



VA Sepulveda Ambulatory Care Center Doctoral Internship Program in Health Service Psychology

VA Sepulveda Ambulatory Care Center

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APPIC MATCH Number: 116312

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<https://www.losangeles.va.gov/trainee/>

Applications due: November 1, 2019

Welcome to the VA Sepulveda Ambulatory Care Center! We are pleased you will be considering our doctoral internship site. We hope you find the following information helpful as you make your decision. If you have any questions, please feel free to contact us.

Accreditation Status:

The doctoral internship at the **VA Sepulveda Ambulatory Care Center (SACC)** is accredited by the Commission on Accreditation (CoA) of the American Psychological Association (APA). The next site visit will be during the academic year 2023.

Application and Selection Procedures:

Applications for full-time internship positions in psychology will be accepted from students who are in good standing at an American Psychological Association (APA) or Canadian Psychological Association (CPA) accredited graduate program in Clinical, Counseling, or Combined psychology or at a Psychological Clinical Science Accreditation System (PCSAS) accredited program in Clinical Science. Students with a doctorate in another area of psychology who meet the APA or CPA criteria for re-specialization training in Clinical, Counseling, or Combined Psychology are also eligible. The training program is funded to support **SIX** full-time internship positions. The 2020-2021 internship year will begin on August 3, 2020.

To apply for internship at the VA Sepulveda Ambulatory Care Center, please include the following information in your cover letter:

- List at least three of your rotations of interest in descending order of priority (1=most interested)
- List all elective experiences of interest

Please contact the Director of Training if you have any questions:

Alexis Kulick, Ph.D., ABPP/CN
Telephone: 818-891-7711, extension 32734
Email: alexis.kulick@va.gov

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VA does not endorse and is not responsible for the content of the external linked websites.*

INTERNSHIP ADMISSIONS, SUPPORT, AND INITIAL PLACEMENT DATA

Internship Program Tables

Date Program Tables are Updated: 7/8/2019

Internship Program Admissions:

Briefly describe in narrative form important information to assist potential applicants in assessing their likely fit with your program. This description must be consistent with the program's policies on intern selection and practicum and academic preparation requirements

Eligibility:

Minimum qualifications include U.S. citizenship, enrollment and good standing in an American Psychological Association (APA) or Canadian Psychological Association (CPA) accredited graduate program in Clinical, Counseling, or Combined psychology or at a Psychological Clinical Science Accreditation System (PCSAS) accredited program in Clinical Science. Students with a doctorate in another area of psychology who meet the APA or CPA criteria for re-specialization training in Clinical, Counseling, or Combined Psychology are also eligible. Approval for internship status by your graduate program training director is also required. Other VA-wide eligibility requirements include:

1. U.S. citizenship. VA is unable to consider applications from anyone who is not currently a U.S. citizen. Verification of citizenship is required following selection. All interns and fellows must complete a Certification of Citizenship in the United States prior to beginning VA training.
2. A male applicant born after 12/31/1959 must have registered for the draft by age 26 to be eligible for any US government employment, including selection as a paid VA trainee. Male applicants must sign a pre-appointment Certification Statement for Selective Service Registration before they can be processed into a training program.
3. Interns and Postdoctoral Residents are subject to fingerprinting and background checks. Match result and selection decisions are contingent on passing these screens.
4. VA conducts drug screening exams on randomly selected personnel as well as new employees. Interns and Fellows 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.

For more information, please see: <http://www.psychologytraining.va.gov/eligibility.asp>.

Selection:

The Sepulveda VA Doctoral Internship training program is funded to support **SIX** full-time general internship positions. Interns are selected based on multiple factors; these include the quality of their graduate and undergraduate education, the quality and diversity of practicum experiences, research and teaching experience, multicultural competence, letters of recommendation, and perhaps most importantly, the perceived fit between the student and our training program. We seek applicants who have had a variety of clinical experiences with an emphasis on evidence-based therapy modalities with different adult patient populations. We require that at the time of the application process, applicants have accrued at least 400 intervention hours and 80 assessment hours. We require that applicants have passed their comprehensive exams and have had their dissertation proposal approved by the start of

internship. We prefer that applicants have completed or have made significant progress on their dissertations before starting the internship.

Our training program is committed to creating a supportive learning environment for individuals of diverse backgrounds, and as a federal agency, we abide by the U.S. Government Equal Employment Opportunity (EEO) and Reasonable Accommodation policies. The Internship Program follows a policy of selecting the most qualified candidates and is an Equal Opportunity Employer. Our commitment to diversity includes attempting to ensure an appropriate representation of individuals along many dimensions, including (but not limited to) gender, sexual orientation, age, ethnic/racial minorities, and persons with disabilities. Our internship program values cultural and individual diversity, and we strongly encourage qualified candidates from all backgrounds to apply.

The Internship program typically receives over 130 applications each year for the six internship positions. Applications are reviewed by members of the training committee to determine whether an interview should be granted. Applicants selected for interviews are invited to attend any one of four Open House/Interview sessions held in early and mid January. These four-to-five-hour sessions include: a group introduction to the staff and program, a campus tour, a meeting with the current interns over lunch (provided), and two individual interviews with staff psychologists who are selected based on applicants' rotation preferences and stated training interests. It is our goal to make the interviews as comfortable as possible and to provide an accurate representation of the collegial training environment at Sepulveda. In-person interviews are preferred; although, in special circumstances, we will conduct phone interviews. All applicants will be notified of their interview status before **December 15, 2019**.

Our procedures for intern recruitment and selection are governed by the Department of Veterans Affairs, the American Psychological Association (APA), and the Association of Psychology Postdoctoral and Internship Centers (APPIC). This internship site agrees to abide by the APPIC policy that no person at this training facility will solicit, accept or use any ranking-related information from any intern applicant.

Our internship is accredited by the Commission on Accreditation of the American Psychological Association. Questions related to the program's accreditation status should be directed to the Commission on Accreditation:

Office of Program Consultation and Accreditation
American Psychological Association
750 First Street, NE
Washington, DC 20002
Telephone: 202-336-5979/Email: apaaccred@apa.org
Web: www.apa.org/ed/accreditation

Does the program require that applicants have received a minimum number of hours of the following at time of application? If yes, indicate how many:

	<u>YES/NO</u>	<u>Amount</u>
Total Direct Contact Intervention Hours:	YES	400
Total Direct Contact Assessment Hours:	YES	80

Financial and Other Benefit Support for Upcoming Training Year*

Annual Stipend/Salary for Full-Time Interns:	\$29,613
Annual Stipend/Salary for Half-Time Interns	N/A

Program provides access to medical insurance for intern? YES

If access to medical insurance is provided:

Trainee contribution to cost required? YES

Coverage of family member(s) available? YES

Coverage of legally married partner available? YES

Coverage of domestic partner available? NO

Hours of Annual Paid Personal Time Off (PTO and/or Vacation) 104
-4 hours accrued every two weeks

Hours of Annual Paid Sick Leave 104
-4 hours accrued every two weeks

In the event of medical conditions and/or family needs that require extended leave, does the program allow reasonable unpaid leave to interns/residents in excess of personal time off and sick leave? YES

Other Benefits (please describe):

Hours of Federal Holiday Leave 80

Hours of Education Leave/Authorized Absence 40

Initial Post Internship Positions

Intern Cohort from 2015-2016 to 2017-2018

Total # of interns who were in the 3 cohorts 18

Total # of interns who did not seek employment because they returned to their doctoral program/are completing doctoral degree 0

	PD	EP
Community mental health center	0	0
Federally qualified health center	0	0
Independent primary care facility/clinic	0	0
University counseling center	0	0
Veterans Affairs medical center	14	1
Military health center	0	0
Academic health center	0	0
Other medical center or hospital	0	0
Psychiatric hospital	0	0
Academic university/department	1	0
Community college or other teaching setting	0	0
Independent research institution	0	0
Correctional facility	0	0
School district/system	0	0
Independent practice setting	2	0
Not currently employed	0	0
Changed to another field	0	0
Other	0	0
Unknown	0	0

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

Post-Internship Activities

Extending upon the table above, in the last 6 years, immediately following internship, 32 of our 35 graduating interns obtained postdoctoral fellowships (28 clinical, 4 research), and three obtained employment positions. All graduating interns successfully completed their dissertations and doctoral programs. Many continue to be actively engaged in scholarly activity, and all interns who are engaged in clinical service delivery have obtained licensure or plan to seek it. We feel confident that our Training Program prepares interns for a wide range of positions consistent with our program’s aim.

Postdoctoral Residencies of Interns from the Classes of 2013-2014 through 2018-2019

Clinical Positions

CBT California

CBT Los Angeles

Harbor UCLA – Adult Cognitive Behavioral Therapy

Harbor UCLA – Behavioral Medicine

Long Beach VA, Advanced Mental Health Interprofessional Special Emphasis Area

Long Beach VA, Liver Disease and Human Immunodeficiency (HIV) Special Emphasis

Long Beach VA, PTSD Special Emphasis

Los Angeles Ambulatory Care Center, SUD/PCMHI

Rancho Los Amigos National Rehabilitation Center

San Diego VA, PCMHI

San Francisco VA, SUD, PTSD, and Co-occurring Disorders

Selph Solutions (San Francisco)

Sepulveda VA, PCMHI/B-Med

Sepulveda VA, SUD/PTSD

The Capital Institute for Cognitive Therapy (Washington D.C.)

