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Predoctoral Psychology Internship Program

Washington DC VA Medical Center
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http://www.washingtondc.va.gov/departments/psychology_training_programs.asp

Match Number: 119311

Applications Due: October 27
Interview Notification Date: December 8
Interviews conducted: Jan. 4, 5, 8
Internship Start Date: end of July

Accreditation Status
The predoctoral internship at the Washington DC VA Medical Center is accredited by the Commission on Accreditation of the American Psychological Association.

Office of Program Consultation and Accreditation
American Psychological Association
Office of Program Consultation and Accreditation
750 First Street NE
Washington, DC 20002-4242
(202) 336-5979

The next site visit will be during the academic year 2020.

Letter to applicants and additional application information

Dear Applicant:

Thank you for your inquiry about internship training in our Psychology Service. To be considered for the internship, your online application must be completed by October 27th. We leave our AAPI online portal open and available for submissions until 11:59 P.M. (Eastern Standard Time) on the day of our published deadline. Due to the volume of applicants, we are unable to interview every student who applies to our predoctoral internship. An onsite interview is required for acceptance into the internship. All applicants will be notified by December 9 whether or not they have been selected for an interview. Please do not call us to ask whether you have been selected for an interview. We do not conduct telephone interviews. When interviews are scheduled, they are conducted individually, not
in groups. We will also give you the opportunity to ask questions of a current intern. Please be aware that we will take a digital photo of each applicant on interview day. This will help us remember you during the application process.

We participate in the APPIC Matching program for psychology internship positions. Only those applicants who participate in the Match can be matched to our internship. Our site requires the AAPI Online, which may be accessed at www.appic.org, click on “AAPI Online.” Our program code number is 119311. In addition to the required materials indicated in the APPIC online application, we require a deidentified, adult psychological assessment that must include personality and cognitive components. We require no more than three letters of recommendation. Please note clearly in your cover letter whether you intend to specialize in neuropsychology. To be eligible for an internship you must be: a) enrolled as a student in an APA-approved clinical or counseling doctoral program and b) a citizen of the United States by the first day of the internship.

You should also be aware that VA employees, including interns, might be subject to random drug testing.

Please address all inquiries to me at slavomir.zapata@va.gov

Please observe the APPIC policy which prohibits applicants from communicating to us any ranking-related information prior to the release of the Match results.

To summarize, a complete application will include:

1) A cover letter (please note if you intend to specialize in neuropsychology)
2) The completed AAPI
3) Three letters of recommendation
4) A deidentified, adult psychological assessment, including personality and cognitive components

While this brochure serves as a snapshot of what our training program offers, please read our trainee handbook also located on our homepage to give you a better idea of our training philosophy and richer detail about training experiences offered.

Introduction
The Veterans Affairs Medical Center, Washington, D.C., offers a psychology internship to qualified graduate students in APA-accredited clinical and counseling psychology doctoral programs. Because psychologists participate widely in this large and active teaching center, psychology interns are exposed to a broad range of potential training experiences, including those in traditional psychiatric settings, therapeutic communities, and contemporary health psychology. Our staff and patient population represent vibrant multi-ethnic communities in the greater metropolitan Washington D.C. area.

This internship program follows a generalist training model. Specifically, interns will have the opportunity to work with a variety of clinical populations in several rotations. Staff psychologists at the VAMC adhere to a diverse range of theoretical orientations. The variety within our setting and the diversity among our staff enable us to approach each intern's training through an individualized plan, with the goal of maximizing the intern's personal growth and professional competence. The internship is
focused on clinical and counseling practice. The internship program has been accredited by the American Psychological Association since 1981.

Mission of the Agency
"We are dedicated to providing high quality, comprehensive health care to Veterans in an environment that fosters trust, respect, commitment, compassion and excellence. We serve as a major resource for health services, education and research that benefit our patients, their families, the community, the network and the nation."

Overall Goal of Internship
Our program goal is to prepare predoctoral interns who are currently enrolled in clinical and counseling programs accredited by the American Psychological Association for the effective, independent, and ethical practice of professional psychology.

The Medical Center
Located in the nation’s capital, the Washington DC Veterans Affairs Medical Center is one of the most visible and dynamic facilities in the VA system. In 2008, the medical center won the Robert W. Carey Performance Excellence Award, one of the most prestigious national awards that the VA bestows. The award recognizes organizations in the VA that have "implemented management approaches that result in sustained high levels of performance and service to the Veterans we serve."

This tertiary care teaching facility provides acute general and specialized services in medicine, surgery, neurology, and psychiatry, as well as offering nursing home care. In addition to the main campus, there are five Community Based Outpatient Clinics (CBOCs).

The medical center's staff of 2,488 provides care to Veterans residing in the District of Columbia and portions of Virginia and Maryland. The medical center treated over 65,703 Veterans in FY2011 and had 648,521 outpatient visits in FY2011. While the majority of our patients are African-American, virtually all racial/ethnic groups and socioeconomic classes are seen. The medical center serves a predominately male population ranging in age from 18-90+ years, with an increasing number of female Veterans. We serve Veterans from WWII, the Korean Conflict, and the Vietnam Era. We also currently treat many Veterans who served in Iraq, Afghanistan, and the Persian Gulf. Our programs treat Veterans with multiple and complex injuries, often with both physical and mental health components. Substance abuse and depression are the most common mental health diagnoses, but we treat the full spectrum of psychiatric disorders, including schizophrenia and PTSD.

The Washington DC VAMC holds medical school affiliations with Georgetown, George Washington, and Howard Universities and engages in residency and internship programs in medicine, surgery, neurology, and psychiatry. It is also affiliated with many other colleges and universities in such areas as pharmacy, rehabilitation medicine, biomedical engineering, dietetics, social work, nursing and medical center management. Thus, psychology interns have many opportunities to participate in interdisciplinary work and training.

The Medical Center has a multi-million dollar research program that supports more than 100 investigators and 300 active research projects. Major research in alcoholism, diabetes, hypertension, cardiovascular disease, HIV/AIDS, and spinal cord regeneration is being conducted. In mental health, research is conducted in schizophrenia, PTSD, and traumatic brain injury.
Psychology is one of several allied health disciplines that conduct training programs here. The atmosphere is that of a modern, active teaching and research-oriented health facility. The medical center is heavily computerized; for instance, medical records are computerized and staff and students have ready access to the Internet and its research capabilities.

Psychology
Approximately forty doctoral-level psychologists offer psychological services within the medical center. In addition, we have seven postdoctoral fellows. In 1999 psychology service became part of the mental health service. The mental health service incorporates psychiatrists, psychologists, nursing staff, and social workers who answer to the associate chief of staff for mental health, who is currently a psychiatrist. Our immediate supervisor, the chief of psychology, is a psychologist.

Psychology offers programs to all sectors of the medical center, and psychologists serve on a variety of medical center committees. All psychologists serve on interdisciplinary teams or as consultants throughout the medical center. Psychology is a prominent and valued department.

Our psychologists' backgrounds, current activities, and major interests are diverse, and they have a great variety of special skills and theoretical outlooks. Taken as a whole, the staff has expertise in many areas of current clinical and counseling psychology practice. In addition, we have arranged consultation from senior professionals in the local area to supplement in-house skills and interests.

Training Model
The internship is organized around a practitioner-scholar model. We recognize that science and practice are interlocking skills that form the foundation of psychological knowledge and its application. The staff of the Psychology Service expects interns to learn to practice psychology in a manner informed by psychological theory and research. Interns learn about evidence-based practice and become familiar with interventions that have been supported by research. Whether our interns come from clinical science, scientist-practitioner or practitioner-scholar graduate programs, we believe that this internship complements their training and the long-term goals of each model.

Our training model is developmental. Interns move from close supervision, mentorship, and intensive instruction to relatively autonomous functioning over the course of the year. Interns take an active and responsible role in developing their training plan and adjusting it to meet their needs and emerging interests. Through this model, graduating interns develop the competencies and sense of professional identity needed for entry-level positions in psychology.

Philosophy of Training
It is our belief that training interns to be generalists in psychology provides a solid foundation for any future work setting. Thus, interns are exposed to a wide variety of settings and treatment groups, regardless of whether they choose to specialize in a particular area (e.g., trauma, neuropsychology, etc.).

