivers receive care either from the home or from their local CBOC as clinically indicated. V-CAMP providers work closely with CBOC clinicians and community resources to provide integrated and comprehensive care. *Supervisors:* Kate Harrell, Ph.D. and Lindsay Embree, Ph.D.
- 3. Long-Term Care and Rehabilitation: Community Living Center (CLC):** Resident receives training and supervision in the provision of neuropsychological assessment services, interdisciplinary consultation, and experience with cognitive rehabilitation in a long-term care setting. The CLC is a training setting where students from a variety of mental health and medical disciplines, including Geriatric Psychology, Geriatric Psychiatry, Geriatric Medicine, Pharmacy, Social Work and Nursing, work to optimize mental health, cognitive, and medical functioning in patients in a long-term care environment. Residents will have the opportunity to work with patients with a variety of mental health disorders (e.g. affective disorders, schizophrenia and psychotic-spectrum disorders, personality disorders), dementia and delirium. A broad biopsychosocial approach to care is used in this setting as many patients have social, medical, cognitive, and mental health conditions. A variety of assessment experiences can be gained in this setting, including psychiatric interviewing, mental status exams, and objective personality testing (e.g. MMPI-2/RF, PAI). At the CLC, residents will receive intervention experience as well, with individual psychotherapy based primarily on a short-term model, utilizing behavioral, dynamic, and problem-solving modalities. Group therapy training opportunities are also offered. *Supervisors:* Paul Cernin, Ph.D. and Fred Kornfeind, Psy.D.
- 4. Psychiatric Inpatient Assessment:** Residents complete psychological assessments on patients who have been admitted to one of the locked psychiatric inpatient wards. Referral questions typically involve requesting assistance with diagnostic formulation, ruling out of symptom exaggeration or malingering, and screening for neurocognitive disorders. *Supervisor:* Steven Castellon, Ph.D.
- 5. Pain Clinic:** Resident will work closely with psychologists who are part of an interdisciplinary pain

treatment team (Rehabilitation Medicine, Anesthesiology, Nursing, and Psychiatry). The primary role of the psychologist in this setting is that of consultant to the treatment team based on an assessment of the patient's current psychological/personality functioning and biopsychosocial history. There are opportunities to assess patients with chronic and complicated pain problems. Pain patients who are candidates for interventional procedures (e.g. spinal cord stimulator placement or baclofen pump) undergo a comprehensive psychological assessment, including clinical interview, self-report measures, and administration of the MMPI-2. Thus, psychology trainees gain experience in the use and interpretation of screening, interview, and personality measures in the assessment of chronic pain. In addition to assessment, the pain psychology program also contributes to an interdisciplinary comprehensive pain rehabilitation program. Fellows may conduct evaluations of candidates for the program, provide group-based psychological treatment, and participate in interdisciplinary treatment plans. There may also be opportunities to provide group behavioral pain management to Veterans who struggle with addiction. Finally, brief individual therapy opportunities (i.e. CBT, or biofeedback) may be available as well. *Supervisors:* Katherine Bailey, Ph.D. and Morgan Kay, Ph.D.

Teaching Methods

The West Los Angeles VA Neuropsychology Residency is a two year, full-time, program with supervised clinical and didactic experiences that are graded in complexity. As the Resident progresses through the program, we strive to provide them with more complex training opportunities requiring more advanced skills. Supervision, a key aspect of all clinical experiences during training, is expected to progress towards providing greater autonomy and responsibility for clinical decision making. Additionally, it is expected that all Residents participate in layered supervision with predoctoral trainees to begin to acquire basic skills at providing supervision. Throughout training, we seek to provide each Resident with a wide variety of patients from different cultural backgrounds and with differing clinical needs and conditions, thereby familiarizing them with an array of neurological and psychiatric evaluations and treatments.

