

Vanderbilt-Veterans Affairs Internship in Professional Psychology

Information Brochure

2017-2018 Recruitment Cycle

Vanderbilt University School of Medicine

Vanderbilt University Psychological and Counselling Center

Veterans Affairs Tennessee Valley Healthcare System

Program At-a-Glance

The Vanderbilt University (VU)-Department of Veterans Affairs (VA) Internship in Professional Psychology is a cooperative effort between the VU Department of Psychiatry & Behavioral Sciences and the VA. The Internship is a consortium consisting of the VU Department of Psychiatry & Behavioral Sciences, Divisions of Adult Psychiatry and Child & Adolescent Psychiatry, and Psychological and Counseling Center (PCC); and the Alvin C. York and Nashville campuses of the VA Tennessee Valley Healthcare System (TVHS). The Consortium's organizations are located in a large university medical center in Nashville, with the exception of the Alvin C. York campus which is located about 37 miles away in Murfreesboro. The Consortium is a member of the Internship and Postdoctoral Programs in Professional Psychology (AAPIC) and has been continuously approved by the American Psychological Association (APA) since 1971. An APA site visit was completed in 2013 and the Consortium was approved for the maximum 7 years. Key details of the internship are briefly reviewed below. For complete details on specific training experiences and application requirements/procedures, please consult the Table of Contents.

TRAINING PERIOD: July 3, 2017 – June 29, 2018 (Vanderbilt Psychiatry)
June 26, 2017 – June 22, 2018 (VA)

POSITIONS AVAILABLE: We will have 12 full-time positions available in 2017-2018:

Vanderbilt Psychiatry & Behavioral Sciences:

Adult- Generalist Track: 1 (NMS #: 156612)
Adult- Psychosis Emphasis Track: 1 (NMS #: 156620)
Child & Adolescent: 1 (NMS #: 156614)
Psychological & Counseling Center: 3 (NMS #: 156617)

Veterans Affairs:

Adult- Generalist Track: 5 (NMS #: 156618)
Adult- Neuropsychology Track: 1 (NMS #: 156619)

STIPENDS: \$25,000 (Vanderbilt Psychiatry); \$24,014 (VA)

ELIGIBILITY: Applicants must be enrolled in an American Psychological Association (APA) or Canadian Psychological Association (CPA) accredited graduate program and have completed at least three years of graduate academic work. U.S. citizenship is required for a primary placement in the VA Tennessee Valley Healthcare System.

HOW TO APPLY: The Consortium follows the policies and procedures of the [Association of Psychology Postdoctoral and Internship Centers](#) (APPIC), including participation in the Match. All application materials are submitted via the APPIC online application system (www.appic.org). Applicants may apply for one or multiple tracks within the Consortium.

APPLICATION DEADLINE: November 2, 2016

INTERVIEWS: Following initial evaluation of applications, a group of applicants will be invited to interview. Interviews are a full day event. Applicants selected for interview will be notified by December 12th, 2016. For applicants that applied to multiple tracks, and are selected to interview for more than one track, interviews will be coordinated over 2 days. Interviews will be conducted on the following dates:

Vanderbilt Adult Psychiatry- Generalist Track: December 9, 12, 15 and January 6

Vanderbilt Adult Psychiatry- Psychosis Emphasis Track: December 9, 12, 15 and January 6

Vanderbilt Child & Adolescent Psychiatry: December 5, 13, 15 and January 11

Vanderbilt PCC: December 5, 12 and January 6, 9

VA (all tracks): December 5, 12, 16 and January 6, 9, 12

ADMINISTRATIVE STRUCTURE

CONSORTIUM DIRECTOR

Blythe Corbett, Ph.D.

ASSOCIATE CONSORTIUM DIRECTOR

Randolph Petersen, Ph.D.

TRAINING DIRECTOR- VANDERBILT ADULT AND CHILD & ADOLESCENT PSYCHIATRY

Kirsten Haman, Ph.D.

TRAINING DIRECTOR- VANDERBILT PSYCHOLOGICAL & COUNSELLING CENTER

Monicah Muhomba, Ph.D.

TRAINING DIRECTOR- VETERANS AFFAIRS TENNESSEE VALLEY HEALTH SYSTEM

Erin Patel, Psy.D.

This brochure can be downloaded from our website:
<https://medschool.vanderbilt.edu/vu-vapsychinternship/>

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OVERVIEW OF THE CONSORTIUM

The Vanderbilt University (VU)-Department of Veterans Affairs (VA) Clinical Psychology Training Program is a cooperative effort between the VU Department of Psychiatry & Behavioral Sciences and the VA. The Internship is a consortium consisting of the following Agencies:

- 1) VU Psychiatry & Behavioral Sciences: Division of Adult Psychiatry
- 2) VU Psychiatry & Behavioral Sciences: Division of Child & Adolescent Psychiatry
- 3) VU Psychiatry & Behavioral Sciences: Psychological and Counseling Center
- 4) VA Tennessee Valley Healthcare System (TVHS): Alvin C. York and Nashville campuses

The number of different agencies and their different missions allows the Consortium to offer a wide variety of clinical training opportunities. Applicants apply to work at one of the four agencies separately (i.e. primary placement). The consortium is structured to provide an in-depth, immersive experience at one agency which should be congruent with the intern's primary interest area (e.g. university counseling center, academic medical center, VA). The Consortium also provides a substantive training experience in a secondary placement, which allows for the pursuit of special interests or the strengthening of areas of weakness in the intern's past training experience. Applicants should expect the internship workload to range from 40 to 50 hours a week. You are urged to discuss this issue with the current year's intern's if/when you come to interview, as they will have the current, most accurate knowledge of this issue. Please be aware that workload will vary somewhat from week to week, from site to site and within the VA from rotation to rotation. There is also some variance due to intern-specific factors such as experience in report writing and research interests.

Each agency is administratively independent and represented on the Training Committee which, under the leadership of the Consortium Director(s), is the coordinating body of the Consortium's program's policies and goals. The administrative structure and governance of the training program are described in detail in the "Administrative Structure" and "Governance" sections. The Consortium's By-laws are available for download on the Consortium's webpage.

The consortium organizations are located in a large university medical center in Nashville, with the exception of the Alvin C. York campus which is located about 37 miles away in Murfreesboro. The VU-VA Clinical Psychology Training Program is a member of the Internship and Postdoctoral Programs in Professional Psychology (AAPIC) and has been continuously approved by the American Psychological Association (APA) since 1971. An APA site visit was completed in 2013 and the Consortium was approved for the maximum 7 years.

GOALS OF PSYCHOLOGY INTERNSHIP TRAINING

The training program is conceptually grounded in the scientist-practitioner model of the profession. All of the Consortium agencies share the recognition that the primary focus of the internship year is on the acquisition of clinical experience in a well-supervised environment conducive to learning and professional development. Training in clinical techniques across the Consortium is presented in relation to the framework of science that underpins clinical practice. The internship is located in an academic/medical center setting which offers the opportunity for involvement in research and interns are strongly encouraged to avail themselves of these opportunities.

The Consortium agencies also share agreed upon training goals and objectives. Interns come into the program as advanced graduate students. Our primary goal is to provide the experience, training, supervision, support, and guidance interns need to make the transition from student to journeyman professional, able to function competently, autonomously, and with confidence in a variety of clinical settings.

Flowing from this goal is the commitment to provide sufficient breadth of training across the traditional areas of psychological practice to allow graduates of the internship to move comfortably into a variety of clinical settings, while at the same time providing the flexibility for interns to pursue specialized interests and to gain experience in more innovative areas of practice. Training experiences and objectives are therefore structured to ensure that each intern will achieve the necessary level of competence in the basic core of assessment, intervention, and consultative skills expected of all professional psychologists while still allowing room for specialization. The opportunity to work in two or more of the participating agencies during the year helps to provide both breadth and depth of experience.

Additional objectives of the Consortium's training program are to foster professional development, and to foster comfort in working relationships with other professional disciplines. Our location in a major university/medical center complex facilitates progress toward these objectives. Throughout the Consortium psychologists interact with a wide range of other clinical disciplines, including anesthesiology, audiology, dietetics, nursing, education, health care administration, medicine, neurology, physical therapy, psychiatry, social work, speech therapy, surgery, and vocational rehabilitation. The focus on training and education in the Vanderbilt and VA communities leads to the existence of numerous learning opportunities not directly sponsored by the Consortium. Participation in professionally relevant seminars, rounds, workshops, and meetings on a local, state, regional and national level is encouraged.

INTERNSHIP STRUCTURE

Although a wide variety of training experiences are available within the Consortium, any single intern's experience will be limited to a few sites that are congruent with the intern's training objectives. On Uniform Notification Day, applicants are matched with a specific agency (i.e. primary placement). Each Consortium intern devotes three and one half days per week to clinical training and supervision at this primary placement. It is, therefore, very important to review carefully the descriptions of the Consortium agencies to decide which agency/agencies you would consider for potential primary placement based on your training interests

Each intern will spend one day a week at a secondary placement, which must be at a site different from the primary placement. Selection of a secondary placement takes place after the beginning of the internship year and plays no role in acceptance decisions. Prior to secondary placement selection interns are oriented to all of the Consortium agencies and available training experiences. Final assignment of a secondary placement takes into account the intern's expressed preferences; faculty and intern evaluation of the intern's training needs, and the availability of particular experiences and supervision. Secondary placement activities are scheduled on the same day of the week, currently Thursday.

The specific experience will differ according to placement and rotation (within VA), but for all interns supervised clinical service delivery is primary vehicle for training. Each intern will experience a mix of supervised assessment, intervention (individual therapy, possibly group and couple therapy and behavioral medicine interventions depending upon interest and placement), and consultation experiences. Every intern will experience at least 500 hours of face to face service delivery time; the majority of the time remaining will be spent in supervised documentation of service delivery, supervision, and, depending on the specific training experiences selected by the intern, research.

All Consortium interns attend regularly scheduled case conferences and didactic seminars that are organized as part of the internship experience. These mandatory consortium-wide training activities occupy approximately one half day each week, currently on Friday mornings. In addition to the presentation of clinically or professionally relevant content, a major objective of these Consortium-wide training activities is to provide a structure within which members of the intern class may interact and learn from one another. There is also an abundance of conferences, colloquia, workshops, and research opportunities open to interns in the Consortium settings, in the larger university community, and the Nashville area. Participation in some of these activities can be arranged through negotiation with your training site, and will serve to enrich the internship year and provide a setting for valuable interaction with other professionals.

The following examples may help to illustrate some of the possible ways in which interns' time could be distributed. Intern A, with a primary placement at the Psychological and Counseling

Center and a secondary placement at Adult Psychiatry would spend all day Monday, Tuesday, Wednesday, and Friday afternoon at the Psychological and Counseling Center (PCC), Thursday at Adult Psychiatry (AP), and Friday morning in Consortium Training activities. Intern B, with a primary placement at the Nashville VA and a secondary placement at the PCC would spend all day Monday, Tuesday, Wednesday and Friday afternoon at the Nashville VA, Thursday at the PCC and Friday morning in Consortium training activities.

	Monday	Tuesday	Wednesday	Thursday	Friday
Intern A	PCC	PCC	PCC	Adult Psychiatry	AM: Didactics PM: PCC
Intern B	Nashville VA	Nashville VA	Nashville VA	PCC	AM: Didactics PM: Nashville VA

VANDERBILT ADULT PSYCHIATRY: GENERALIST TRACK

Training Director: Kirsten L. Haman, Ph.D., Assistant Professor of Clinical Psychiatry

Email: kirsten.haman@vanderbilt.edu

Number of Positions: 1

Salary: \$25,000

Term: July 3, 2017 - June 29, 2018

National Matching Service (NMS) Number: 156612

Overview

Training in the provision of psychological services for adult clients is conducted through Vanderbilt Adult Psychiatry outpatient clinics and the inpatient setting of the Vanderbilt Psychiatric Hospital. The clinics are staffed by teams of multidisciplinary professionals from the fields of psychology, psychiatry, nursing, and social work. Adults with chronic mental illness, those who receive state-sponsored insurance coverage, and the working poor with mental health needs are eligible for treatment regardless of race, gender, age, religion, sexual orientation, or ethnic origin. Adult Psychiatry offers services to a broad spectrum of mental health clients ranging from those with mild impairment to severe disability. Co-morbid psychological, personality, developmental, and physical illness diagnoses are common for this population, as is a history of traumatic experiences and socioeconomic challenges.

Potential for Change: We are in the process of hiring several additional faculty for the Behavioral Medicine assessment component. These faculty will start in October 2016.

Training Objectives

Fostering professional development as an independent clinical psychologist is the primary goal of training. Interns will obtain enhanced competence in the following areas: evidence-based psychological interventions, assessment in forensic and/or behavioral medicine populations, and consultation with multidisciplinary treatment team members. Additional objectives include: proficiency with intake procedures; increased familiarity with clinical diagnosis and case conceptualization; development of skills in interacting and consulting with other professionals; understanding and using relevant ethical and legal principles arising in the treatment of adults; and the development of sensitivity and competency in providing services to a racially, culturally, and socio-economically diverse patient population.

Training Experiences/Structure

The structure for this placement includes three and one-half days in the Adult Psychiatry inpatient and outpatient settings, one day of placement at a secondary site within the consortium, and one-half day of didactic training with all consortium interns. Two and one-half days in Adult Psychiatry will focus on learning and conducting individual and group psychotherapy. Delivery of Cognitive-Behavioral Therapy, Dialectical Behavioral Skills Training, and other evidence-based psychotherapy techniques is emphasized. The intern will also have the option to lead and co-lead several ongoing psychotherapy groups. One half-to one whole day a week is focused on clinical assessment, including opportunities to take part in behavioral medicine assessments and/or forensic assessment.

The internship experience takes place in a clinical setting and the intern will gain valuable experience with managed care (primarily Tennessee's version of Medicaid), electronic medical record keeping, and aspects of working within the organizational and administrative structure of a busy mental health center.

The intern whose primary placement is in Adult Psychiatry will receive supervision from multiple sources, including: Weekly individual supervision with the primary therapy supervisor, Dr. Kirsten Haman, focusing on psychotherapy cases; weekly supervision for group therapy experiences, with the supervisor varying according to the group the intern chooses to co-lead; individual supervision with the assessment supervisor, either Dr. Kimberly Brown for the forensic assessment or one of the newly-hired faculty in Bariatric Surgery for the Behavioral Medicine assessment experience; and additional weekly individual supervision from the supervisor of his or her secondary placement site. Applicants interested in learning more about forensic psychology training experiences offered at Vanderbilt Psychiatry are encouraged to visit the websites for Vanderbilt Forensic Psychiatry and the Vanderbilt Comprehensive Assessment Program.

Didactic training occurs weekly with all interns throughout the consortium. Half of the weekly meeting is spent participating in a case conference that is facilitated by a Vanderbilt, VA, or community psychologist. Each week a different intern presents a case and a different facilitator is present. The second half of the meeting consists of a guest speaker or intern who presents on topics pertinent to the science and practice of psychology. There is also an open invitation for interns to attend additional training opportunities throughout the year, such as psychiatry and general medical center Grand Rounds, psychiatric resident psychotherapy trainings, and a neuropsychological assessment seminar held at the VA.

Research Possibilities

There are active research programs ongoing in the Department of Psychiatry & Behavioral Sciences. Involvement in clinical research is an option for the intern; however, research

participation will require a commitment of additional time on the part of the intern. Before accepting any invitations to conduct research, the intern is expected to discuss the matter with the internship site director (Dr. Haman) and the Co-Directors of the Internship Consortium (Drs. Woodward and Jimenez). However, we encourage involvement in a research project.

We have a consortium-wide Research Day presentation at the end of the year. Each intern will present a topic of scholarly and scientific research in an interest area of their choosing. This requirement can be met in several ways: by completing a unique research or quality improvement project in collaboration with a faculty member on-site during the training year; by presenting their previous or ongoing research, with emphasis on demonstrating the clinical relevance of their findings (this may include work related to the dissertation); or by presenting a case study highlighting and incorporating the relevant research literature.

Secondary Placement Selection

The intern collaborates with his or her supervisor to accommodate the scheduling needs of both primary and secondary placements. The intern whose primary placement is in Adult Psychiatry will interview for a secondary placement at one of the other sites in the consortium, such as the PCC or the VA. For an intern whose primary placement is at one of the other sites in the consortium, Adult Psychiatry offers several potential secondary placement options. Specific options are determined each year based on supervisor availability but may include experiences in child and adolescent inpatient assessment, forensic assessment, behavioral medicine, and neuropsychological assessment.

Additional Criteria for Acceptance

Successful candidates will have experience conducting evidence-based therapy and psychological assessment as well as having an attitude of cooperation and motivation. Consistent with the overall requirements of the Consortium, applicants should have a minimum of 550 total intervention and assessment hours as defined by AAPI. While not required, it is recommended that applicants have at least 150 hours of assessment experience.

Note: All interns with primary placements in the Vanderbilt Department of Psychiatry & Behavioral Sciences must pass a background check. This will be performed after match day. Match results and selection decisions are contingent on passing the background check. No prospective Consortium intern has ever been refused employment as a result of the background check, but it is a possibility. Several have had difficulty, in all cases because of past legal problems they chose not to reveal during the application process. Department of Psychiatry & Behavioral Sciences interns performing a secondary placement in the VA must also complete a VA background check.

Affiliated Faculty and Staff

Kimberly Brown, Ph.D.

Assistant Professor of Psychiatry

Interests: Forensic psychology and competency evaluations including competency to stand trial; competency to waive Miranda rights; insanity defense; risk assessment of violence and sexual violence; fitness for duty evaluations; pre-employment psychological evaluations; personality disorders; psychopathy; malingering

Kirsten Haman, Ph.D.

Assistant Professor of Clinical Psychiatry

Interests: Training and supervision of CBT; efficacy of CBT for anxiety and depressive disorders; relation of medical conditions (cancer, POTS) to anxiety and depression

Monica Jacobs, Psy.D.

Assistant Professor of Clinical Psychiatry

Interests: Neuropsychological assessment

Aida Jimenez, Ph.D.