The Clinic (San Francisco)

VA Puget Sound, Seattle Division, Mental Health

West Los Angeles VA, Health Psychology

West Los Angeles VA, Interprofessional and Integrative Health

Research Positions

University of California, Los Angeles Department of Psychology

University of California, San Diego, Department of Medicine

VA Greater Los Angeles Healthcare System Women's Health Clinic Fellowship

San Diego VA, Center of Excellence for Stress and Mental Health (CESAMH)



PROGRAM SETTING:

VA Greater Los Angeles Healthcare System:

The VA Greater Los Angeles Healthcare System (VAGLAHS) is one of the largest healthcare systems within the Department of Veterans Affairs. It is one component of the VA Desert Pacific Healthcare Network (VISN 22) offering services to Veterans residing in Southern California and Southern Nevada. Greater Los Angeles (GLA) consists of two ambulatory care centers (Sepulveda VA and the Los Angeles Ambulatory Care Center); a tertiary care facility (West Los Angeles VA); and 8 community based outpatient clinics (CBOCs) throughout five counties in southern California (Los Angeles, Ventura, Kern, Santa Barbara, and San Luis Obispo). GLA provides comprehensive ambulatory and tertiary care to over 1.4 million Veterans living in this region.

GLA directs the Department of Veterans Affairs' largest educational enterprise. It serves as a major training site for medical residencies sponsored by the UCLA David Geffen School of Medicine and USC School of Medicine, as well as more than 45 colleges, universities and vocational schools in 17 different medical, nursing, paramedical, and administrative programs. Over 500 university residents, interns, and students are trained at the VA Greater Los Angeles Healthcare System each year.

GLA is a designated Center of Innovation for the national Office of Patient Centered Care and Healthcare Transformation. This office works with VA leadership and health care providers to transform VA's health system from the traditional medical model, which focuses on treating specific issues, to a personalized, proactive, patient-driven model that promotes whole health for Veterans and their families. Psychologists at GLA offer many integrated health and healing modalities of care, some of which include introductory courses for relaxation, mindfulness-based interventions, Tai Chi, yoga, and biofeedback. GLA has a Mindfulness Based Stress Reduction program (MBSR) for staff and Veterans.



Sepulveda Ambulatory Care Center:

The Sepulveda Ambulatory Care Center (SACC), located in the San Fernando Valley of Los Angeles, is part of the VA Greater Los Angeles Healthcare System. SACC is a fully independent, though integrated component of the educational mission of GLA. SACC is the major outpatient facility that provides care to the Veterans living in Northern Los Angeles. Following the earthquake in 1994, Sepulveda redefined its mission to become a comprehensive ambulatory care, education, and research facility. From an old-style traditional VA Medical Center, SACC has emerged as a facility in tune with contemporary and innovative health care delivery approaches and interprofessional collaboration. SACC offers a comprehensive array of services that supports the primary care program. These services include a wide spectrum of on-site ambulatory care activities for internal medicine, neurology, and specialty ambulatory surgery services, comprehensive psychiatry and psychology services, including alcohol and substance use treatment, dentistry, social services, rehabilitation medicine, audiology, speech pathology, prosthetics services, and comprehensive homeless services. There is also a 40-bed academic nursing home care unit on the campus.

SACC is recognized for special programs, including Geriatric Research, Education and Clinical Care Program (GRECC) and the Women's Health Program. SACC is unique for its expertise in primary, managed care education, and is a site for national VA PRIME medical residents and associated health trainees. Sepulveda's strong academic affiliation with UCLA Schools of Medicine, Dentistry and Nursing assures a progressive, high-quality healthcare environment. As a teaching facility, education and training are prominent at SACC. Most members of the medical staff hold clinical and/or academic appointments at UCLA or other academic institutions. Psychology is an independent discipline, but a fully integrated and respected component of the overall mental health and medical services.

SACC serves a diverse patient population. While the population is predominately male, we make every effort to ensure that the interns see a varied sample of patients. Efforts to reach out to women Veterans have resulted in an increased number of female patients and specialized women's clinics to address their unique needs. In fiscal year 2017, nearly 2800 female Veterans were seen for medical and/or mental

health treatment in the Women's Health Clinic at Sepulveda. Creating a rotation in this service has allowed our interns to work with this traditionally under-represented population in VA Medical Centers.

The Psychology internship program at the Sepulveda VA has been accredited by the American Psychological Association since 1979. Of the 13 clinical psychologists on staff at Sepulveda, 12 provide clinical supervision in the internship training program (1 supervisor from the WLA VA supervises MBSR at Sepulveda). All psychologists on staff are licensed, are from APA-accredited doctoral programs in clinical or counseling psychology, have completed an APA-accredited doctoral internship, and most supervisors have completed postdoctoral residency programs. Many hold clinical and academic appointments at local institutions, including the University of California, Los Angeles and Pepperdine University. Psychologists at the Sepulveda VA engage in a variety of roles in interprofessional outpatient medical and mental health settings, with many staff members involved in program leadership positions.

In addition to the clinical internship, the Psychology training program provides training for up to 6 practicum students each year, most of whom are from local doctoral programs. In addition, we have two postdoctoral residency specialty areas – Trauma and Primary Care Mental Health Integration/Behavioral Medicine (PCMHI/B-Med). There are also two other postdoctoral residency positions available to psychology trainees at Sepulveda which are not under the Psychology Department. Both the positions are two years long and are 75% research/25% clinical positions – one is in the Women's Health Clinic, and the other is in the Geriatric Research Education and Clinical Center (GRECC). Interns will have the opportunity to work closely with practicum students and residents during the internship year.

TRAINING AIMS, MODEL, AND PROGRAM PHILOSOPHY:

The aim of the Sepulveda doctoral internship in health service psychology is to promote competencies necessary for postdoctoral or entry-level psychology positions in healthcare settings specializing in the assessment and treatment of patients with behavioral and mental health problems. The Internship is a generalist program based on the practitioner-scholar model. We provide a broad range of training opportunities and offer close supervision and competency-based training in a highly collegial setting. Our goal is to provide each intern with a breadth of training experiences in assessment, intervention, and consultation with a diverse selection of patients in medical and mental health settings.

The training model reflects our philosophy that psychological practice is based on the science of psychology which, in turn, is influenced by the professional practice of psychology. We expect that interns will acquire a broad range of clinical and consultation skills that are informed by the scientific literature. We emphasize training in Evidence-Based Therapy Modalities. Nearly all of our 13 training supervisors are VA certified in one or more evidence-based practice modalities. Training opportunities exist in the following areas: Acceptance and Commitment Therapy (ACT); Biofeedback; Brief Behavioral Treatment for Insomnia (BBTi); Cognitive Behavioral Conjoint Therapy for PTSD (CBCT); Cognitive Behavioral Therapy (CBT) for anxiety, chronic pain, depression, insomnia, and substance use disorders; Cognitive Processing Therapy (CPT); Concurrent Treatment of PTSD and Substance Use Disorders Using Prolonged Exposure (COPE); Dialectical Behavior Therapy (DBT) skills; Exposure and Response Prevention (ERP); Imagery Rehearsal Therapy (IRT); Integrative Behavioral Couples Therapy (IBCT); Integrative Health and Healing modalities (IHH); Interpersonal Therapy (IPT); Mindfulness Based Relapse Prevention (MBRP); Mindfulness Based Stress Reduction (MBSR) and other Mindfulness approaches; Motivational Interviewing (MI); Problem Solving Therapy for Primary

Care; Prolonged Exposure (PE); Reminiscence Therapy; Skills Training in Affective and Interpersonal Regulation (STAIR), among others.

Interns at Sepulveda participate in six year-long training experiences/didactics (1. Clinical Research Seminar; 2. Diversity Seminar; 3. Trauma Seminar; 4. Neuropsychology Seminar; 5. Psychology Training Seminar; and 6. Supervision Seminar) and three, 4-month rotations throughout the year from the following (1. Addictive Behaviors Clinic; 2. Health Psychology: Behavioral Medicine; 3. Health Psychology: Geriatrics; 4. Mental Health Clinic; 5. Primary Care Mental Health Integration; and 6. Women's Health Clinic). We also offer three elective placements from which interns must choose at least two: (1. ACT Seminar [6 months]; 2. Couples Seminar [full year]; and 3. Insomnia Clinic [6 months]). The schedule is designed so that trainees can choose all three electives, if desired. If fewer than three electives are chosen, interns can apply 4 hours per week toward other training activities (described in greater detail later).

Staff at the Sepulveda VA believe in and respect the individuality of interns, honoring the diversity of their personal and professional background, skills, and interests. We recognize and appreciate the individual nature of their aspirations. The internship itself is structured to allow flexibility and to facilitate individualized training experiences. Supervision is developmentally sensitive with more intensive supervision at the beginning of the internship and at the start of each new clinical activity, with the goal of increasing the interns' independence as their knowledge and skills develop over time. Supervision takes place through a variety of modalities including: co-therapy in which the intern and supervisor work together, direct observation, audiotape review, review of written notes, and case report. By the completion of internship, our expectation is that interns will be well prepared to function at a sufficiently autonomous level required for a supervised entry-level position or a postdoctoral residency program.

Internship Competencies:

The APA Commission on Accreditation requires that all trainees in APA accredited programs develop specific competencies as part of their preparation for practice in health service psychology. Interns must demonstrate increasing competence in the following nine profession-wide competencies over the course of the year. The broad range of clinical and demographic diversity in our training setting provides an exceptional environment for developing these competencies.

1. Research – interns will demonstrate the substantially independent ability to critically evaluate and disseminate research or other scholarly activities (e.g., case conference, presentation, publications) at the local (including the host institution), regional, or national level.
2. Ethical and legal standards – interns will demonstrate knowledge of and act in accordance with each of the following: (i) the current version of the APA Ethical Principles of Psychologists and Code of Conduct; (ii) Relevant laws, regulations, rules, and policies governing health service psychology at the organizational, local, state, regional, and federal levels; and (iii) relevant professional standards and guidelines. Interns will recognize ethical dilemmas as they arise and apply ethical decision-making processes in order to resolve the dilemmas. Interns will conduct themselves in an ethical manner in all professional activities.
3. Individual and cultural diversity – interns will demonstrate understanding of how their own personal/cultural history, attitudes, and biases may affect their understanding and interaction with different people. Interns will demonstrate knowledge of the current theoretical and empirical

knowledge base as it relates to addressing diversity in all professional activities including research, training, supervision/consultation, and service. Interns will integrate awareness and knowledge of individual and cultural differences in the conduct of professional roles (e.g., research, services, and other professional activities). Interns will apply a framework for working effectively with areas of individual and cultural diversity not previously encountered. Interns will learn to work effectively with individuals whose group membership, demographic characteristics, or worldviews create conflict with their own. They will demonstrate the ability to independently apply their knowledge and demonstrate effectiveness in working with the range of diverse individuals and groups encountered during residency, tailored to the learning needs and opportunities consistent with the program's aim(s).