Residents receive a minimum of 4 hours of individual and group supervision each week, including one-hour weekly individual supervision with a primary program supervisor and rotation supervisors. Direct observation, role modeling, and review of neuropsychological evaluation protocols and reports, as well as joint participation in teaching clinics are among the supervision models employed. Ongoing and regular feedback is provided at a monthly Psychology Training Committee meeting and a bi-monthly Neuropsychology Training Group meeting. These meetings allow program faculty and neuropsychology trainees (residents and interns) to have on-going evaluation and make any modifications of individual training plan, as indicated. Required and optional didactics, continuing education events for staff, Grand Rounds (Neurology and Psychiatry) and lectures and seminars at the West Los Angeles VA and at the UCLA School of Medicine occur throughout the training year (also, see below, Didactics).

Competency Areas Assessed

At program completion each Resident will demonstrate advanced competency in the following seven areas:

1. Assessment of neurobehavioral problems
2. Cognitive rehabilitation and treatment of patients with neurobehavioral disorders
3. Neuropsychological consultation to other specialists regarding neurobehavioral disorders
4. Ethical and professional behavior

5. Appreciation of cultural and individual differences
6. Scholarship/Research in Neuropsychology
7. Supervision and Teaching

Program Structure

The Clinical Neuropsychology Postdoctoral Residency Program is comprised of two full-time years of training. The table below summarizes a sample Training Plan/Program for three Residents for each of the two years of training. The time allotments noted are estimates and each Resident’s program may differ based on their unique training needs and interests.

SAMPLE TRAINING PLAN/PROGRAM

Training Year 1		
General NP Resident	TBI/Rehab Resident	Geriatric Neuropsych Resident
Neuropsych Lab – 2 days	Polytrauma/TBI – 3 days	GEM/GRECC – 2 days
Geropsychology – 2 day	Inpatient Rehab (Zeller) – 1 days	Neuropsych Lab – 1 day
		Geropsychology – 1 day
*Electives – 1 day	*Electives – 1 day	*Electives – 1 days

Didactics: Diversity Seminar, Fellow/Resident Seminar and Journal Club; Clinical Neuroanatomy (UCLA), Neuropsychology/Assessment Seminar (VA)

Training Year 2		
General NP Resident	TBI/Rehab Resident	Geriatric Neuropsych Resident
Neuropsych Lab – 2 days	Polytrauma/TBI – 2 days	GEM/GRECC – 1 day
GEM/GRECC – 1 day	Inpatient Rehab (Zeller) – 1 days	Polytrauma/TBI – 1 day (6 mos) V-CAMP 1 day (6 mos)
Polytrauma/TBI – 1 day	Neuropsych Lab – 1 day	Geropsychology – 2 day
*Electives – 1 day	*Electives – 1 day	*Electives – 1 days

Local Information

The West Los Angeles VA Healthcare Center is located in one of the most culturally diverse cities in the nation. We are located approximately one mile west of the UCLA campus and five miles east of the Santa Monica beaches. Neighboring communities include Brentwood, Westwood, and Santa Monica.

Los Angeles has much to offer in the way of arts and culture (The Getty Center, the Los Angeles County Museum of Art, Museum of Contemporary Art, the Los Angeles Philharmonic, the Hollywood Bowl, the Los Angeles Opera, to name a few), sports (Los Angeles Kings, Lakers, Sparks, Clippers, Dodgers, Angels), restaurants, nightlife, and entertainment (film, music, theater). The Southern California weather allows for year-round outdoor sports and recreation, including hiking, surfing, sailing, and bicycling, as well as skiing and snowboarding in the winter and spring. To find out more about events and attractions in the greater Los Angeles area, go to: <http://www.discoverlosangeles.com/>

Facility and Training Resources

Fellows/Residents will be provided with office space and computers necessary for patient care and administrative responsibilities. They will have full access to VA Medical Library services, the UCLA Biomedical Library, as well as VA Intranet and internet resources for clinical and research work. We have a comprehensive Psychology Assessment Lab, which includes a wide variety of psychological assessment instruments and scoring programs. There are 2 staff available for administrative support.

Administrative Policies and Procedures

Due Process – Procedures for due process and grievance are in place for any instances of problematic performance.