Associate Professor of Psychiatry and Behavioral Sciences

Interests: Marital and family therapy; disparity in mental health; multiculturalism; supervision

Neil Woodward, Ph.D.

Associate Professor of Psychiatry and Psychology

Interests: Neuropsychological assessment; psychotic disorders; neuroimaging

VANDERBILT ADULT PSYCHIATRY: PSYCHOSIS EMPHASIS TRACK

Primary Supervisor: Neil D. Woodward, Ph.D., Assistant Professor of Psychiatry

Email: neil.woodward@vanderbilt.edu

Number of Positions: 1

Salary: \$25,000

Term: July 3, 2017 - June 29, 2018

National Matching Service (NMS) Number: 156620

Overview

The Adult Psychiatry- Psychosis Emphasis track is designed to provide interns generalist training in adult clinical psychology with an emphasis on clinical assessment, intervention, and research on psychotic disorders, particularly early-stage psychosis. The program is geared towards individuals with a background in research, assessment, and treatment of psychotic disorders that plan on pursuing academic careers in clinical research. Core training in psychotic disorders is supplemented by mandatory training in neuropsychological assessment and an elective experience in psychotherapy. Training is conducted through the Vanderbilt Psychotic Disorders and Early Psychosis Programs (<https://medschool.vanderbilt.edu/early-psychosis-program/>).

Training Objectives

Consistent with the overall purpose of the clinical psychology internship, the primary goal of the Adult Psychiatry-Psychosis Emphasis track is on the acquisition of clinical skills. Specific training objectives of the Adult Psychiatry- Psychosis Emphasis program include:

- Provide interns with a core knowledge base of the clinical features, treatment, neurobiology, and psychosocial factors involved in psychotic disorders;
- Provide comprehensive training and experience in the assessment and/or psychotherapeutic treatment of psychotic disorders;
- Provide comprehensive training in neuropsychological assessment of older individuals with suspected cognitive impairment and/or epilepsy;
- Further develop the intern's research skills and expertise;

At the end of the internship, the intern should be able to function competently, autonomously, and with confidence in a variety of clinical settings.

Training Experiences/Structure

Consistent with the overall structure of the Consortium, the Adult Psychiatry-Psychosis Emphasis intern will spend 3.5 days per week at their primary placement in Adult Psychiatry, one day per week (currently Thursdays) at a secondary placement within the Consortium, and one-half day of didactic training (currently Friday Mornings). Within the primary placement, one and a half days will focus on clinical assessment and research of psychotic disorders. For the remaining 2 days per week, interns will choose two elective training experiences (each 1 day per week, all year): Geriatric Neuropsychology, Epilepsy Neuropsychology, and Psychotherapy. At least one of the elective training experiences must be in neuropsychological assessment (i.e. geriatric or epilepsy). For example, an intern may spend 1.5 days per week in psychosis assessment/research, 1 day per week in geriatric neuropsychology, and 1 day per week engaged in psychotherapy. Details regarding the psychosis emphasis training and elective neuropsychology and psychotherapy training experiences are described in detail below.

Core Training Experience: Psychosis Assessment, Treatment, and Research

Supervisor(s): Neil D. Woodward, Ph.D.

Location: Vanderbilt Psychiatric Hospital

Working within a multidisciplinary treatment and research team, the intern will receive training in the following areas:

- Diagnostic Interviewing and Clinical Assessment of Psychotic Disorders. The intern will have the opportunity to receive training and become competent in the administration of semi-structured diagnostic interviews and clinical symptom rating scales commonly used in evaluating and tracking outcomes in individuals with psychotic disorders. The Intern will also receive training and become competent in the administration and interpretation of clinical neuropsychological tests commonly used to assess individuals with a psychotic disorder. In collaboration with other psychologists, psychiatrists, and allied health professionals, the intern will determine working diagnoses and eligibility for participation in clinical research. Interns will be asked to summarize results of their assessments at multidisciplinary team meetings and, where relevant, prepare neuropsychological reports.
- Research. Research is an important component of the training experience. The intern will be expected to become involved in on-going programs of research and complete an individual research project. Current studies include neuroimaging investigations of brain function (i.e. working memory), functional connectivity, brain structure, and white matter integrity. A significant focus of on-going research projects is on the early stage of psychotic disorders. Interns will also have access to a large repository of existing clinical, cognitive, and neuroimaging data collected on several hundred individuals with a psychotic disorder and healthy subjects.

At the end of training, the intern should be able to:

- Describe the biological, psychological, and social factors involved in the etiology, clinical features, and treatment of psychotic disorders;
- Conduct structured/unstructured clinical interviews for assessing and diagnosing psychotic disorders;
- Administer and interpret clinical neuropsychological measures commonly used to evaluate individuals with a psychotic illness;
- Communicate results of psychological/neuropsychological assessments and subsequent recommendations to patients and their families, and/or other healthcare professionals in the context of a multidisciplinary team setting;

Setting: The Vanderbilt Psychotic Disorders Program (VPDP) consists of a 22-bed unit within the VPH, a partial hospitalization program, and an outpatient clinic. The VPDP includes clinicians and researchers who assess, treat, and study patients with a psychotic disorder. The clinical focus of the program is on the acute stabilization of psychotic inpatients at VPH and the implementation of long-term treatment plans through outpatient services affiliated with the Department of Psychiatry & Behavioral Sciences. Each year the VPDP provides treatment to approximately 600 patients with a primary psychotic disorder, including over 90 first episode patients.

Elective Training Experience: Geriatric Neuropsychology

Supervisor(s): Neil D. Woodward, Ph.D.; Monica Jacobs, Psy.D., ABPP-CN

Location: Vanderbilt Psychiatric Hospital

The Geriatric Neuropsychology rotation provides training in neuropsychological evaluations of older individuals with suspected cognitive impairment. Referrals come mainly from the Vanderbilt Psychiatry Memory and Aging Clinic (VMAC), an outpatient clinic focused on assessment and treatment of older individuals with a wide array of psychological and neurological disorders. These include depression, mild cognitive impairment, Alzheimer's disease, fronto-temporal dementia, stroke, vascular dementia, and dementia with Lewy bodies. Training emphasizes the role of the neuropsychologist in the context of a multi-disciplinary team which includes a geriatric psychiatrist and registered nurse. Under direct supervision, interns will conduct clinical interviews; administer, score, and interpret neuropsychological tests; prepare neuropsychological reports; and provide feedback to patients and families.

Interns selecting this training experience will develop the following competencies:

- Proficient in the administration and interpretation of clinical neuropsychological measures commonly used to evaluate older individuals with suspected cognitive impairment;

- Demonstrable understanding of the neuropathology, differential diagnosis, and treatment of dementias and other cognitive disorders associated with aging;
- Communicating results of psychological/neuropsychological assessments and subsequent recommendations to patients and their families, and other healthcare professionals in the context of a multidisciplinary team setting;

Elective Training Experience: Epilepsy Neuropsychology

Supervisor(s): Monica Jacobs, Psy.D., ABPP-CN

Location: Vanderbilt Psychiatric Hospital

This is an outpatient adult neuropsychological rotation at the Vanderbilt Psychiatric Hospital. Interns will see patients referred from the Vanderbilt Epilepsy Program, including patients with intractable epilepsy referred as part of their pre- and post-surgical workups, patients with cognitive impairment related to epilepsy, and patients with non-epileptic spells. Interns may also have the opportunity to observe Wada testing and participate in multidisciplinary case conferences. Interns will see one patient per week and will be responsible for interviewing, testing scoring, and report writing. Turnaround time for reports is one week. Interns will also be expected to set up times to provide feedback to patients regarding test results. It is expected that interns will have some experience with the administration of neuropsychological batteries and report writing. By the end of internship, it is expected that interns will be able to discuss lateralization and localization of deficits in patients with epilepsy, be able to make pertinent recommendations for patients with epilepsy related cognitive impairment, and differentiate between psychogenic and neurologically based cognitive impairment. It is also expected that interns will be proficient at writing reports that integrate information obtained from the clinical interview and medical records with the test findings, and will be able to convey this information to patients and their families in feedback sessions.

Interns selecting this training experience will develop the following competencies:

- Proficient in the administration and interpretation of clinical neuropsychological measures commonly used in the evaluation of individuals with a seizure disorder;
- Demonstrable understanding of the neuropathology, differential diagnosis, and treatment of seizure disorders;
- Communicating results of psychological/neuropsychological assessments and subsequent recommendations to patients and their families, and other healthcare professionals in the context of a multidisciplinary team setting;

Elective Training Experience: Psychotherapy

Supervisor(s): Kirsten Haman, Ph.D.; Heather Kreth, Psy.D.

Location: Vanderbilt Psychiatric Hospital

The primary focus of this elective experience is on the provision of individual and group therapy to a variety of patient populations in: 1) Partial Hospitalization Program (PHP); and 2) outpatient settings.

- 1) Rotation through the PHP allows the intern experience with designing and leading group therapy with adult patients struggling from an array of symptomatology including depression, anxiety, mood regulation problems and psychosis. It will also provide opportunities for collaboration with the patient and multi-disciplinary team in formulation of treatment plans and delivery of patient care.
- 2) An additional training experience focused on outpatient psychotherapy for individuals with a psychotic disorder, primarily first episode patients, is also offered. Individuals experiencing their first psychotic episode are usually transitioned from the inpatient setting to the outpatient clinic with both psychiatrist and psychotherapist follow-up appointments. Patients meet with the psychotherapist prior to discharge to ensure smooth transition between the levels of services (inpatients to PHP to outpatient). Individual psychotherapy places a strong emphasis on engagement skills, with a focus on cognitive-behavioral therapy (CBT) for symptom reduction. Additional features of the outpatient experience include collaborative treatment planning and joint conceptualization with other providers.

Psychotherapy in either setting is recovery focused and plans for transition back to college/work as soon as symptoms are stabilized. Across settings, Family Therapy is also offered to address issues including communication/roles/boundaries, and development and utilization of crisis planning. The diversity of psychotherapy training experiences offered allows the intern to tailor their training experiences to meet their specific goals.

Depending on the specific experience (i.e. individual, group therapy through PHP) interns selecting this training experience will develop the following competencies:

- Initial interviewing, diagnostic assessment, treatment planning and case formulation;
- Proficiency in designing and implementing skills-based, group psychotherapy education for patients admitted to the Partial Hospitalization Program;
- Proficiency in implementing psychological interventions including empirically supported approaches (e.g. CBT) in individual therapy;
- Building therapeutic rapport and appropriate setting of professional boundaries;
- Effectively communicating psychological concepts to non-psychologists through ongoing consultation and collaboration with multidisciplinary staff

Research

Research is an important component of the core training experience in psychosis. Consistent with other interns in the Consortium (e.g. those at the VA), interns will be expected to complete an individual project (IP) during the course of the year. At the beginning of the internship year, the intern, working in collaboration with the intern's primary supervisor and other psychosis researchers within the department, will select an IP that is aligned with the intern's research interests and graduate training, and is feasible within the constraints of the internship year and resources of the program.

Secondary Placement Selection

Consistent with the overall structure of the Consortium, interns will be required to select a secondary placement outside their primary placement in Adult Psychiatry. Given the emphasis on psychosis, neuropsychology, and research, interns will select a secondary placement that adds to the breadth of their training, rather than duplicating training experiences included in their primary placement.

Additional Criteria for Acceptance

Given the goals of the Psychosis Emphasis track, applications from interns whose achievements reflect a strong commitment to pursue careers emphasizing research and training in academic/research settings will be viewed favorably. Prior graduate training/experience and research in psychotic disorders is essential. Consistent with the overall requirements of the Consortium, applicants should have a minimum of 550 Total Intervention and Assessment Hours as defined by the AAPI. While not required, it is recommended that applicants have at least 150 hours of assessment experience.

Affiliated Faculty and Staff

Jennifer Urbano Blackford, Ph.D.

Director- Division of Psychology

Associate Professor of Psychiatry and Behavioral Sciences, and Psychology

Interests: Neurobiological basis of anxiety vulnerability; anxiety disorders and PTSD; comorbid anxiety and schizophrenia; amygdala; BNST

Emma Finan, LMFT

Associate in Psychiatry

Interests: First break/early-stage psychosis; CBT; family therapy

Kirsten Haman, Ph.D.

Assistant Professor of Clinical Psychiatry

Interests: Training and supervision of CBT; efficacy of CBT for anxiety and depressive disorders; relation of medical conditions (cancer, POTS) to anxiety and depression

Stephan Heckers, MD.

Chair of the Department of Psychiatry & Behavioral Sciences

Professor in Psychiatry

Interests: Psychotic disorders; neuroimaging; neuroanatomy

Ellen Margaret House, MD.

Assistant Professor of Psychiatry

Interests: Child and adolescent psychiatry; college mental health; first episode psychosis

Monica Jacobs, Psy.D.

Assistant Professor of Clinical Psychiatry

Interests: Neuropsychological assessment

Heather Kreth, Psy.D.

Assistant Professor of Clinical Psychiatry

Interests: Children/adolescents; trauma; family therapy

Jeffrey G. Stovall, MD.

Associate Professor of Psychiatry

Interests: Schizophrenia; community psychiatry

Neil D. Woodward, Ph.D.

Associate Professor of Psychiatry and Psychology

Interests: Neuropsychological assessment; psychotic disorders; neuroimaging

VANDERBILT CHILD & ADOLESCENT PSYCHIATRY

Training Director: Kirsten L. Haman, Ph.D., Assistant Professor of Clinical Psychiatry

Email: kirsten.haman@vanderbilt.edu

Phone: (615) 343-2572

Number of Positions: 1

Salary: \$25,000

Term: July 3, 2017 - June 29, 2018

National Matching Service (NMS) Number: 156614

Overview

The Child and Adolescent Psychiatry group in the Department of Psychiatry & Behavioral Sciences at Vanderbilt School of Medicine has offered an APA-approved Psychology Internship for more than 20 years. Child and Adolescent Psychiatry consists of child and adolescent psychiatrists, psychologists, and trainees from several mental health disciplines. We provide inpatient psychiatric hospital services, partial hospitalization services, and a broad range of outpatient services, and are both a major mental health services provider for Middle Tennessee and a regional training center. Psychology Interns with a primary placement in Child and Adolescent Psychiatry will provide outpatient mental health services to vulnerable children and families served by the Mental Health Center (MHC) and the Center of Excellence for Children in State Custody (COE).

Children and families present to these clinics with a range of psychiatric problems, including conduct and behavioral disturbances, adjustment problems, traumatic stress, depression and anxiety, and symptoms of psychotic disturbances. As such, Psychology Interns will gain experience with patients ranging in age from early childhood to late adolescence and from diverse racial and ethnic groups. Patients are often involved in multiple child-serving systems (e.g., the child welfare system); have been exposed to a variety of adverse childhood experiences, including but not limited to abuse, neglect, family stress, and environmental stress; and experience developmental, physical, and psychiatric disabilities.

Potential for Program Change: There are no current indications for change.

Training Objectives

The goal of the internship experience in Child and Adolescent Psychiatry is to provide supervised clinical training, as well as didactic teaching, so that graduates are prepared to assume roles as child and adolescent-oriented clinical psychologists. Objectives for this placement include development of basic skills in child and adolescent clinical psychology: psychological evaluation, psychotherapy with children and teenagers, work with parents, family

therapy, and clinical case consultation with multiple child-serving systems. At the end of the training year, we expect Interns to be familiar with the operation of a child and adolescent outpatient service in a community mental health center and specialty clinic. We also expect Interns to develop skill interacting productively with other disciplines, recognize when patient problems call for consultation with other professionals, understand relevant ethical and legal principles arising in the treatment of children and adolescents, and develop sensitivity and competency in providing services to a racially, culturally, and socio-economically diverse patient population. Interns will gain familiarity and competence delivering a range of evidence-based treatment approaches to address child, adolescent and parenting issues.

Training Program/Experiences

The structure of this placement includes assessment with child and adolescent psychiatric populations, clinical case consultation with multiple child-serving systems, psychotherapy with children, teenagers and parents, consultation with trainees and staff from varied disciplines, and professional development opportunities. The Community Mental Health Center and Center of Excellence for Children in State Custody both emphasize the provision of evidence-based treatment protocols (e.g., cognitive behavioral therapy, trauma-focused CBT, family therapy, parent training protocols) and other best practices. Training and supervision for interns, fellows, students and staff in evidence-based treatments are incorporated into the program. In addition to two individual supervision hours per week, interns participate in weekly group supervision with staff therapists and trainees from multiple disciplines. Further didactic offerings include weekly child and adolescent grand rounds, a psychiatry fellows' seminar series, and various trainings and lectures offered through the Psychiatry Department and affiliated Medical School and University departments. In addition to direct service provision, trainees will have the opportunity to participate in local and statewide dissemination projects that train community mental health providers across the State to deliver evidence-based treatments and other best practices with fidelity.

This training experience does not provide opportunities for extensive work with individuals with mental retardation and autism spectrum disorders, clinical work with infants, or eating disorders. Although we see parents as an adjunct to our work with their children or adolescents, we do not normally work with adult patients.

Secondary Placement

A secondary placement through the Division of Child and Adolescent Psychiatry is available for Interns with primary placements at other sites in the Consortium. This placement is focused on pediatric neuropsychological assessment through a research study and involves seeing children and adolescents with Autism Spectrum Disorders for various assessments. Additional secondary placements may be added from year to year. However, beyond the pediatric neuropsychology

placement, we cannot guarantee the availability of any further placements for the 2017-18 training year within the Division of Child and Adolescent Psychiatry.

Additional Criteria for Acceptance

Enrollment in an APA accredited program is required. Consistent with the overall requirements of the Consortium, applicants should have a minimum of 550 total intervention and assessment hours as defined by the AAPI. While not required, it is recommended that applicants have at least 150 hours of assessment experience. All interns with primary placements in the Vanderbilt Department of Psychiatry & Behavioral Sciences must pass a background check. This will be performed after match day. Match results and selection decisions are contingent on passing the background check. No prospective Consortium intern has ever been refused employment as a result of the background check, but it is a possibility. Several have had difficulty, in all cases because of past legal problems they chose not to reveal during the application process. Department of Psychiatry & Behavioral Sciences Interns performing a secondary placement in the VA must also complete a VA background check.