4. Professional values and attitudes – interns will behave in ways that reflect the values and attitudes of psychology, including integrity, deportment, professional identity, accountability, lifelong learning, and concern for the welfare of others. They will engage in self-reflection regarding their personal and professional functioning; engage in activities to maintain and improve performance, well-being, and professional effectiveness. Interns will be encouraged to actively seek and demonstrate openness and responsiveness to feedback and supervision. They will be expected to respond professionally in increasingly complex situations with a greater degree of independence as they progress across levels of training.
5. Communication and interpersonal skills – interns will develop and maintain effective relationships with a wide range of individuals, including colleagues, communities, organizations, supervisors, supervisees, and those receiving professional services. They will produce and comprehend oral, nonverbal, and written communications that are informative and well-integrated; demonstrate a thorough grasp of professional language and concepts. Interns will demonstrate effective interpersonal skills and the ability to manage difficult communication well
6. Assessment – interns will select and apply assessment methods that draw from the best available empirical literature and that reflect the science of measurement and psychometrics; collect relevant data using multiple sources and methods appropriate to the identified goals and questions of the assessment as well as relevant diversity characteristics of the service recipient. They will interpret assessment results, following current research and professional standards and guidelines, to inform case conceptualization, classification, and recommendations, while guarding against decision-making biases, distinguishing the aspects of assessment that are subjective from those that are objective. Interns will communicate orally and in written documents the findings and implications of the assessment in an accurate and effective manner sensitive to a range of audiences.
7. Intervention – Interns will establish and maintain effective relationships with the recipients of psychological services. They will develop evidence-based intervention plans specific to the service delivery goals. They will implement interventions informed by the current scientific literature, assessment findings, diversity characteristics, and contextual variables. Interns will demonstrate the ability to apply the relevant research literature to clinical decision making. They will be expected to modify and adapt evidence-based approaches effectively when a clear evidence-base is lacking. Interns will evaluate intervention effectiveness and adapt intervention goals and methods consistent with ongoing evaluation.
8. Supervision – interns will apply supervision knowledge in direct or simulated practice with psychology trainees, or other health professionals. Examples of direct or simulated practice examples of supervision include, but are not limited to, role-played supervision with others, and peer supervision with other trainees.

9. Consultation and interprofessional/interdisciplinary skills – interns will demonstrate knowledge and respect for the roles and perspectives of other professions. They will apply this knowledge in direct or simulated consultation with individuals and their families, other health care professionals, interprofessional groups, or systems related to health and behavior.

Interns are formally evaluated on these nine areas of competence at the mid-year and end-of-year points for the year-long experiences, at the end of each 6-month elective, and at the end of each rotation, on a trimester basis. In addition to these general competencies, each rotation has specific goals and requirements, which will be communicated at the outset of the training experience.

Program Structure

The doctoral internship is structured to allow maximum flexibility and to facilitate individualized internship experiences. The interns are involved in 15 hours per week of seminars/didactics and 12-14 hours per week in their clinical rotations. Interns have 8 hours per week to apply to elective activities. They must choose at least 2 electives in which to participate, but the schedule can accommodate all 3 electives, if desired. If 2 electives are chosen, interns can apply the remaining hours (4 hours/week) to a number of different training activities, such as adding time to their rotations, taking on additional assessments, taking on additional trauma patients, etc. Three to five hours of unscheduled time is included in the schedule each week for administrative tasks and/or preparation time. Preferences of incoming interns are the primary factors in determining the schedule and training plan.

YEAR-LONG SEMINARS/DIDACTICS

Interns will be involved in six year-long seminars/didactics, which require a time commitment of **15 hours per week**. Required year-long experiences are as follows:

1. Clinical Research Seminar
2. Diversity Seminar
3. Neuropsychology Seminar
4. Psychology Training Seminar
5. Supervision Seminar
6. Trauma Seminar

CLINICAL ROTATIONS:

The internship program also consists of three clinical rotations, which requires a time commitment of **12-14 hours per week** for about four months each. For each rotation, interns are assigned a primary supervisor who will be working in that same setting. Currently, six clinical rotations are offered:

1. Addictive Behaviors Clinic (ABC)
2. Health Psychology: Behavioral Medicine (Health)
3. Health Psychology: Geriatrics (Gero)
4. Mental Health Clinic (MHC)
5. Primary Care Mental Health Integration (PCMHI)
6. Women's Health Clinic (WHC)

ELECTIVES: (Choose 2 or 3 of these elective training experiences)

1. Acceptance and Commitment (ACT) Seminar (4 hours per week for 6 months)
2. Couples Seminar (4 hours per week for a full year)
3. Insomnia Clinic (4 hours per week for 6 months)

As noted, if 2 electives are chosen, the remaining 4 hours/week can be applied to other available training activities.

In addition to the seminars and practica, there are numerous educational opportunities at Sepulveda. There are weekly colloquia in Geropsychology and Geriatrics, Grand Rounds in Medicine, and full-day workshops offered for GLA psychologists.

During the year, each intern will have the opportunity to present his/her work in a colloquium format for the psychology department. The presentations will include one presentation on the intern's research and one case presentation.

SUPERVISION:

Interns will have a number of different supervisors at any one time, but they will have three primary supervisors throughout the year, which is dictated by which rotation they are on. They will receive a minimum of four hours of supervision per week, at least two hours of which includes individual face-to-face supervision, one with the primary supervisor and the other with delegated supervisors. At least two hours per week will include group supervision with primary/delegated supervisors. The program employs a developmental model of training; there is more intensive supervision at the outset of the internship and at the beginning of each new rotation, with the goal of increasing the interns' independence and ability to manage increasingly complex situations as their knowledge and skills develop. Supervision takes place through a number of different modalities, including co-therapy, direct observation, audiotape review, case presentations, role plays/response to vignettes, review of written work, review of test data, observations in interdisciplinary team meetings, and feedback from other staff members. Interns have the opportunity to observe supervisors providing services in many settings, especially at the outset of the rotation, and frequently serve as co-facilitators for group interventions.

EVALUATION:

Interns are asked to complete a self assessment at the beginning of the training year and again at the midpoint. This is done to promote self reflection, to identify gaps in training, and to develop goals and a plan for the internship year. The Internship Program encourages ongoing feedback among interns, supervisors, and the Training Committee. Staff members review interns' progress at monthly staff meeting. Supervisors and interns complete formal, written, competency-based evaluations at the mid-point and end-point of the year-long experiences and at the end of each rotation and six-month elective with the expectation that feedback is an ongoing process throughout the year. These evaluations encourage communication, identify strengths and weaknesses, and set goals for training. Interns are required to complete evaluations of their supervisors, the rotations, the didactics, and their elective placements. The Training Program also solicits feedback from interns on programmatic issues informally throughout the year. Interns are scheduled to meet with the Director of Training on a monthly basis to discuss any problems, concerns, or suggestions for program improvement. Interns complete a formal program evaluation and an exit interview with the Director of Training at the completion of the year.

Sepulveda's goal is to provide a successful and rewarding internship experience for all of our interns. The staff is highly committed to training, and we work to tailor the internship to meet each intern's individual interests, needs, and goals.

REQUIREMENTS FOR COMPLETION

In order to maintain good standing in the program, interns must:

1. Abide by the APA Ethical Principles and Code of Conduct and all VA policies, rules, and regulations
2. Obtain ratings of 3 (“requires close supervision on advanced tasks”) or higher on 80% of items in each of the nine core competency areas, with no serious ethical violations at the mid-point of the year.
3. Meet all administrative requirements

Criteria for Successful completion of internship:

1. Completion of 2080 hours of supervised professional experience, to be completed in one year of full-time training
2. It is required that a minimum of 25% of the intern’s worked hours be in direct patient care (10 hours of face-to-face care in a 40 hour/week)
3. Satisfactory performance in all nine clinical competency areas. It is expected that as interns gain in knowledge and skill during the internship year, they will be able to carry out more advanced tasks with greater independence. Successful completion of internship is determined by ratings of '4' (“Ready for Entry-Level Practice”) or higher on 100% of items in all nine clinical competency areas, with no areas requiring remediation and no serious ethical violations.
4. Didactic Training. Interns are required to attend required Psychology Seminars and Psychology Department workshops. In addition, interns must attend educational activities required on their rotations.

YEAR-LONG SEMINARS/DIDACTICS

CLINICAL RESEARCH SEMINAR

This is a monthly, 60-minute seminar attended by interns and residents. Content focuses on developing a knowledge base for the use of research in clinical practice. Specific topics include: quality improvement, understanding and using clinical trials to inform practice, and understanding how clinical practice guidelines are developed from research findings.

Coordinator:

Jennifer Martin, Ph.D., FAASM, DBSM

DIVERSITY SEMINAR

This is a twice-monthly, 60-minute seminar attended by interns and residents. The purpose of this seminar is to increase trainees' cultural awareness and competence using a number of methods, such as formal presentations, experiential exercises, role plays, and assigned readings. Trainees will learn how their own personal/cultural history, attitudes, and biases may affect their understanding and interaction with different people. Trainees will learn to work effectively with individuals whose group membership, demographic characteristics, or worldviews create conflict with their own. Guest lecturers are invited to speak on topics, such as ethnic minority groups, immigrants, LGBT considerations, returning students, and women Veterans, among others.