Privacy policy: we will collect no personal information about you when you visit our website.

Self-Disclosure: We do not require fellows to disclose personal information to the program administrators or clinical supervisors, except in cases where personal issues may be adversely affecting the fellows' performance and such information is necessary to address any difficulties.

Fellow Pay and Benefits

Stipend: Postdoctoral fellows receive a competitive stipend that is paid in 26 biweekly installments. VA fellowship stipends are locality adjusted to reflect different relative costs in different geographical areas. Currently, our stipends are as follows: Year 1: \$47,049; Year 2: \$49,592*.

Benefits: The fellowship appointments are for 2080 hours, which is full time for a one year period. All VA fellows are eligible for health insurance and for life insurance, just as are regular employees. However, as temporary employees, fellows may not participate in the VA retirement programs.

Holidays and Leave: Fellows receive the 10 annual federal holidays. In addition, fellows accrue 4 hours of sick leave and 4 hours of annual leave for each full two week pay period, for a total of between 96 and 104 hours of each during the year.

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).

Training Staff

Psychology Postdoctoral Training Faculty

Core Supervisors:

Katherine Bailey, Ph.D.

Doctoral Program: University of Illinois at Chicago, 2010

Predoctoral Internship: West Los Angeles VA Medical Center

Postdoctoral Fellowship: San Francisco VA Medical Center

Emphasis Track: Health/Integrative Health (Pain Clinic, Infectious Disease Clinic); Substance Use Disorder Clinic
Clinical Interests: Health psychology, substance abuse, anxiety disorders, evidence-based behavioral practice

Research Interests: Health behavior change, health disparities, dissemination and training

Booker, Kevin E., Ph.D.

Doctoral Program: University of California, Santa Barbara (Clinical), 1999

Predoctoral Internship: Howard University School of Medicine

Postdoctoral Fellowship: UCLA School of Medicine, Department of Adult Psychiatry

Academic Affiliation: Adjunct Faculty, Department of Cognitive Science, University of California, Irvine

Emphasis Track: Trauma (POST program)

Clinical Interests: Exposure to violence and mood/anxiety disorders; Trauma-focused cognitive behavioral and experiential/humanistic treatments; the role of finding meaning in mitigating against co-morbid mood disturbance in patients with PTSD

Research Interests: Impact of therapeutic alliance in potentiating the efficacy of Evidence-Based Therapy

Boxer, Laurie, Ph.D.

Doctoral Program: Syracuse University (Clinical), 1991

Predoctoral Internship: West Los Angeles VA Medical Center, 1990-1991

Emphasis Track: Trauma (POST program)

Clinical Interests: Assessment and Treatment of PTSD, Dialectical Behavior Therapy, Psychotherapeutic Interventions for Bipolar Disorder

Research Interests: Impact of the therapeutic alliance in potentiating efficacy of evidence-based psychotherapy; Effectiveness of DBT skills training on PTSD symptoms and tension reduction behaviors

Castellon, Steven A., Ph.D. – (Director, Postdoctoral Fellowship Program)

Doctoral Program: University of California, Los Angeles (Clinical), 1997

Predoctoral Internship: West Los Angeles VA Medical Center

Postdoctoral Fellowship: Neuropsychology, UCLA Neuropsychiatric Institute

Academic Affiliation: Associate Clinical Professor and Research Psychologist, Department of Psychiatry & Biobehavioral Sciences; David Geffen School of Medicine at UCLA

Track: Polytrauma Psychology, Health/Integrated Care (Psychology Assessment Lab)

Clinical Interests: Neuropsychological assessment, psychological assessment

Research Interests: Cognitive effects of cancer and cancer treatments, neuropsychiatric aspects of HIV/AIDS, cognitive and psychiatric consequences of Hepatitis C and its treatment

Cernin, Paul, Ph.D.