We recognize and respect the varied interests, backgrounds, and professional goals interns bring to our training program. We do not emphasize one theoretical orientation, as we acknowledge the broad range of orientations in the field. Within this context, we maintain a strong focus on empirically-supported assessment and treatment.
Goals of the Internship
At the core of the internship are five areas that we regard as fundamental to psychological practice: psychotherapy, assessment, practice anchored in professional and research literature, competence in professional consultation, and general professional competency. Developing these core competencies is the goal of our training program.

The essence of professional practice in this setting is intervention, either singly or in groups, to sustain or improve the quality of life for individuals. The internship includes systematic exposure to psychotherapeutic approaches and support in choosing an effective and appropriate method of treatment. When possible, training is based on current scientific research, i.e., evidence-based practice. Training in psychotherapeutic approaches is intended to build on the interns’ current skills, and based upon the development of these skills over the course of the internship, intern responsibilities increase in complexity.

Interns are trained in psychological assessment because of its importance within all psychotherapeutic endeavors. The internship focuses on the use of diagnostic interviewing supplemented with psychological assessment measures in treating patients with both intrapsychic and interpersonal problems. The impact of family, work setting, current hospitalization, and cultural diversity is considered. Individualized assessment is emphasized, and training is given in the use of computer-supported assessment.

Use of professional and research literature to guide psychological practice is also important. Interns are encouraged to make use of such literature in seeking solutions to practical patient problems. We teach interns to develop a realistic view of the limits as well as the applications of research literature to guide patient treatment.

Consultation is a separate and essential area of expertise for professional psychologists, and involves answering referral questions from interdisciplinary staff. Individual supervision time is devoted to helping interns develop the ability to handle referral questions sensitively and effectively, with attention to and respect for the needs of referral agents as well as the needs of the patients referred.

Administrative and professional issues frequently arise in day-to-day practice and are more formally addressed in supervision and staff meetings. These issues include patient safety and confidentiality, maintaining positive professional relationships, knowing when to seek consultation with staff, and assuming responsibility for key patient care tasks. Ethics are considered at all times in addressing appropriate and feasible solutions to patient care. Sensitivity to cultural issues is emphasized through supervision and seminars.

The purpose of our program is to prepare pre-doctoral interns who are currently enrolled in clinical and counseling programs accredited by the American Psychological Association for the effective, independent, and ethical practice of professional psychology. Training is a very high priority in the psychology department.

Finally, the training program follows the "Guidelines and Principles for Accreditation of Programs in Professional Psychology" and the Code of Ethics of the American Psychological Association. These standards give our program its direction and guide our professional practice.

Means to Achieve the Goals of the Internship

**Goal:** To help interns to develop their skills in psychotherapy
• Interns engage in both individual and group psychotherapy.
• Interns are exposed to a wide variety of psychiatric patients, including the chronic and severely mentally ill.
• Interns attend seminars in psychotherapy conducted by both staff and outside consultants.
• Psychotherapy supervision is provided by more than one supervisor, representing a variety of theoretical orientations.
• Interns participate in group supervision.
• Interns present cases to staff in case conferences.
• Interns train in a variety of rotations, including the possibility of split rotations.

Goal: To help interns to develop their knowledge of psychological assessment
• All interns complete six psychological assessments during the internship year.
• Interns attend seminars on psychological evaluation.
• Interns are supervised on assessment and report writing.

Goal: To encourage interns to use professional and research literature in their professional practice and to use evidence-based practice.
• Interns are assigned reading throughout the internship.
• Interns are given seminars and are supervised in evidence-based practice.
• Interns participate in a journal club to foster critical analysis of scholarly research.

Goal: To help interns develop consultative skills
• Interns are placed on multi-disciplinary teams where consultation is expected.
• Individual supervision time is devoted to helping interns handle referral questions effectively.

Goal: To help interns develop their knowledge of administrative and professional issues.
• Interns attend monthly psychology service staff meetings, where professional issues are discussed.
• Interns assist psychology service with the selection of future interns, program development, and other assignments to develop the internship and the department.
• Supervision and seminars are used to foster an understanding of cultural differences.
• Seminars on professional practice and ethical issues are provided.
• Interns have the opportunity to supervise practicum students.

The Internship Program
The training of clinical and counseling psychologists has been a major commitment since this Psychology Service took its present form in 1965. In the ensuing years, a few hundred graduate students have received supervised practicum and internship experience here at all levels of training and in amounts ranging from 500 to 2000 hours. We currently concentrate our training efforts on the internship.

As a general rule, all staff members participate in training activities. Possibilities exist for interns to train in all areas of the medical center. There are 10 rotations to choose from at this time, as well as other opportunities outside the rotations to work with psychologists on the staff. The following is a description of the major rotations.
Rotations (more detailed descriptions of rotations and supervisors associated with each training experience are located in our trainee handbook)

Community Living Center
This rotation provides a variety of training opportunities with the geriatric and rehabilitation population. A full rotation is preferred, but a partial rotation may be arranged depending on interest and circumstances. The Veterans served by the CLC are either receiving rehabilitation or are residing in Long-Term Care or Palliative Care/Hospice Care. Interns participate as members of a comprehensive interdisciplinary team. As a member of the team, the intern would assist the supervising psychologist in providing direct patient care, including initial and "as needed" evaluations on all Veterans admitted to CLC, as well as individual and group therapy as appropriate. Assessments generally include conducting clinical interviews and administration of screening measures to identify levels of cognitive and psychological functioning, and providing feedback to the Veteran and his or her family, as well as at weekly gero-psychiatry and interdisciplinary team meetings. Interventions provided by the intern may include various cognitive-behavioral interventions such as relaxation training, pain management, assertiveness training, cognitive restructuring, couples therapy, and behavioral modification. Targets of interventions range from assisting in adjustment to a medical condition and/or loss of independence, to estrangement from family and friends and end-of-life issues. Many opportunities exist to learn about differential diagnoses regarding medically versus psychologically-related mental and emotional states. There is the opportunity to co-facilitate an existing PTSD group, and/or to develop group therapy with a different focus, such as pain management or a family support group.

Health Psychology
This rotation is intended for interns at any level of training in health psychology, from beginner to highly-experienced, and can be selected as a full or partial rotation. The health psychology rotation is unique in that it combines experiences in multiple settings and programs at the medical center. Interns will have the opportunity to gain experience working with Veterans who have a wide range of psychological disorders and physical illnesses. The health psychology program has a formal presence in the infectious disease clinic (HIV/Hepatitis C), the renal dialysis clinic, the oncology department, the low vision clinic, the health improvement program (HIP) and the MOVE! program. HIP is an outpatient program that serves Veterans with serious mental illness and co-morbid medical problems. MOVE! (a national weight management program) utilizes the psychology service to provide cognitive and behavioral interventions for patients who may be experiencing changes in mood, such as depression, as a result of their health concerns and chronic medical conditions. Interns will also have the opportunity to provide group and individual therapy, psychoeducation, intake evaluations, and mental health clearance evaluations for patients undergoing organ transplants, Hepatitis C treatment, and bariatric surgery. The rotation includes opportunities for consultation with other providers, supervision of practicum students, and participation in multidisciplinary team meetings. A major goal of the rotation is for interns to appreciate how cognitive and behavioral interventions can be used for patients with co-morbid mental health and medical problems. Interns will have the opportunity to collaborate with psychologists, psychiatrists and other medical specialists, social workers, nurses, recreational therapists, vocational specialists, and dieticians.

Home Based Primary Care (HBPC)
This rotation can be selected as either a partial or full rotation. We serve Veterans whose physical health and/or mobility significantly limits their ability to come to the hospital/clinics for medical care. Interns function as part of a small, cohesive multidisciplinary team that travels to the Veteran’s place of residence to provide services. Under supervision of a licensed psychologist, interns provide direct patient care, serve as a mental health consultant to the team, and contribute to treatment planning. Interventions include but are not limited to: 1) Screening, assessment, diagnosis, and treatment of mental health conditions, particularly depressive and anxiety-related disorders, adjustment disorders,
and dementia; 2) Individual psychotherapy to support Veterans coping with grief and loss associated with disability and other life transitions; 3) Behavioral medicine interventions for pain, disability, sleep problems, smoking cessation, and medical compliance; 4) Assessment of suicidality and dangerousness, providing treatment and/or coordinating referral as needed; 5) Cognitive screening to address specific functional questions and/or to coordinate referral for neuropsychological evaluation; 6) Psycho-education and support of the Veteran, spouse, family members/caregivers, and others who play an important role in keeping the Veteran at home. In short, the HBPC rotation permits an intern to implement a wide variety of diagnostic and therapeutic interventions as part of a close-knit team who truly values the contribution of psychology. This rotation also provides the option to work with individuals with amyotrophic lateral sclerosis (ALS) as part of the twice-monthly half-day ALS clinic on campus.