Coordinators:

Grace Rosales, Ph.D.

Carissa Klevens-Thomas, Ph.D.

TRAUMA SEMINAR

This is a weekly, 90-minute seminar attended by interns. It includes lecture, training, application, and supervision in the treatment of PTSD using treatments recommended by the 2017 VA/DOD Clinical Practice Guidelines. Seminar will involve discussions about the complex presentation of many of the Veterans being seen for trauma-related treatment. This will include exploration and consideration of the interplay between symptoms of PTSD and pain, substance use, sleep problems, and depression. Interns will be given the opportunity to work with Veterans exposed to a range of traumas, including combat, sexual, and childhood. This weekly seminar specifically includes training in the assessment of PTSD through use of the Clinical Administered PTSD Scale – 5 (CAPS-5) and in the treatment of PTSD with Cognitive Processing Therapy (CPT) and Prolonged Exposure (PE). Interns are expected to work with two patients outside of the seminar time. In addition to the seminar/group supervision, interns will also meet with one of the coordinators for individual supervision.

Coordinators:

Alex Barrad, Psy.D.

Melissa Lewis, Ph.D.

Shana Spangler, Psy.D.

NEUROPSYCHOLOGY SEMINAR

This is a weekly, two-hour seminar attended by interns. It provides a rich learning environment in all kinds of assessment with particular focus on the neuropsychological assessment of adults with known or suspected neurologic injury or disease. The approach emphasizes the hypothesis-testing method, which takes from both standard test batteries as well as a variety of specialized techniques that evaluate intellectual functioning, attention, processing and psychomotor speed, language functioning, visuospatial functioning, memory, and executive functioning, etc. Training will include basic and correlative neuroanatomy, brain-behavior relationships, and neurologic syndromes. The patients assessed include male and female adult outpatients suffering from a broad array of neurocognitive and neurobehavioral disorders. Interns will learn a range of techniques, from brief screenings to comprehensive batteries. Psychodiagnostic assessment is also a focus in this seminar, and participants will develop proficiency in the interpretation of personality measures. An average weekly commitment of **8 hours** per week is anticipated (including seminar time). Patients are scheduled outside of seminar time.

The didactic portion of the course includes presentations by the course instructor and case discussions. Interns will give case presentations on an ongoing basis throughout the year in the context of group supervision. The practicum portion of the course consists of a minimum of six evaluations per year; however, interns are encouraged to complete more than that if desirous of additional assessment experience. Additionally, interns will co-facilitate feedback sessions with the supervisor to help the patients and their family members understand the results of the clinical assessment.

Coordinator:

Alexis Kulick, Ph.D., ABPP/CN

PSYCHOLOGY TRAINING SEMINAR

This is a weekly, 60-minute seminar on a broad range of issues related to professional development, attended by interns and residents. Speakers are different each week and topics include: Laws and Ethics, Licensure Preparation, Military Culture, Wellness/Self Care, How to Start a Private Practice, and Hiring Opportunities in the VA, among others. Additionally, the interns and residents will be responsible for providing one presentation on research and one formal case presentation in the context of this seminar toward the end of the training year.

Coordinator:

Melissa Lewis, Ph.D.

SUPERVISION SEMINAR

This is a monthly, 60-minute seminar attended by interns and residents designed to provide training in competency-based clinical supervision. The seminar content is comprised of a combination of formal presentations, group discussions, vignettes, role plays, and assigned readings. Guest lecturers are invited to present on a number of different topics including the supervisory relationship; assessment, evaluation, and feedback; diversity considerations; ethical, legal, and regulatory considerations, among others.

Coordinator:

Melissa Lewis, Ph.D.

ROTATIONS

Each intern completes three rotations over the internship year. There are six rotations, and it is expected that all six are filled each trimester (rotations cannot accommodate more than one intern at a time). Time commitments for rotation-related clinical activities are **12-14 hours per week**.

ADDICTIVE BEHAVIORS CLINIC

The Addictive Behaviors Clinic (ABC) offers an Intensive Outpatient Program (IOP) to male and female Veterans, ages 20 to 80, who misuse alcohol, heroin, cocaine, amphetamines, and/or other substances. Most patients have comorbid psychological problems. Patients in the IOP are required to commit to a minimum of 16 weeks of 3 days/week treatment and many continue in aftercare treatment for a year or longer. Therapeutic interventions are recovery oriented and include evidence-based treatment of early recovery and relapse prevention skills through the Matrix model of treatment, as well as DBT skills-based emotions management groups and CBT skills-based groups. Veterans develop a network of community and support.

Interns on this rotation participate as junior colleagues. Within the IOP, they lead psychoeducation groups, small and large therapy groups, administer and interpret self-report measures, and conduct individual psychotherapy while working within an interdisciplinary team to make both administrative and treatment decisions. Interns are encouraged to teach and to model adaptive behaviors, including self-awareness, boundary management, and accurate empathy. In addition to the IOP, trainees may also participate in harm reduction-based groups, which allow for contrast from the abstinence-based component of training, giving the trainee a chance to learn how to match treatment approaches with patient needs.

The treatment team is drawn from various disciplines, including nursing, recreation therapy, psychiatry, social work, peer support, and psychology. Learning to coordinate interdisciplinary care is an important focus of training on the rotation. Trainees are encouraged to develop and to model effective staff interactions, which patients can utilize to improve their own peer relationships.

Interns on the ABC rotation will facilitate the following groups:

Matrix Model Groups

- The Matrix Model is an evidence-based group treatment that focuses on early recovery and relapse prevention skills with the use of cognitive behavioral, motivational enhancement, psychoeducation, and 12-step facilitation techniques. Veterans attend three days per week, and this is the foundation of the IOP.

Aftercare Group

- This is an ongoing group for Veterans who have completed the IOP, to provide extended support for Veterans in longer-term sobriety. While this group is more supportive in nature, topics are typically informed by Matrix topics.

Emotions Management

- This group is based on Dialectical Behavior Skills (DBT) Training (Linehan, 2014). Group content will focus on core mindfulness, interpersonal effectiveness, emotion regulation, and distress tolerance skill building. The group has been modified to be ongoing and open.

Mindfulness-Based Relapse Prevention

- This group is based on the Mindfulness-Based Relapse Prevention for Addictive Behaviors (Bowen, et al., 2011) protocol, modified to be an ongoing and open group in IOP. This group integrates mindfulness meditation practices with traditional relapse prevention skills.

The following group is optional pending intern interest:

Healthy Habits

- This group is based on the Group Treatment for Substance Abuse: A Stages-of-Change Therapy Manual (Velasquez, et al., 2001) protocol and CBT for Substance Use Disorders Among Veterans (DeMarce, et al., 2014), modified to be an open drop-in group. This group offers strategies based on the transtheoretical model of behavior change for Veterans who are thinking about reducing or modifying their current use of substances.

The goals of psychology training on the rotation are to:

1. Understand and implement the techniques of abstinence-based, relapse-prevention and harm-reduction approaches to treat substance use disorders.
2. Competently obtain drug histories while assessing co-morbidities.
3. Comprehend issues and treatment strategies for dual-diagnosis patients with special emphasis on PTSD.
4. Improve group therapy skills.
5. Understand the role of consistency and modeling in team cohesion and with patients.

Clinical Supervisors:

Melissa Lewis, Ph.D. (Primary Supervisor)

Aleksey Zvinyatskovskiy, Ph.D.

HEALTH PSYCHOLOGY: BEHAVIORAL MEDICINE

The Health Psychology: Behavioral Medicine rotation aims to introduce trainees to the foundational competencies expected in the doctoral-level health psychologist. This includes developing skills in the assessment of psychological concerns related to the interplay between physical and mental health, developing expertise in the implementation of empirically-supported brief interventions, and developing the professional acumen necessary for working within interprofessional teams. The goal of this rotation is to provide the intern with the skill and experience in consultation, assessment, intervention, and education via direct experience with Veterans suffering from acute and chronic medical illnesses. Interns serve as collaborative members of interprofessional teams in which psychological skills and mind-body medicine are valued.

The clinical settings of the health psychologist are diverse; however, the competencies are similar across settings. These competencies include assessment strategies for individuals and systems, education, brief empirically-based interventions, evaluation of behavioral risk factors, consideration of the biopsychosocial factors that impact adherence to treatment, and consultation with patients, their family members and/or other providers on interprofessional teams. The health psychologist provides a variety of psychological interventions, such as group and brief individual psychotherapy, stress management, education and health-promotion activities, and support groups with a strong focus on evidence-based treatments. The health psychology rotation supervision team works closely with interns to provide the observation, modeling, and supervision required to develop competency in health psychology assessment and intervention skills.

Specific elements of the health psychology rotation include:

Biofeedback

- Individual psychotherapy caseloads can include Biofeedback in which the following can be measured: breath pace (respiration), muscle activity (Electromyography), heart rate and heart rate variability (HR and HRV), peripheral finger temperature (thermistors), and galvanic skin response (GSR). Interns will learn how to use and interpret the measurements and how to teach Veterans skills for modulating the processes being measured.

Coping with Chronic Pain Group

- Interns will co-facilitate this 6-week group with the PCMHI/B-Med resident. Interns will provide psychoeducation about the biopsychosocial model and factors that affect chronic pain. Interns will train patients to use pain management strategies using techniques from both CBT and ACT approaches.

Coping with Medical Illness Group

- Interns will provide time-limited group therapy to promote self-care and manage stress in Veterans with chronic medical conditions and comorbid mood and anxiety spectrum disorders. Interventions are primarily cognitive behavioral and skills based. Each session will focus on a particular topic related to coping with medical illness, such as communication skills with providers, medication management, the relationship between stress and health, sleep hygiene, pain management, and valued living. Interns are encouraged to present on other relevant topics of interest to them.