Doctoral Program: Wayne State University, 2008

Predoctoral Internship: St. Louis VAMC

Academic Affiliation: Assistant Clinical Professor, Department of Psychiatry and Biobehavioral Sciences David Geffen School of Medicine at UCLA

Postdoctoral Fellowship: Neuropsychology, UCLA Semel Institute, Geriatric Neuropsychology, 2008-2010

Track: Clinical Neuropsychology (Geriatric Neuropsychology)

Clinical Interests: older adults, LGBT aging

Research Interests: health disparities and urban elders, successful aging, breast cancer and cognition.

Chen, Suzie S., Ph.D.

Doctoral Program: Drexel University (Formerly MCP Hahnemann University), 2005

Predoctoral Internship: VA Greater Los Angeles Healthcare System, Sepulveda Ambulatory Care Center

Postdoctoral Fellowship: VA Long Beach Healthcare System

Track: Health Psychology/Integrative Health

Clinical Interests: Health Psychology, Behavioral Medicine, Rehabilitation Psychology, Sexuality & Intimacy, general psychological or cognitive assessment and treatment

Research Interests: Sexuality and Disability, Pain, Spinal Cord Injury, Caregiver Burden

Embree, Lindsay, Ph.D.

Doctoral Program: Suffolk University, 2012

Predoctoral Internship: Boston Consortium in Clinical Psychology

Postdoctoral Fellowship: UCLA Semel Institute for Neuroscience and Human Behavior

Academic Affiliation: Clinical Instructor, Division of Geriatric Psychiatry, UCLA Semel Institute for Neuroscience and Human Behavior

Track: Clinical Neuropsychology (Veterans' Cognitive and Assessment Management Program – V-CAMP)

Clinical Interests: Geriatric Psychology, Neuropsychology, Cognitive Rehabilitation

Research Interests: Memory in normal and diseased aging

Harrell, Katherine, Ph.D.

Doctoral Program: Drexel University (Formerly MCP Hahnemann University), 2005

Predoctoral Internship: West Los Angeles VA Medical Center

Track: Clinical Neuropsychology (V-CAMP program)

Clinical Interests: Neuropsychology; Tele-psychology; Geriatrics

Himmelfarb, Naomi, Ph.D.

Doctoral Program: University of Connecticut (Clinical), 1988

Predoctoral Internship: Los Angeles County-USC Medical Center

Academic Affiliation: Assistant Professor, Department of Psychiatry and Biobehavioral Sciences David Geffen School of Medicine at UCLA

Track: Trauma, Health (Women's Health Program)

Clinical Interests: Trauma, PTSD, and sexual assault

Research Interests: PTSD, sexual assault in women

Hinkin, Charles H., Ph.D., ABPP-CN

Doctoral Program: University of Arizona, 1991

Predoctoral Internship: Miami VA Medical Center

Postdoctoral Fellowship: Neuropsychology, UCLA School of Medicine

Academic Affiliation: Professor-in-Residence, Department of Psychiatry and Biobehavioral Sciences David Geffen School of Medicine at UCLA

Track: Geropsychology/Neuropsychology (Director Neuropsychology Service)

Clinical Interests: Neuropsychological assessment, detection of malingering, dementia

Research Interests: Neurocognitive and neuropsychiatric sequelae of HIV infection, HCV infection, medication adherence in chronic disease

Kay, Morgan A., Ph.D.

Doctoral Program: California School of Professional Psychology, 2013

Predoctoral Internship: VA Western NY Healthcare System (Buffalo)

Postdoctoral Fellowship: West Los Angeles VA Medical Center (2014)

Track: Interprofessional Integrative Health and Health Psychology

Clinical Interests: Health psychology, chronic pain management, insomnia treatment, interprofessional collaboration

Kornfeind, Fred, Psy.D.

