



Psychology Internship Program

Martinsburg VA Medical Center

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MATCH Number: 2349

Applications due: (please contact Dr. Malcy)

Accreditation Status

The program is not accredited by the American Psychological Association. The Martinsburg VA Medical Center Psychology Internship Program is an APPIC member in good standing.

Applicants should note that individuals who complete VA psychology internships, even if from a not yet accredited internship, are eligible for VA Postdoctoral Fellowships and VA employment. The following is an excerpt from the VHA policy regarding hiring of psychologists from non-accredited VA psychology internships.

*"2. **BASIC REQUIREMENTS.** The basic requirements for employment as a VHA psychologist are prescribed by: Public Law 96-151 codified in Title 38, U.S.C. § 7402. To qualify for appointment, all applicants for the position of psychologist in VHA must meet the following:*

*a. **Citizenship.** Citizen of the United States. (Non-citizens may be appointed when it is not possible to recruit qualified citizens in accordance with Chapter 3, section A, paragraph 3g, this part.)*

*b. **Education (1)** Have a doctoral degree in psychology from a graduate program in psychology accredited by the American Psychological Association (APA). The specialty area of the degree must be consistent with the assignment for which the applicant is to be employed.*

AND

(2) Have successfully completed a professional psychology internship training program that has been accredited by APA. Exceptions: (1) new VHA psychology internship programs that are in the process of applying for APA accreditation are acceptable in fulfillment of the internship requirement, provided that such programs

were sanctioned by the VHA Central Office Program Director for Psychology and the VHA Central Office of Academic Affiliations at the time that the individual was an intern and (2) VHA facilities who offered full one-year pre-doctoral internships prior to PL 96-151 (pre-1979) are considered to be acceptable in fulfillment of the internship requirement.”

Application & Selection Procedures

The Psychology Service abides by the Department of Veterans Affairs’ commitment to ensuring equal opportunity (EEO), and promoting diversity and inclusion, all applicable Federal EEO laws, regulations, Executive Orders and Management Directives. As provided by the Policy, the VA will not tolerate discrimination or harassment on the basis of race, color, religion, national origin, sex, pregnancy, gender identity, parental status, sexual orientation, age or disability. Our training program is committed to ensuring a range of diversity among trainees, and we select candidates representing diverse backgrounds. All things being equal, consideration is given to applicants representing elements of diversity, including but not limited to age, disability, ethnicity, gender, gender identity, language, national origin, race, religion, culture, sexual orientation, social economic status, and military service.

General Intern Qualifications

- US Citizenship
- Student in good standing in an APA accredited clinical or counseling psychology doctoral program
- Approved for internship status by their graduate training program coordinator
- Verification of Selective Service Registration (Male applicants born after 12/31/1959 must sign a pre-appointment Certification Statement for Selective Service Registration)
- Comprehensive examinations passed prior to 3/1/2019
- Dissertation proposal approved prior to start of internship
- Clinical experience with adult populations in a variety of clinical settings

Application Materials

All applicants must register for the Match in order to be eligible for consideration for internship training. An electronic application service, called AAPI Online (<https://portal.appicas.org/>), must be used by applicants to prepare and submit applications to the program. AAPI Online is a separate and distinct service from the Match and applicants must register to use AAPI Online separately from registering for the Match. Please ensure three letters of recommendation are included, preferably from a combination of both your doctoral training program and clinical placements.

Background

The Martinsburg VAMC is located on 175 scenic acres in the Shenandoah Valley. Situated in the heart of West Virginia's Eastern Panhandle in historic Berkeley County, the medical center has a service area of more than 126,000 veterans in West Virginia, Maryland, Virginia, and Pennsylvania. The facility includes seven Community Based Outpatient Clinics (CBOCs): Cumberland, Maryland; Hagerstown, Maryland; Fort Detrick, Maryland; Petersburg, West Virginia; Stephens City, Virginia; and Harrisonburg, Virginia. The Martinsburg VAMC anticipates a continued increase in the number of new Veterans from prior and current operations in Iraq and Afghanistan. This is coupled with the population growth in the greater Martinsburg, WV region. The cost of living in this area, along with the small friendly community environment within 90 minutes of the Nation's Capital, is drawing many Veterans to this locale. Many Veterans seek out treatment specifically through our facility as it captures the rural warmth and open environment of the area, yet provides high quality and dedicated service that is unsurpassed at any other facility.