Affiliated Faculty

Timothy J. Cooper, Psy.D. (Spaulding University)

Assistant Professor of Psychiatry

Interests: Assessment in children; impact of trauma

Blythe Corbett, Ph.D. (California School of Psychology)

Associate Professor of Psychiatry

Interests: Autism; Tourette Syndrome; ADHD

Jon Ebert, Psy.D. (Wheaton College)

Assistant Professor of Clinical Psychiatry

Interests: Marriage and family therapy; juvenile justice; trauma and attachment

Tarah Kuhn, Ph.D. (Adelphia University)

Assistant Professor of Clinical Psychiatry

Interests: Adolescent treatment outcomes; complex trauma; juvenile sexual behavior problems

VANDERBILT PSYCHIATRY- PSYCHOLOGICAL AND COUNSELING CENTER (PCC)

Training Director: Monicah Muhomba, Ph.D., HSP, Assistant Professor of Clinical Psychiatry

Email: monicah.muhomba@vanderbilt.edu

Positions: 3

Salary: \$25,000

Term: July 3, 2017 - June 29, 2018

National Matching Service (NMS) Number: 156617

Overview

The Vanderbilt University Psychological and Counseling Center (PCC) is a large and well utilized counseling center, with a staff of approximately 30 full and part-time mental health professionals. Our staff is active and multidisciplinary in nature, consisting of psychologists, psychiatrists, licensed professional counselors, licensed clinical social workers, and psychiatric nurse-practitioners. The PCC is also a multidisciplinary training center. In addition to psychology interns, graduate level practicum students from a variety of mental health disciplines train at the center, as do psychiatry residents and post-doctoral fellows in psychology. Working in this multidisciplinary setting provides interns with opportunities to cultivate and sharpen clinical consultation skills with a variety of mental health professionals. The overall depth and breadth of training experiences offered make the PCC an excellent fit for those seeking a career in a variety of outpatient settings.

As a training site within the larger consortium, the PCC provides a comprehensive program that involves opportunities in:

- Short and long-term individual therapy
- Group therapy
- Biofeedback
- Support groups
- Diagnostic interviewing
- Assessment (cognitive and psycho-educational)
- Supervision
- Crisis intervention (triage and on-call)
- Outreach and consultation

Potential for Program Change: There are no foreseeable, significant changes anticipated for this training program. Any significant changes that directly affect the structure and/or training offered at the PCC will be made public when and if they emerge.

Training Objectives

The purpose of the Vanderbilt Psychological and Counseling Center (PCC) internship training program is to prepare doctoral level interns to function broadly, effectively, competently and autonomously as professional psychologists in a wide variety of clinical settings. Some specific objectives of the PCC training program include:

- Initial interviewing, diagnostic assessment, treatment planning and case formulation
- Psychological assessment: Administration, scoring, interpreting a variety of cognitive, personality & other assessments to address varied referral questions.
- Ability to write comprehensive integrated reports
- Proficiency in implementing a broad range of psychological interventions including evidence-based approaches (e.g. CBT, DBT, interpersonal) in short and long term individual therapy
- Establishing effectiveness in forming therapeutic relationships and appropriately identifying therapeutic limits
- Working effectively with persons from diverse backgrounds
- Development of a professional identity as a psychologist that includes the integration of science, theory, local evidence and professional ethics into professional practice
- Effectively communicating psychological concepts to non-psychologists through ongoing consultation and collaboration with multidisciplinary staff

Training Experiences

The primary focus for interns includes individual & group psychotherapy and psychological assessment with Vanderbilt University undergraduate, graduate students, and professional students. Psychotherapy training at the PCC is grounded in empirically-supported treatments, including (but not limited to) CBT, DBT, psychodynamic, and interpersonal approaches. PCC clients reflect the diversity of the campus population. They present with a wide range of issues and severity. As such, interns can expect to develop rich caseloads that vary in terms of presenting concern, cultural issues, complexity, and duration of treatment. Decisions regarding treatment modality are determined through needs assessment based on accurate diagnosis and treatment planning. Full-time interns at the PCC can expect to engage in an average of 18 direct client contact hours per week. Additionally, although emphasis is placed on producing skilled generalist-practitioners, opportunities for specialization are made available through participation in various treatment teams (Alcohol/Other Drugs, Trauma, and Eating Disorders), exposure to additional treatment modalities such as biofeedback, and interventions to specific populations through the numerous therapy groups and workshops (DBT, LGBTQI, coping skills, ADHD, students of color, graduate process, undergraduate process, women's health, grief , etc.). Interns also have the opportunity to participate in a few outreach programs and work with various campus partners such as the Student Health Center and Residential Education Office among others.

Interns also participate in a number of structured training/learning activities on and off site. These include a weekly assessment seminar and case conference (on-site), as well as Friday morning case presentations/didactic meetings (off-site). Additional training experiences take place throughout the year and are determined by specific training needs, as well as center and campus requests. The PCC is also engaged in collaborative research with academic programs on campus. Interns experience an educational setting in which there is active learning and curiosity, generating opportunity for dialogue in a challenging learning environment.

Structure

All interns participate in structured training activities to ensure development of core competencies. The required activities include:

- Direct clinical service (individual and group therapy)
- Conducting new client evaluations and generating written reports
- Assessment, including attending assessment seminar
- Receiving and providing individual clinical supervision
- Participating in supervision of supervision
- Attending weekly staff meetings
- Attending weekly case conference meetings
- Participating in on-call service

All full-time PCC interns train at the center Monday through Wednesday during regular work hours (8am-5pm), and are off-site, all day, on Thursday for their secondary placement. Friday mornings are devoted to the case presentation/didactic meetings (off-site) with interns returning to the PCC for the second half of the day.

Diversity

We are committed to an ongoing dialogue about individual differences in order to work effectively with the entire student body at Vanderbilt. We offer culturally competent and empirically supported services in a safe and affirming space. Our therapeutic, assessment, outreach, and educational programs are delivered in a caring and compassionate manner that recognizes the unique characteristics and experiences of the individual student. We support and challenge each other's understanding of our own biases and experiences through active reading and dialogue.

Research Opportunities

Interns can participate in or create team research relevant to Center operations. The amount and focus of such research varies from year to year. The Center is becoming increasingly involved in research collaborations with academic departments within the University.

Secondary Placement Selection

The PCC offers no inpatient services. Center interns are encouraged to seek such experiences through their secondary placements.

Additional Criteria for Acceptance

Only applicants from APA-Accredited Counseling or Clinical Psychology doctoral programs will be considered eligible for internship positions within the Consortium. Applicants must have defended their dissertation proposal by ranking deadline. Consistent with the other agencies in the Consortium, applicants to the PCC must have a minimum of 550 total hours, of which at least 130 must be assessment hours.

Affiliated Faculty and Staff

Mary Clare Champion, Ph.D., HSP

Assistant Professor of Clinical Psychiatry

Interests: Women's health; health psychology; supervision/student development; individual psychotherapy

Nalini Connor, Ph.D., HSP

Assistant Professor of Clinical Psychiatry

Interests: Interpersonal/relationship problems; depression; anxiety; identity issues; and clinical supervision. Psychotherapy orientation is integrative, primarily using CBT, interpersonal-focused therapy, and insight oriented therapy.

Catherine Fuchs, MD.

Center Director, Professor of Psychiatry, Associate Professor of Pediatrics

Interests: Children and adolescents; adolescent mood disorders; post-traumatic stress disorder; and eating disorders

Divya Kannan, Ph.D., HSP

Assistant Professor of Clinical Psychiatry

Interests: Trauma and PTSD; sexual assault; international student adjustment; using integrative approach with particular emphasis on cognitive and emotion-focused interventions

Monicah Muhomba, Ph.D., HSP

Training Director, Assistant Professor of Clinical Psychiatry

Interests: Training and supervision; DBT skills training; trauma/PTSD; broad range of identity struggles; interpersonal problems; couples therapy; adjustment issues; multicultural issues; psychotherapy orientation is eclectic, primarily using interpersonal and DBT approaches

Frances Niarhos, Ph.D., HSP

Assistant Professor of Clinical Psychiatry, Assessment Coordinator

Interests: Neurocognitive assessment; LD and ADHD; health psychology and adjustment to chronic illness

Melissa Porter, Psy.D., HSP

Assistant Professor of Clinical Psychiatry, Practicum Student Intake Assessment Coordinator, Case Assignment Coordinator

Interests: Individual, group, and family therapy regarding women's issues; trauma; adjustment issues; depression; assessments; crisis assistance; interventions predominately utilize CBT, trauma focused CBT, and supportive therapy along with EMDR

David Sacks, Ph.D., HSP

Assistant Professor of Clinical Psychiatry

Interests: Personality/interpersonal issues; systems-based practice; supervision; psychological aspects of performance

Anabella Pavon Wilson, Ph.D., HSP

Assistant Professor of Clinical Psychiatry

Interests: Individual, group, and family therapy; adjustment issues; identity development; multicultural issues; anxiety and depression; predominately utilizing CBT and supportive therapies

VETERANS AFFAIRS (VA) TENNESSEE VALLEY HEALTH CARE SYSTEM (TVHS)

Training Director: Erin Patel, Psy.D.

Email: erin.patel@va.gov

Number of Positions: 6 (5 General Track, 1 Neuropsychology Track)

Salary: \$24,014

Term: June 26, 2017 - June 22, 2018

National Matching Service (NMS) Numbers: 156618 (General); 156619 (Neuropsychology)

Overview

The VA Tennessee Valley Healthcare System (TVHS) Internship in Clinical Psychology consists of two primary campuses, the Nashville Campus, located adjacent to Vanderbilt Medical Center, and the Alvin C. York Campus, located approximately 37 miles from Nashville in Murfreesboro. In addition to these campuses, the TVHS also includes thirteen Community-Based Outpatient Clinics which provide services closer to Veterans who live at a distance from the main campuses. Interns may also work at one of the two annex clinics in Nashville which are located only a few miles from the main campus. Over the last several years, TVHS has hired a significant number of new psychologists and initiated new Mental Health programs, and the training program has been structured to incorporate new faculty interested in training and new training experiences. These changes included the decision to reserve one position for a Neuropsychology training track, featuring two four-month assessment focused rotations with different supervisors. This track is described in detail below and is considered a separate program by NMS with its own match number. The other five positions are labeled as General Track and are considered a single program by NMS. The training experience for these positions will consist of three four-month rotation periods. Each track is described in detail in the "Training Experiences/Structure" section below.

GRECC: The Geriatric Research, Education and Clinical Center, a research oriented consortium involving TVHS, Vanderbilt Medical Center and Meharry Medical Center, and supported nationally by the VA, funds two internship positions. We have chosen not to single out particular intern slots as geropsychology training slots, so all interns participate in the training sponsored by the GRECC and thus acquire some training and experience in geriatrics. Psychology does not design the GRECC Training Program, and it changes somewhat from year to year.

Travel: The Campuses are located approximately forty miles apart, and the internship will require travel between campuses during the course of the training year. Travel time from campus to campus varies from 50 to 60 minutes with the time of day and direction of travel.

Training Objectives

It is the objective of the VA Tennessee Valley Healthcare System training program to prepare interns as generalists with a strong base of experience in assessment, intervention, and consultation. Although most training in this primary placement takes place in a medical center, the experience is sufficiently broad that it should generalize to a wide range of post-internship settings. A second important objective is to prepare interns to move with competence and confidence into the role of working professional at the conclusion of the internship. Interns who successfully complete the program are prepared, by the depth and variety of their internship experience, to function confidently in a variety of work settings including medical centers, academic departments, university counseling centers, and community mental health centers, depending somewhat on their choice of rotations and secondary placement. A third objective is to assist interns in learning to function as effective participants in the health care delivery system, interacting professionally and with appropriate assertiveness with other disciplines involved in the provision of health care. It is the intention of the faculty to model behavior reflective of committed, competent, caring, thoughtful, and ethical psychological practitioners and to encourage interns to reflect on their personal characteristics and how these affect their work in therapy and other professional interactions.

Training Experiences/Structure

Unlike the other Consortium sites TVHS has a system of training rotations structured so that interns receive significant depth of experience across a broad range of specialty areas. The interns' time at the VA will be divided into three, four-month rotations, with approximately three days a week spent in rotation-related activities. The rotations are grouped into three categories as follows with the campus location indicated by Nashville (N) or Murfreesboro (M).

Behavioral Medicine Rotations:

Geropsychology/Hospice (M)
Organ Transplant Psychology (N)
Pain Management (N & M)
Primary Mental Health Integration (N & M)

Mental Health Rotations:

Inpatient Psychiatry (M)
Outpatient Psychotherapy (N & M)
Post Deployment (N & M)
PTSD**

Neuropsychology Rotations:

Neuropsychology (N & M)

**PTSD is not currently offered, but should be available for the 2017-2018 training year.

Rotations are further classified as Major and Minor training opportunities. **Major Rotations** are 24 hrs/week that includes a wide variety of training experiences within the single rotation (i.e. Neuropsychology, Geropsychology). **Minor Rotations** are 12/hrs per week of training that is a focused experience (i.e. CPT, Group therapy) and is combined with another TVHS training opportunity to complete a full work week. Each rotation is described in detail under “TVHS Rotations” at the end of this section.

Training Tracks: VA TVHS Internship has two tracks: Neuropsychology and General. Each has a unique NMS match number. Applicants applying to the Neuropsychology track should have an interest in specializing in Neuropsychology. Interns in the Neuropsychology track complete one neuropsychology rotation. For breadth of training, the Neuropsychology Intern will choose the remaining rotations from among the Mental Health and Behavioral Medicine rotations. The other five VA Internship positions are in the General track. Interns in the General track may choose to complete a Neuropsychology rotation.

Example Training Year: Below are example training experiences for the General and Neuropsychology tracks. In the first example, an Intern in the General track completes major rotations in Post Deployment (rotation #1) and Primary Care Mental Health Integration (rotation #3), and two minor rotations in Geropsychology and Inpatient Psychiatry during their second rotation period. In the second example, an Intern in the Neuropsychology track completes the required major rotation in neuropsychology, the possibility of one major assessment focused rotation, and two minor rotations in Outpatient Psychotherapy and Hospice/Palliative Care.

	Training Year		
Track	Rotation 1	Rotation 2	Rotation 3
General	Post Deployment	Geropsychology & Inpatient Psychiatry	Primary Care Mental Health Integration
Neuropsychology	Neuropsychology	Transplant Psychology	Outpatient Psychotherapy & Hospice

Rotation Selection: There are more potential training rotations within TVHS than there are interns to fill them. Assignment of specific rotations will be accomplished within the first two weeks of the internship. Assignments will be based primarily on intern preference, although faculty judgment in relation to interns' training needs, practical issues such as office space availability, and the number of interns interested in specific rotations will also be taken into account. Rotation assignment will be guided by the following factors/constraints derived from practical limits and faculty judgment.

Independent Project: In addition to their rotation-based training activities interns are asked to complete an individual project (IP) during the course of the year under the supervision of a VA faculty member. The project subject matter is flexible and may be Clinical (i.e. development of a

new intervention or treatment group), Administrative (i.e. program evaluations), Research (i.e. treatment outcomes), or another appropriate task. Regardless of whether an intern chooses to complete a project during the training year, all interns will be asked to participate in a research day at the end of the training year where they give a short oral presentation on a scholarly work they have engaged in. Interns not participating in a project will spend an extra half-day on their primary rotation each week.

Research

There is great potential for research within the TVHS and intern involvement in research is possible. In particular VA interns will have the opportunity to participate in ongoing Geriatric Research, Education, and Clinical Center (GRECC) projects involving the examination of long-term cognitive outcomes of in critical illness. Other research opportunities are described briefly under the appropriate rotation description. The primary focus of the internship, however, remains the acquisition of clinical experience, and significant involvement in research is optional and will require initiative and a commitment of additional time on the part of the intern.

Constraints on Secondary Placement Selection

The training experience within TVHS is diverse and covers many of the various kinds of experiences interns are expected to receive; therefore, relatively few constraints are placed on interns' secondary placement choices other than the requirement that interns select a placement outside of either VA facility. Faculty judgment of intern training needs will still take precedence in some cases, and choices are always constrained by the interaction of the availability of training experiences and supervision and the preferences expressed by other members of the intern class.

Additional Criteria for Acceptance

American citizenship and an APA accredited graduate program are nationwide requirements for VA internship positions. **Please Note: The requirements noted here are necessary for all VA Internships nationwide.** Before being accepted for employment in the VA system all potential employees including interns must pass a pre-employment physical examination and a background check. These will be performed after match day, but before the beginning of the internship. Below is the text from a national VA internship website regarding citizenship, drug screening, and for males, selective service registration.

A CERTIFICATION OF REGISTRATION STATUS, CERTIFICATION OF U.S. CITIZENSHIP, and DRUG SCREENING are required to become a VA intern or VA postdoctoral fellow. The Federal Government requires that male applicants to VA positions who were born after 12/31/59 must

sign a Pre-appointment Certification Statement for Selective Service Registration before they are employed. All interns will have to complete a Certification of Citizenship in the United States prior to beginning the internship. VA will not consider applications from anyone who is not currently a U.S. citizen. 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 as are other staff. Interns and Fellows are also subject to fingerprinting and background checks. Match result and selection decisions are contingent on passing these screens.

Affiliated Faculty and Staff

Erlete Ascencao, Ph.D.; Emory University, Social Psychology Ph.D. University of Tennessee, Knoxville, Clinical Psychology, Ph.D.

Interests: Behavioral Medicine, Body-Mind Connection, Psychodynamic Psychotherapy.

Eric Aureille, Ph.D.; University of Minnesota.

Interests: PTSD, Anxiety Disorders, Forensic Psychology.

Erica Barnes, Psy.D.; Indiana University.