Doctoral Program: Illinois School of Professional Psychology – Chicago Campus, 1996

Predoctoral Internship: West Los Angeles VA Medical Center

Postdoctoral Fellowship: Geropsychology, UCLA Neuropsychiatric Institute

Track: Geropsychology/Neuropsychology

Clinical Interests: Geropsychology, Health Psychology

Martin, Jennifer L. PhD

Doctoral Program: San Diego State University/University of California, San Diego Joint Program

Predoctoral Internship: Brown University

Postdoctoral Fellowship: University of California, Los Angeles

Academic Affiliation: Adjunct Associate Professor, Department of Medicine; David Geffen School of Medicine at UCLA

Track: Health, Integrative Health, and Polytrauma Psychology (Sleep Medicine Clinic)

Clinical Interests: Non-pharmacological treatment of sleep disorders; geriatrics

Research Interests: Development and dissemination of evidence based treatments for insomnia and other sleep disorders; impact of sleep disturbances on immunological markers and health outcomes in geriatric patients; sleep disorders in female veterans

McCreary, Charles P., Ph.D., ABPP-CP

Doctoral Program: Fordham University, 1971

Predoctoral Internship: UCLA Neuropsychiatric Institute

Academic Affiliation: Clinical Professor, Department of Psychiatry and Biobehavioral Sciences David Geffen School of Medicine at UCLA

Track: Health/Integrative Health (Cardiopulmonary rehabilitation, smoking cessation, MOVE Program)

Clinical Interests: Health Psychology, smoking cessation, cardiac rehabilitation

Research Interests: Smoking cessation during substance abuse treatment

Melrose, Rebecca, Ph.D.

Doctoral Program: Boston University, Boston (Clinical), 2007

Predoctoral Internship: West Los Angeles VA Medical Center, 2006-2007

Postdoctoral Fellowship: Special Fellowship in Advanced Geriatrics, West Los Angeles VA Medical Center, 2007-2010

Academic Affiliation: Assistant Research Psychologist, Department of Psychiatry and Biobehavioral Sciences David Geffen School of Medicine at UCLA

Track/Rotation: Clinical Neuropsychology (Geriatric Medicine)

Clinical Interests: Neuropsychology

Research interests: Neuroimaging & neuropsychology of cognitive decline in aging

Active Research: Neuroimaging (task fMRI, resting state fMRI, DTI) of Mild Cognitive Impairment & Alzheimer's Disease

Okonek, Anna, Ph.D. – (Director of Psychology Training)

Doctoral Program: University of California, Los Angeles (Clinical), 1992

Doctoral Internship: West Los Angeles VA Medical Center, 1989-1990

Postdoctoral Fellowship: Geropsychology/Neuropsychology, UCLA Neuropsychiatric Institute, 1991-1993

Academic Affiliation: Clinical Professor, UCLA Department of Psychology

Track: Polytrauma

Clinical Interests: Polytrauma/traumatic brain injury, neuropsychology, adjustment to disability, coping with acute and chronic medical illness

Research interests: Traumatic brain injury, blast injury

Active Research: Regional cerebral metabolism in blast-induced mild traumatic brain injury

Osato, Sheryl, Ph.D.

Doctoral Program: University of Hawaii (Clinical), 1986

Predoctoral Internship: West Los Angeles VA Medical Center

Postdoctoral Fellowship: Geropsychology, UCLA Neuropsychiatric Institute

Academic Affiliations: Clinical Professor, UCLA Department of Psychology; Adjunct Professor, Fuller Graduate School of Psychology

Track: Geropsychology-Neuropsychology

Clinical Interests: Neuropsychiatric aspects of aging, dementia, psychopathology and aging

Research Interests: Aging and neuropsychology, dementia

Serpa, J. Greg, Ph.D. - (Co-Director, Interprofessional Integrative Health Program)

Doctoral Program: California School of Professional Psychology, 2004

Predoctoral Internship: VA Greater Los Angeles Healthcare System, Sepulveda Ambulatory Care Center

Postdoctoral Fellowship: Harbor UCLA Medical Center

Clinical Interests: Mindfulness and Mindfulness Based Stress Reduction, Interprofessional training, Integrative Health modalities, Substance use disorders, HIV Mental Health, Yoga

Research Interests: Mindfulness and integrative Modalities of health, cortical neuroplasticity in veterans with TBI using mindfulness, cortical neuroplasticity in IBS using mindfulness

Song, Yong S., Ph.D.