**Mental Health Clinic**

A halftime rotation, the Mental Health Clinic (MHC) is a multidisciplinary program that provides outpatient medical, psychiatric, and social work services to Veterans. Interns in the mental health clinic will have the opportunity to provide individual and group psychotherapy to Veterans with various psychological concerns (e.g. mood disorders, psychotic disorders, adjustment disorders, and trauma-related issues). The main training goal of this rotation is to prepare interns to learn appropriate interventions in order to treat individuals with the broad range of psychological disorders typically encountered in a multi-disciplinary outpatient mental health clinic. Evidence-based psychotherapies and a recovery model are emphasized. Supervision by one of three psychologists will be available to interns in this rotation.

**Neuropsychology**

This full-time rotation is intended for interns at any level of training in neuropsychology, from beginner to highly-experienced. Training will be tailored to meet the needs and interests of the intern. On this rotation, interns will be trained in all aspects of neuropsychological evaluation, including: clinical interviewing, test administration, test scoring, interpretation, and report write-up. A flexible battery approach is used with test selection based on referral issue and age of patient. Interns will primarily conduct outpatient evaluations but will likely have opportunities to conduct inpatient evaluations as well. Interns will also be trained in neuropsychological consultation to other medical professionals and will take part in multidisciplinary team meetings. Opportunities exist to attend neurology grand rounds, brain cuttings, and other relevant didactics. Opportunities for training in neurocognitive rehabilitation also exist (see polytrauma rotation). The goal of this rotation is to provide interns with well-rounded training in all aspects of neuropsychological evaluation and consultation. Interns interested in pursuing a career in neuropsychology are able to complete 50% of their training during internship in neuropsychology, in accordance with the Div 40/Houston Guidelines.

**Pain Clinic**

This rotation can be selected as either a full or partial rotation and is available to interns at any level of training in Pain Psychology, from beginner to highly-experienced. The Pain Clinic is a multidisciplinary, specialty clinic within the Department of Neurology serving Veterans with complex cases of chronic/intractable pain; there are currently two full-time psychologists and one postdoctoral level Psychology Associate within Pain Psychology. There are a multiple opportunities available including biopsychosocial evaluation, group therapy, couples therapy, and individual therapy. We also welcome interns to take part in our Interdisciplinary Pain Rehabilitation Program which incorporates Pain Psychology and physical rehabilitation interventions designed to teach a self-management approach to a cohort of patients meeting two full days per week for six weeks. A variety of treatment modalities are utilized within Pain Psychology including, but not limited to, cognitive behavioral therapy, acceptance and commitment therapy, dialectical behavior therapy, motivational interviewing, and biofeedback. Opportunities also exist to complete cognitive screening evaluations dependent upon the availability of
patients and the interests of the intern. Interns will have the opportunity to work with Veterans who present with a variety of mental health concerns including comorbid substance abuse disorders, mood and anxiety disorders, psychosis, and Axis II disorders. There is a focus on program development, and interns therefore have the opportunity to develop interventions based on their interests and the needs of the clinic. Interns also serve an important consultative role within weekly multidisciplinary team meetings, and have the opportunity to present cases and recommendations to providers within neurology, pharmacy, physical medicine and rehabilitation, and nursing.

**Polytrauma Psychology Rotation**

The Polytrauma Network Site at the Washington, DC VAMC offers specialized, post-acute rehabilitation for Veterans with traumatic brain injuries and polytraumatic conditions. Services provided by the DC VAMC Polytrauma team include: interdisciplinary treatment planning, physiatry (rehabilitation medicine), psychology, neuropsychology, case management, speech-language pathology, occupational therapy, physical therapy, recreational therapy, vocational rehabilitation, low vision/blind rehabilitation, prosthetics, and other consultative services as needed. This rotation is intended for interns at any level of training, from beginner to highly experienced, who are interested in learning the principles and techniques of rehabilitation psychology, neuropsychology, and trauma-focused psychotherapy. Training opportunities include individual psychotherapy, group psychotherapy, and neuropsychological assessment. Clinical care often focuses on: adjustment to disability, psychological reactions to trauma, caregiver and family support, incorporating cognitive rehabilitation and compensatory strategies into psychotherapy, decision making capacity, sexual functioning, behavioral management, alcohol and substance use disorders, chronic pain, educational and vocational planning, and social reintegration. The intern becomes an integral member of the treatment team and consults with other treating providers to facilitate seamless, highly individualized care.

**Psychosocial Rehabilitation Recovery Center (PRRC)**

The Psychosocial Rehabilitation and Recovery Center (PRRC) is an outpatient skills building inter-professional treatment program that provides mental health services for veterans who are suffering from severe and persistent mental illness (e.g., Schizophrenia, Schizoaffective Disorder, Major Depressive Disorder, Bipolar Disorder, and PTSD) with significant functional impairment. The PRRC consists of a dedicated multidisciplinary team comprised of (but not limited to) Psychologists, Nurses, Clinical Social Workers, a Recreational Therapist, Vocational Rehabilitation Specialists and Peer Support Specialists. The PRRC program offers an array of individual and group interventions that are psychoeducational (e.g., Building Strength and Resilience, Cognitive Training, & Coping with Trauma), manualized (e.g., Anger Management, Chronic Pain and Depression), and grounded in evidence based practice (e.g., DBT, CBT, ACT, Social Skills Training, Problem Solving Therapy). Interns who choose the PRRC for a full rotation have the opportunity work with an multi-disciplinary treatment team, to engage in an inter-professional approach to treatment, to conduct intakes and devise treatment recommendations, to provide individual and group therapy, to plan and develop groups based on interest and program needs, and to engage in program evaluation initiatives in collaboration with the Program Director that aligns with key VA mandates and initiatives.

**Trauma Services**

A full-time rotation, the Trauma Services Program (TSP) is an outpatient clinic that provides treatment for Posttraumatic Stress Disorder (PTSD) to men and women veterans. The clinic is staffed by a multidisciplinary team of professionals, including psychologists, nurses, social workers, peer support specialists, recreation therapists, and a psychiatrist. The clinic provides group, individual, and family therapy, focal evaluations for post-traumatic stress disorder, psychodiagnostic evaluations, as well as spirituality and recreation groups. TSP emphasizes training in Prolonged Exposure therapy and Cognitive Processing Therapy (group and individual formats) for PTSD. Currently, the Trauma Services
Program provides treatment to over 600 patients with a primary diagnosis of PTSD. While many veterans in TSP served in combat, we treat veterans with a variety of military-related traumatic experiences including, but not limited to, MST, training accidents and motor vehicle accidents. An intern would have the opportunity to obtain extensive experience in assessing PTSD, co-facilitating group therapy, providing individual therapy, participating as a member of the multidisciplinary team, performing psychological evaluations, and providing family education and therapy.

Organizational Management/Program Evaluation
The Program Evaluation Rotation is developed to provide interns with greater exposure to the systems level of health care. Psychologists are committed to promoting and enhancing patient care and well-being. Part of this work involves determining whether patients’ needs are being met and evaluating whether patients are receiving the best quality of care. This rotation provides interested interns with the opportunity to learn about and actively engage in needs assessments and program evaluation within a medical center. Moreover, interns will have the opportunity to observe and participate in the activities of leadership staff to better understand health care at the macro level. Finally, this rotation is designed to provide potential methods of preparing for opportunities in areas of education, clinical health care administration, research, and general health care administration. Upon completion of the Program Evaluation Rotation, interns will have developed a particular skill-set conducting needs assessments and/or program evaluation, and will have specific expertise based on their rotation project. Interns will become more familiar with data related to mental health services through the Mental Health Information Systems Dashboard and become aware of how data is collected and analyzed for performance measures and metrics. Interns will understand more deeply the gaps that exist between desired and existing patient care as well as working knowledge of the challenges involved in bridging this gap. Interns will also have a deeper understanding of the systems-level operation of a large medical center and the managerial decisions that influence patient care. Core components may include the following: development of a program evaluation or needs assessment project, attending leadership committee meetings, shadowing a member of the Management or Leadership Team within the DC VAMC, carrying a small caseload of related individual psychotherapy cases, and completing readings of program evaluation, needs assessment, and managerial literature. Generally, interns complete this rotation as a 4 month minor rotation in combination with another minor rotation.