Interests: Adjustment and Relationship Issues, Cognitive Behavioral Therapy, Trauma, Problem Solving Therapy, Cognitive Processing Therapy.

Ashley Barroquillo, Psy.D.; Xavier University.

Interests: Health Psychology, Acceptance and Commitment Therapy, Cognitive Behavioral Therapy, Trauma.

Jennifer Beeghly, Psy.D.; Georgia School of Professional Psychology.

Interests: Trauma, Evidence-based Psychotherapies, Hypnosis, ACT, DBT, Couples Therapy.

Deborah Bonitz, Ph.D.; Ball State University, Counseling Psychology, Ph.D.

Interests: Health Psychology, Integration of Psychology and Primary Care Medicine, Health-Promotion and Disease-Prevention Initiatives in VA, Adjustment to Illness and Disease, Motivational Interviewing (to improve patient self-management), CBT.

Allison Bradshaw, Ph.D.; Indiana State University, Counseling Psychology Ph.D.

Interests: PTSD and Treatment of Other Anxiety Disorders, Psychological Assessment, Personality Disorders.

Melissa V. Broome, Ph.D.; University of Missouri-St. Louis.

Interests: Substance Use Disorders, Trauma, Dual Diagnosis, Health/Rehabilitation Psychology, Clinical Training, Intra-Professional Collaboration.

Lucille Carriere, Ph.D.; Auburn University.

Interests: Health Psychology, Management of Chronic Illnesses, Multiple Sclerosis, Primary Care.

Elizabeth Corsentino, Ph.D.; Florida State University.

Interests: Geropsychology, Cognitive Assessment, Geriatric Depression.

Maria Cottingham, Ph.D., ABPP; Fuller Graduate School of Psychology.

Interests: Neuropsychology, Malingering, Somatization, Ethnocultural Differences in Neuropsychological Test Performance.

Mary Beth Covert, Psy.D., ABPP; Regent University.

Interests: Positive Psychology, Integration of Psychology and Spirituality, Forgiveness of Self and Others, Posttraumatic Stress Disorder, and Women's Issues.

Jennifer Devan, Ph.D.; Pacific Graduate School of Psychology.

Interests: Health-Promotion and Disease-Prevention, Health Psychology, Motivational Interviewing, Acceptance and Commitment Therapy, Shared Medical Appointments, Health Coaching, Patient Chronic Disease Self-Management, Health Behavior Change Issues such as Tobacco Cessation and Weight Management.

Elizabeth Fenimore, Ph.D.; Pacific Graduate School of Psychology.

Interests: Posttraumatic Stress, Neuropsychology, Rehabilitation, Geropsychology.

Cara Freudenberg, Psy.D.; Georgia School of Professional Psychology.

Interests: LGBT-Related Concerns; Eating Disorders; Relationship Issues; Individual, Couples, and Group Psychotherapy.

Sharon M. Gordon, Psy.D.; Antioch/New England Graduate School, Chief of Psychology Section.

Interests: Neuropsychology, Geropsychology, Behavioral Medicine.

Natalie Heidelberg, Ph.D.; Auburn University.

Interests: Health Psychology, Geropsychology

Jennifer Kasey, Psy.D.; James Madison University.

Interests: Individual and Group Psychotherapy, Multicultural Issues, Supervision/Training, Relationship Issues, Depression, PTSD

Eun Ha Kim, Ph.D.; University of Mississippi.

Interests: Cognitive Behavioral Treatment of Anxiety Disorders, Depression, and Eating Disorders, Health Psychology and Holistic Treatment of Medical and Mental Health Disorders, Yoga as a Complimentary and Alternative Treatment for Mental Health Disorders.

Lisa Lorenzen, Ph.D.; Tennessee State University.

Interests: Group, Couples, and Individual Psychotherapy, Psychological Training and Supervision, Treatment of Trauma, Anxiety and Depression.

Kimberly C. Marshman, Ph.D.; Florida State University.

Interests: Neuropsychological Assessment and Consultation, Behavioral Medicine, Geropsychology, Clinical Research.

Joseph Minifie, Psy.D.; Virginia Consortium Program in Clinical Psychology.

Interests: Transitional Issues, Interpersonal and Family Relationships, Anxiety/Depression/Trauma/Substance Abuse, Multicultural Diversity, Chronic Pain, Group Therapy

Michele M. Panucci, Ph.D.; University of Wisconsin, Madison.

Interests: Psychotherapy, Treatment of Female Veterans, Personality Assessment, Posttraumatic Stress Disorder, Attachment, Health Psychology Issues, e.g. weight management and smoking cessation.

Erin L. Patel, Psy.D., ABPP; Nova Southeastern University.

Interests: Geropsychology, Behavioral Medicine, Interprofessional Collaboration, Clinical Outcomes.

Randolph S. Petersen, Ph.D.; Nova Southeastern University.

Interests: Neuropsychological Assessment, Psychological Assessment, Mild Traumatic Brain Injury, Rehabilitation, and Co-morbidity in TBI.

Whitney Pierce, Psy.D., RN, BCB; Wright State University.

Interests: Pain Psychology, Biofeedback, Hypnosis, Whole Health Approaches, Recovery Orientated Services, Interdisciplinary Collaboration.

Arthur Preston, Psy.D.; Illinois School of Professional Psychology.

Interests: Psychological Assessment, Acute Inpatient, Sexual Dysfunction.

Kristin Reed, Ph.D.; University of North Texas.

Interests: Trauma, Health Psychology, Hypnosis, Mindfulness.

Chelsea Rothschild, Ph.D.; University of Louisville.

Interests: Health Psychology, Chronic Disease Management, Trauma, Aging, Problem Solving Therapy, Acceptance and Commitment Therapy.

Jonathan Rudiger, Psy.D.; Virginia Consortium Program in Clinical Psychology.

Interests: Psychodynamic Therapy, Depression/Anxiety, Relationship Issues, Couples Therapy, Axis II Disorders.

Sandra A. Saporiti, Psy.D.; Nova Southeastern University.

Interests: Psychological Aspects of Organ Transplantation, Behavioral Medicine and Health Psychology, Trauma.

Lori Simms, Ph.D.; University of North Texas.

Interests: Posttraumatic Stress Disorder, Treatment of Co-occurring Disorders, Evidenced-Based Psychotherapies, Personality Assessment.

Rhonda Venable, Ph.D.; Georgia State University.

Interests: PTSD, Evidence-Based Psychotherapies, Health Psychology, Behavioral Medicine, Training and Supervision.

Nicole Webb, Ph.D.; University of Alabama at Birmingham.

Interests: Behavioral Medicine, Primary Care- Mental Health Integration.

Erica White, Ph.D.: University of Michigan.

Interests: Psychotherapy.

TVHS Rotations: Behavioral Medicine Rotations

GEROPSYCHOLOGY & HOSPICE CARE

Availability: Major and Minor Rotation

Location: Murfreesboro Campus

Supervisor: Natalie Heidelberg, Ph.D. and Sharon Gordon, Psy.D.

Setting: The intern will be able to work with older veterans in a variety of settings for assessment and intervention services. Veterans seen on this rotation reside on the Community Living Centers at this VAMC. The Community Living Centers provide comprehensive, interdisciplinary care to veterans requiring short-term rehabilitative care and long-term skilled nursing care, including dementia related care. Within hospice, there are sixteen total beds (12 hospice and 4 palliative care). The patients have a variety of terminal or chronic illnesses including cancer, liver failure, failure to thrive, congestive heart failure, and various other diseases. Most have co-morbid psychiatric conditions such as substance abuse, depression and PTSD. The majority of the patients encountered on this rotation are in the geriatric age group.

What Interns Will Do: Interns will complete diagnostic interviews, brief cognitive assessments, capacity assessments, individual and group therapy, and assist in the development of positive contingency plans with veterans. There are also opportunities available to work with family members, such as co-facilitating the caregiver support group or providing REACH VA interventions.

TRANSPLANT PSYCHOLOGY

Availability: Major rotation only

Location: Nashville Campus

Supervisor: Saundra Saporiti, Psy.D.

Setting: The psychologist on the liver, heart, stem cell, and kidney transplantation services is an integral part of the transplant teams at this regional academic transplant center, which operates in conjunction with Vanderbilt University Medical Center. Psychological evaluations of potential transplant candidates and their support person(s) are performed. These evaluations involve a diagnostic interview, cognitive and personality assessment, and a collateral interview. The psychologist formulates specific recommendations regarding suitability for transplantation, and possible interventions or behavioral markers which should be met before the candidate is

listed. Follow-up in regard to the patient's progress in meeting intervention goals is an ongoing part of the evaluation. Results of the evaluation are presented in an interdisciplinary team meeting involving psychologists, transplant physicians, transplant surgeons, nurses, and social workers. Candidacy for transplant is decided at these meetings. In addition to evaluation, psychological interventions (psychotherapy and support groups) are provided for pre- and post-transplant patients and their families/support persons.

What Interns Will Do: The intern will perform psychological evaluations of potential transplant candidates and their support person(s). A goal of this rotation is the objective assessment of the risk of noncompliance, including relapse to smoking and substances of abuse, presence of dysfunctional family systems, presence of psychopathology, and cognitive impairment, any of which might be a barrier to successful transplantation. The intern must learn to communicate and report to non-mental health professionals clearly, both orally and in writing, and to work closely with medical center staff from a variety of disciplines. The intern and the staff psychologist attend team meetings together and are jointly involved in all aspects of the rotation. In addition, the intern will attend the Liver Support Group for pre- and post-transplant patients, as well as provide psychotherapy to pre- and post-transplant patients, as needed.

PAIN MANAGEMENT

Availability: Major Rotation only

Supervisor: Eun Ha Kim, Ph.D. (Nashville Campus); Whitney Pierce, Psy.D. (Murfreesboro Campus)

Setting: The psychologist on this rotation functions as a member of the interdisciplinary Pain Management Team through the Pain Clinic. The central focus of this rotation is assessment and brief interventions for patients with chronic pain conditions. Assessment: These evaluations involve a diagnostic interview; cognitive, substance, functional, and personality assessment; and, when possible, a collateral interview. The psychologist formulates specific recommendations regarding suitability for invasive pain management procedures, and possible interventions or behavioral markers which should be addressed before the candidate is considered a candidate for implantable pain management devices (e.g. neurostimulator, intrathecal medication pump). Follow-up in regard to the patient's progress in meeting intervention goals is an ongoing part of the evaluation process when appropriate. Intervention: From a Behavioral Medicine perspective, the focus is on brief psychological interventions that facilitate self-management of pain (e.g. sleep management, use of pacing, relaxation strategies). In addition, appropriate Veterans may be trained in adjunct interventions that directly aid in reduction in physical and mental distress (e.g. biofeedback, hypnosis). The results of the evaluation and treatment recommendations are communicated to the team via a variety of formal and informal avenues. In addition to evaluation, other services available to Pain Clinic patients and their families include individual, group, telemental health, and education.

What Interns Will Do: The intern and the staff psychologist attend Pain Management Team meetings together and are jointly involved in all aspects of the rotation. A goal of this rotation is the objective assessment of current functioning, available support and coping resources, potential co-morbid psychopathology, possible substance abuse, and cognitive impairment, any of which might be a barrier to full benefit of medical and psychological interventions. The intern must learn to communicate and report to non-mental health professionals clearly, both verbally and in writing, and to work closely with medical center staff from a variety of disciplines. In addition, the intern will attend the quarterly TVHS Pain Management Committee, as well as provide psychotherapy to Pain Clinic patients, as needed. Interns interested in a Minor rotation experience will be expected to focus on one aspects of this rotation (for example, either the Pain Rehab group, individual implementation of the CBT-CP protocol, or biofeedback).

PRIMARY CARE- MENTAL HEALTH INTEGRATION (PCMHI)

Availability: Major or Minor rotation, depending upon location

Location: Murfreesboro Campus, Nashville Campus, and Charlotte Ave./Meharry annex

Supervisors: Ashely Barroquillo, Psy.D (Murfreesboro Campus). and Chelsea Rothschild, Ph.D. (Nashville Campus); Rhonda Venable, Ph.D. (Nashville- Charlotte Ave./Meharry annex)

Setting: Primary Care Clinic. The PC-MHI psychologist consults with the Patient Aligned Care Teams that include a physician, a registered nurse, a licensed practice nurse, and a medical support assistant. There are opportunities to also gain exposure working with a psychiatric nurse practitioner and serve as a member of an interdisciplinary team. The PC-MHI psychologist often collaborates with other consultants within primary care in addition to the PACT team to include pharmacy and social work.

What Interns Will Do: The intern on this rotation functions as a psychologist within the primary care setting. The central focus of this rotation is to obtain experience as a functioning member of the PC-MHI team. The intern and the staff psychologist are jointly involved in all aspects of the rotation. Goals of this rotation are to establish skills in brief assessment, conduct brief interviews, deliver targeted brief psychological interventions, and assess veterans' current levels of functioning and the possible impacts of co-morbid psychological disorders on physical and emotional health. The intern will develop skills regarding clear, concise verbal and/or written communication to medical providers and staff regarding patient care.

TVHS Rotations: Mental Health Rotations

INPATIENT PSYCHIATRY

Availability: Major or Minor rotation

Location: Murfreesboro Campus

Supervisors: Arthur Preston, Psy.D.; Lisa Lorenzen, Ph.D.

Setting: The Inpatient Rotation involves working on a 30 bed acute unit and a 30 bed sub-acute unit. The patient population is 90+% male and ranges in age from 18 – 85. In addition to psychiatric admissions the acute unit also functions as the detoxification unit for the Addiction Medicine program. There are 6 treatment teams consisting of a psychiatrist, clinical pharmacy specialist, social worker, utilization management nurse, and charge nurses from both units. These teams meet daily with the patients and are supplemented by nursing staff, the unit chaplain, psychiatric residents and medical students. Admissions are assigned on a rotational basis. Lengths of stay vary from a few days to several months. Psychology works by consultation.

What Interns Will Do: The intern is responsible for a caseload of at least 3 therapy patients. Interventions are time limited and focused. Patients are referred for issues such as PTSD, depression, grief, coping skills training, anger management, relaxation training and supportive therapy. The intern is expected to attend treatment team meetings when their patients are seen and/or discussed. There is also an opportunity for group therapy to be conducted. The intern is encouraged to observe numerous adjunct therapies such as music therapy, occupational therapy and kinesiotherapy. If available during the rotation there is the opportunity to complete a variety brief cognitive and personality assessment measures. Timely documentation in the computerized record is expected as is verbal communication with the treatment team.

OUTPATIENT PSYCHOTHERAPY

Availability: Major or Minor Rotation

Location: Nashville and Murfreesboro Campuses

Supervisors: (Nashville Campus): Jennifer Kasey, Psy.D. and Jonathan Rudiger, Psy.D.; Jennifer Beeghly, Psy.D. (Meharry annex)

Supervisors: (Murfreesboro Campus): Melissa Broome, Ph.D., Cara Freudenberg, Psy.D., Amy Owen, Ph.D., and Erica White, Ph.D.

Setting: Each intern is typically responsible for seeing veterans in his/her office or another designated space. Consults for psychotherapy are received on a regular basis from Primary Care, Psychiatry, or other services in the hospital. Interns will see their therapy cases at the Nashville campus.

What Interns Will Do: Interns on the Outpatient rotation will have the opportunity to perform personality assessments, intakes, and conduct individual, marital, and group psychotherapy with outpatients. Both brief and longer-term treatment modalities are available with a variety of presenting problems including mood disorders, PTSD (combat- or non-combat-related), relationship difficulties, personality disorders, addictive behaviors, adjustment problems, and more. During this rotation interns have the opportunity to co-lead ongoing groups, as well as begin new groups. Some examples of ongoing groups include: Anger Management, DBT, ACT, CBT for Depression, Coping Skills, Early Recovery Group, and CPT. Interns may elect to begin a new group, as well.

POST DEPLOYMENT- NASHVILLE CAMPUS

Availability: Major or Minor Rotations

Location: Nashville Campus

Supervisor: Joseph Minifie, Ph.D.

Setting: The SeRV-MH (Services for Returning Veterans-Mental Health) program is a nationwide program offered through the Department of Veterans Affairs to provide mental health services specifically for those individuals who have served in the combat areas of Afghanistan and Iraq since 2001, as well as post war support during the reunification of Iraq. The program is designed to provide early intervention for those serving in recent conflicts to promote a more rapid reintegration back into the family environment and the community. TVHS has two psychologists working in the program (one based at the Nashville campus and one at the Murfreesboro campus) to provide clinical evaluation, therapeutic intervention, and in-reach services. Intervention services are available to veterans of all ages and both genders, to National Guard and Reserve veterans, and possibly to some active duty military. Therapeutic opportunities may include individual, group, couple, or family counseling using such modalities as Cognitive Behavioral Therapy, supportive/talk therapy, stress inoculation/coping skills training, and/or trauma processing. In addition, adjunctive therapies are used to assist with the treatment of anxiety, PTSD, and chronic pain. These adjunctive therapies include meditation and biofeedback, including neurofeedback and heart rate variability. Although the primary emphasis is on readjustment issues, there is also opportunity to treat a range of mental health

disorders. Anxiety, anger, depression, sleep problems, post-traumatic stress, parenting problems, and marital discord are prominent issues within this population.

What the Intern Will Do: The intern will have the opportunity to conduct psychological evaluations consisting of a structured clinical interview and possibly the administration of brief assessment instruments, such as the Beck Depression Inventory-II and the Posttraumatic Checklist List-military version, as indicated. The intern will provide individual and/or group psychotherapy to those experiencing difficulty upon their return stateside from deployment to a conflict arena. Opportunities to work with couples and family members may also be available. There may be opportunities for the intern to assist the psychologist with in-service presentations.

POST DEPLOYMENT- MURFREESBORO CAMPUS

Availability: Major or Minor rotations

Location: Murfreesboro Campus

Supervisor: Erica Barnes, Ph.D.