Mindfulness Based Stress Reduction (MBSR) - elective within this rotation only during the first and third trimesters

- GLA is a national Center for an Innovation program, which has funded the creation of a Center for Integrative Medicine and Healing. This pioneering program is introducing Mindfulness Based Stress Reduction (MBSR). Interns may choose to participate in the facilitation of this 8-week MBSR group with a certified trainer.
- *For trainees who are not able to engage in the MBSR elective, there is the option to facilitate the **Mindful Living** group.* This group is for graduates of the MBSR or Intro to Relaxation and Meditation groups and provides a 40-minute formal mindfulness practice as well as discussion about how patients are incorporating mindfulness into their daily lives.

Polytrauma Program/Traumatic Brain Injury

- This program serves Veteran and active duty military returning from Iraq and Afghanistan who have multi-system injuries, including traumatic brain injury, typically as a result of blast exposure. Interns participate in neuropsychological and psychodiagnostic assessment, provide feedback sessions, facilitate treatment planning/recommendations, and provide education and consultation to the TBI clinic treatment team.

Progressive Tinnitus Management Program

- Tinnitus research at the VA National Center for Rehabilitative Auditory Research (NCRAR) has led to the development of an interdisciplinary Progressive Tinnitus Management (PTM) program. Audiologists and Mental Health providers work together to deliver portions of the protocol. The psychology intern will work directly with the Audiologists to provide psychoeducation and management skills to patients presenting with tinnitus.

Time-Limited Individual Psychotherapy

- Interns will provide time-limited psychotherapy to Veterans with comorbid physical and mental health problems and to implement various evidence-based approaches and interventions. Patients present with a range of medical diagnoses and both preexisting and newly diagnosed mental health issues.

Clinical Supervisors:

Alexis Kulick, Ph.D., ABPP/CN

J. Greg Serpa, Ph.D.

Sarah Duman Serrano, Ph.D., BCB (Primary Supervisor)

HEALTH PSYCHOLOGY: GERIATRICS

The Health Psychology: Geriatrics rotation incorporates training in the Adult Day Health Care (ADHC) program, Community Living Center (CLC), and the Hospice unit.

ADHC PROGRAM, COMMUNITY LIVING CENTER (CLC), AND LONG-TERM CARE

Training in outpatient geriatric psychology and rehabilitation occurs in the Adult Day Health Care (ADHC) Unit, housed within Building 99, the Nursing Home. The ADHC Unit offers comprehensive interdisciplinary treatment involving such disciplines as Rehabilitation Medicine, Nursing, Pharmacy, Dietetics, Psychology, Speech and Audiology, Geropsychiatry, Social Work, and Occupational and Recreational Therapies. The patient population is predominantly male and middle-aged to very elderly. Some of the more common diagnoses include: stroke, traumatic brain injury, and Parkinson's disease. Less common diagnoses are also seen, such as Huntington's disease and Multiple Sclerosis. Most have no prior psychiatric histories, but many patients present with depression and social isolation, secondary to their altered functional status. All have disabilities in areas such as ambulation, speech, cognition, and activities of daily living.

The Community Living Center (CLC) and Hospice units are inpatient programs at the Nursing Home and offer opportunities to work with families and patients facing terminal diseases and end of life concerns. Among the highest rates of mental illness in this country are in nursing homes, yet treatment historically has often been very limited in this setting. This is particularly true for non-pharmacological interventions. Among the most complex psychological problems in nursing homes are behavioral and other psychological symptoms (e.g., aggression, agitation, wandering) associated with Major Neurocognitive Disorders and other neuropsychiatric conditions. Over the last few decades, there has been increasing empirical support for evidence-based psychosocial interventions for these problems. Similarly, in recent years, there has been increasing efforts in nursing homes to enhance resident well-being and reduce negative behaviors by changing the treatment culture to emphasize more home-like and person-centered principles.

Within this program, the intern will provide individual psychotherapy to patients in the ADHC, the Nursing Home, and Hospice Unit as well as participate in interprofessional team meetings, treatment planning, and co-facilitation of the following groups:

Caregiver Support Group

The caregiver support group is offered through the ADHC program once a month. It is for families, partners, and other caregivers of adults who are enrolled in the ADHC program and are dealing with disorders such as major neurocognitive disorders, stroke, brain injury, and other chronic debilitating health conditions. The group offers a safe place to discuss the stresses, caregiver burnout, challenges, and rewards of providing care for a significant other.

Living with Life Transitions Therapy Process Group

Veterans attend this weekly process group facilitated by the psychology intern. The focus of the group is different each week and can include topics such as coping with recent life transitions, difficult emotions, and discussing other issues that accompany aging and living with a medical condition.

Reminiscence Group

- Reminiscence Therapy is an evidence-based treatment applied with the geriatric population that promotes self-understanding and preserves personal and collective history. It increases the ability to communicate and practice self-expression, social interaction through the sharing of experiences, feelings of belonging and togetherness, individual identity, and unique experiences of each person. Reminiscence therapy has been proven to increase self-worth, reduce apathy and confusion, alleviate depression, increase life satisfaction, and improve self-care.

Weight Management Group

- The Weight Management Group is geared to helping older veterans with multiple health problems and difficulty with mobility identify ways to lose weight and to stay healthy and productive. The group is focused on achieving a healthy lifestyle, setting specific, measurable, and achievable goals versus imposing rigid dietary restrictions. Veterans learn to identify feelings that may lead to over eating, and they discuss strategies, such as reading labels, portion control, and incorporating exercise into their lives.

Role of the Intern:

The intern will provide a full range of psychological services to patients and their families, including screening, psychological, cognitive, and capacity assessments, psychotherapy, and prevention-oriented services. Mental health treatment and prevention-oriented services will emphasize evidence-based and best practice approaches. The intern will be involved in the following specific areas:

- Promoting the delivery of evidence-based psychosocial and environmental interventions for reducing behavioral and psychological symptoms, such as agitation, aggression, and wandering, associated with neurocognitive impairment and other neuropsychiatric and mental health conditions.
- Conducting initial intakes which will include brief cognitive and depression screens along with suicide risk assessment. The screening for cognitive deficits will also be used to address specific functional questions or to determine if a referral for a complete neuropsychological assessment is needed.
- Assisting in performing capacity/competency assessments when there are questions about a resident's ability to make medical decisions, perform other specific functions, or live independently. Assessing residents' understanding of advanced directives and other forms of consent and assisting staff in determining how to present treatment options and other such material to residents in a format they can understand.
- Providing individual and group interventions to support residents that are coping with feelings of grief and loss associated with disability, adjustment to the nursing home environment, and other life transitions.
- Implementing behavioral medicine interventions to manage pain, disability, address sleep problems, facilitate weight loss, promote smoking cessation, and enhance medical compliance.
- Promoting communication and interactions between medical team members, residents, and their families to facilitate the medical treatment process;

Clinical Supervisor:

Falguni Chauhan, Ph.D. (Primary Supervisor)

MENTAL HEALTH CLINIC (MHC)

The **Mental Health Clinic (MHC)** is an interprofessional clinic designed to serve the mental health needs of Veterans. Disciplines include primarily psychiatry, psychology, social work, and nursing. In this training setting, interns will work with Veterans presenting with a variety of different diagnoses. Referrals come from psychiatry and social work within the MHC, Primary Care Mental Health Integration providers, treatment providers outside of mental health, and from other VA systems. Intern activities include functioning within the context of an interprofessional team to conduct weekly initial assessments and provide individual and group psychotherapy to a wide range of patients. Treatment is individualized to assist Veterans in achieving their personal goals in the community.

Interns will provide time-limited psychotherapy using various evidence-based approaches and interventions, including Acceptance and Commitment Therapy (ACT), Cognitive Behavioral Therapy (CBT), and Exposure and Response Prevention (ERP) modalities, among others. Patients present with a range of preexisting and newly diagnosed mental health issues, including depression, anxiety disorders, psychotic disorders, and personality issues, among others.

Interns may be involved in facilitating the following groups:

ACT Drop-In Group

- This group uses a flexible application of Acceptance and Commitment Therapy. This is a 10-week group, in which Veterans are seen for a range of clinical presentations that include depression, anxiety, trauma/PTSD, and/or personality features. Interns will learn how to conduct in-the-moment functional analysis and apply relevant core processes of ACT.

Anger Management

- This is a 16-week, evidence-based, present-focused approach to psychotherapy that helps patients learn to communicate their anger in a clear and direct way that is not destructive or aggressive. The focus is on issues participants are dealing with in the present, and they will learn anger management techniques with the goal of developing self-control over their actions.

CBT for Anxiety

- This is a 12-week, evidence-based, present-focused approach to psychotherapy that helps patients to identify and modify dysfunctional thinking patterns/cognitions, maladaptive emotions, and behaviors in order to assist them in resolving current problems related to anxiety. The group introduces Veterans to interoceptive exposures to physical symptoms, Exposure and Response Prevention (ERP) approaches, and personalized exposure hierarchies. Veterans are seen on a weekly basis.

Managing Behavior and Affect

- This group is based on Dialectical Behavior Skills Training (Linehan, 2014). Group content will focus on core mindfulness, interpersonal effectiveness, emotion regulation, and distress tolerance skill building.

Clinical Supervisors:

Charles DeLeeuw, Ph.D.