Medical services available include internal medicine, ambulatory surgery, audiology and speech pathology, dental, nursing home, nutrition, podiatry, prosthetics, women's health and rehabilitation medicine. Within this setting, the Mental Health Service holds a prominent position in terms of both size (largest in terms of staffing) and specialty care.

Our Mental Health staff include 25 psychologists, 18 psychiatrists, 70 social workers, 8 addictions specialists, 5 peer support assistants, 9 vocational rehabilitation positions, and various other clinical personnel. Psychologists are located in either a newly constructed building for Outpatient Mental Health Services (Hope Center), specialty care units within the facility, at a CBOC, or in the field with Home Based Primary Care.

Stipends and Benefits

Salary: \$29,080 (for 2019)

Fringe benefits: health insurance, life insurance, federal holidays (10), vacation (13 days), sick leave (13 days), dissertation release time/professional development time/graduation attendance (up to 5 days).

THE DEADLINE FOR RECEIPT OF ALL MATERIALS IS

(Please contact Dr. Malcy)

If there are questions about the internship program or if you need to check the status of your application please contact Dr. Jason Malcy, Director of Psychology Training at (304) 263-0811 ext 4659 or via email at Jason.Malcy@va.gov.

APPIC Match #: 2349

Selection and Interview Process

Application materials will be reviewed upon receipt, and selected candidates will be contacted for telephone interviews. There will be no in-person interviews granted during this initial year. All interviews will be conducted by telephone to provide for fairness and prevent unreasonable financial distress onto applicants.

Match Process

We will follow the Match policies established by APPIC. The only information that we may communicate to applicants is whether they are still under consideration for selection. Additional information regarding the Match is available through the National Matching Service. This internship is an APPIC member and is eligible to participate in the 2019 APPIC match. The Martinsburg VA Medical Center Match # is 2349.

Training Model and Program Philosophy

The Scientist-Practitioner model guides our psychology training program. Our ideal is that of a psychologist who is skilled in the understanding and application of clinical research and scientific methods to his/her practice.

The internship year is designed to be sequential, cumulative and graded in complexity. There will be increasing expectations for the interns' performance in the core competencies as they increase in knowledge, gain experience and develop expertise. As the year progresses, they will be assigned progressively more difficult and complex tasks matching the interns' level of competency. Initially working under close supervision of experienced and skilled staff members,

students will be expected to work with increasing independence as they develop individual competencies. Training will be conducted in a format that encourages growth of the student clinically and professionally throughout his/her time in the program. Supervision is expected to match the needs of the intern in a way that facilitated professional development and progression. Thus, the intensity of supervision diminishes over the course of the rotation and internship as the intern matures into a role approaching colleague rather than student.

Program Aims & Objectives

Traditional assessment and psychotherapeutic techniques are practiced under close supervision in the context of common demands for clinical service present in a general medical and psychiatric medical center. While experience in specialize skills is available, it is our point of view that concentration in such areas should occur following the internship after more general clinical skills have been mastered. Therefore, our core aims include demonstrated competency in areas we feel are necessary for success in any professional setting. These include: research; ethical and legal standards; individual and cultural diversity; professional values and attitudes; communication and interpersonal skills; assessment; intervention; supervision; and consultation and interprofessional/interdisciplinary skills. Specific responsibilities of the intern are, in part, determined by his/her individual needs, interests, and level of readiness. In general, however, the intern should: develop an understand of the clinical setting, work effectively with other disciplines, put administrative requirements into practice, handle ethical considerations wisely, and project psychology as an asset to the overall health care delivery endeavor. Didactic seminars, supervision, and additional trainings are integrated with the practical demands of a service-producing environment as the intern continues his/her development toward being an independent provider of psychological services.

Interns should complete the program either prepared for the marketplace or with a clear motivation for further intensive training in some specialized area of their choice. Our interns are prepared for a wide variety of psychology positions. Our expectations for internship are that the interns develop core competencies that will translate well into research, clinical, teaching, administrative, or combined position and that the interns have time and experience to thoughtfully consider a plan for a career path that most fits their interests. This development has the end goal of a well-rounded psychologist who can function in an autonomous manner and serves as a positive representative for the field of psychology.