Setting: This clinic serves combat veterans who have served in the areas of Afghanistan (Operation Enduring Freedom/OEF) and Iraq (Operation Iraqi Freedom/OIF) since 2001, as well as post war support during the reunification of Iraq (Operation New Dawn/OND). The clinic is designed to provide early intervention for those serving in recent conflicts to promote a more rapid reintegration back into the family environment and the community. Post Deployment veterans typically are transitioning to life post military which can include adjusting to new roles, reforming an identity, finding meaning after service, and relationship changes in and out of the home. There is a wide range of diagnoses and complexity in presenting issues including depression, anxiety, trauma, readjustment problems, relationship difficulties, traumatic brain injury, etc. Veterans in this clinic range in age from early 20's to late 50s and have a variety of military service experiences.

What the Intern Will Do: This rotation consists of diagnostic interviews, making appropriate treatment recommendations, conducting individual therapy, and developing treatment plans. Couples and group therapy may also be available. The specific breakdown of these activities can be tailored to the needs of the student. This is an opportunity to enhance diagnostic and interviewing skills, enhance therapy skills for a variety of mental health related issues, treat varying degrees of trauma related disorders, and learn about transition issues from military to civilian life. Treatment modalities include Cognitive Behavioral Therapy, Dialectical Behavior Therapy, Problem Solving Therapy, Cognitive Processing Therapy, and Gottman's Couple's Therapy.

Primary rotation interns can expect to conduct 1-3 intakes per week and carry a case load of 8-15 therapy cases. One hour of individual supervision as well as one hour of group supervision is provided per week. Secondary rotations interns can expect to have 3-5 direct client hours per week in the form of intakes or therapy depending on the needs of the intern. One hour of individual supervision per week is provided.

POST-TRAUMATIC STRESS DISORDER PROGRAM

Availability: TBA*

Supervisor: TBA

* PTSD is not currently offered, but should be available for the 2017-2018 training year.

Setting: The PTSD program provides comprehensive outpatient treatment for veterans. Treatment options in the PTSD program include weekly individual, couples, and group psychotherapy. Treatment via telemental health is also available. Evidence-based therapies, such as Prolonged Exposure, Cognitive Processing Therapy, and Motivational Interviewing, are utilized. Cognitive Behavioral Couples Therapy, a newer treatment for PTSD, is also an option. Group modalities are used for the Introduction to PTSD, Seeking Safety for co-occurring PTSD/SUD, Cognitive Processing Therapy, and Couples Coping Skills for PTSD treatment options. A new mindfulness/meditation group is in the planning stage. Treatment for veterans with co-occurring PTSD and SUD involves Motivational Interviewing and individual or group Seeking Safety treatment, possibly prior to Prolonged Exposure or Cognitive Processing Therapy. Initial entry to any of these treatment options involved a comprehensive psychological evaluation. Assessments are based on a comprehensive clinical interview, mental status exam, and the PCL and Brief Addiction Monitor (BAM). The PTSD program has an active treatment team which meets biweekly. The psychologist serves as a member of the interdisciplinary treatment team and does evaluations and individual, couples, and group psychotherapy.

What Interns Will Do: The intern will spend a significant portion of his/her time conducting initial evaluations and doing individual, couples, and group psychotherapy. The specific breakdown of these activities can be adapted to fit the selected intern's training needs and desires. In addition, the intern will have the opportunity to learn and practice evidence-based psychotherapy for PTSD, such as Cognitive Processing Therapy, Prolonged Exposure, and Motivational Interviewing. The intern can also become familiar with assessment and treatment for co-morbid PTSD/SUD in individual or group Seeking Safety therapy and the Couples Coping Skills Group, if a secondary rotation on Thursday is chosen. There may be opportunities to provide PTSD treatment services via telemental health. As a member of the treatment team, the intern will attend biweekly treatment team meetings and consult with other staff members on a regular basis. The intern will additionally have the opportunity to participate in the formulation of initial treatment plans. All of these activities will be conducted in an environment

where a premium is placed on gaining more advanced understanding of PTSD, current evidence-based treatments for PTSD, the military culture, and the nature of combat and military sexual trauma.

TVHS Rotations: Neuropsychology Rotations

NEUROPSYCHOLOGY- NASHVILLE CAMPUS

Availability: Major rotation only

Supervisor: Maria E. Cottingham, Ph.D. and Elizabeth Fenimore, Ph.D.

Setting: The neuropsychological assessment rotation provides an opportunity to learn about brain-behavior relationships, the field of neuropsychology, various methods of assessment, and the functioning of a neuropsychology service within a medical center setting. Neuropsychology is a consultative service that receives referrals from various sources including neurology, neurosurgery, psychiatry, primary care, and other specialty clinics/services (e.g., transplant). The service primarily provides differential diagnostic assessment and recommendations for treatment, with most patients being seen on an outpatient basis. Typical cases involve the assessment of cortical and subcortical dysfunction associated with various medical conditions, illnesses, and injuries, including degenerative dementias (e.g., Lewy-body, Alzheimer's, frontotemporal), multiple sclerosis, cerebrovascular diseases/CVAs, epilepsy, traumatic brain injury, "normal aging" memory complaints, and pseudodementia. Due to the nature of the VA population, many evaluations also include the assessment of psychiatric disorders, such as Major Depression and Post-Traumatic Stress Disorder, and their impact on cognitive performance. Because changes in mood and personality may occur in certain neurological conditions, personality assessment (e.g., PAI, MMPI-2-RF) may also play an important role in a neuropsychological assessment. Since the majority of our patients have comorbid medical conditions (e.g., diabetes, hypertension, sleep apnea, COPD), interns have the opportunity to learn about the impact of non-neurological conditions and medications on cognitive functioning.

What Interns Will Do: The neuropsychological assessment format employs a modified "flexible battery" approach, with typical tests including the WAIS-IV, CVLT-II, RBANS, RULIT, GPB, COWAT, WCST and others. Interns are expected to conduct one to two supervised assessments per week, depending upon their level of experience and training needs. Interns will learn how to conduct a neuropsychological clinical interview, administer and score commonly-used neuropsychological tests, interpret the results, develop useful recommendations, write a comprehensive but relatively brief (4-5 page) neuropsychological report, and provide feedback to patients, families, and other medical staff. Through the clinical cases, neuropsychology seminar, and outside readings, interns will have the opportunity to learn functional neuroanatomy to integrate into the report and recommendations. Interns may attend Neurology Rounds at Vanderbilt and other didactics. Supervision includes 1-2 hours of scheduled individual time, as well as ad hoc supervision. Supervision is also provided via written detailed feedback on each of the intern's neuropsychological reports. Because the services provided by neuropsychology are often communicated to the referral source solely in writing,

interns will be expected to have, or be willing to develop, accurate written communication skills during the rotation. The overall goal of this rotation is to help the intern gain a broad understanding of brain-behavior relationships that will enhance his or her general clinical skills. For those who are interested in pursuing post-doctoral neuropsychological training, this rotation will also provide a firm foundation for the post-doctoral residency.

NEUROPSYCHOLOGY- MURFREESBORO CAMPUS

Availability: Major rotation only

Supervisor: Randy Petersen, Ph.D.

Setting: The Neuropsychology Rotation is a consultation service that receives referrals from various sources, including Primary Care, Psychiatry, Psychology, and Neurology. The service primarily provides differential diagnostic assessment and recommendations for treatment, with most patients being seen on an outpatient basis. The clinic provides exposure to a variety of patient populations ranging in age from the mid 20's to the upper 80's. Typical cases involve the assessment of cognitive dysfunction associated with various medical conditions, illnesses, and injuries – including degenerative dementias (e.g., Alzheimer's Disease, frontotemporal), cerebrovascular disease/CVA, traumatic brain injury, "normal aging" memory complaints, and pseudodementia. Patients often have multiple comorbid medical conditions (e.g., high blood pressure, diabetes, sleep apnea, COPD, etc.), and interns have the opportunity to learn about the impact of non-neurological conditions and medications on cognitive functioning. Due to the nature of the VA population, patients also frequently present with comorbid psychiatric disorders (Major Depression, Post-Traumatic Stress Disorder, Substance Abuse, etc.) which can also adversely impact cognitive performance. Throughout the rotation, interns will gain exposure to patients with a variety of medical, psychiatric, and motivational factors that may influence cognitive test performance.

What Interns Will Do: The intern will be responsible for conducting one to two supervised neuropsychological assessments per week, depending upon their level of experience and training needs. Interns will learn how to conduct a neuropsychological clinical interview, administer and score commonly-used neuropsychological tests, interpret the results, develop useful recommendations, write a comprehensive but relatively brief (4-5 pages) neuropsychological report, and provide feedback to patients, families, and other medical staff. The typical format of testing utilizes a "flexible battery" and grouping of measures that can be modified to fit patient needs or limitations. Tests commonly used include the WAIS-IV, CVLT-II, BVM-T-R, COWAT, WCST, Trails, BNT, FTT, GPB, TOMM and MSVT. Supervision is at structured times during the week (1-2 hours) and also occurs informally whenever needed, such as before, during, and after an evaluation. All tests are computer scored using an integrated scoring program and summary sheet that allows for simultaneous computation of standard scores based on multiple sources of normative data (e.g., Heaton, MetaNorms, MOANS/MOANS, test

manuals, etc.). Ample readings and up-to-date research findings relevant to clinical cases as well as a broad range of neuropsychology-related topics are also provided.

SECONDARY PLACEMENT

Each intern must receive training for the equivalent of at least one day per week at a site other than his/her primary placement. Interns are expected to select a secondary placement that complements the training opportunities available at the primary placement, broadens the overall training experience, and provides experiences congruent with the intern's needs/objectives for professional development. Due to faculty changes/availability, the number and type of secondary placements varies from year-to-year. The complete list of secondary placements is finalized in spring of the upcoming training year (i.e. March/April for interns entering that summer). A complete list of secondary placements available in the 2016-2017 internship year is presented in Appendix A. The roster of secondary placements changes yearly due to faculty availability, thus, we can not make any guarantees about the availability of secondary placements in future years. However, we anticipate that many of these placements will also be available for the 2017-2018 internship year.

To aid in the secondary placement selection process, a faculty member at the intern's primary placement, in conjunction with the intern, will complete a needs assessment, reviewing the intern's overall training background in relation to the intern's and the Consortium's training objectives. Interns will receive an orientation to secondary placement opportunities throughout the Consortium on Consortium Orientation Day. The Training Directors at the interns' primary placements, and the Consortium Director (on an as needed basis), will provide individual guidance to interns during the secondary placement selection process using information gathered through the needs assessment. After narrowing their secondary placement choices, interns are expected to contact the appropriate staff at the sites in which they remain interested for the purposes of exploring available experiences in more detail and working out the practical arrangements for a placement. Interns will submit a hierarchically ranked list of their secondary placement preferences to the Director by a date to be designated each year by the Consortium Training Committee.

DIDACTICS

All Consortium interns attend regularly scheduled didactics as part of the internship experience. Consortium-wide training activities occupy approximately one half day each week, currently on Friday mornings from 8-11:30 AM. Didactics consists of Neuropsychology seminar, a general seminar series covering a variety of clinically relevant topics and professional issues, and a case conference. In addition to the presentation of clinically or professionally relevant content, a major objective of these Consortium-wide training activities is to provide a structure within which members of the intern class may interact and learn from one another. There is also an abundance of case conferences, colloquia, and workshops that may be available to interns in the Consortium settings. Participation in some of these activities may be required depending on the intern's agency and rotations.

As part of the didactics, each intern must present at least three (3) clinical cases in the course of the training year. In addition, each intern must present to the intern class during the general seminar series at least one review of the current scientific and clinical literature on a clinical topic. The format of the presentation is flexible. Interns may present an in-depth case report (i.e. case conference with literature of review of clinically relevant topic), practice job talk, practice dissertation defense, or a conventional research talk.

Attendance Policy: Attendance at the Consortium's scheduled didactic training activities throughout the year is mandatory. With the exception of approved absences due to illness, professional development, and vacation time, interns are expected to attend all scheduled Friday morning seminars and case conferences. Excessive unexcused absences may jeopardize successful completion of the internship. All absences must be confirmed with the intern's respective Training Director and Consortium Directors.

SUPERVISION

1. Each intern will receive a total of at least four (4) hours of supervision per week by psychologists who have primary clinical responsibility for the cases on which they provide supervision and are appropriately credentialed to practice psychology in the jurisdiction in which the supervision is rendered. This will include a minimum two hours of scheduled individual supervision. Scheduled group supervision or individual supervision may provide the additional two hours.
2. Faculty who serve as principal supervisors at any site and provide individual supervision for interns must be psychologists who are appropriately credentialed. They must also be employed by one of the training sites in the consortium which supports an intern and/or be clinically and administratively supervised through one of the agencies signatory to these by-laws.
3. Supervisors are expected to be knowledgeable of the scientific base of psychological practice and to remain knowledgeable of relevant scientific developments. This scientific knowledge base will be incorporated into the process of clinical supervision.
4. Interns will receive regular and timely feedback from their supervisors regarding the quality of their performance in the program.

EVALUATION PROCESS

1. Each supervisor will provide a written evaluation of the interns with whom he/she works at the beginning of the training year (Needs Assessment) and a minimum of three times thereafter. These evaluations will be reviewed with the intern before being sent to the Consortium Director.
2. A mid-year and end-of-year letter of evaluation will be sent by the Consortium Director on behalf of the Training Committee to each intern's academic Training Director. Interns will be provided copies of these letters on request.
3. Each intern will complete a written evaluation of his/her supervisors and training sites to the Consortium Director every time supervisors submit evaluations of the intern's performance. This will be a minimum of three times a year.
4. It is the responsibility of the Consortium faculty to identify as early as possible during the training year any intern exhibiting serious problems or deficiencies. Feedback should be given in a timely manner to the intern. If the problem is of such severity as to call into question the intern's successful completion of the program, the Training Committee will be informed, and a written plan developed, in collaboration with the intern, to attempt to remedy the deficiencies.

SUCCESSFUL COMPLETION

1. In order to successfully complete the Consortium's internship program, the intern must complete the equivalent of one (1) year of full-time training in a period of no less than twelve (12) months and no more than twenty four (24) months. Every intern will complete at least 500 hours of face to face service delivery time; the majority of the time remaining will be spent in supervised documentation of service delivery and supervision. Interns will be expected to review their face to face hours on a regular basis with their respective supervisors and/or Training Director.
2. Interns are expected to maintain an on-going log of training activities throughout the internship. The relevant portions of this log will be reviewed with supervisors at the time of each formal, written evaluation. Interns will be expected to turn in a summary of this log to the Consortium Director at the completion of the internship. A copy of the "Log of Training Activities" is available in Appendix A of this document. The log will be used thereafter in responding to requests for information about your training from Licensing Boards, hospital credentialing committees, third party payers, etc.
3. In order to successfully complete the program, an intern must demonstrate, through the mechanism of supervised clinical practice, an intermediate to advanced level of professional function in all of the professional competencies rated by the Consortium. In practice this will be indicated by supervisor ratings on the Final Intern Performance Evaluation Instrument. For successful completion of the program, all competencies must be rated at a skill level of "needs regular supervision" or higher, and at least 80% of all competencies must be rated as "needs occasional supervision" or "ready for autonomous practice."
4. Interns must demonstrate, through the process of clinical supervision, an adequate understanding of professional ethics in application to practice and of the relationship between the science and practice of psychology.
5. Interns must demonstrate an understanding of issues of cultural and individual diversity as they relate to the science and practice of psychology.
6. The intern must attend at least 80% of the Consortium's scheduled didactic training activities throughout the year. The exact standard herein may be modified by majority vote of the Consortium Training Committee.
7. The intern must present at least three (3) clinical cases in case conference in the course of the training year.
8. The intern must present to the intern class during the seminar series at least one review of the current scientific and clinical literature on a clinical topic.

9. The intern must complete and/or participate in any other activities or assignments required as a part of the Consortium's educational program.

10. An internship in professional psychology is an organized and structured sequence of training experiences. The Consortium's internship program is either successfully completed, or not successfully completed. No partial internship "credit" will be certified by the Consortium for any intern who voluntarily leaves or is terminated from the Consortium's program.

SALARY & BENEFITS

Intern stipends are set by and paid through the intern's primary placement. Stipend levels vary slightly within the Consortium. Expected stipend levels for the 2017-2018 training year can be found at the descriptions of the Consortium agencies.

Health Insurance

Both the Vanderbilt and VA primary placements offer health insurance as a benefit of employment.

Vacation and Sick Time

All Consortium interns are allowed a minimum of two weeks (i.e. 10 working days) annual leave (vacation), two weeks of sick leave (i.e. 10 working days), and seven professional days (to be used for professional meetings and workshops, dissertation related activities, job interviews, etc.). Arrangements for leave should be negotiated in advance with the relevant training sites except in cases of emergency. Extended periods of absence due to serious illness, illness of a family member, etc., will need to be made up by extending the period of the internship in order to complete training requirements.

* Vanderbilt University Medical Center is currently assessing the impact of the new Fair Labor Standards Act (FLSA). The number of paid vacation, sick and/or professional days available to Vanderbilt interns may change for the 2017-18 internship year. The information presented above is accurate for VA interns as they are not affected by the FLSA rule changes.

Parking

Parking arrangements are the responsibility of each primary placement. You may be required to pay for parking at either or both your primary and secondary placements.

Additional Resources

Additional Resources

All Consortium interns have access to Vanderbilt University library resources, as well as the library and computer resources available at their training sites.