Primary Care Mental Health Integration- PACT (Women’s Health Clinic)
Patient Aligned Care Teams (PACT) provide integrated health services that are both comprehensive and preventative in nature. PACTs are health-oriented and directed toward achieving medical as well as psychosocial goals with each patient. The foundation of PACT is the integrated treatment team, on which psychologists have traditionally played central roles. This rotation is intended for interns at any level of training in health psychology, from beginner to highly-experienced and provides the opportunity to gain experience working with veterans with a wide range of psychological and physical health concerns. This rotation also provides interns with an opportunity to work as part of an interdisciplinary treatment team within the Women’s Health Clinic and to consult with other primary care clinics to provide care to women veterans. Interns will work closely with providers in patient education, nutrition, social work, vocational rehabilitation, psychiatry, nursing, and medicine. Interns will also assist in providing evaluation and intervention services for patients with a variety of presenting problems that are common in the primary care setting including depression, anxiety, PTSD, adjustment difficulties, and management of acute and chronic health conditions. Interns will also have the opportunity to co-facilitate groups within the Women’s Health Clinic such as the Managing Chronic Pain group and Women’s Self-Esteem group. Additionally, interns will have the option of assisting in the provision of training to healthcare staff through formal and informal presentations, participation in team meetings, and modeling of interventions in patient care.
**Substance Abuse Rehabilitation Program (SARP)**
A full or part-time rotation, SARP is an outpatient drug treatment program that uses a multidisciplinary team to treat Veterans with alcohol and drug addictions. Interns provide individual therapy, conduct assessment, and participate in multidisciplinary team meetings. Interns have the opportunity to co-lead groups including a CBT/Depression group. The main training goal is to prepare interns to treat alcoholism and drug addiction in a multidisciplinary setting.

**Formulating an Individual Program**
During an initial weeklong orientation period in August, the supervisors of each of the previously described rotations meet with the interns, describe the rotations in detail, and answer any questions that the interns may have. On the last day of the orientation period, each intern meets with the director of training to begin selecting a program. The program must include three, four-month assignments. The training committee reviews the selection and may make recommendations. The internship year and first rotation begin in August; the second and third rotations begin in December and April.

The primary function of formulating a schedule is the selection of the intern's personally constructed training plan. An additional function is to coordinate assignment choices among interns and among the various program elements in the medical center. The need for even distribution of interns across assignments rarely interferes with interns' assignment choices, but an intern might be asked to take a second choice if a particular rotation is oversubscribed. Intern preferences cannot always be accommodated and cannot be guaranteed.

Some rotations may be split into two concurrent rotations, each with their own supervisor. When split, the rotations may have equal weight or one may have more emphasis than the other, i.e. a major and minor rotation. The time spent in each of the concurrent rotations is a decision made by the supervisors, director of training, and intern prior to the rotation.

To help ensure long-term psychotherapy experience, interns see outpatients who have been referred to the psychology service. Interns are permitted to continue treating up to three patient cases from one rotation to another or a group and two individual cases.

In addition, interns will complete a minimum of six psychological assessments during the course of their training year. By the end of the year, each intern will have experience with cognitive assessment, personality assessment, interviewing, and report writing.

**Didactic Seminars, Meetings, and Conferences**
Training meetings have been established for interns as a group, in addition to any conferences or meetings originating with the intern's specific assignment. The nature and pattern of these meetings vary somewhat, but they typically include a variety of seminars and one administrative meeting with staff.

**In-house Seminar**
Each week or biweekly, a psychology staff member or an invited speaker from outside the department presents a lecture on a topic of his/her choice. Some of the topics that are regularly presented are suicide prevention, program evaluation, conducting an intake evaluation, and evidence-based practices. This seminar reflects our commitment to providing interns with a full spectrum of learning experiences to support their development of a personal therapeutic style.
Professional Development Series
Each month a staff member presents his/her experiences as a psychologist, their career path, and any instructive professional lessons. This seminar is attended by interns, postdocs, and any interested staff members.

Diversity Seminar
Several times a year invited speakers present on a topic related to diversity and psychological practice. The purpose of the seminar is to promote diversity awareness and competence. As our program believes diversity competence is an ongoing process, this seminar is attended by both staff and interns.

Journal Club
Each month, interns meet with 1-2 psychology staff members to discuss a journal article. The purpose of the journal club is to foster critical analysis of scholarly research. Journal articles will be selected by psychology staff in collaboration with the interns.

Ethics Seminar
This seminar meets monthly to discuss ethical and legal challenges faced at the VA, as well as a review of the ethical principles by which we are governed. The primary focus is on applying the APA’s ethical principles to either hypothetical or real-life situations. The secondary focus is on legal obligations and potential pitfalls of practice. Some of the ethical issues along with expert opinions are culled from the website of the American Psychology-Law Society, a division of the American Psychological Association. At times we invite speakers to answer specialized questions, such as “What to do if you get a subpoena?” Prior to each meeting, the seminar leader provides a vignette or ethics question to the interns for further discussion in the meeting. Interns are welcome to bring in their own current ethical challenges and legal concerns for discussion.

Staff Meetings
The full psychology staff holds a monthly meeting. Because one of the aims of the internship is to give training in administrative as well as clinical skills, all interns are required to attend and encouraged to participate in the discussion. In addition to administrative issues, a variety of topical issues are discussed of both local and national concern to psychology, which include privileging, ethics, and quality improvement standards.

Case Conference
Each intern is expected to conduct presentations throughout the year to the staff and other interns. Interns present one therapy case, one assessment case, and their research. The purpose of the case conference is to have interns learn to present professionally, and to provide an additional opportunity to consult with the staff.

Meeting with the Director of Training
As a group, interns meet with the director of training either biweekly or monthly to discuss the internship program and how the interns are progressing.

Cognitive Processing Therapy Training (CPT Training)
All interns have the option to attend a two-day CPT workshop led by a CPT consultant. This training will occur near the beginning of the internship year, and interns will successfully complete two PTSD cases with CPT focused supervision over the course of the year. This process can lead to requirements necessary for provider status, which will be granted following licensure.
Neuropsychology Video teleconference
This is a video teleconference in which neuropsychology fellows from a number of military sites present journal club readings and cases. Interns on the neuropsychology rotation are invited to attend this weekly two-hour seminar. During the journal club portion, important readings in neuropsychology are reviewed. During the case conference portion, different cases are presented each week, and there is a monthly ABPP-style case presentation led by the fellows.

Neurology Grand Rounds
All interns in neuropsychology attend weekly grand rounds in Neurology. Rounds typically consist of lectures covering a wide range of neurological diseases. Periodically, an attending neurologist will lead a case conference and demonstrate the neurological examination.

Neuropsychology Group Supervision
All neuropsychology interns attend the weekly neuropsychology group supervision. Here, an extern or intern presents a case, and the team (including attending neuropsychologists and fellows) offers insights and thoughts on interpretation of the data.

Intern Hours, Stipend, and Benefits
To meet the standards of the Veterans Administration as well as various state licensing boards, the internship is 2080 hours in duration over a 52-week period. Hours cannot be accrued for credit at a rate greater than 40 per week except under extraordinary circumstances. Interns are employees who accrue four hours of annual leave and four hours of sick leave every two weeks. In addition, interns have the following ten holidays: New Year's Day, Martin Luther King's Birthday, Washington's Birthday, Memorial Day, Independence Day, Labor Day, Columbus Day, Veteran's Day, Thanksgiving, and Christmas. We also allow leave for continuing education and conference attendance.

We expect that under normal conditions the internship will be completed within one calendar year. The Psychology Service does not conduct a two-year, half-time internship.

The internship year starts in late July depending on the federal pay period at that time. Interns come to the hospital for physical examinations before reporting to work. After official processing in the Human Resources Management Service, interns report to the Psychology Service for orientation to the internship. This orientation lasts for one week and offers each intern the chance to sample all facets of the Psychology Service programs. Time spent in orientation is credited toward the 2080-hour total.