Ethical Standards

Supervision, clinical seminars, and other didactics are just some of the opportunities in which interns will receive an understanding of ethical standards: clinically, professionally and personally. The goal will be for interns to appropriately apply ethical standards in situations where there are no clear answers. This is a true evaluation of an interns' preparedness for functioning autonomously as a psychologist. Through direct experience, didactics and

supervision, the program encourages the development of a strong, professional identity that incorporates critical thinking, ethical practice and cultural sensitivity.

Recovery Model

Adherence to the recovery model encourages patients to take an active role in their treatment. Interns will facilitate this process by routinely using a variety of assessment tools throughout treatment episodes. Interns will be instructed on the importance and value of incorporating brief objective measures during the course of care. Specific assessments will vary depending on the presenting issues, but typical assessments will include the BDI-II, BAI, PCL-S, PDQ, PAI, MMPI-2 and the RBANS. These assessment/outcome tools will be actively drawn in to the session in order to help guide the course of care. Interns will gain comfort in regularly providing feedback to their patients on progress made using these objective measures. Utilization of these assessment measures will be used throughout all rotations.

All aspects of mental health treatment at the Martinsburg VAMC are based within the recovery model. The 10 guiding principles of recovery by SAMHSA are applied throughout the medical center. The Local Recovery Coordinator (LRC) regularly provides trainings to departments within the mental health service, as well as, other services within the medical center. She additionally works closely with the 5 peer support assistants (PSAs), who are embedded in many different areas in mental health including: psychosocial rehabilitation and recover center (PRRC), domiciliary care and the PTSD Center. Students will learn to promote hope and autonomy to their patients and reduce the stigma associated with mental illness. A priority is placed on Veterans' cultural background and social support as this represents a key role in the long term recovery of their patients. There is an understanding that one can achieve their goals through many avenues and at a varying pace that is often not linear.

Program Structure

The internship will require a minimum of 1750 training hours over one calendar year. Interns will complete three major rotations of four months in duration and two to four minor rotations of three to six months in duration. Major rotations include Behavioral Health, Posttraumatic Stress Disorder, and Outpatient Mental Health. Thus, a typical week would include approximately four days in the major rotation and one day in the minor rotation. Within this overall structure are long-term therapy cases, didactic training, supervision, and formal evaluation. Approximately 50 percent of the intern's time is devoted to the provision of direct clinical care.

Behavioral Health Rotation

The Behavioral Health rotation will be an interdisciplinary experience designed to prepare interns for new and evolving roles as psychologists in a medical setting. Effective

communication among interdisciplinary staff and attention to medical conditions as they relate to psychological functioning is critical. While many training activities and professional responsibilities are established as part of the routine program, the rotation is designed with an orientation toward flexibility to meet an intern's specific professional interests and needs. Settings include (1) Primary Care, (2) Pain Management, (3) Home-Based Primary Care, and (4) the Women's Health Clinic. Additional opportunities in Behavioral Health include consultation for bariatric surgery, transplants, amputations, and cancer treatment.

Primary Care: Interns will work directly with medical providers in a team environment, to include rapid psychological assessment and abbreviated case conceptualization as part of the physician visit. Follow-up services may include crisis intervention, brief problem-focused therapy, supportive counseling, and/or patient education. Primary Care teams are interdisciplinary and consist of physicians, nurses, psychologists, physician assistants, dietitians, social workers, pharmacists and program support assistants. Referred Veterans may be seen within minutes of the consult request in this fast-paced and challenging environment. While supervision will be readily available to all interns across all rotations, supervision in Primary Care will be in close proximity at all times.

Pain Management: This clinic is an interdisciplinary outpatient program that provides services to Veterans with chronic pain. Clinical providers include physical medicine physicians, nurse practitioner, nurse case manager and pain psychologist, who work in close collaboration with physical and occupational therapy, chiropractic services and anesthesia. Services provided within this biopsychosocial model include comprehensive assessment, individual and group treatment, consultation, and coordination of care for complex pain patients. Interns will have the opportunity to work with various disciplines and apply evidenced base psychotherapies such as Cognitive Behavioral Therapy for Chronic Pain, Acceptance and Commitment Therapy, and biofeedback. This experience will afford interns with a working knowledge of medical conditions associated with pain and a comprehensive biopsychosocial approach to pain care.