Carissa Klevens-Thomas, Ph.D. (Primary Supervisor)

Sarah Duman Serrano, Ph.D., BCB

PRIMARY CARE MENTAL HEALTH INTEGRATION

Interns will engage in co-located collaborative care on an interdisciplinary primary care team. They will provide brief (30-minute) functional assessments to patients with a wide variety of presenting problems who may be experiencing their first contact with mental health services or who may be re-establishing care. Interns will have the chance to conduct intake interviews, generate joint treatment plans with psychiatrists, primary care providers, and other healthcare professionals, and perform “curb side” consults, as appropriate. Interns will actively engage in patient triage, determining whether patients should be seen in primary care or referred for more extensive treatment through specialty mental health services. If additional treatment is warranted, the intern will make the appropriate referral(s). Within primary care, the intern will deliver brief treatments to patients with mild to moderate psychopathology. Treatments delivered in PCMHI may target anxiety, depression, insomnia, history of trauma, adjustment disorders, chronic pain, and psychological factors related to chronic medical conditions. Additionally, interns may engage in diagnostic clarification and treatment planning to aid in making appropriate referrals to specialty mental health.

Patients seen in the PCMHI clinic are treated on a brief basis (4-6, 30-minute sessions) using a variety of evidence-based treatment approaches, which can include skills-based interventions, Cognitive Behavioral Therapy (CBT), Acceptance and Commitment Therapy (ACT), Biofeedback, Mindfulness-based psychotherapy, Cognitive Behavioral Therapy for Insomnia (CBT-I), and Motivational Interviewing (MI).

Activities for the intern participating in this rotation will involve multiple weekly intakes, brief individual psychotherapy, group psychotherapy, and walk-in evaluations, as appropriate.

The intern will have the opportunity to co-facilitate the following groups:

Introduction to Relaxation

- This transdiagnostic group educates patients on the physiological effects of unmanaged stress and helps them to build skills in a variety of evidence-based mind-body approaches. This can be effective in reducing subjective stress, depression, anxiety, physical pain, hypertension, insomnia, etc. Patients begin with the introductory group and are then offered their choice of weekly continuing practice yoga or meditation groups for skills enhancement. There is a new cycle every 4 weeks in order to provide prompt access to services.

MOVE – Weight Management for Veterans

- This national, evidence-based program fully integrates psychology into a multidisciplinary team of medical providers, dieticians, and health educators treating obesity. Interns provide individual and group interventions incorporating motivational enhancement strategies and relevant psychoeducation.

Clinical Supervisors:

Sarah Duman Serrano, Ph.D., BCB

Aleksey Zvinyatskovskiy, Ph.D. (Primary Supervisor)

WOMEN'S HEALTH CLINIC (WHC)

The Women's Health Clinic (WHC) at the Sepulveda VA is a comprehensive women's health care center that provides primary and specialty (e.g., OB/GYN) care, as well as psychiatry, psychology, and social work services. The Women Veteran population seen in the WHC is diverse in terms of age, race, ethnicity, and sexual orientation. Women Veterans present for mental health treatment with a range of psychiatric diagnoses such as mood disorders, anxiety disorders, substance use disorders, and personality disorders. A subset of women Veterans presents with combat-related trauma, military sexual trauma (MST), and other non-military-related trauma (e.g., childhood abuse). Many of the women Veterans seen in the WHC have served in recent combat zones. Common medical diagnoses include musculoskeletal disorders, including chronic pain, heart disease, and diabetes. Many women also present either during or post-pregnancy for mental health services. Interns have the opportunity to provide services in the context of an interprofessional team and work closely with providers from multiple disciplines.

Interns on the WHC rotation will conduct weekly comprehensive mental health initial assessments which are designed to increase their diagnostic and interviewing skills as well as build strong treatment-planning abilities. Interns will also provide individual psychotherapy to female veterans using evidence-based interventions such as Cognitive-Behavioral Therapy, Cognitive Processing Therapy, Prolonged Exposure Therapy, and Dialectical Behavior Therapy. In addition, the intern will co-facilitate the following female-only groups:

Cognitive Processing Therapy Group for PTSD

- Interns will co-facilitate this 12-week evidence-based group treatment for PTSD with a Women's Health Clinic psychologist. The group is for female veterans who present with a diverse range of trauma exposure (e.g. MST, childhood abuse, combat exposure).

DBT Skills Group

- This group is based on Dialectical Behavior Skills (DBT) Training (Linehan, 2014). Group content focuses on core mindfulness, interpersonal effectiveness, emotion regulation, and distress tolerance skill building. Interns will co-facilitate this 17-week group with the Women's Health Clinic Postdoctoral Fellow and participate in weekly DBT Consultation Team with all members of WHC Psychology.

PTSD 101- Psychoeducational Group

- PTSD 101 is a 6-week psychoeducational and skills building group designed for those who are entering trauma treatment. Veterans will learn to better understand their diagnosis and learn skills to help manage symptoms of PTSD. Interns will co-facilitate this group with a Women's Health Clinic psychologist or Women's Health Clinic Postdoctoral Fellow.

STAIR (Skills Training for Affective and Interpersonal Regulation)

- STAIR is a group therapy program for people who are struggling with the after effects of trauma. STAIR helps by teaching skills that improve coping with one's emotions and navigating interpersonal relationships. Interns will co-facilitate this group with a Women's Health Clinic psychologist or Women's Health Clinic Postdoctoral Fellow.

The following groups are also run within the Women's Health Clinic and may be available pending intern interest:

Lesbian, Bisexual, Queer Women's Group

- This group is an ongoing process group for women who identify as LBQ. The group is designed to run as a process group informed by Yalom group psychotherapy techniques. The group provides a space for women to discuss their unique experiences as queer veterans of intersecting identities within a social political context. The intern will have an opportunity to co-facilitate this group with a WHC psychologist which will provide exposure to running a non-manualized group.

Psychotherapy Process Group

- This is an ongoing psychotherapy process group for women diagnosed with depression and/or anxiety. This group is encouraged for female veterans who have completed an evidence-based protocol treatment (either group or individual) for depression, anxiety or PTSD and continue to struggle with symptoms. The group is focused on here-and-now issues and is based on Yalom's group psychotherapy practice theory.

There is the possibility of participating in other groups within the WHC depending on each intern's areas of interest. In addition, interns may have the opportunity to start other psychotherapy groups that are appropriate for the treatment needs of women Veterans and that are of interest to them. Interns will attend the monthly Women's Health Interprofessional Staff Meeting. In addition, interns will receive individual supervision as well as participate in a weekly DBT Consultation group with psychology staff and trainees.

Clinical Supervisors:

Marissa Burgoyne, Psy.D. (Primary Supervisor)

Grace Rosales, Ph.D.

ELECTIVES

As noted, interns have **EIGHT** hours per week that they can apply to electives or to other training activities, such as adding time to rotations, taking on additional assessment cases, focusing on trauma work, etc. (pending approval of the training committee). Interns must select at least two elective activities, but the schedule can accommodate all three electives, if desired.

HALF-YEAR ELECTIVE IN ACT SEMINAR (4 hours/week)

ACT is a transdiagnostic third-wave cognitive-behavioral treatment that addresses human pain and suffering. Through mindfulness, metaphor, and various experiential exercises, Veterans are encouraged to accept feelings and thoughts, choose valued directions, and take action. Interns will learn ACT theory and the application with a range of diagnoses. Two patients will be scheduled during the seminar time. Supervisors will engage in direct supervision and give behaviorally-based feedback regarding sessions. Group supervision will occur immediately following the ACT sessions. In addition, individual supervision is available upon request.

Clinical Supervisors:

Charles DeLeeuw, Ph.D.

Aleksey Zvinyatskovskiy, Ph.D.

FULL-YEAR ELECTIVE IN COUPLES THERAPY SEMINAR (4 hours/week)

In this seminar, interns will learn to view couples as organizationally complex emotional systems in which members engage in repetitive transactions. Therapeutic interventions are directed at collaborating with couples as they, together, seek new solutions to previously unresolved conflicts. Interns will learn how to deliver Integrative Behavioral Couples Therapy (IBCT). A consultation room with a one-way mirror allows observers to view ongoing treatment as conducted by trainees or as demonstrated by the supervisor. Live supervision of trainees conducting therapy, co-therapy with supervisor and trainees, videotapes of master therapists, and continuous case conferences provide exposure to a variety of clinical situations and lead to enhanced clinical skills. Individual supervision is available to supplement group supervision. Aside from the initial session, patients will be scheduled outside of seminar time. It is expected that the intern will carry a case-load of two couples at a time.

Clinical Supervisor:

Falguni Chauhan, Ph.D.

HALF-YEAR ELECTIVE IN INSOMNIA CLINIC (4 hours/week)

After completing a two-day workshop, trainees will deliver Cognitive Behavioral Therapy for Insomnia (CBT-I) and other behavioral treatments for sleep disorders and nightmares within a primary care setting. Trainees and supervisors work closely with sleep medicine physicians and other healthcare providers to manage patients with multiple sleep-related difficulties.

Clinical Supervisors:

Alex Barrad, Psy.D.

Jennifer Martin, Ph.D., FAASM, CBSM

Shana Spangler, Psy.D.

Facility and Training Resources:

Interns are provided with office space and computers necessary for patient care and administrative responsibilities. They have access to the VA Medical Library services as well as VA Intranet and Internet resources for clinical work and research. The Psychology Department has a Psychology Assessment Lab, which includes a wide variety of psychological assessment instruments and test scoring programs.

Administrative Policies and Procedures:

Authorized Leave: The Sepulveda Ambulatory Care Center's policy on Authorized Leave is consistent with the national standard. In the course of the year, interns accrue 13 vacation days and 13 sick days (4 hours of vacation and 4 hours of sick time are accrued every two-week pay period) and 10 paid holidays. Interns may request up to 5 days (40 hours) of educational leave/administrative absence (AA) for off-site educational activities. The following professional activities qualify: defending one's dissertation, postdoctoral fellowship interviews, conferences, pre-licensure seminars, and workshops outside of GLA.

Stipend: The stipend for the training year is \$29,613

Benefits: VA interns are eligible for health insurance (for self, legally married opposite and same sex spouse, and legal dependents) and for life insurance.