REQUIREMENTS

The following are the minimum requirements an applicant must fulfill to be considered for an internship in the Consortium:

- 1) The applicant must be actively enrolled in an academic program leading to a doctoral degree in professional psychology or have completed a doctoral degree in a non-professional field of psychology and be certified by an appropriate official as being enrolled in an organized re-specialization program requiring the completion of the equivalent of pre-internship training in professional psychology.
- 2) If in the United States, the academic program must be housed in a regionally accredited, degree-granting institution. If in Canada, the institution must be publicly recognized as a member in good standing by the Association of Universities and Colleges of Canada.
- 3) Applicants must be enrolled in an APA or CPA accredited graduate program. The applicant must have completed at least three years of graduate academic work in a program meeting the requirements described above.
- 4) The applicant must have a minimum of 550 Total Intervention and Assessment Hours as defined by the AAPI. This training must be of such a nature and amount as to provide the applicant with the experience needed to have a reasonable opportunity to succeed in the Consortium placement for which the applicant is being considered. Given the breadth of training opportunities available, the breakdown between assessment and intervention hours varies across the agencies and training tracks within the Consortium. Applicants should read the description of each agency carefully to determine the minimum number of assessment and intervention hours required for each site and training track. As a general rule, applicants with at least 400 Intervention hours and at least 150 Assessment hours will meet the requirements for every agency within the Consortium.
- 5) The applicant must be certified by the program's Director of Clinical Training as being ready for internship.
- 6) The applicant must pass a criminal background check.
- 7) U.S. citizenship is required for a primary placement in the VA Tennessee Valley Healthcare System. In addition any 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. These are nationwide VA requirements. Neither of these factors is a necessary requirement for the Consortium's other primary placements.

Please review the descriptions of the Consortium agencies in which you are most interested for additional criteria specific to these agencies.

APPLICATION PROCESS

The Consortium's application and selection process follows the policies and procedures developed by the Association of Psychology Postdoctoral and Internship Centers (APPIC), including participation in the Match. All applicants must register for the Match using the online registration system on the Match website at www.natmatch.com/psychint. If you apply for this internship, you are expected to submit all your application materials via the APPIC online application system. Go to the APPIC website at www.appic.org and click on the AAPI Application Portal Online link. This year the due date for applications is November 2, 2016. All application materials must be submitted and received by us on or before this date.

All application elements (#1-6 below) should be submitted using the AAPI Online system. Follow all instructions accompanying the AAPI Online to either enter your information directly, or upload your documents (#1-3). We encourage all CVs to be uploaded as Microsoft Word or Adobe Acrobat files. Only the transcript (#4) should be mailed in hard copy form to the AAPI Online application address.

Please note that, due to the high volume of e-mails sent during the application season, you will not receive a confirmation e-mail from us that your application materials have been received. You can check on the AAPI Online system if your application is complete and if your DCT and letter writers have completed their parts (#5-6). We will notify you by email on or before December 12th, 2016 of your interview status.

Application Requirements List

- 1) Cover letter: In a separate line above the body of your cover letter please list the Consortium agencies to which you are applying. The Consortium has six programs to which you may apply. These are listed below along with the accompanying NMS match numbers. Do not rank order your choices. Your cover letter should indicate how these choices fit with your training interests and goals. The match numbers for the Consortium Agencies are as follows:

VU Adult Psychiatry- Generalist Track:	156612
VU Adult Psychiatry- Psychosis Emphasis Track:	156620
VU Child and Adolescent Psychiatry:	156614
VU Psychological and Counseling Center:	156617
VA TVHS Generalist Track:	156618
VA TVHS Neuropsychology Track:	156619

- 2) All elements of the AAPI Online general application.

- 3) Curriculum Vita.
- 4) Transcripts of graduate work. The transcripts should cover all post baccalaureate course work. You should mail one official copy of all graduate transcripts to the AAPI Online application address at:

AAPI Online Transcription Department
PO Box 9117
Watertown, MA 02471

- 5) Verification of AAPI by your doctoral program through the DCT Portal of the AAPI Online System.
- 6) Submit at least three and no more than four letters of recommendation from faculty members or practicum supervisors who know your clinical as well as your research work well. At least one must be from an academic faculty member, and at least one from a clinical supervisor. Letter writers should upload an electronic copy to the Reference Portal of the AAPI Online system.

Selection Process and Interviews

Representatives from the Consortium sites will review the completed internship applications looking for applicants whose interests and training objectives are compatible with the training experiences each site has available. The selection process is coordinated by the Consortium Training Committee. Applicants are accepted into a particular primary placement at a site that is deemed congruent with the applicant's training interests. It is, therefore, important that applicants delineate their training goals and objectives clearly on the application or in the cover letter and indicate in the cover letter which Consortium site(s) are of interest to them and how the experiences offered at that site fit into their training goals.

After screening the application materials, the Consortium faculty will contact, by phone, letter or e-mail, applicants to be invited for interviews. It is the faculty's intention to inform all applicants of their interview status by December 12th, 2016. If you are strongly interested in our program, and have not received an invitation for an interview, you may contact by phone or email the designated contact person for the site in which you are the most interested and request information about your status.

The Consortium has established the following interview dates for this year:

Vanderbilt Adult Psychiatry- Generalist Track: December 9, 12, 15, and January 6

Vanderbilt Adult Psychiatry- Psychosis Emphasis Track: December 9, 12, 15, and January 6

Vanderbilt Child & Adolescent Psychiatry: December 5, 13, 15 and January 11

Vanderbilt PCC: December 5, 12, and January 6, 9

VA (all tracks): December 5, 12, 16, and January 6, 9, 12

The faculty member who contacts you will work with you to schedule an interview on one of these dates. Depending upon your expressed interests you may be invited to interview at more than one Consortium agency, in which case we will work to arrange the interviews within the same two day period and schedule them so they do not conflict. You are welcome to interview at more than one agency, as long as you are genuinely interested in each of the agencies as a potential primary placement. Do not accept an invitation to interview and do not schedule an interview with a site that interests you only as a secondary placement. Be aware that choosing to interview at more than one site may require an overnight stay depending upon the scheduling discussed above. If you are interested in an interview at only one site, faculty may choose, at their discretion, to schedule the interview on a date different from those listed. If you cannot be here on any of the scheduled dates, you may be able to arrange an interview on an individual basis with a site in which you are interested; however, the faculty cannot guarantee to be available at other times.

Experience has shown that applicants to Child and Adolescent Psychiatry are much less likely to have an interest in another primary placement than are applicants to the other agencies. Therefore, applicants who are interested only in a primary placement at Child and Adolescent Psychiatry may negotiate an interview date and time with Dr. Kirsten Haman without regard to the schedule above.

A personal or phone interview is not a required part of the application process; however, an interview is beneficial in that it brings you to the attention of the Consortium faculty and provides you with more information about the Consortium's program than can be gleaned from this website alone. A review of our selection process showed that since the computer match has been in effect, only two applicants who did not interview in person were on the ranked lists submitted by the Consortium to National Matching Services. Those applicants initially scheduled interviews but subsequently withdrew for pressing personal reasons.

Secondary placement selection takes place after the beginning of the internship year and plays no role in decisions about acceptance as a Consortium intern. During the first week of the internship, interns are provided an orientation to the Consortium and its component agencies, including all available secondary placement training experiences. Secondary placement assignments are made by the Consortium Training Committee after a careful consideration of the intern's expressed preferences, the intern's overall training needs and objectives as developed jointly by the intern and faculty, and the availability of supervisory resources and workload.

The Vanderbilt-Department of Veterans Affairs Internship in Professional Psychology is a member of the Association of Psychology Postdoctoral and Internship Centers (APPIC) and adheres to the Association's policies (which may be found on the web at www.appic.org) regarding internship offers and acceptances. It is our intention to be in full compliance with

both the letter and the spirit of the APPIC policy. The Consortium will abide by the APPIC policy that no person involved with the internship will solicit, accept or use any ranking-related information from any intern applicant.

Each primary placement within the Consortium is listed in the match as a program within the Consortium internship and has a separate match number. In ranking your choices for the match, you are encouraged to include more than one Consortium agency on the ordered list you submit to National Matching Services if that is a true reflection of your interests. If you have indicated an interest in more than one consortium agency, and more than one agency believes you would fit well with their program, you may be included on more than one of the rank order lists the Consortium sends to NMS.

ACCREDITATION

The Consortium has been continuously accredited by the American Psychological Association (APA) since 1971. The most recent site visit by APA occurred in 2013 and the Consortium received accreditation for seven years. Questions related to the program accreditation program should be directed to the Commission on Accreditation using the contact information below.

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

www.apa.org/ed/accreditation

NASHVILLE AREA INFORMATION

Nashville is the largest city and the economic center of middle Tennessee. The population of Nashville itself is over five hundred thousand, of the Nashville Metropolitan area, over one million. The economic base is sound and varied the rate of unemployment low, and the cost of living near the national average. Industries important to the economy of the region include government (Nashville is the state capital), insurance, publishing, banking, tourism, and of course music. Nashville is rich in talent across a wide range of musical styles; outstanding musicians will be found playing regularly in local venues. The city is also a major academic and health care center, with two medical schools, Vanderbilt and Meharry, an unusual number of excellent hospitals (including Vanderbilt, St. Thomas, Baptist, and Centennial), the corporate headquarters of HCA Healthcare Systems, and an unusual number of colleges and universities (including Vanderbilt, Belmont, Fisk, Tennessee State, and David Lipscomb). This concentration of academics has earned Nashville the title "Athens of the South."

Middle Tennessee also offers a wealth of recreational opportunities. Among the more tourist oriented are the Grand Ole Opry, the Opryland Hotel (one of the nation's largest and magnificent), Historic Second Avenue, Riverfront Park, the Hermitage (home of President Andrew Jackson), the Belle Meade Mansion, the Hard Rock Cafe, and the Wild Horse Saloon. There are good public radio and TV stations, the Tennessee Performing Arts Center with year round offerings at each of its three theaters, the Cheekwood Museum and Botanical Gardens, the Tennessee State Museum, the Cumberland Museum and Science Center, the Frist Center for the Visual Arts, the Nashville Symphony Orchestra with its magnificent new Schermerhorn Symphony Center, the Nashville Opera, and the Nashville City Ballet. In addition, Vanderbilt brings Southeastern Conference athletic competition to the city. The Tennessee Titans have brought NFL football and the Nashville Predators NHL hockey. Nashville's international airport terminal is among the most modern in the United States and provides easy access to the area from throughout the country.

The climate offers four definite seasons with relatively mild winters. Fall brings colorful foliage. Spring with its floral display rivals Fall as the most pleasant and beautiful time of the year. For those with outdoor interests TVA lakes suitable for recreational use are scattered throughout the region. There are rivers suitable for kayaking or canoeing, with white water to be found to the east on the Cumberland Plateau or in the mountains. There are numerous attractive and interesting state parks, while within Nashville itself there are 6650 acres of city park land. In addition, the Great Smoky Mountains National Park and other areas in the Southern Appalachians are a three and one half to four hour drive to the east.

As can be seen from the above, the middle Tennessee area offers something to fit just about everyone's tastes and interests. Most of us who have lived here for some time find it an interesting, pleasant, and comfortable place.

APPENDIX A: LOG OF TRAINING ACTIVITIES

Name _____

Class of 20XX-20XX

VANDERBILT-DEPARTMENT OF VETERANS AFFAIRS

INTERNSHIP IN PROFESSIONAL PSYCHOLOGY

LOG OF TRAINING ACTIVITIES

Each of you is expected to maintain an on-going log of your training activities throughout your internship. The relevant portions of this log will be reviewed with your supervisors at the time of each formal, written evaluation. You will be expected to turn in a summary of this log to the Consortium Director at the completion of the internship. The log will be used thereafter in responding to requests for information about your training from Licensing Boards, hospital credentialing committees, third party payers, etc.

Below is an outline of the minimal information which should be maintained in your log. Feel free to include any other information you deem important. You may collect and format this information in any format you wish as long as you do collect the information and it is presented in a readily understandable and useable fashion. Your primary and secondary placements should be named and the information presented separately for each placement.

ASSESSMENT

<u>TYPE</u>	<u>NUMBER</u>	<u>POPULATION</u>
Personality		
Intellectual		
Neuropsychology		
Other (Describe)		

Name and number given of frequently used assessment instruments.

INTERVENTION

TYPE **NUMBER OF CASES** **NUMBER OF SESSIONS** **POPULATION**

Individual

Couple

Group

Family

Other (Describe)

POPULATION DEMOGRAPHICS

Assessment and Intervention Clients by Significant Diversity Factors

	FEMALE	MALE
African American		
Asian/Pacific Islander		
Caucasian/Not Hispanic		
Hispanic		
Native American		
Multi-Ethnic		
Gay/Lesbian/Bi-Sexual		
Physically Disabled		

CONSULTATION

Describe the training situations (and their frequency) which provided the opportunity for consultation with other healthcare professionals, or individuals or organizations in the community.

SUPERVISION

Did you have the opportunity to engage in supervised supervision of less experienced psychology students/trainees? If so, describe.

Hours Providing Supervision _____

SELECTED HOURS

Total Number of Direct Patient Care Hours _____

Total Number of Supervision Hours: Individual _____

Group _____

Total Internship Hours: (This will not be the sum of the above) _____

**APPENDIX B: SECONDARY PLACEMENTS AVAILABLE IN 2016-2017
TRAINING YEAR**

Secondary placements available for the 2016-2017 year are listed in the table below and described in detail on the following pages.

Placement	# of Positions	Which Interns are Eligible			
		VA	VU Adult	VU C & A	VU PCC
VA PCMHI	1-2		✓	✓	✓
VA General Outpatient Psychotherapy Clinic	1		✓	✓	✓
VA Outpatient Psychotherapy (BHIP)	1		✓	✓	✓
VA Pain Psychology	1		✓	✓	✓
VA Pain Psychology	1		✓	✓	✓
VA Post Deployment	1		✓	✓	✓
VA PTSD/Outpatient Psychology	1		✓	✓	✓
Vanderbilt Psychiatry-Epilepsy Neuropsychology	1	✓		✓	✓
SENSE Lab	1	✓	✓		✓
Vanderbilt PCC-Psychotherapy Track	2	✓	✓	✓	
Vanderbilt PCC-Biofeedback Track	1	✓	✓	✓	
Osher Center Pain Medicine	1	✓		✓	✓
VU Neurology (100 Oaks) Neuropsychology	1	✓	✓	✓	✓
Vanderbilt Memory and Alzheimer's Center	1	✓	✓	✓	✓
Vanderbilt Athletics	1	✓	✓	✓	
Vanderbilt ICU Delirium	1	✓	✓	✓	✓

Name of Secondary Placement: PC-MHI- Primary Care Mental Health Integration

Supervisor(s): Rhonda Venable, Ph.D.

Location: VA community based clinic at Meharry 1818 Albion Avenue, Nashville, TN

Clinical or Research Placement: Clinical

Number of Positions Available: 1 (maybe 2)

Anticipated Number of Face-to-Face Clinical Hours per Week: 4-6 hours

Description: Primary Care-Mental Health Integration (PC-MHI) is the term VA uses to describe a set of mental and behavioral health care services that are provided to Veterans in collaboration with primary care providers. Just as you might go to see your personal physician for a physical or a sore throat, you are working in an office where Veterans come to get their physical health needs met. The difference is that there are additional mental health services offered in the same location. Interns will work with patients across the life span, from early 20s to early 90s. These services are fully integrated into the primary care setting (PACT), and support PACT-based treatment of both mental health conditions and behavioral aspects of chronic medical conditions. PC-MHI programs seamlessly combine evidence-based care management and co-located collaborative care services.

Interns may see a patient that you scheduled into your clinic for short term treatment. Conversely you may see a patient as a “warm handoff” from a nurse or physician who is concerned about the emotional health of the Veteran. It is an opportunity to learn the complexities of a large multifaceted medical system. Part of your role in pcmhi is evaluating the services the Veteran may find beneficial and determining what referrals throughout the system may best meet those needs.

The integrated mental health services that PC-MHI programs provide address specific Veteran, provider, and health system needs and have a number of unique characteristics that differentiate them from traditional specialty mental health services. It serves as the “first stop” for Veterans who may need mental health care. Often these patients may not ever have sought out care if the provider was not co-located with their physical health care provider. As an intern you have an opportunity to assist them in defining their experience of mental health treatment.

Competency Goals: At the end of your training experience the intern will have competence in the following objectives:

1. To provide immediate access to clinical assessment and appropriate collaborative care and treatment for those experiencing mental health symptoms (either ad hoc or in response to screening).

2. To practice collaborative, stepped and measurement-based care, including appropriate longitudinal follow-up, to address common mental health conditions for the primary care population.
3. To enable optimal functioning of PACT teams(treatment teams in primary care) through collaborative decision support and interdisciplinary consultation with co-located mental health providers.
4. To prevent the development of more severe symptoms through early recognition and intervention.
5. As a member of PCMHI the intern will also provide neuropsychological screenings for cognitive impairment prior to referral to specialty care neuropsychological assessment.
6. You will have the opportunity to learn the EBTs, CBT-Insomnia and Problem solving Therapy(PST).
7. Have the ability to identify appropriate treatment recommendations for patients who are not able to be treated in the short term mental health model.

Prerequisites: Psychology in primary care requires a person who is flexible and prepared for the unexpected. You will work closely with your supervisor on your cases (perhaps initially even hour to hour). You will have a minimum of an hour of supervision a week. It is an exciting venue to train in and you will learn a lot. A desire to work closely across several professions is essential (nursing, primary care physicians, pharmacy, and social work). Often your work will be in exam rooms with patients and their families. The maximum number of sessions per patient is 6 sessions across a 6 month period. Previous work in a health care setting is helpful but not essential.

Contact Information: If you have any questions or are interested in this placement, please contact Dr. Rhonda Venable at 615-873-6700 or 615-873-6503 or send me an email at Rhonda.Venable@va.gov.

Name of Secondary Placement: General Outpatient Psychotherapy Clinic

Supervisor(s): Jennifer Kasey, Psy.D.

Location: Nashville VAMC
1310 24th Ave. South
Nashville, TN 37212

Clinical or Research Placement: Clinical

Number of Positions Available: 1

Anticipated Number of Face-to-Face Clinical Hours per Week: 3 to 5

Description: The General Outpatient Psychotherapy Clinic provides care to veterans who present with a variety of presenting concerns including depression, anxiety, PTSD, partner-relational concerns, grief and loss, adjustment, etc... The population served within this placement is diverse in age, race, ethnicity, ability, educational background, and socioeconomic status. Veterans in this clinic also tend to have a variety of military service and life experiences. This placement consists of diagnostic interviewing, making appropriate treatment recommendations, conducting individual therapy, and developing treatment plans. Couples and group therapy may also be available. The specific breakdown of these activities can be tailored to the needs of the intern. Treatment modalities utilized may include Cognitive Behavioral Therapy for depression, Cognitive Processing Therapy for PTSD, and Interpersonal Therapy.