Home-Based Primary Care: Interns will spend at least two days per month in Home Based Primary Care (HBPC), a program that provides home health care for Veterans who are severely disabled and/or chronically ill. Services to this typically geriatric population include risk assessment, cognitive assessment, mental health assessment, supportive therapy and psycho-education. Interns will function as part of the HBPC interdisciplinary team, which consists of medical providers, nurses, social workers and psychologists. Initially interns will accompany a HBPC psychologist in home visits as they experience the challenges of service delivery in the home environment and often within a rural area.

Women's Health Clinic: Interns will spend at least two days per month in the Women's Health Clinic (WHC). The WHC is an outpatient care setting that addresses specifically the health care needs of women Veterans. The clinic is staffed by an interdisciplinary team including physician, social workers and peer support assistant. The WHC embraces an integrative and holistic approach to health care in which the role of mental health is highly regarded.

Posttraumatic Stress Disorder (PTSD) Rotation

The second major rotation is PTSD, which consists of the PTSD Residential Rehabilitation Program (PRRP), the PTSD Clinical Team (PCT), and the Military Sexual Trauma Program (MST). Thus, the intern will gain experience in both residential and outpatient environments.

Residential: The structured 50-bed PRRP program located in the domiciliary is the largest of its kind in the VHA. It targets combat-related PTSD, and is known for its treatment of more chronic and severe cases of PTSD. Although variable in length, a 90-day length of stay is the norm. Interns will be integrated into the interdisciplinary treatment team, which consists of a psychologist, psychiatrist, nurse, recreational therapist, practicum student, social workers and office support. Interns will learn how to collaborate with these other disciplines to provide fully integrated services. As Veterans experiencing PTSD often present with comorbid depression, substance abuse and other anxiety disorders, interns will learn how to structure an evidenced-based comprehensive approach. PRRP will provide interns the opportunity to be trained in and deliver evidence-based treatments, such as Cognitive Processing Therapy, Prolonged Exposure and Seeking Safety. The PTSD residential program has a strong recovery model focus and will provide interns the opportunity to conduct individual and group psychotherapy, educational groups and life skills practice

Outpatient PTSD Clinical Team: Augmenting this residential program is the PTSD outpatient program or PTSD Clinical Team (PCT), which provides treatment to Veterans from all eras of service. This interdisciplinary team includes psychiatrists, psychologists, social workers and peer support assistants. As part of this team, interns would have opportunities to attend staff meetings, perform assessments, and conduct evidenced based therapy in group and individual formats. The PTSD clinic offers prolonged exposure therapy (individual) and cognitive processing therapy (both individual and group). As noted with the residential component, interns will be trained in PE and CPT and in the delivery of these EBPs in an outpatient setting. Interns would have the opportunity to co-lead a group specifically for OEF/OIF veterans. Interns will also have the opportunity to work directly with the Military Sexual Trauma (MST) coordinator to conduct individual therapy and co-lead gender specific MST groups. Opportunities selected for interns will be guided by their interests and the clinical care being offered at the time of the rotation. In treating rural Veterans with PTSD, isolation can be one of the most significant obstacles to address in treatment. Interns will learn how to deal with this unique factor as they work with Veterans with PTSD.

Outpatient Mental Health

The Outpatient Mental Health rotation will primarily be located in the newly constructed HOPE Center. This is a centralized location for the majority of outpatient mental health services available. It offers treatment in a relaxing and recovery oriented setting that is detached from the general medical center. The Outpatient Mental Health Clinic is comprised of a multidisciplinary team of psychologists, nurses, social workers, and psychiatrists that serves a diverse population of psychiatric outpatient Veterans. Interns have the opportunity to conduct assessment, treatment planning, individual therapy and group therapy. This rotation will help

interns to improve their skills in psychotherapy, conceptualization, and treatment planning by working with veterans of diverse characteristics and mental health challenges. There is a healthy balance in opportunity to work with Veterans from various eras of service, including Vietnam, non-combat, and OEF/OIF. This rotation is designed to enable interns to develop competent skills in the differential diagnosis of psychopathological disorders and to develop and implement individualized treatment plans essential for successful intervention. Interns will have the opportunity to work with Veterans experiencing a wide range of problems including anxiety disorders, mood disorders, adjustment disorders, anger, personality disorders, substance abuse and marital discord. This rotation will include training in evidence-based practices for treatment Veterans with depression, PTSD and other anxiety-related disorders.