Due Process: All trainees are afforded the right to due process in matters of problematic behavior and grievances. A copy of our due process policy is available on request.

Privacy policy: We will collect no personal information from you when you visit our Website.

Self-Disclosure: Our program sets no requirement for self-disclosure.

Family and Medical Leave: The internship program allows for parental leave as well as for leave in the event of serious illness. Family and Medical Leave are granted for the birth of a child and care of a newborn, or placement of a child with oneself for adoption or foster care; a serious health condition of a spouse, son or daughter, or parent; or one's own serious health condition. Interns are required to complete the full 2080-hour requirement; any leave time will result in an extension of the training contract. Interns are encouraged to address any requests for leave with the Director of Training as early as possible.

Reasonable Accommodations: It is the policy of VA to provide reasonable accommodations to qualified applicants and employees with disabilities in compliance with the Americans with Disabilities Act (ADA).

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

Barrad, Alex, Psy.D.

Training Roles: Supervisor, Co-Facilitator of Trauma Seminar

Training Activities: Trauma Seminar, Insomnia Clinic

Undergraduate Program: University of California, San Diego, 2007

Doctoral Program: PGSP-Stanford Psy.D. Consortium (Clinical), 2013

Doctoral Internship: VA Sepulveda Ambulatory Care Center, 2012-2013

Postdoctoral Residency: VA Loma Linda Healthcare System (Trauma), 2013-2014

Areas of Interest: Posttraumatic Stress Disorder, Treatment of Sleep Disorders, Evidence-Based Treatments, Substance Use Disorders

Certifications: Certified VA Acceptance and Commitment Therapy (ACT) and Prolonged Exposure (PE) Provider

Orientation: Cognitive-Behavioral, Integrative

Burgoyne, Marissa, Psy.D.

Training Roles: Supervisor, Section Chief for Women's Mental Health, GLA

Training Activities: Women's Health Clinic

Undergraduate Program: Brown University, 1994

Doctoral Program: Pepperdine University (Clinical), 2011

Doctoral Internship: VA Loma Linda, 2010-2011

Academic Affiliations: Adjunct Professor, Pepperdine University

Areas of Interest: Women's Health, Posttraumatic Stress Disorder, Anxiety Disorders, Readjustment Issues Among Student Veterans, Development and Implementation of Group Interventions, Evidence-Based Practice, Individual and Group Therapy.

Certification: Certified VA Cognitive Processing Therapy (CPT) Provider; Certified VA Prolonged Exposure Therapy (PE) Provider

Orientation: Cognitive-Behavioral

Chauhan, Falguni, Ph.D.

Training Roles: Supervisor; Couples Therapy Seminar Facilitator; Director of Psychology Practicum Program

Training Activities: Health Psychology: Geriatrics, Couples Therapy Seminar

Undergraduate Program: University of California Irvine, 1992

Graduate Program: Boston University, M.A., 1995

Doctoral Program: University of Houston (Counseling), 2007

Doctoral Internship: VA Sepulveda Ambulatory Care Center, 2006-2007

Areas of Interest: Geropsychology, Home Based Primary Care, Neuropsychology, Dementia, Alzheimer's Disease, Multiple Sclerosis, Posttraumatic Stress Disorder, TBI, Family Therapy, Caregiver Stress, Individual and Group Therapy.

Certifications: Certified VA Integrative Behavioral Couples Therapy (IBCT) and Cognitive-Behavioral Therapy for Insomnia (CBT-I) Provider

Orientation: Eclectic/ Integrative

DeLeeuw, Charles E., Ph.D.

Training Roles: Supervisor, Facilitator of ACT Seminar, Section Chief of Mental Health Clinic, SACC

Training Activities: ACT Seminar, Mental Health Clinic

Undergraduate Program: Hope College, 2005

Doctoral Program: Fuller Graduate School of Psychology (Clinical), 2011

Doctoral Internship: Pacific Clinics, Arroyo FSP, 2010-2011

Postdoctoral Residency: VA Pacific Islands Health Care System, PTSD & SMI, 2011-2012

Areas of Interest: Acceptance and Commitment Therapy

Certifications: VA Acceptance and Commitment Therapy (for Depression) Consultant & Regional Trainer

Orientation: Third Wave CBT

Duman Serrano, Sarah, Ph.D.

Training Roles: Supervisor; Local Evidence-Based Practice Coordinator

Training Activities: Health Psychology: Behavioral Medicine; Primary Care Mental Health Integration; Mental Health Clinic

Undergraduate Program: Yale University, 2000

Doctoral Program: USC Clinical Science (Clinical), 2010

Doctoral Internship: VA Sepulveda Ambulatory Care Center, 2009-2010

Postdoctoral Residency: Women's Health, UCLA/VA Greater Los Angeles, 2011-2012

Academic Affiliations: Clinical Instructor, David Geffen School of Medicine at UCLA

Areas of Interest: Health Psychology, Integrative Medicine, Mindfulness, Biofeedback, Psychology in Medical Setting, Evidence-Based Treatments, Women Veterans, Individual and Group Therapy.

Certifications: Board Certified in Biofeedback, iRest Yoga Nidra Level I Teacher, VA CALM Mindfulness Facilitator, VA CALM Self-Compassion Facilitator; Certified VA Acceptance and Commitment Therapy (for Depression) Provider

Orientation: Cognitive Behavioral, Third Wave, Integrative

Klevens-Thomas, Carissa Ph.D.

Training Roles: Supervisor, Diversity Seminar Co-facilitator

Training Activities: Mental Health Clinic

Undergraduate Program: California State University Northridge, 1996

Doctoral Program: University of Missouri, Kansas City, Ph.D. 2007

Doctoral Internship: University of Southern California, Student Counseling Services, 2006-2007

Postdoctoral Residency: Gateways Hospital, 2007-2008

Areas of Interest: Mindfulness, Recovery-Oriented Care, LGBTQI, Diversity and Multicultural Issues in Research and Psychotherapy, Evidence-Based Interventions, Crisis Negotiation, Substance Use, Eating Disorders

Certification: VA Cognitive Processing Therapy (CPT) Provider, VA Cognitive Behavior Therapy for Depression (CBT-D) Provider, VA Cognitive Behavior Therapy for Chronic Pain (CBT-CP) Provider, VA CALM Mindfulness Facilitator, VA CALM Self-Compassion Facilitator

Orientation: Cognitive Behavioral, Integrative

Kulick, Alexis D., Ph.D., ABPP/CN

Training Roles: Director of Psychology Training, Supervisor, Facilitator of Neuropsychology Seminar

Training Activities: Health Psychology: Behavioral Medicine (Polytrauma/TBI Clinic), Neuropsychology Seminar

Undergraduate Program: Brandeis University, 1996

Doctoral Program: Bowling Green State University (Clinical), 2001

Doctoral Internship: Southern Louisiana Internship Consortium, 2000-2001

Postdoctoral Residency: Kaiser Permanente, Oakland; Department of Behavioral Medicine, 2001-2002

Areas of Interest: Clinical Neuropsychology; Psychodiagnostic Assessment; Behavioral Medicine/Health Psychology; Pain Management

Certifications: Diplomate in Clinical Neuropsychology

Orientation: Cognitive-Behavioral, Integrative

Lewis, Melissa M., Ph.D.

Training Roles: Supervisor, Co-Facilitator of Trauma Seminar, Facilitator of Psychology Training Seminar and Supervision Seminar

Training Activities: Addictive Behaviors Clinic, Trauma Seminar

Undergraduate Program: University of San Francisco, 2001

Doctoral Program: Saint Louis University (Clinical), 2009

Doctoral Internship: VA Sepulveda Ambulatory Care Center, 2008-2009

Postdoctoral Residency: University of California, San Diego/VA San Diego Healthcare System, 2009-2010

Areas of Interest: Substance Use Disorders, Posttraumatic Stress Disorder; Severe Mental Illness; Psychodiagnostic Assessment; Evidence-Based Interventions

Certifications: Certified VA Cognitive Processing Therapy (CPT) Provider, Certified VA Social Skills Training (SST) Provider

Orientation: Cognitive Behavioral, Integrative

Martin, Jennifer, Ph.D., FAASM, DBSM

Training Roles: Supervisor, Clinical Research Seminar Facilitator

Training Activities: Insomnia Clinic

Undergraduate Program: University of California, San Diego, 1995

Doctoral Program: San Diego State University/University of California, San Diego Joint Doctoral Program (Clinical), 2002

Doctoral Internship: Brown University, 2001-2002

Postdoctoral Fellowship: Geriatrics, University of California, Los Angeles 2002-2003

Academic Affiliations: Associate Professor, David Geffen School of Medicine, University of California, Los Angeles; Faculty, UCLA Multicampus Program in Geriatrics and Gerontology; Faculty; VAGLAHS/UCLA Sleep Medicine Fellowship Program; Research Scientist, VAGLAHS Geriatric Research, Education and Clinical Center; VA National Expert Trainer, Cognitive Behavioral Therapy for Insomnia

Areas of Interest: Psychological Treatment of Insomnia, Chronic Nightmares and Circadian Rhythm Sleep Disorders; Sleep Apnea, Geriatrics; Health Psychology; Motivational Interviewing; Women's Health

Certifications: Certified in Behavioral Sleep Medicine by the American Board of Sleep Medicine, Fellow of the American Academy of Sleep Medicine; Diplomate of the Board of Behavioral Sleep Medicine

Orientation: Cognitive-behavioral (with motivational enhancement, Acceptance and Commitment Therapy and case conceptualization)

Rosales, Grace Ph.D.

Training Roles: Supervisor, Diversity Seminar Co-Facilitator

Training Activities: Women's Health Clinic

Undergraduate Program: California State Los Angeles, 1994

Doctoral Program: University of Massachusetts Boston, Ph.D. 2004

Doctoral Internship: VA West Los Angeles, 2003-2004

Postdoctoral Residency: Didi Hirsch Community Mental Health

Academic Affiliations: Clinical Assistant Professor, UCLA

Areas of Interest: Women's Health, Posttraumatic Stress Disorder, LGBTQ, Immigrant Mental Health, Cross Cultural Psychology, Substance Use Disorders.