Doctoral Program: Virginia Commonwealth University (Clinical), 1998

Predoctoral Internship: San Francisco VA Medical Center, 1997-1998

Postdoctoral Fellowship: UCSF School of Medicine, Langley Porter Psychiatric Institute, 1998-2000

Track: Health Psychology/Integrated Care; Trauma

Clinical Interests: Co-occurring PTSD and substance use disorders (SUD), motivational enhancement for SUD, OEF/OIF post-deployment care, health promotion among substance users, substance relapse prevention

Research Interests: Drug abuse treatment research, HIV risk reduction interventions for substance users

Wettstein, Barbara, Ph.D.

Doctoral Program: University of Notre Dame (Clinical), 1992

Predoctoral Internship: Loma Linda VA Medical Center, 1990-91

Clinical Interests: Affective disorders, civilian trauma, couples/family, groups

Track: Trauma (PDC/VTC)

Zeller, Michelle, Psy.D, ABPP-CN – (Director, Psychology Practicum Training Program)

Doctoral Program: Pepperdine University (Clinical), 2004

Predoctoral Internship: VA Greater Los Angeles Healthcare System

Postdoctoral Fellowship: Geropsychology, UCLA Neuropsychiatric Institute, 2004-06

Track: Health/Integrated Care (Inpatient Acute Rehabilitation Unit)

Clinical Interests: Neuropsychological assessment, individual psychotherapy, group psychotherapy, geropsychology

Research Interests: Cognitive performance on neuropsychological measures and PTSD

Psychologists Available for Training or Serving as Consultants:

Caskey, Nicholas H., Ph.D.

Doctoral Program: University of California, Los Angeles, 1987

Predoctoral Internship: Didi Hirsch Community Mental Health Center; VA Sepulveda

Postdoctoral Fellowship: UCLA Department of Psychiatry and Biobehavioral Sciences
West Los Angeles VA Medical Center, Psychopharmacology Unit

Academic Affiliation: Assistant Research Psychologist, Department of Psychiatry and Biobehavioral Sciences; David Geffen School of Medicine at UCLA

Clinical Interests: Short-term psychotherapy, anger management, risk management for suicidal patients, depression, PTSD

Research Interests: Nicotine dependence in psychiatric patients, psychopharmacology of smoking

Graves, Peter, Ph.D., Department Chair, GLA Psychology

Doctoral Program: University of Illinois at Chicago, 1994

Predoctoral Internship: VA Los Angeles Outpatient Clinic

Clinical Interests: Substance abuse, chronic mental illness, law and psychology

Research Interests: Behavior change, health beliefs, substance abuse

Jarvis, Sara J., Ph.D.

Doctoral Program: Southern Illinois University, 1987

Predoctoral Internship: Camarillo State Hospital

Clinical Interests: Personality and cognitive assessment, individual psychotherapy, projective testing

Lam, Mona, Ph.D.

Doctoral Program: University of Nebraska, 1998

Predoctoral Internship: West Los Angeles VA Medical Center

Postdoctoral Fellowship: Neuropsychology, UCLA Neuropsychiatric Institute

Academic Affiliation: Assistant Clinical Professor, UCLA Department of Psychology

Clinical Interests: Neuropsychology

Research Interests: Neuropsychology of HIV, chronic mental illness

Rosales, Grace, Ph.D.

Doctoral Program: University of Massachusetts, 2004

Predoctoral Internship: VA Greater Los Angeles Healthcare System

Postdoctoral Fellowship: Didi Hirsch Community Mental Health Center

Track: Leader, Diversity Seminar

Clinical Interests: Substance abuse treatment, cross-cultural mental health, addiction/high risk behaviors, psychological assessment and treatment

Research Interests: Acculturation, culturally-informed mental health treatment, multi-family treatment

Sreenivasan, Shoba, Ph.D.