The Internal Revenue Service has held that intern pay is taxable as income; interns will thus find state, federal, and social security taxes withheld from paychecks. Gross pay is approximately $26,000.00 per year, paid out bi-weekly in 26 equal installments. Interns are not eligible for the Federal Employee Retirement System, although if an intern later becomes a federal employee, time spent in internship status can be credited toward retirement. The VA is interested in offering jobs to former interns, and they are encouraged to apply for federal employment, which would begin after completion of degree requirements.

The DC VAMC provides its interns with emergency medical treatment. Interns can elect to participate in health and life insurance programs. They are required to pay a portion of the premiums, as any employee would. The United States Government covers interns for malpractice under the Federal Tort Claims Act.
Nondiscrimination Policy
The Department of Veterans Affairs and this medical center are equal opportunity employers. The internship welcomes and strongly encourages applications from all qualified candidates, regardless of racial, ethnic, sexual orientation, disability or other minority status. Psychology fully adheres to these principles. Furthermore, psychology is a member of the Association of Psychology Postdoctoral and Internship Centers (APPIC) and abides by all APPIC guidelines regarding intern recruitment.

Diversity and Inclusion
The medical center, and psychology service, values diversity and inclusion. We currently have twenty-six nationalities on the staff of the medical center, and are committed to making all staff, regardless of ethnic, cultural, minority, or disability status, comfortable in this setting. To help assist in creating and maintaining this type of environment, the medical center has an office of diversity and inclusion that has two major tasks: to ensure compliance with existing laws to prevent discrimination and to help ensure diversity and inclusion in the workplace. To accomplish these tasks, this office:

- monitors whether the demographics of the workforce mirror that of the community
- helps mediate and resolve EEO issues and other issues of cultural diversity
- ensures reasonable accommodations for disability
- provides training in cultural diversity and prevention of discrimination during new employee orientation and during in-service training
- provides translation services for family members that speak other languages
- celebrates our diversity by hosting cultural events about Black history; women’s history; Asian-Pacific Islanders; Native American Indians; Hispanic heritage; persons with disabilities; and lesbian, gay, bisexual, and transgender people

Psychology service shares this commitment. We make efforts to attract and retain diverse staff and interns and by any measure we have been successful at doing so. We have a monthly diversity seminar in which experts are invited to talk about diversity. Our interns attend a number of conferences during the year on diversity.

In sum, we are a diverse workforce, strive to be inclusive, and take pride in providing a constructive environment for all.

Application Policy and Procedures and Admission Requirements

Application policy
Policy and procedures regarding the selection of interns in clinical and counseling psychology.

1. To choose applicants who want to participate in a training program in a multidisciplinary medical center.
2. To attract as many applicants as possible with whom we have mutual training-related interests.
3. To avoid bias in the evaluation of applicants based on race, nationality, ethnicity, religious preference, sexual preference, gender, or age.
4. To avoid bias based on preferred theoretical or practical approach, in accordance with the diversity within this medical center, limited only by the presence of appropriate role models on our staff.
5. To promote applications from students who are members of minority and other underserved groups.
6. In all cases, however, applicants must satisfy the requirements of the Department of Veterans Affairs, the American Psychological Association, the parent academic program, the Association of Psychology Postdoctoral and Internship Centers, and this medical center.

The Washington VAMC internship is a traditional internship in that we require applicants to have adequate experience in both psychotherapy and psychological assessment. Experience in psychotherapy must show diverse settings and a fair number of individual cases. Experience in group therapy is a plus, but not mandatory. Experience in psychological assessment must show both course work and actual test experience using both cognitive measures (e.g. WAIS) and objective personality measures. We will only consider applicants with backgrounds in both psychotherapy and psychological assessment.

We recognize that there are many graduate programs that are geared to a very specific theoretical model and provide intensive education and training in that model. We prefer applicants who have familiarity with a range of evidence-based therapy models, however, even if their program is more focused.

Our selection of intern applicants is based on a review of the documents we request and the interview. We do not have weighted values for individual parts of an application such as GPA or the interview. We are seeking people who have demonstrated excellent social and communication skills. Interns must write well and have computer literacy. We are highly selective because we receive about 170 applications for five positions, and our highly ranked applicants tend to accept our offers. In accordance with APA guidelines, we are especially attentive to applications from members of minority groups, but the selection standards are the same for all applicants.

Prior Preparation, Admission Requirements, and Selection Procedures

Each year the Psychology Service updates its website, by the end of August, describing the internship program. Applicants must use the AAPI Online, which may be accessed at www.appic.org, and then clicking on "AAPI Online".

To ensure a basic quality for applications and also to ensure compliance with VA policy, the applicant must meet the following requirements:

1. Grade point average of 3.00 or higher.

2. 1000 hours of total practicum experience, supervised by licensed psychologists, with a minimum of 700 hours of intervention and assessment due by the start of internship. Applicants need to acquire 500 hours of intervention and assessment by November 1. We only consider hours that are part of a doctoral program and not from a terminal masters degree.

3. APA-accredited graduate program in clinical or counseling psychology.

We use a rating form to review the online applications and select those applicants whom we want to interview. Interviewees meet with five teams of staff members. Each team focuses on different selection criteria that are important to the staff. The interviewees are then ranked based on their application materials and their interviews.

(Please see application for instructions).

Letters to the successful applicants and their academic program directors will confirm all selections.
The internship follows the match policies of APPIC. These policies can be downloaded by clicking on the following link: http://www.appic.org/Match/Match-Policies

Human Resource Eligibility Requirements
Applicants who match with our site must also be aware of the following federal government requirements:

1. U.S. citizenship. VA is unable to consider applications from anyone who is not currently a U.S. citizen. Verification of citizenship is required following selection. All interns and fellows must complete a certification of citizenship in the United States prior to beginning VA training.

2. A male applicant born after 12/31/1959 must have registered for the draft by age 26 to be eligible for any US government employment, including selection as a paid VA trainee. Male applicants must sign a pre-appointment certification statement for selective service registration before they can be processed into a training program. Exceptions can be granted only by the US Office of Personnel Management; exceptions are very rarely granted.

3. Interns and Fellows are subject to fingerprinting and background checks. Match result and selection decisions are contingent on passing these screens.

4. 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.

Requirements for completion of the internship
Interns must complete three separate rotations over the course of the internship. Interns are formally evaluated at the conclusion of each rotation, and they must meet certain competency standards. The internship is 2080 hours and must be completed in one year and one day from the first day of internship. The internship year cannot be condensed or abbreviated.

Contact the Training Director
The Director of Psychology Training Programs is Slavomir Zapata, Ph.D. Method of communication in order of preference: to obtain information about the program, download from website; if you have any additional questions, e-mail: slavomir.zapata@va.gov

Postal mail:
Slavomir L. Zapata, Ph.D.
Director of Psychology Training Programs
Psychology Service (116B)
Veterans Affairs Medical Center
50 Irving Street, N.W.
Washington, D.C. 20422

Phone: (202)745-8000 x55695

We would appreciate any feedback about this website and its contents. slavomir.zapata@va.gov
Public Disclosure and Accreditation Status
The internship training program is committed to public disclosure. Our admission criteria, selection processes, training model and mission (values, training goals, objectives, etc.), requirements for completion, resources, accreditation status, and virtually all information about our internship is on this website. Our last site visitor report is available upon request. We are accredited by the Commission on Accreditation of the American Psychological Association.

Questions related to the program's accredited status should be directed to the Commission on Accreditation:

Office of Program Consultation and Accreditation
American Psychological Association
750 1st Street, NE, Washington, DC 20002
Phone: (202) 336-5979 / E-mail: apaaccred@apa.org
Web: www.apa.org/ed/accreditation
Staff biographies are located in our training handbook also on our website

**Ernest J. Aucone, Ph.D.** Dr. Aucone is a neuropsychologist and Director of Neuropsychology Service at the Washington D.C. VAMC. He conducts neuropsychological evaluations with military Veterans reporting a range of difficulties, including difficulties with short- or long-term memory, attention and concentration, language and communication, problem-solving, and changes in personality. His clinical and research interests include traumatic brain injury, differential diagnosis in dementia, forensic neuropsychology (particularly determining competency); and neuropsychological/cognitive rehabilitation. Dr. Aucone received a Ph.D. in clinical psychology (specialization in neuropsychology) from Nova Southeastern University in Fort Lauderdale, FL; completed a clinical internship/residency at the Boston VA Healthcare System /Harvard Medical School in Boston, MA; and completed a two-year APPCN accredited postdoctoral fellowship in clinical neuropsychology at the University of Virginia in Charlottesville, VA. Prior to coming to VAMC, Dr. Aucone was part of a large neurology practice in Rhode Island.