Certification: VA Cognitive Processing Therapy (CPT) Provider

Orientation: Interpersonal

Serpa, J. Greg, Ph.D.

Training Roles: Supervisor (employed at WLA VA)

Training Activities: Health Psychology: Behavioral Medicine (MBSR)

Undergraduate Program: UCLA, 1985

Graduate Program: USC, School of Cinematic Arts, MFA, 1990

Doctoral Program: California School of Professional Psychology (Clinical), 2004

Doctoral Internship: VA Sepulveda Ambulatory Care Center, 2003-2004

Postdoctoral Residency: HIV Mental Health, University of California Los Angeles, 2004-2005

Academic Affiliations: Associate Clinical Professor, Psychology Department, UCLA

Areas of Interest: Health Psychology, HIV Mental Health, LGBT Mental Health, Mind-Body Interactions, Mindfulness, Substance Use Disorders and Treatment, Supervision, Trauma

Certifications: National Trainer, American Psychological Association, HIV Office of Psychology Education, Certified Prolonged Exposure (PE) provider, MBSR teacher

Orientation: Cognitive-Behavioral, Mindfulness/Buddhist Psychology, Self Psychology

Spangler, Shana, Psy.D.

Training Roles: Supervisor; Co-Facilitator of Trauma Seminar; Section Chief PTSD, GLA

Rotation Activities: Trauma Seminar, Insomnia Clinic

Undergraduate Program: University of California, Los Angeles, 1998

Doctoral Program: Pepperdine University (Clinical), 2009

Doctoral Internship: W.G. "Bill" Hefner VA Medical Center, Salisbury, NC, 2008-2009

Postdoctoral Residency: University of California, San Francisco/VA San Francisco, PTSD/Substance Use, 2009-2010

Academic Affiliations: Clinical Instructor, David Geffen School of Medicine at UCLA

Areas of Interest: Posttraumatic Stress Disorder, Sleep Disorders, Substance Use, Evidence-Based Interventions.

Certifications: Certified VA Cognitive Processing Therapy (CPT) Provider, Interpersonal Psychotherapy (IPT) Provider, and Prolonged Exposure (PE) Provider; Board Certified in Biofeedback (BCB)

Orientation: Cognitive-behavioral, eclectic/integrative

Zvinyatskovskiy, Aleksey, Ph.D.

Training Roles: Supervisor, Co-Facilitator of ACT Seminar

Training Activities: Primary Care Mental Health Integration (PCMHI)

Undergraduate Program: University of California, Berkeley, 2007

Doctoral Program: University of California, Los Angeles (Clinical), 2015

Doctoral Internship: VA Sepulveda Ambulatory Care Center, 2014-2015

Areas of Interest: Primary Care Psychology, Evidence-Based Practice, Mindfulness, Sleep Disorders, Acceptance and Commitment Therapy, Biofeedback, Posttraumatic Stress Disorder, Substance Abuse, Individual and Group Psychotherapy

Certifications: Certified VA Acceptance and Commitment Therapy (for Depression) Provider, Certified VA Co-located Collaborative Care (CCC) Provider

Orientation: ACT, integrative, psychodynamic

Graduate Programs of Recent Trainees

Intern Class of 2019-2020

Illinois Institute of Technology
Pepperdine University
PGSP-Stanford Consortium (2)
Roosevelt University
Suffolk University

Intern Class of 2018-2019

Catholic University of America
Drexel University
Fuller Theological Seminary
PGSP-Stanford Consortium
St. Louis University
University of Southern California

Intern Class of 2017-2018

AIU/CSPP, San Diego
Pepperdine University
PGSP-Stanford Consortium (2)
University of California, Los Angeles
University of Nevada-Reno

Intern Class of 2016-2017

Pepperdine University (2)
PGSP - Stanford Consortium
University of California, Los Angeles (2)
University of Illinois at Urbana-Champaign (Counseling)

Intern Class of 2015-2016

Pepperdine University (2)
PGSP - Stanford Consortium (2)
University of California, Los Angeles
University of Missouri, Kansas City

Intern Class of 2014-2015

New York University (Counseling)
Pepperdine University (2)
SDSU/UCSD Joint Doctoral Program in Clinical Psychology
University of California, Los Angeles
University of Southern California

GETTING TO SEPULVEDA

16111 Plummer Street

North Hills, CA 91343

Driving Directions

From West LA

405 North to Nordhoff

Left onto Nordhoff

Right onto Haskell

Left onto Plummer

Entrance to the Medical Center is on the right

From Ventura

101 South to the 405 North

Exit at Nordhoff

Left on Nordhoff

Right on Haskell

Left onto Plummer

Entrance to the Medical Center is on the right

From Bakersfield

Take the 99 or I-5 south to the I-5 to the 405 South

Exit at Devonshire

Right on Devonshire

Left on Haskell

Right on Plummer

Entrance to the Medical Center is on your right

From Lancaster/Palmdale

Take the 14 Freeway south to the I-5 to the 405 South

Exit at Devonshire

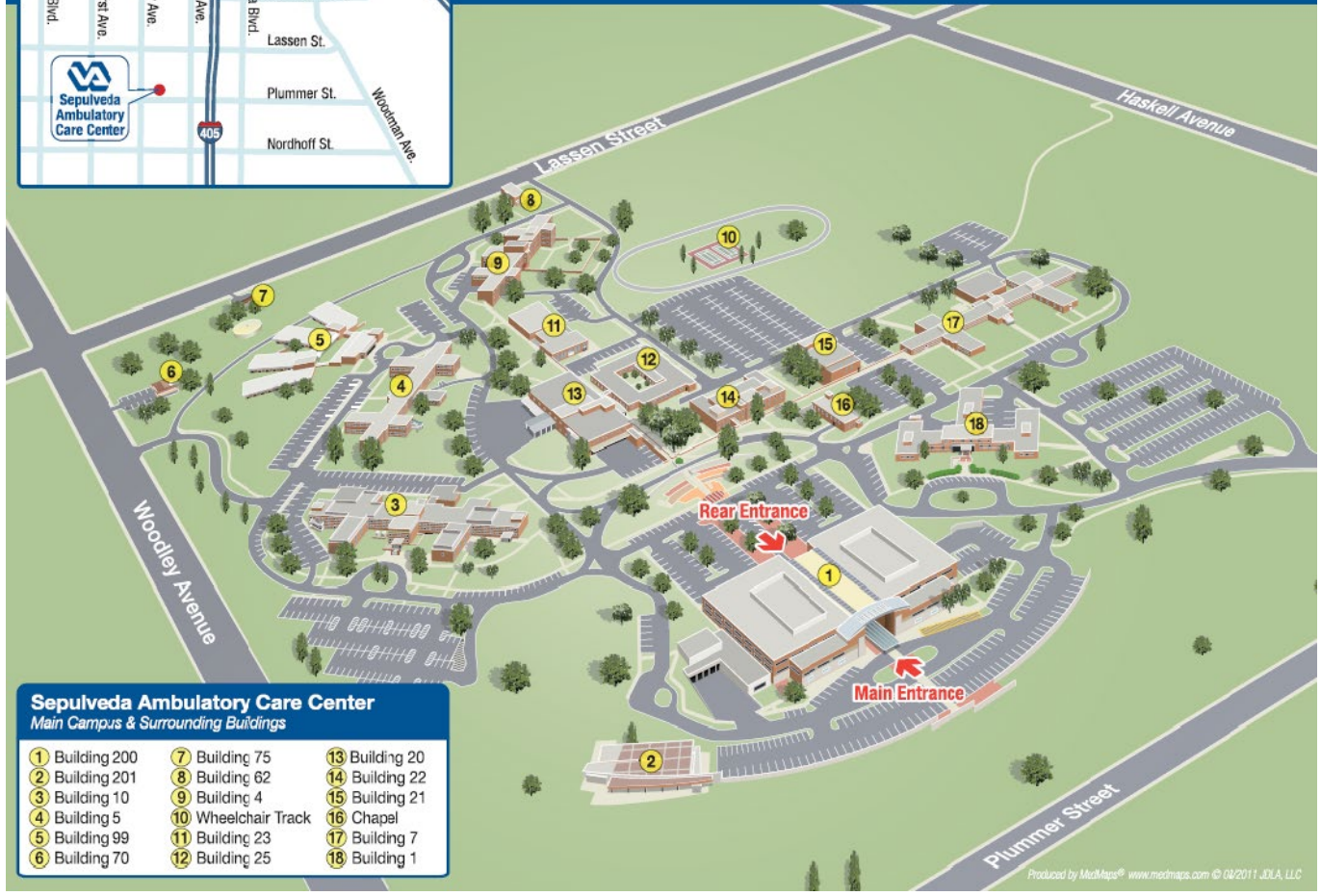
Left on Haskell

Right on Plummer

Entrance to the Medical Center is on the right

Sepulveda Ambulatory Care Center

16111 Plummer Street, North Hills, CA 91343



- Sepulveda Ambulatory Care Center**
Main Campus & Surrounding Buildings
- | | | |
|----------------|--------------------|---------------|
| ① Building 200 | ⑦ Building 75 | ⑬ Building 20 |
| ② Building 201 | ⑧ Building 62 | ⑭ Building 22 |
| ③ Building 10 | ⑨ Building 4 | ⑮ Building 21 |
| ④ Building 5 | ⑩ Wheelchair Track | ⑯ Chapel |
| ⑤ Building 99 | ⑪ Building 23 | ⑰ Building 7 |
| ⑥ Building 70 | ⑫ Building 25 | ⑱ Building 1 |

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