Competency Goals: This is an opportunity to improve diagnostic and interviewing skills, enhance therapy skills for a variety of mental health related issues, treat varying degrees of trauma related disorders, and learn about common issues that veterans face following military service as civilians..

Prerequisites: Experience providing therapy with adults preferred.

Contact Information: Please contact Dr. Kasey at Jennifer.Kasey@va.gov or 615-873-8277.

Name of Secondary Placement: Outpatient Psychotherapy/BHIP

Supervisor(s): Melissa Broome, Ph.D., Cara Freudenberg, Psy.D., Erica White, Ph.D., Kristin Reed, Ph.D. , Mary Beth Covert, Psy.D,

Location: Alvin C. York VAMC
3400 Lebanon Pike
Murfreesboro, TN 37129

Clinical or Research Placement: Clinical

Number of Positions Available: 1

Anticipated Number of Face-to-Face Clinical Hours per Week: 3 to 6

Description:

What Interns Will Do: Interns on the Outpatient placement will have the opportunity to conduct: intake evaluations, personality testing/cognitive screening, individual therapy, couples counseling, and group psychotherapy with outpatients. Both brief and longer-term treatment modalities are available with a variety of presenting problems including mood disorders, PTSD (combat- or non-combat-related), schizophrenia spectrum, relationship difficulties, personality disorders, depression, addictive behaviors, adjustment problems, and more. During this placement interns have the opportunity to co-lead ongoing groups, as well as begin new groups. Some examples of ongoing groups include: Anger Management, DBT, Coping Skills, and Growth Group. Interns may elect to begin a new group, as well. Interns on these placements will develop appropriate psychotherapy treatment plans and referrals, conduct brief and long-term individual psychotherapy with a diverse population of veterans, including couples therapy when available, and co-lead existing groups and/or organize new groups to meet the intern's areas of interest and work in the context of an interdisciplinary team. The specific breakdown of these activities can be tailored to the needs and interests of the student. Treatment modalities and approaches include but are not limited to: Cognitive Behavioral Therapy (CBT), Brief/Time-Limited Dynamic Psychotherapy, Gottman Method Couples Psychotherapy, Acceptance and Commitment Therapy (ACT), Prolonged Exposure (PE), Cognitive Processing Therapy (CPT), Interpersonal Therapy (IPT), and mindfulness-based approaches.

Supervision: Interns will receive 1 hour of individual supervision per week.

Population: Veterans who are receiving care in a BHIP are diverse in their military and life experiences. Some will have recently separated from the military and may be adjusting to life post military while others are from the Vietnam or Korea era. There are a wide range of diagnoses and complexity in presenting issues, such as depression, anxiety, trauma, posttraumatic stress disorder, depression, substance abuse, bipolar disorder, readjustment problems, relationship difficulties, and personality disorders. This population also is quite

diverse regarding: age (early 20's to 80's); military experience; SES status (e.g., education, economic status, geography/community); gender; sexual and gender identity; race/ethnicity; physical ability/medical conditions (e.g., individuals ambulating via wheelchair, visual impairments).

Research: There is not currently any on-going research in Outpatient Psychotherapy, but supervisors are open to interested interns' ideas.

Competency Goals: This is an opportunity to enhance and learn skills related to diagnosis, intake evaluations, personality testing/cognitive screening, individual therapy, couples counseling, and group psychotherapy with outpatients. Specific competencies related to types of presenting concerns, mental health disorders, types of therapy will be tailored to the needs and wishes of individual interns.

Prerequisites: None

Contact Information: Dr. Melissa Broome at melissa.broome2@va.gov, Dr. Erica White at erica.white5@va.gov, Dr. Cara Freudenberg at cara.freudenberg@va.gov.

Name of Secondary Placement: Pain Psychology

Supervisor(s): Whitney Pierce, Psy.D., RN, BCB

Location: Alvin C. York VAMC, 3400 Lebanon Pike, Murfreesboro, TN 37129

Clinical or Research Placement: Clinical

Number of Positions Available: 1

Anticipated Number of Face-to-Face Clinical Hours per Week: 3 to 5

Description: On the pain psychology placement, interns will utilize a biopsychosocial approach to offer brief, behavioral health interventions and assessment services for Veterans with chronic pain. Interns are expected to function as a member of the interdisciplinary Pain Clinic team, answering referrals, participating in interdisciplinary appointments and treatment planning, providing formal and informal consultation, and attending regular staff meetings. There will be an opportunity to work with other professionals and trainees including Anesthesiologists, Nurse Practitioners, and Clinical Pharmacists, as well as Pharmacy Residents. Interns will also consult with other mental health and primary care providers to answer referrals and coordinate care.

The Veterans served by pain psychology vary widely in age and era of military service. Current participant ages range from 25 to 70 years of age, with the bulk being in their 40s, 50s, and 60s. The majority of Veterans served by pain psychology are Caucasian and male, but the number of female, transgender, and Veterans who are Hispanic or African American is growing. Typical primary psychiatric diagnoses include Somatic Symptoms Disorder and Psychological Factors Affecting Other Medical Conditions, and Veterans often present with co-occurring Depression, Anxiety, PTSD, and Substance Use Disorders.

Interns will complete clinical training opportunities including pain psychology diagnostic intake interviews and psychological assessment for Veterans considering implantable pain management devices (spinal cord stimulators and intrathecal medication pumps). Additionally, secondary placement interns will be expected to focus on one aspect of intervention for this placement, such as individual therapy, group therapy, or biofeedback training. Treatment modalities utilized may include: Cognitive Behavioral Therapy for Chronic Pain, Acceptance and Commitment Therapy for Chronic Pain, Motivational Interviewing, Biofeedback Training, and Whole Health Behavioral Coaching.

Competency Goals: Interns will have the opportunity to collaborate with an interdisciplinary treatment team, improve diagnostic interviewing, assessment, and therapy skills, and enhance their understanding of the impact of biopsychosocial factors on chronic pain management.

Prerequisites: Adult, health and interdisciplinary treatment experience preferred.

Contact Information: Please contact Dr. Pierce at Whitney.Pierce@va.gov or 615-225-3776.

Name of Secondary Placement: Pain Psychology

Supervisor(s): Eun Ha Kim, Ph.D.

Location: Nashville VAMC
1310 24th Avenue South
Nashville, TN 37212

Clinical or Research Placement: Clinical

Number of Positions Available: 1

Anticipated Number of Face-to-Face Clinical Hours per Week: 5 to 6

Description: Chronic pain is one of the most common conditions experienced among Veterans, and research supports a multidisciplinary approach to care. This placement focuses on the role of psychology in chronic pain management. Individual and group therapy modalities teach Veterans how to cope with chronic pain conditions and engage in effective self-management methods for symptoms. Treatment options are primarily based on cognitive behavioral principles, excluding the yoga group, which is utilized as an adjunctive treatment to primary evidence-based modalities.

Veterans typically seen in this clinic vary in age (early 20s to 70s) and low socioeconomic status is a common presentation. Veterans have most commonly identified as Caucasian or African American. The most common area of pain has been the low back, although, Veterans with pain in other areas of the body, including headaches/migraines, as well as those who experience pain spread throughout the body have been present. Veterans may have medical diagnoses often stemming from an injury; however, some Veterans present with no medical evidence supporting the source of pain and may meet criteria for conversion disorder.

In this placement, trainees will obtain experience with screening methods for the appropriateness of psychological treatment, clinical interviews, and individual therapy using cognitive behavioral interventions, mindfulness meditation, relaxation skills, and acceptance techniques. Trainees will have frequent interaction with providers from other disciplines to receive referrals and make appropriate recommendations for treatment.

Competency Goals: Trainees will obtain knowledge about chronic pain and the role of psychological interventions for pain management. Trainees will also learn to interact in a multidisciplinary setting while receiving and providing education across disciplines. In addition, trainees will obtain opportunities to apply cognitive behavioral treatment, acceptance and commitment therapy techniques, mindfulness meditation, and relaxation training in the context of therapy for pain management.

Prerequisites: Experience completing clinical interviews, using assessment measures, and providing therapy with adults preferred. Experience in pain management is not required.

Contact Information: Please contact Dr. Kim at eun.kim@va.gov or 615-873-6074.

Name of Secondary Placement: Post Deployment Clinic

Supervisor(s): Erica Barnes, Psy.D.

Location: Alvin C. York VAMC
3400 Lebanon Pike
Murfreesboro, TN 37129

Clinical or Research Placement: Clinical

Number of Positions Available: 1

Anticipated Number of Face-to-Face Clinical Hours per Week: 3 to 5

Description: The Post Deployment Clinic provides care to veterans who are within 5 years of discharge from military service and have served in combat in Iraq and Afghanistan since 2001 (Operation Enduring Freedom-OEF, Operation Iraqi Freedom-OIF, Operation New Dawn-OND). This population is the closest to military service within the VA and many are often still active in the Guard or Reserves creating an opportunity for interns to learn more closely about military culture and military life.

Post Deployment veterans typically are transitioning to life post military which can include adjusting to new roles, reforming an identity, finding meaning after service, and relationship changes in and out of the home. There is a wide range of diagnoses and complexity in presenting issues including depression, anxiety, trauma, readjustment problems, relationship difficulties, traumatic brain injury, etc. Veterans in this clinic range in age from early 20's to late 50s and have a variety of military service experiences.

This placement consists of diagnostic interviews, making appropriate treatment recommendations, conducting individual therapy, and developing treatment plans. Couples and group therapy may also be available. The specific breakdown of these activities can be tailored to the needs of the intern. Treatment modalities utilized may include Cognitive Behavioral Therapy, Dialectical Behavior Therapy, Problem Solving Therapy, Cognitive Processing Therapy, and Gottman's Couple's Therapy.

Competency Goals: This is an opportunity to improve diagnostic and interviewing skills, enhance therapy skills for a variety of mental health related issues, treat varying degrees of trauma related disorders, and learn about transition issues from military to civilian life.

Prerequisites: Experience providing therapy with adults preferred.

Contact Information: Please contact Dr. Barnes at Erica.barnes@va.gov or 615-225-3449.

Name of Secondary Placement: VAMC PTSD/Outpatient Psychology

Supervisor(s): Eric Aureille, Ph.D.

Location: Nashville VAMC

Clinical or Research Placement: Clinical

Number of Positions Available: 1

Anticipated Number of Face-to-Face Clinical Hours per Week: 4-6 hours/week

Description: The PTSD Clinic is a specialty clinic, providing outpatient care to veterans who have been referred variously by mental health and medical providers (e.g., PCP). Veterans have typically, but not necessarily, served in combat, and range in age from 20s to 80s. Some patients have experienced military sexual trauma. Once a consult has been processed, veterans participate in a one session educational group, the objective of which is to inform prospective patients about PTSD and psychotherapy options. Veterans then complete a PTSD evaluation to assess treatment needs and generate recommendations. Next, cases are staffed with an interdisciplinary treatment team, and final treatment recommendations are made. Coping oriented and trauma-focused interventions are offered to individuals and groups.

Competency Goals: This placement provides opportunities to improve skills in the following areas: diagnostic assessment, cognitive-behavioral therapy in individual and group modalities. Additionally, interns will enhance skills in functioning as a member of interdisciplinary treatment teams. Through Outpatient Psychology, there will likely be additional opportunities to treat psychiatric disturbances in addition to PTSD (e.g., major depressive disorder, panic disorder). Interns will gain experience in treating wide-ranging comorbid pathologies including: substance use, medical disorders and disabilities. Mobility ranges from ambulatory to wheelchair-bound. Finally, this placement will enable interns to learn a “gold standard,” empirically based psychotherapy for the treatment of PTSD, namely, Cognitive Processing Therapy (CPT). Interns will be trained by Dr. Aureille, a certified CPT Provider.

Prerequisites: Experience providing cognitive-behavioral psychotherapy with adults is preferred.

Contact Information: Please contact Dr. Aureille at Eric.Aureille@va.gov or 615-873-6817.

Name of Secondary Placement: Vanderbilt Psychiatry- Epilepsy Neuropsychology

Supervisor(s): Monica Jacobs, Psy.D., ABPP-CN

Location: Vanderbilt Psychiatric Hospital
1601 23rd Ave. S.
Nashville, TN 37212

Clinical or Research Placement: Clinical

Number of Positions Available: 1

Anticipated Number of Face-to-Face Clinical Hours per Week: 3-4

Description: This is an outpatient adult neuropsychological placement at the Vanderbilt Psychiatric Hospital. Interns will see patients referred from the Vanderbilt Epilepsy Program, including patients with intractable epilepsy referred as part of their pre- and post-surgical workups, patients with cognitive impairment related to epilepsy, and patients with non-epileptic spells. Interns may also have the opportunity to observe Wada testing and participate in multidisciplinary case conferences. Interns will see one patient per week and will be responsible for interviewing, testing scoring, and report writing. Turnaround time for reports is one week. Interns will also be expected to set up times to provide feedback to patients regarding test results. It is expected that interns will have some experience with the administration of neuropsychological batteries and report writing. By the end of internship, it is expected that interns will be able to discuss lateralization and localization of deficits in patients with epilepsy, be able to make pertinent recommendations for patients with epilepsy related cognitive impairment, and differentiate between psychogenic and neurologically based cognitive impairment. It is also expected that interns will be proficient at writing reports that integrate information obtained from the clinical interview and medical records with the test findings, and will be able to convey this information to patients and their families in feedback sessions.

Competency Goals: Interns selecting this training experience will develop the following competencies:

- Proficient in the administration and interpretation of clinical neuropsychological measures commonly used in the evaluation of individuals with a seizure disorder;
- Demonstrable understanding of the neuropathology, differential diagnosis, and treatment of seizure disorders;
- Communicating results of psychological/neuropsychological assessments and subsequent recommendations to patients and their families, and other healthcare professionals in the context of a multidisciplinary team setting;

Prerequisites: Graduate level coursework and practicum experience in neuropsychological assessment.

Contact Information: For more information, please contact Dr. Monica Jacobs at monica.jacobs@vanderbilt.edu.

Name of Secondary Placement: Social Emotional NeuroScience Endocrinology (SENSE) Lab.

Supervisor(s): Blythe A. Corbett, Ph.D.

Location: Vanderbilt Kennedy Center
One Magnolia Circle
Room 407B
110 Magnolia Circle
Nashville, TN 37203

Clinical or Research Placement: Clinical Research

Number of Positions Available: 1

Anticipated Number of Face-to-Face Clinical Hours per Week: 3-4

Description: The SENSE research program (funded by NIMH) focuses on the assessment and treatment of reciprocal social interaction and stress responsivity of children with autism spectrum disorder (ASD) and typical development. The SENSE Lab is fundamentally multidisciplinary by combining students and scholars with diverse academic backgrounds in psychology, neuroscience, child development, psychiatry and quantitative methods. Our translational research program focuses on characterizing biobehavioral profiles of ASD by utilizing several tools including neuropsychological measures, neuroimaging, physiological indices of stress and arousal and sophisticated behavioral observation tools.

Specific Activities: The primary focus of this placement is the assessment of social cognition, behavior and functioning in children and adolescents with ASD especially as it relates to engagement with typically developing peers. As part of the placement, students will also be invited to participate in a novel intervention program that utilizes theatre techniques and classic operant conditioning principles.

Assessment: training in diagnostic and neuropsychological assessment of children with ASD and other neurodevelopmental disorders. The majority of participants include children and adolescents between 7-17 years of age with and without ASD. Diagnostic measures include the Autism Diagnostic Observation Schedule (ADOS) and the Social Communication Questionnaire (as well as structured parent interview).

Intervention: SENSE Theatre intervention research program for youth with ASD that incorporates classic behavioral intervention strategies with theatre techniques in a peer-mediated, community-based treatment model.

Time commitment: Thursdays, 8:00 am- 4:30 pm. If interns choose to participate in the SENSE Theatre program, they are expected to attend all sessions, which are conducted on Saturdays

1:00-5:00 pm during the Winter or consecutive afternoons for two weeks in June for the summer session.

Competency Goals: By the end of the placement, the intern will have learned the neuropsychological measures, which include the Wechsler Abbreviated Intelligence Scale (e.g., WASI, measurement of intellectual functioning), receptive and expressive language (e.g., Clinical Evaluation of Language Fundamentals, Peabody Picture Vocabulary Test), as well as social cognitive processes using neuropsychological measures (NEPSY affect recognition, memory for faces, theory of mind), as well as parent questionnaires and self-report measures.

Prerequisites: Prior graduate level coursework and practicum experience in neuropsychological/cognitive assessment.

Contact Information: For more information, please contact Dr. Blythe Corbett (blythe.corbett@vanderbilt.edu).

Name of Secondary Placement: Vanderbilt University Psychological and Counseling Center (PCC)

Supervisor(s):

Psychotherapy Track: Monicah Muhomba, PhD., HSP, & David Sacks PhD., HSP

Biofeedback Track: Adriana Kipper-Smith, Ph.D., HSP (BCIA HRV Certificate)

Location: PCC; 2015 Terrace Place, Nashville TN 37203

Clinical or Research Placement: Clinical

Number of Positions Available:

1) Psychotherapy Track: up to 2 positions

2) Biofeedback Track: 1 position. Please note that both tracks are clinical hours.

Anticipated Number of Face-to-Face Clinical Hours per Week: 5 – 6 hours for both tracks.

Description: The APA-Accredited doctoral internship in Health Service Psychology at the Vanderbilt University Psychological and Counseling Center (PCC) offers a secondary placement that provides opportunities in a variety of clinical experiences.