Doctoral Program: University of California, Los Angeles, 1986

Predoctoral Internship: UCLA Neuropsychiatric Institute; UCLA Student Psychological Services

Postdoctoral Fellowship: University of Southern California

Academic Affiliation: Clinical Professor, USC Keck School of Medicine, Department of Psychiatry;

Coordinator of Forensic Neuropsychology, USC Institute of Psychiatry & Law

Clinical Interests: Forensics and neuropsychology

Research Interests: Actuarial risk assessment, neuropsychology and violence, suicide

Past/Current Trainees

2008-09 fellows (Name, Graduate Program, Internship):

Christian Carter, Ph.D., Clinical Psychology, Alliant International University
Internship: UCLA Semel Institute for Neuroscience and Human Behavior

Samantha French, Ph.D., Clinical Psychology, University of Nevada Las Vegas
Internship: VA Palo Alto Healthcare System

Melissa Magaro, Ph.D., Clinical Psychology, University of California, Los Angeles
Internship: UCLA Student Psychological Services.

2009-10 fellows:

Christian Carter, Ph.D., Clinical Psychology, Alliant International University
Internship: UCLA Semel Institute for Neuroscience and Human Behavior

Samantha French, Ph.D., Clinical Psychology, University of Nevada Las Vegas
Internship: VA Palo Alto Health Care System

Christopher Jetton, Ph.D., Clinical Psychology, University of California, Los Angeles
Internship: West Los Angeles VA Healthcare Center

2010-11 fellows:

Zainab Delawalla, Ph.D., Clinical Psychology, Washington University
Internship: West Los Angeles VA Healthcare Center

Ruth Gentry, Ph.D., Clinical Psychology, University of Nevada Reno
Internship: West Los Angeles VA Healthcare Center

Brooke Schneider, Ph.D., Clinical Psychology, Wayne State University
Internship: West Los Angeles VA Healthcare Center

Shelley Tom, Ph.D., Clinical Psychology, University of Southern California
Internship: Sepulveda Ambulatory Care Center

2011-12 fellows:

Zainab Delawalla, Ph.D., Clinical Psychology, Washington University
Internship: West Los Angeles VA Healthcare Center

Anna Leshner, Psy.D., Clinical Psychology, University of Southern California
Internship: VA Los Angeles Ambulatory Care Center

Christina Robinson, Ph.D., Clinical Psychology, University of Houston
Internship: West Los Angeles VA Healthcare Center

Brooke Schneider, Ph.D., Clinical Psychology, Wayne State University
Internship: West Los Angeles VA Healthcare Center

2012-13 fellows:

Fiona Barwick, Ph.D., Clinical Psychology, Pennsylvania State University
Internship: VA Palo Alto Healthcare System

Sara Gilbert, Ph.D., Counseling Psychology, University of Texas, Austin
Internship: Cincinnati VA Medical Center

Sheena Horning, Ph.D., Clinical Psychology, University of Colorado, Colorado Springs
Internship: West Los Angeles VA Healthcare Center

Alicia Semiatin, Psy.D., Clinical Psychology, Massachusetts School of Professional Psychology
Internship: VA Los Angeles Ambulatory Care Center

2013-14 fellows:

Fiona Barwick, Ph.D., Clinical Psychology, Pennsylvania State University
Internship: VA Palo Alto Healthcare System (Year 2)

Najwa Culver, Ph.D., Clinical Psychology, University of California, Los Angeles
Internship: Sepulveda VA Ambulatory Care Center

Lina D'Orazio, Ph.D., Clinical Psychology, University of Southern California
Internship: West Los Angeles VA Healthcare Center

Sheena Horning, Ph.D., Clinical Psychology, University of Colorado, Colorado Springs
Internship: West Los Angeles VA Healthcare Center (Year 2)

Morgan Kay, Ph.D., Clinical Psychology, Alliant International University
Internship: Buffalo VA Medical Center, Western NY Healthcare System

Diane Scheiner, Ph.D., Clinical Psychology, Fordham University
Internship: West Los Angeles VA Healthcare Center