**Christine Brown, Ph.D.** Dr. Brown joined the Washington VA Medical Center psychology staff in 2007. She is assigned to the Home Based Primary Care team, primarily serving homebound geriatric Veterans with multiple medical concerns and their caregivers. She also sees Veterans through our Amyotrophic lateral sclerosis (ALS) clinic. Dr. Brown is a member of the psychology department’s pre-doctoral internship training committee and provides supervision to both psychology interns and practicum students. Dr. Brown received her B.A. from Southern Methodist University and her Ph.D. in Clinical Psychology from the University of Texas Southwestern Medical Center at Dallas. She has been licensed as a clinical psychologist in Texas since 2000. Her interests include assessment, training students, chasing after her two small children, and trying new restaurants.

**Rickey Bullock, Ph.D.** Dr. Bullock is a staff clinical psychologist at the Washington VA Medical Center and is licensed to practice psychology in Washington, D.C. and Maryland. Dr. Bullock received his master's degree from Seton Hall University and his doctorate from Fairleigh Dickinson University. His internship was completed at Essex County Hospital Center in northern New Jersey. Dr. Bullock was a staff psychologist for 15 years with the D.C. Dept. of Mental Health and worked in numerous inpatient and outpatient programs within the D.C. Dept of Mental Health before coming to the VAMC. His first 9 years with the D.C. Dept. of Mental Health were spent as staff psychologist on the Intensive Day Treatment Program (IDTP) which was a therapeutically oriented, partial day hospitalization program. Duties performed were psychological assessments, individual therapy, supervision of all psychology interns/residents doing rotations on IDTP, consultation to non-psychology staff, member of IDTP multidisciplinary treatment team where results of psychological assessments were shared with staff as part of treatment planning, and the coordinator and major presenter of the annual multicultural seminar ("Race, Culture & Psychology") presented to psychology interns. Dr. Bullock then spent 3 years at St. Elizabeth Hospital in Washington, D.C. working with the severely and persistently mentally ill before coming to the VAMC in mid 2006. During his tenure at St. Elizabeth hospital, he ran numerous weekly therapy and psycho-educational groups, gave individual psychotherapy and psychological assessment, supervised psychology interns and residents, and was the major presenter and coordinator of the annual 16 week psychology intern seminar on Race, Culture & Psychology (Multiculturalism). He also gave numerous presentations to D. C. Dept. of Mental Health staff, interns, and residents on Nigrissance theory, multiculturalism, and treatment concerns and strategies impacting African-American clients. Dr. Bullocks' hobbies include the enjoyment of all types of art, playing basketball and tennis, physical fitness, spending time with family and friends, listening to soul music and jazz, and reading books.
Lisa Carlin, Ph.D. Dr. Carlin is a staff psychologist in the Trauma Services Program at the Washington DC VAMC. Within Trauma Services, she coordinates the women’s trauma recovery track, which implements strategies to promote education about and services to women Veterans with PTSD. Prior to graduate school, Dr. Carlin worked for several years as a sexual assault victim advocate and provided education programs on sexual assault, harassment, and bullying prevention to elementary through college age students. She completed her graduate training at American University in DC, and pre-doctoral internship at the Washington DC VAMC. Dr. Carlin has also worked for the Laboratory for the Treatment of Suicide-related Ideation and Behavior at the Uniformed Services University, and has a professional interest in treatment of suicidality for individuals with PTSD. Her personal interests include exploring the DC area with family and friends, attending sporting events, and hiking.

Katie Chipungu, Ph.D. Dr. Chipungu is a clinical psychologist in the Home Based Primary Care program at the Washington DC VAMC. She provides in-home care to veterans suffering from chronic medical conditions. Dr. Chipungu obtained her Ph.D. in Clinical Health Psychology from the University of Miami. She completed her pre-doctoral internship and post-doctoral fellowship at Henry Ford Health Systems located in Detroit, Michigan. During these training experiences, she completed rotations in Consultation-Liaison, Transplant, Outpatient Behavioral Health, Oncology, Emergency Medicine, Bariatric Surgery, Anesthesia Pain and Pelvic Pain. She has also provided care to cancer survivors and their caregivers as well as veterans suffering from obesity and other health related concerns. Her clinical and research interests include the promotion of healthy lifestyle changes within chronic medical illnesses as well as the reduction of racial/ethnic health disparities. In her free time, she enjoys exploring new restaurants, listening to music and spending time with family and friends.

Abigail Cobey, Psy.D. Dr. Cobey has been with the DC VA since Feb 2014. Prior to joining us here, she worked at Ft. Belvoir Community Hospital treating active duty service members and running a PTSD recovery processing group. She completed her post-doctoral training at Central State Hospital in Petersburg, VA where she was responsible for the acute female forensic unit and conducted risk assessments for those not guilty by reason of insanity. Her internship was at the Louis Stokes Cleveland VAMC with rotations in geropsychology, PRRC, and the Women’s Trauma Program. Her Doctorate is from the American School of Professional Psychology at Argosy University and her Bachelor’s is from Sarah Lawrence College. Significant amounts of Dr. Cobey’s leisure time is spent training for triathlons and at spin class, otherwise she is relaxing with her little dog or spending time with family and friends.

Ranon Cortell, Ph.D. Dr. Cortell works in the multidisciplinary Trauma Services Program. He provides individual, group, and family therapy to veterans impacted by traumatic stress. Dr. Cortell coordinates family services for the clinic. He provides supervision of clinical care, administrative issues, and psychological assessment for pre-doctoral psychology interns, postdoctoral fellows, and peer support specialists. Dr. Cortell received his Bachelors in Psychology from the University of Maryland and his Ph.D. in Clinical Psychology from the Catholic University of America. Dr. Cortell served in the DC VAMC during his graduate training, working with veterans in the Substance Abuse Rehabilitation Program and Primary Care Behavioral Health. He completed his pre-doctoral internship at the Woodburn Community Mental Health Center, where he provided individual and family therapy, emergency and mobile crisis services, forensic services, and psychological assessment. Prior to his position at the VAMC, Dr. Cortell provided individual and group therapy to inmates in a maximum security facility in Jessup, MD and individual and family therapy, consultation, and psychological assessment to military dependent children and their families at Fort Meade, Maryland. Dr. Cortell has published in the area of suicide and developmental disorders. In his free time, he enjoys spending time with his family, reading, teaching, being in the outdoors, and playing tennis.
Leslie Gumienny, Psy.D. Dr. Gumienny is a clinical psychologist at the Washington DC VAMC. She currently provides individual and group psychotherapy to veterans in the Mental Health Clinic (MHC), and she serves as the medical center’s Military Sexual Trauma (MST) Coordinator. She is certified in Cognitive Processing Therapy and is the MST Consultant for Vet Centers in the DC Metropolitan area. She obtained her Psy.D. from the Virginia Consortium Program in Clinical Psychology. Her internship and post-doctoral fellowship were completed at the North Florida/South Georgia Veterans Health System. The internship focused on generalist clinical training with an emphasis on treating co-morbid trauma and substance use disorders, and her fellowship specialized in treating posttraumatic stress disorder (PTSD) and traumatic brain injury (TBI). Prior to joining the staff at the DC VAMC, Dr. Gumienny worked as a civilian psychologist at Fort Belvoir Community Hospital. In addition to her psychotherapy and assessment roles with active duty service members and their families, she helped develop a clinical treatment pathway for PTSD. Dr. Gumienny is licensed in the commonwealth of Virginia. Her clinical and research interests include trauma, TBI, intimate partner violence, substance use disorders, program development, and supervision. In her free time she enjoys running, traveling, and spending time with family and friends.