Interns will have the opportunity to be trained in and conduct a number of EBPs throughout this rotation. These EBPs will include: CBT for couples, CBT for depression, CBT for insomnia, IPT for depression, Motivational Interviewing, DBT in group format, problem-solving training and Integrated Behavioral Couple Therapy.

The majority of Veterans utilizing the Mental Health Clinic are from rural areas, and trainees receive training in working within this context. A key training element of this rotation will be developing competence and confidence in modifying practices to a rural care environment. Training on this rotation will include learning and conducting therapy through the use of tele-mental health. Interns will work in collaboration with the Mental Health Integrated Case Management (MHICM) team to ensure all psychosocial needs are successfully addressed. Additionally, they will have an opportunity to experience the provision of services at the Community Based Outpatient Clinics (CBOCs).

Interns will develop and strengthen skills working with rural Veterans deemed high risk. This is particularly important as the VA's approach to suicide prevention is among the most intensive in health care, and particularly in an outpatient setting. Students will work collaboratively with the Suicide Prevention Coordinator (SPC) for any Veterans they are treating that have been identified as having an increased risk for suicidal behaviors. Knowing how to provide a high quality of risk prevention will serve an intern well in future settings.

Interns will also coordinate care with Peer Support Specialists, as an opportunity to learn about the Peer Support program in the VA. Students on this rotation will learn how to apply skills working with specific subpopulations of Veterans in rural areas through coordinated work with programs such as homeless services, Veteran's Justice Outreach and vocational rehabilitation.

Minor Rotations

Interns will select two to four minor rotations in which they will participate for a three to six month duration. Minor rotations that students can select from will encompass a wide array of opportunities throughout the hospital. These minor rotations will allow interns to explore in-depth a specialty area. Minor rotations that can be selected include: neuropsychology (4-6 months), geriatric focus/community living center, home based primary care, acute psychiatric unit, administration/quality improvement, telepsychology, in addition other rotations can be developed upon interns' interests and supervisory availability.

Long-Term Therapy Patients

Interns will carry a long-term therapy case load of at least three patients. All three major rotations create the opportunity for interns to develop ongoing treatment. Thus, for the Veterans that are receiving this care the change in rotation will not have any impact on their treatment. Additionally, while students are changing rotations they will be encouraged to maintain contact with prior rotation supervisors. Martinsburg embraces a collegial atmosphere that encourages collaboration amongst staff and students.

Didactic Trainings

Didactic trainings are held weekly led by trained staff from a variety of disciplines, as well as respected community partners (i.e., West Virginia University, DC VAMC). Additionally, there is a weekly journal club with an extensive focus on ethical and multicultural issues in the development of a well-rounded psychologist.

Supervision

Supervision is provided by psychologists who are directly associated with the rotation areas selected. Major rotations require two hours of face-to-face supervision per week, and minor rotations require one hour of supervision per week. In actual practice, the total amount of supervision at the work site will typically exceed APA and program required minimums. Supervision will be offered on an individual and group basis through case discussions, live observation, co-therapy, case presentations, audio tape review and seminars. All assessments will be supervised by a psychologist. Informal supplementary supervision will be provided by members of other professional disciplines. A psychologist is required to be on-site or in nearby proximity when students meet with any patient. Should the student's primary supervisor be out for any reason another psychologist in that location will be identified as the acting supervisor. No clinical work is to be done after hours as there will be no covering psychologist available (this includes phone calls to patients).

Formal Evaluation

Interns are assessed through a formal evaluation conducted by each supervisor twice during each rotation. Each evaluation is according to a standard rating system along with a narrative statement. The evaluation form has been designed to meet APA accreditation guidelines. The evaluation is discussed between supervisor and intern. Additionally, interns are asked to prepare evaluations of their supervisors and rotations at the end of each rotation, and to provide an overall evaluation of the internship program at the end of the year. One year following completion of the internship, former interns will be requested to complete assessments of how well their internship training prepared them for the residency period. Informal, ongoing verbal feedback is solicited from interns and supervisors throughout each

rotation, with necessary adjustments made in accordance with feedback received. This feedback is used by the psychology training committee to determine the effectiveness of the program in meeting the mission and goals of the training program and the student.