1) Psychotherapy Track: Secondary placement interns will have experience in the following areas

- Initial interviewing, diagnostic assessment, and treatment planning
- Evidence based and other psychotherapy approaches/interventions
- Short-and long-term Individual therapy
- Participation in complex case conferences
- Group psychotherapy
- Supervision
- Ongoing consultation and collaboration with multidisciplinary staff

This placement is ideal for interns who are looking to cultivate and sharpen their clinical skills in the areas of diagnosis and psychotherapy, and who are considering building a career in a fast-paced, practice- oriented setting. Primary focus for secondary interns involves the provision of individual psychotherapy to Vanderbilt University undergraduate and graduate students. Psychotherapy training at the PCC is grounded in empirically supported treatments, including (but not limited to) CBT, DBT, psychodynamic, and interpersonal approaches. PCC clients are diverse as reflected in the campus population. As such, interns can expect to develop rich caseloads that vary in terms of presenting concern, cultural issues, complexity, and duration of treatment. Secondary placement interns can expect to engage in an average of 6 direct client contact hours per week. PCC clients are generally seen every other week, so a caseload of approximately 12 clients is considered average.

Decisions regarding type and course of treatment are determined through needs assessment based on accurate diagnosis and treatment planning. Secondary interns have one new client appointment scheduled each week. The PCC uses a three-session assessment approach, which begins with the initial intake session, followed by two additional sessions for the purpose of achieving diagnostic clarity and formulating a treatment plan. In many cases, treatment plans will involve interns keeping the clients they see for intake; however, other services associated with the PCC (or wider Vanderbilt community) may be deemed more appropriate given the clients' needs. In such instances, individual therapy may be deemed as a secondary modality or not recommended at all. In addition to sharpening clinical skills, the three-session assessment process gives secondary interns an opportunity to become familiar with, and refer to, the many services and treatment modalities associated with the Center and the larger campus.

Examples of these services include:

- Process, psychoeducational, support, and skills groups
- Biofeedback
- Pharmacotherapy/medical evaluations
- Psychological testing
- Time management and study skills
- Specialty treatment teams (Alcohol/other drug, Trauma, and Eating disorder)

2) Biofeedback Track:

BIOFEEDBACK is a process where information about the body is provided to an individual. This information is not readily accessible to our conscious selves. It can reduce symptoms associated with anxiety, depression, PTSD, addictive behaviors, stress and chronic pain.

Brief Description of the Biofeedback Process: Specialized computer programs and sensors are used for this purpose. Computers are used to collect and display results which are presented visually or by audio. This information is then used to train a new, better or more healthy ways of functioning. The data provides an objective measure showing if you are doing it in a safe and effective way—it eliminates guessing.

The PCC has a 5-session Biofeedback (BF) protocol. The 5-session training focuses on *Heart Rate Variability* (HRV) and *Respiration* biofeedback. There is a considerable amount of training in psychophysiology and health psychology before the hands on training begins. The BF team meets biweekly to discuss new research in the area and how to apply new knowledge to our protocol. The PCC BF protocol has been presented twice in national biofeedback conferences. The BF team is composed of six mental health clinicians, sees about 214 clients a year with an average of 1300 appointments.

Biofeedback Training: Training and supervision is conducted by a highly experienced PCC psychologist who is certified in Biofeedback and earned a BCIA HRV certificate.

The Secondary placement intern will have a minimum of 2 full days (2 Thursdays) of training before beginning to see clients. Their first Biofeedback protocol will be supervised in vivo—supervisor in the room during the 5-session protocol.

Competency Goals:

Psychotherapy Track

- Initial interviewing, diagnostic assessment, treatment planning and case formulation
- Proficiency in implementing a broad range of psychological interventions including empirically supported approaches (e.g. CBT, DBT, interpersonal) in short and long term individual therapy
- Building therapeutic rapport and appropriate setting of professional boundaries
- Working effectively with persons from diverse backgrounds and appropriately identifying therapist limits
- Effectively communicating psychological concepts to non-psychologists through ongoing consultation and collaboration with multidisciplinary staff

Biofeedback Track

- Proficiency in appropriate implementation of the 5-session biofeedback protocol with clients
- Proficiency in explaining and using Heart Rate Variability and Respiration biofeedback interventions with clients of diverse backgrounds

Prerequisites:

- Interest in honing therapeutic skills and interventions in a fast-paced environment
- Willingness to work as part of a multidisciplinary team

Other:

Supervision

All secondary interns are assigned to a licensed psychologist with experience in direct client service, supervision, and training. Secondary interns receive one hour of on-site, individual supervision per week. In addition to supervision, structured training/learning activities associated with the Center provide additional opportunities for professional growth and acclimation. As an example, the PCC holds its complex case conference every Thursday at 9am and interns are welcome to join.

Diversity

We are committed to understanding and respecting individual differences in order to work effectively with the entire student body at Vanderbilt. As a training program we adhere to APA's position that professional psychologists must be prepared to serve a diverse public, thus we devote our time in preparing trainees to be effective in this area.

Contact Information: Monicah Muhomba, PHD., HSP, Training Director. Phone: 615-322-2571
Monicah.Muhomba@vanderbilt.edu.

Name of Secondary Placement: Interventional Pain Medicine via the Osher Center for Integrative Medicine

Supervisor(s): Julie Price, Ph.D.

Location: Interventional Pain Medicine, 100 Oaks (OHO)
719 Thompson Lane
Nashville, TN 37204
(615) 936-8587

Clinical or Research Placement: Clinical

Number of Positions Available: 1

Anticipated Number of Face-to-Face Clinical Hours per Week: 6-7

Description: The central focus of this placement is assessment and brief interventions for patients with chronic pain conditions. This placement is housed in Pain Medicine at OHO, but opportunities for participation in activities at the Osher Center for Integrative Medicine, formally Vanderbilt Center for Integrative Health, will be highly encouraged if schedules allow.

Assessment: These evaluations involve a diagnostic interview, brief cognitive screening, psychological inventories (anxiety, depression, pain), and a personality assessment, and, when possible, a collateral interview. The psychologist formulates specific recommendations regarding suitability for invasive pain management procedures, and possible interventions or behavioral markers which should be addressed before the candidate is considered a candidate for implantable pain management devices (e.g. spinal cord stimulator, intrathecal pain pump). Follow-up in regard to the patient's progress in meeting intervention goals is an ongoing part of the evaluation process when appropriate.

Consultation/Intervention/Groups: From a Behavioral Medicine perspective, the focus is on brief psychological interventions that facilitate self-management of pain (e.g. use of pacing, relaxation strategies/mindfulness, sleep management). Appropriate patients may be trained in adjunct interventions that directly aid in reduction in physical and mental distress (e.g. biofeedback). In addition, recommendations that utilize an integrative approach (medicine, psychology, PT, nutrition, yoga/Tai Chi, massage, acupuncture) to pain management and referrals to the Osher Center for Integrative Medicine, as well as to community providers will be utilized.

The results of assessments/evaluations and treatment recommendations are communicated to the appropriate team via a variety of formal and informal avenues. In addition to the above, other services available to Pain Medicine patients and their families include psychoeducation and individual and couples therapy. The opportunity to develop group therapy and participate

in the development/piloting of the new inpatient functional rehabilitation program is also possible.

What interns will do: The intern and the psychologist will attend a monthly Interdisciplinary Pain Medicine Team meeting together and are jointly involved in all aspects of the placement. A goal of this placement is the objective assessment of current functioning, available support and coping resources, potential co-morbid psychopathology, possible substance abuse, and cognitive impairment, any of which might be a barrier to full benefit of medical and psychological interventions. The intern must learn to communicate and report to non-mental health professionals clearly, both verbally and in writing, and to work closely with medical center staff from a variety of disciplines. In addition, the intern will attend/give at least 2-4 pain didactics (7:15-8am) with the Pain Medicine fellows throughout the year and will have the opportunity to attend the quarterly Interdisciplinary grand rounds (Sat. 9-12pm).

Time commitment: Thursdays, 9:00 am- 5:00 pm, though potential for flexibility exists.

Competency Goals: By the end of training, interns will be expected to demonstrate knowledge of and intervention strategies for chronic pain management. This will include: appropriate utilization of psychological and non-psychological, integrated pain treatment modalities (e.g., CT guided nerve blocks, PT, AT, yoga, acupuncture, nutrition, etc.); the ability to rapidly integrate and document medical and psychological information, demonstration of clinical writing skills and professional responsibility; and knowledge of the pain literature concerning treatment, classification, and etiology as well as related general medical terms and disorders.

Prerequisites: Prior graduate level coursework and practicum experiences in Health Psychology including experiences conducting assessments for implantable devices and a basic ability to conduct compressive chart reviews (labs, toxicology screens [UDS]) is highly recommended. In addition, passion for working with this population is encouraged.

Contact Information: For more information, please contact Dr. Julie Price (julie.r.price@vanderbilt.edu)

Name of Secondary Placement: Adult Clinical Neuropsychology at One Hundred Oaks

Supervisor(s): Holly Westervelt, PhD, ABPP

Location: Neuropsychology clinic at One Hundred Oaks Outpatient Neurology Clinic

Clinical or Research Placement: Clinical

Number of Positions Available: 1

Anticipated Number of Face-to-Face Clinical Hours per Week: 4-5 hours of face-to-face time for interview, testing, feedback; 4 hours for scoring, report writing, supervision/instruction

Description: The One Hundred Oaks (OHO) neuropsychology clinic offers a secondary placement for interns interested in gaining experience in neuropsychological assessment in a general adult outpatient practice. **Expected duties of the intern:** Interns will gain experience in clinical interview with the patient and their loved ones, test administration and scoring of a wide variety of neuropsychological assessment tools, case conceptualization focused on brain-behavior relationships, report writing, generation of meaningful recommendations, and feedback to family and patients. The placement is held Thursdays, 8:00am – 5:00pm. The intern is expected to see one patient per week. **Setting:** The clinical experience is based at the neurology suite at Vanderbilt Health at the One Hundred Oaks mall, located at 719 Thompson Lane in Nashville. **Patient population:** Interns will be exposed to patients with a variety of neuropsychological disorders, which may include various degenerative conditions (e.g., Alzheimer’s disease, dementia with Lewy bodies, frontotemporal dementias), movement disorders, cerebrovascular insults, endocrine/metabolic disorders, brain tumors, sleep disorders, and multiple sclerosis, among other disorders. The majority of the referrals come from Vanderbilt’s Neurology department, though referrals come from a variety of disciplines within and outside of Vanderbilt. **Therapeutic Orientation:** The OHO neuropsychology group uses a flexible battery approach. Assessments typically include a set core of neuropsychological instruments, supplemented as needed to address the presenting concerns or issues that arise during testing. The intern will gain experience in test selection and appropriate modification of batteries for the patient.

Competency Goals: Interns will receive supervision and experience in clinical interviewing, test selection, administration and scoring, case conceptualization, generation of recommendations, and feedback to patients and family members.

Prerequisites: Prior graduate-level coursework and practicum experience in test administration is highly desired.

Contact Information: holly.westervelt@vanderbilt.edu.

Name of Secondary Placement: Vanderbilt Memory & Alzheimer's Center – Geriatric Clinical Neuropsychology

Supervisor(s): Angela L. Jefferson, PhD, HSP & Katherine A. Gifford, PsyD, HSP

Location: Vanderbilt Memory & Alzheimer's Center at 2525 West End Avenue and Clinical Research Center at Medical Center North

Clinical or Research Placement: Clinical experience is in the context of visits for a longitudinal cognitive aging study of adults age 60 and older

Number of Positions Available: 1

Anticipated Number of Face-to-Face Clinical Hours per Week: 3

Description:

- **Overview & Setting:** The clinical experience is based within the Memory & Aging Project at the Vanderbilt Memory & Alzheimer's Center, a research study longitudinally following older adults with normal cognition, mild cognitive impairment, and dementia. Training is provided in the context of a clinical research infrastructure with assessment and diagnostic procedures identical to an outpatient memory clinic. Interns will gain experience in clinical interviewing, interpretation of a comprehensive neuropsychological assessment, and case conceptualization focused on brain-behavior relationships. Each week, the intern participates in clinical research assessments for suspected of memory loss under the supervision of two licensed psychologists. The trainee orally presents case summaries in a multi-disciplinary conference (i.e., two neuropsychologists, a neurologist, and a nurse). Once a month, the intern co-facilitates a support group with patients with early stage Alzheimer's disease or their care partners. Finally, the intern participates in brief feedback sessions with older adults regarding test results and recommendations (when applicable).
- **Therapeutic Orientation:** Because the experience is based in a clinical research environment, assessments emphasize structured protocols in which the intern completes a social, development, and medical history in addition to evaluating all essential cognitive domains as part of the memory loss workup. Monthly group work is conducted in a support and psychoeducation framework.
- **Expected Duties:** The intern is expected to complete 1 to 2 cases every Thursday. Each case includes a 90-minute clinical diagnostic interview with the identified patient and their loved one, completing visit paperwork, and participating in an interdisciplinary consensus meeting for diagnostic determination. The intern is expected to co-lead brief feedback sessions with Dr. Gifford. One Thursday evening each month, the intern is also expected to facilitate a one-hour support group, including preparing and delivering educational material to group members.
- **Time Commitment:** Thursdays, 8:30am-5:00pm. Once a month, group work is held 5:30pm-6:30pm on Thursdays.

Competency Goals: By the end of training, the intern is expected to demonstrate proficiency in conducting semi-structured clinical interviews for assessing and diagnosing mild cognitive impairment and dementia among older adults. The intern is expected to develop case formulation and diagnostic skills, including expertise in the interpretation of clinical neuropsychological tools. The intern is expected to increase his/her competency in clearly communicating results to older adults and their loved ones and clearly communicating clinical impressions to other interdisciplinary professionals, including neurology, neuroimaging, geriatrics, and nursing. The intern will gain skills in the conduct of supportive group therapy, including the delivery of educational content.

Prerequisites: Prior graduate level coursework and practicum experience in psychological or neuropsychological assessments

Contact Information: For more information or to inquire about the training experience, please contact Dr. Angela Jefferson at angela.jefferson@vanderbilt.edu.

Name of Secondary Placement: Vanderbilt Athletics

Supervisor(s): Vickie Woosley, Psy.D., HSP

Location: Vanderbilt University, 2601 Jess Neely Dr., Nashville, TN 37212

Clinical or Research Placement: Clinical

Number of Positions Available: 1

Anticipated Number of Face-to-Face Clinical Hours per Week: 3-4

Description: The Vanderbilt Athletics Department provides individual therapy for collegiate athletes, and psychological/sports interventions to enhance the athletic and academic performance of all student-athletes. Services are provided in the athletic facility and on occasion outside when working with an entire team. Aspects of the position are physical in nature. This placement provides interns with experience in the range of issues that typically exist in a collegiate athletic setting. These include taking a biopsychosocial intake of an individual with a long history of sport participation, student athletes dealing with depression, anxiety, concussion, injury, and ADHD/AD/LD issues.

This placement emphasizes the role of the clinical psychologist in the context of an athletic setting which may include a multi-disciplinary team of the coach, the athletic trainer, academic advisors, nutritionist, and an administrator. Also, this placement includes the opportunity to develop outreach programs for student athletes/teams, participate in the Health Enhancement Committee for student athletes and provide consults to coaches. Under direct supervision, interns will conduct clinical interviews, provide individual therapy, administer screening assessment tools for ADHD/ADD/LD, and provide feedback to the student athlete.

Competency Goals: By the end of training, interns will be expected to demonstrate knowledge of communication and interpersonal skills that facilitate positive and therapeutic relationships. The intern will have demonstrated the ability to work cooperatively with other professionals (both mental health and others) as part of a health care team. Upon completion the intern will have an understanding of the practice of clinical psychology within a sport/athletic community that will facilitate their ability to compete in a broader range of job opportunities. The intern will have gained the knowledge and skills in the areas of sports psychology pertinent to a university setting, including sensitivity and responsiveness to a student athlete's culture, age, and gender. The intern will develop a commitment to ethical principles pertaining to providing care, confidentiality of information, and informed consent.

Prerequisites: Prior graduate level coursework and practicum experience in sports psychology or in working with athletes in some capacity would be helpful.

Contact Information: Dr. Vickie Woosley (vickie.woosley@vanderbilt.edu).

Name of Secondary Placement: Vanderbilt Clinical Research – ICU Delirium

Supervisor(s): Jim Jackson, Psy.D.

Location: Center for Health Services Research, 6th Floor Med Center East
Suite 6100, Vanderbilt Medical Center

Clinical or Research Placement: Clinically oriented research

Number of Positions Available: 1

Anticipated Number of Face-to-Face Clinical Hours per Week: 3-4

Description: This placement takes place within the Vanderbilt ICU Delirium Group (www.icudelirium.org), a large and productive research group that focuses on long term outcomes in survivors of critical illness. Specifically, we study the impact of medical conditions and surgical events on the development of conditions such as depression, anxiety, PTSD, and acquired brain injuries. To accomplish these goals, we perform a wide array of clinical assessments on patients including assessments of cognitive, mental health, and quality of life related functioning. These assessments are done in the intensive care unit, in patient homes, by telephone, and at the office. We also engage in research on cognitive rehabilitation. In addition to assessment duties (administering and scoring evaluations), responsibilities include consenting patients, performing bedside delirium evaluations, performing literature reviews, assisting in writing manuscripts, and learning to functioning as part of a multidisciplinary team.

Competency Goals: Interns will learn wide ranging aspects of clinical research. They will learn how to develop research related assessment batteries and to design research protocols that will assess specific research questions. They will become adept at administering a wide array of neuropsychological tests as well as screening tools that evaluate depression, PTSD, quality of life, frailty, and daily functioning. They will learn what an ethical approach to research involves including the particular unique challenges of working with vulnerable research populations such as individuals with cognitive impairment. They will learn how to write more succinctly and more effectively, particularly in the context of scientific writing. They will learn how to take ideas and use these to create focused manuscripts. They will learn how psychologists can function in large research teams of professionals from other disciplines and, in particular, how to take complex psychological concepts and distill them into easily understood concepts to share with non-psychology colleagues.

Prerequisites: Prerequisites include some familiarity with neuropsychology, rehabilitation psychology, or health psychology. More importantly, interns most have a willingness to learn and openness to trying new things.

Contact Information: Jim Jackson at 615-936-2822 or at james.c.jackson@vanderbilt.edu.