Bita Kianimanesh, Psy.D. Dr. Kianimanesh is a staff clinical psychologist at the Ft Belvoir VA clinic where she conducts individual and group therapy for a predominantly female population. Prior to joining the VA, she served as an active duty psychologist and a naval officer at Naval Hospital Jacksonville, FL and Naval Medical Center Bethesda’s National Intrepid center of Excellence. She earned her Bachelor’s of Science in Psychology at George Mason University and her master’s degree in International Relations with a focus on cross-cultural communication from American University’s school of International Service. She earned her doctorate degree in Clinical Psychology at American School of Professional Psychology/DC and completed her internship and postdoctoral residency at NOVA Southeastern University’s Center for Psychological Studies at Ft Lauderdale, FL. Her interests include psychology of women and integrating Eastern philosophy of mindfulness into her clinical practice.

Michael Knep, Psy.D. Dr. Knep is a clinical psychologist who provides individual, couples and group psychotherapy to Veterans in the Mental Health Clinic. He obtained his B.A. from Clark University (Worcester, MA) and his M.S. and Psy.D. in Psychology from Nova Southeastern University (Fort Lauderdale, FL). His internship was completed at the DC Commission on Mental Health Services, which included providing psychological services to a forensic inpatient population. Prior to joining the VAMC, Dr. Knep was employed as a staff psychologist for over six years at Northern Virginia Mental Health Institute where he worked on both an acute admissions unit and on a longer term, psychosocial rehabilitation unit. He is licensed in the District of Columbia, and he provides individual and couples psychotherapy in his private practice in northwest DC.

Susan G. Mareck, Ph.D. Dr. Mareck is a staff psychologist at the Washington, DC VAMC. Dr. Mareck provides Compensation and Pension evaluations and coordinates assessment training for interns. Dr. Mareck received her Ph.D. in Clinical Psychology from the University of South Dakota. She interned at the Mid Missouri Psychology Consortium and completed a Post Doctoral Fellowship in Health Psychology at the University of Minnesota Hospital and Clinics. Dr. Mareck worked for seven years at North Memorial Medical Center in Robbinsdale, MN doing crisis evaluations in the emergency room before coming to the Washington DC VAMC. Her interests include health psychology, crisis intervention, and integrated dual diagnosis assessment and treatment. When not working, she enjoys exploring the Washington DC area, travel, and reading.

Vanessa L. Moore, Ph.D. Dr. Moore received her undergraduate education at the University of Dayton and her Master of Arts and Doctor of Philosophy degrees from the Ohio State University. A former intern of the Washington, DC VA Medical Center, Dr. Moore is the medical center’s Health Behavior Coordinator. She also conducts a monthly women’s psychotherapy group. Dr. Moore has a specialty
interest in couples dynamics and psychotherapy. Additionally, Dr. Moore conducts comprehensive mental health clearance evaluations of Veterans as part of their medical work-up for organ transplant as well as Interferon Therapy for the treatment of Hepatitis C. Finally, she is co-coordinator of the Medical Center's Employee Assistance Program. Dr. Moore, a Washington DC native, is active in her church where she regularly makes presentations that seek to integrate spiritual and psychological issues as they pertain to optimal well-being. She is lovingly devoted to her family and friends. Other outside interests include dabbling in the culinary arts, playing the piano, and writing fiction.

**Michael Moran, Ph.D.** Dr. Moran is a clinical psychologist who provides individual, couples, and group treatment at the Fort Belvoir (VA) CBOC (community based outpatient clinic). His primary theoretical focus is cognitive-behavioral, but he integrates systems and dynamic theory in his clinical work. Dr. Moran received his undergraduate degree from Boston College and then was a volunteer teacher of math and English at a boarding school in Uganda for three years. After returning to the U.S., he earned an M.A. in History from Columbia University, and then an M.A. and Ph.D. from American University (APA) in Clinical Psychology. He completed his internship (APA) at the National Naval Medical Center in Bethesda, MD. and is licensed in California and Virginia. A retired military psychologist, he served at duty stations in Great Lakes, IL., Oakland, CA., Guam, the U.S. Naval Academy, and St. Elizabeth’s Hospital (Washington, DC.). During his time on active duty, Dr. Moran served as director of an outpatient clinic and a college counseling center, as well as director of an inpatient day treatment program for patients with chronic mental illness. He also completed postdoctoral training in brief therapy at the Mental Research Institute in Palo Alto, CA.

**Melanie Paci, Psy.D.** Dr. Paci joined the VAMC psychology staff in 2009. As a member of the multidisciplinary team in the Psychosocial Rehabilitation and Recovery Center (PRRC), she provides individual and group therapy to Veterans with serious and persistent mental illness. She also conducts evaluations, consultations, crisis intervention, and short-term therapy in Primary Care Behavioral Health. Prior to joining the VAMC, Dr. Paci was employed as a supervising psychologist at St. Luke’s-Roosevelt Hospital (NY), where she developed the Co-occurring Disorders program, provided psychological interventions for individuals with chronic mental illness, and supervised psychology trainees. Dr. Paci received her doctorate with an academic concentration in Serious and Persistent Mental Illness from Long Island University/C.W. Post Campus. She completed a pre-doctoral internship at the Manhattan campus of the VAMC, where she provided services in Health Psychology, Neuropsychology, Acute Inpatient Psychiatry and the PTSD clinic. In her spare time, Dr. Paci enjoys family gatherings, exercising, cooking, music, reading, and visiting her hometown in New York.

**Nishant Patel, Psy.D.** Dr. Patel is a clinical psychologist with the Trauma Services department at VAMC and provides individual therapy at Fort Belvoir to Veterans afflicted with traumatic stress. Dr. Patel completed his B.A. in Psychology at Rutgers College and his doctorate in clinical psychology at Widener University. Dr. Patel completed his post-doctoral fellowship while working with Heartland Alliance in Kurdistan (Northern Iraq), conducting training and delivering technical assistance to local mental health paraprofessionals, therapy to Iraqi survivors of torture and managing programs. Prior to his position at VAMC, Dr. Patel served as the program coordinator and later acting director of the Cross-Cultural Counseling Center at the International Institute of New Jersey, providing treatment to survivors of torture seeking political asylum, international human trafficking survivors and immigrant survivors of domestic violence. Dr. Patel’s professional interests primarily include trauma work and cultural psychology. In his leisure time, Dr. Patel enjoys spending time with family and friends in Washington and NJ/NY, playing tennis, watching sports, reading and traveling.

**Miguel Roberts, Ph.D.** Dr. Roberts is a clinical psychologist and Director of the Trauma Services Program at the Washington DC VAMC. He obtained his Ph.D. from the University of Mississippi, completed his pre-doctoral internship at University of Alabama at Birmingham, and a NIDA Funded
post-doctoral fellowship in PTSD and Substance Use Disorders at Duke University Medical Center. Prior to joining the VA, Dr. Roberts worked for the Department of Defense where he focused on Psychological Health and Resilience policies and program development and evaluation at the Defense Centers of Excellence (DCoE) for Psychological Health and Traumatic Brain Injury. He was also formerly employed as a staff psychologist at the VA Maryland Health Care System (Baltimore Division) in the Trauma Recovery Program. Dr. Roberts’ clinical and research interest include objective assessment of PTSD, evidenced based treatments, and newer forms of Cognitive Behavioral Therapy including Acceptance and Commitment Therapy.

Howard M. Schulman, Ph.D. Dr. Schulman, Chief of the Psychology Service at the Washington DC VAMC has been in practice since 1974. He received his Bachelor of Arts degree from Brooklyn College and his Ph.D. in Clinical Psychology from the University of Florida. Having served in the VA during his graduate training, Dr. Schulman took a 28 year break from the VA, coming to the Washington VAMC in 2000. Dr. Schulman had an extended detail as the VISN 5 Mental Health Officer. He has been the unit psychologist for the Partial Hospitalization Program here at the DC VA, has also worked on the substance abuse program, and directed the Primary Care Behavioral Health Clinic for a number of years. Prior to coming to the VA Dr. Schulman was on the staff of the University of Maryland Medical School where he worked on a national heart disease clinical research/prevention project (M.R.F.I.T.) He worked for ten years at a community mental health center offering clinical services to children, adolescents, adults and couples. He has been the Chief Consulting Psychologist of the Prince George’s County Correctional Center; has been a consultant to a number of local agencies in the areas of forensic evaluations, problems of victims of crime; geriatric problems; problems of severely disturbed adolescents and children; and family issues and problems. Dr. Schulman has published in the area of neuropsychology. He did two years of post-doctoral training in Strategic Family Therapy with Jay Haley and Cloe Madanes. He has taught and supervised graduate students and other professionals in the area of strategic therapy and has served as Training Director of the Center for Brief Therapy. Dr. Schulman’s current professional interests include: psychology training; service delivery within the VA system, problem solving therapies; story-telling and metaphor in psychotherapy; issues of systems; psychotherapy with treatment resistant patients; crisis intervention and hypnosis. Besides his administrative duties in the mental health and psychology service, Dr. Schulman enjoys teaching and supervising interns and externs and for many years offered a weekly seminar, “The Art and Science of Psychotherapy” to our interns. He enjoys people, movies, reading, travel, cooking, volunteer work in his community and most importantly spending time with his family (especially his 12 grandchildren).

Jennifer Strang, Ph.D. is a neuropsychologist at the Washington DC VAMC. She conducts neuropsychological evaluations with military Veterans with known or suspected cognitive deficits. Her areas of clinical and research interest include traumatic brain injury, cognitive rehabilitation, dementia, and the cognitive effects of neuropsychiatric disorders, such as depression and PTSD. Dr. Strang received B.A. and M.S. degrees from the University of Rochester and a Ph.D. from Arizona State University. She completed internship training at the Buffalo VAMC and a two-year postdoctoral fellowship at Rehab Without Walls, an outpatient neurorehabilitation facility in Phoenix, AZ. She has extensive experience working with the military population at Fort Belvoir, VA. In addition to providing clinical services, she assisted in the development of the TBI Clinic at the Fort Belvoir Community Hospital. Prior to coming to the VAMC in June 2014, she served as the TBI Program Manager for the Northern Regional Medical Command, U.S. Army where she oversaw the TBI programs at all of the military treatment facilities in the northeast region of the United States. In her leisure time, Dr. Strang enjoys hiking, traveling, reading, being outdoors, and attending arts events in the Washington, DC area.

Candice Wanhatalo, Ph.D. Dr. Wanhatalo primarily provides individual, couples, and group psychotherapy as the primary psychologist in the geriatric BHIP team in the Mental Health Clinic. She integrates cognitive-behavioral, systems, and client-centered approaches in her clinical work. Prior to
beginning her position at the VA, Dr. Wanhatalo provided individual and family psychotherapy in the Fairfax County community mental health system. She obtained her B.A. from the Pennsylvania State University and her M.A. and Ph.D. from George Mason University. She completed her internship at the Woodburn Center for Community Mental Health in Annandale, Va. In her free time, Dr. Wanhatalo enjoys listening to music at home, attending live music concerts, and spending time with loved-ones in the Baltimore area.

**Leonard Tate, Ph.D.** Dr. Tate is currently providing psychological services to Veterans with alcohol/substance abuse issues in the Substance Abuse and Rehabilitation Program. Dr. Tate received his M.S. and Ph.D. in Clinical Psychology from Saint Louis University (St. Louis, MO). He completed his doctoral internship and residency at St. Elizabeth's Hospital (Washington DC), where he treated the severely mentally ill, in both inpatient and outpatient settings. Dr. Tate has also worked with substance abusing and mentally ill inmates in forensic settings. He is a licensed Clinical Psychologist in the State of Maryland. He enjoys photography, reading, listening to live jazz and poetry, and watching movies.

**Tracela White, Ph.D.** Dr. White is a clinical psychologist and Program Director for the Washington DC VA Medical Center’s Psychosocial Rehabilitation and Recovery Center (PRRC). In her role as Program Director of the PRRC, she is responsible for the program development and management of care for Veterans who are diagnosed with Serious Mental Illness (SMI). She is also a member of the Fellowship Training Committee in the specialty area of Psychosocial Rehabilitation/Recovery General Health with a focus on Geropsychology. Dr. White has a strong history of clinical and research mentorship of practicum students, interns, and post-doctoral fellows. She was appointed to DCVAMC Institutional Review Board (IRB) in 2011 and presently serves as an active member of the IRB. Dr. White is also trained in the following evidence based treatments: Cognitive Behavioral Therapy for Psychosis and Problem Solving Therapy. She also has experience in the delivery of manualized mindfulness based techniques such as Stress Management. She received her undergraduate education at Spelman College, obtained her doctoral degree from Kent State University, and completed a post-doctoral fellowship in Geriatric Psychiatry at the University of Pennsylvania School of Medicine. Over a period of ten years Dr. White, who is licensed in both Pennsylvania and Georgia, has served in multiple roles. As a faculty member at the University of Pennsylvania and Thomas Jefferson University, she was actively involved in intervention research focusing on depression, suicidal ideation, functional impairment, and Alzheimer's disease. Prior to her arrival at the DCVAMC, Dr. White was Clinical Director for two mental health departments for the Georgia State Department of Corrections. During this time, she was responsible for program development, supervision of mental health counselors, psychological evaluation and diagnostics, and crisis intervention. Dr. White enjoys the arts, reading, going out to dinner, shopping, and walking with her two beautiful standard poodles, Ebon and Odin.

**Slavomir Zapata, Ph.D.** Dr. Zapata is the Director of Psychology Training Programs, where he has program and personnel management responsibilities for all three components of the Psychology Training Program; the Post-doctoral Fellowship training program, the Psychology Internship training program and the practicum student training program. Dr. Zapata has has served as the acting Chief of Psychology Service from March to December 2014. He is also the Coordinator of the Health Improvement Program (HIP) and works primarily with Veterans diagnosed with serious mental illness (SMI) and co-morbid medical disorders. Until recently, he has served as the Medical Center’s Evidence-Based Psychotherapy Coordinator. Dr. Zapata in evidence based psychotherapy interventions including Problem Solving Therapy and Cognitive Behavioral Therapy for Psychosis. He serves on the Disruptive Behavior Management Committee and is a trainer for the management and prevention of disruptive behavior at the Washington DC VA Medical Center. Dr. Zapata is also an adjunct professor at George Mason University where he provides supervision for the assessment practicum students. His research experience includes serving as the Site PI for a multisite study to Reduce Internalized Stigma in People with SMI. Dr. Zapata has served on national review panels for
funding decisions for programs and positions in VA and the Department of Defense. Dr. Zapata obtained his Bachelor of Arts from Boston University and received his Ph.D. in Clinical Psychology from George Mason University. He interned at the Washington D.C. VA Medical Center. He is certified in program and project management, holding the Federal Acquisition Center Project and Program Management Certification (FAC-P/PM). Prior to joining the medical center, Dr. Zapata was employed as the Coordinator of the Cognitive Assessment Program, a subsidiary of the Center for Behavioral and Cognitive Development in Fairfax, Virginia. His professional interests include health psychology, crisis intervention, relationship issues, and integrated dual-diagnosis assessment and treatment. When not working, he enjoys exploring the Washington D.C. area, spending time with his family and friends, and reading.

Parin Zaveri, Ph.D. Dr. Zaveri provides individual and group therapy to Veterans diagnosed with severe and persistent mental illness as part of the interdisciplinary Psychosocial Rehabilitation and Recovery Center (PRRC). He also serves on the Training Committee and as a clinical mentor for the Trauma Services post-doctoral fellow. Since joining the Washington DC VAMC in 2008, Dr. Zaveri has received additional VA training on several evidence-based treatments, including Cognitive Behavior Therapy, Acceptance and Commitment Therapy, Interpersonal Therapy, Cognitive Processing Therapy, and Problem-Solving Training. His professional interests include provision of clinical supervision/mentoring, acceptance-based interventions, and suicidality. Dr. Zaveri received his Bachelor of Science degree from Trinity College in Hartford, Connecticut, and his Ph.D. from George Mason University in Fairfax, Virginia. As a pre-doctoral intern, Dr. Zaveri worked on an inpatient unit at Trenton Psychiatric Hospital in New Jersey. Prior to joining the medical center in 2008, Dr. Zaveri was a post-doctoral fellow and, later, a staff psychologist in the Trauma Disorders Program at Sheppard Pratt Hospital in Towson, Maryland. Dr. Zaveri is licensed to practice psychology in Maryland. His outside interests include spending time with his family and friends, exercising, and reading.