

# Psychology Pre-Doctoral Internship Training Program

2016-2017  
Internship Training Year



Bath Veterans Affairs Medical Center  
Bath, NY  
[www.bath.va.gov](http://www.bath.va.gov)

MATCH Number: 234411

Behavioral Health Outpatient Clinic  
76 Veterans Ave  
Bath, NY 14810

### **Accreditation Status**

The pre-doctoral internship program at the Bath VA Medical Center in Upstate NY is a newly-funded VA internship site that is a member of APPIC but is not accredited by the APA. In accordance with VA Psychology Qualification standards, residents who have successfully completed an internship at the VA, even if not yet accredited, ARE ELIGIBLE for VA Postdoctoral Fellowships or VA employment.

### **Introduction**

The Bath VA Medical Center Pre-doctoral Internship provides qualified doctoral candidates generalist training with a variety of psychiatric, medical, and geriatric patients in residential and outpatient settings. Internship graduates are prepared for professional practice in VA facilities as well as a wide range of health care settings, including medical centers and non-VA hospitals that primarily serve adults.



***Bath VA National Cemetery***



***Keuka Lake, located seven miles north of the Bath VA***

## **Training Settings**

Bath VA provides primary and behavioral health care throughout a rural seven-county area of southern New York and northern Pennsylvania. Patients are served at two additional community-based outpatient clinics. Training takes place at the main hospital and the Domiciliary, all conveniently located at the main campus. Based on availability, residents are provided a private office in the Behavioral Health Outpatient Clinic or Domiciliary with a dedicated computer and phone.

## **Philosophy of Training**

The Bath VA Psychology pre-doctoral internship follows a scholar-practitioner model to prepare residents as competent entry-level psychologists, serving as clinicians for an adult population. We believe that psychological practice and scholarly inquiry are symbiotic and mutually informing, and emphasize learning-by-doing. Residents will acquire knowledge and develop skills in the following areas: ethics, diversity, consultation, assessment, evidence-based practices, and foundational personal and professional skills.

We emphasize a generalist approach that aims to develop proficient diagnosticians with the ability to practice both short and long term therapeutic strategies using individual and group approaches. In addition to core training rotations in outpatient mental health and substance use, residents are provided exposure to a number of specialties (e.g., primary care, neuropsychology, PTSD clinic). As a result, residents are provided a strong foundation for future specialization at the post-doctoral level.

Clinical practice at the Bath VA is informed by research and residents have the opportunity to receive training in evidence-based treatments, including cognitive-behavioral interventions, problem-solving therapy, acceptance and commitment therapy, cognitive processing therapy, and prolonged exposure therapy. We expect residents to think critically, to generate and test hypotheses related to their clinical work and become educated consumers of clinical research.

Our focus at the Bath VA is clinical practice and excellent service delivery in a setting where self-reflection and mentoring is valued. The resident is guided through training from a developmental approach; residents will begin by observing their supervisors' clinical work, will advance to conducting assessment and therapy while receiving in-vivo supervision and feedback, and graduate to junior colleague status within each clinical rotation.

Our training program is sensitive to individual differences and diversity and is predicated on the idea that psychology practice is improved when we develop a broader and more compassionate view of individual differences. In our efforts to train culturally aware and competent psychologists, our program integrates diversity-focused training in the forms of clinical supervision, didactic seminars and clinical case conferences. Our program

faculty has expertise working with patients from various racial/ethnic groups, sexual/gender orientations, religious affiliations, and age groups.

## **Goals and Objectives**

The goals and objectives of our internship program reflect our dedication to provide generalist training that prepares residents as competent entry-level psychologists who are committed to empirically-supported/evidence-based assessment, program design, and treatment.

- 1. To produce entry-level psychologists with a solid foundation in assessment and diagnosis.** Residents will be able to appropriately (a) assess, (b) evaluate, and (c) conceptualize a broad range of patients, including those with complex presentations and co-morbidities. Selection and use of assessment tools and/or evaluation methods should be appropriate to the clinical needs of the patient and the clinical setting, and responsive to the needs of other professionals.
- 2. To foster the development of psychotherapeutic skills.** Residents will be able to demonstrate the ability to effectively work with diverse populations, and provide appropriate intervention in response to a range of presenting problems and treatment concerns. They will also demonstrate skill in applying and/or adapting evidence-based interventions with a specialized population, and be able to provide clinical leadership when working with junior providers.
- 3. To foster interdisciplinary teamwork and consultation.** Residents will develop clinical skills within the context of interdisciplinary teams. They will demonstrate an ability to effectively work within interdisciplinary teams, including demonstration of competency in assessment, treatment and care management, collaborative working, management and administration, and interpersonal skills.
- 4. Scholarly Inquiry.** We do not require that residents engage in research while on internship. However, we encourage residents to learn the process by which they can pursue scholarly projects by providing the necessary research educational requirements in the early part of the internship program. Additionally, we expect our residents to effectively utilize the scientific literature to inform their clinical practice and demonstrate a scholarly approach to clinical practice that includes critically evaluating research findings and applications.
- 5. To nurture continued growth in professional and ethical development.** The internship program is committed to fostering the development of identity as a professional psychologist, and the values and ethics of the profession of psychology. Residents are exposed to racial, cultural, and gender-related issues in clinical practice; issues of institutional affiliation and dual relationships; and roles and values of professional psychologists in clinical practice, training, and research. Development of professional identity is facilitated by training and supervision.
- 6. Cultural Diversity and Individual Differences.** We value cultural and individual diversity in our residents and in their experiences. Residents enhance their knowledge

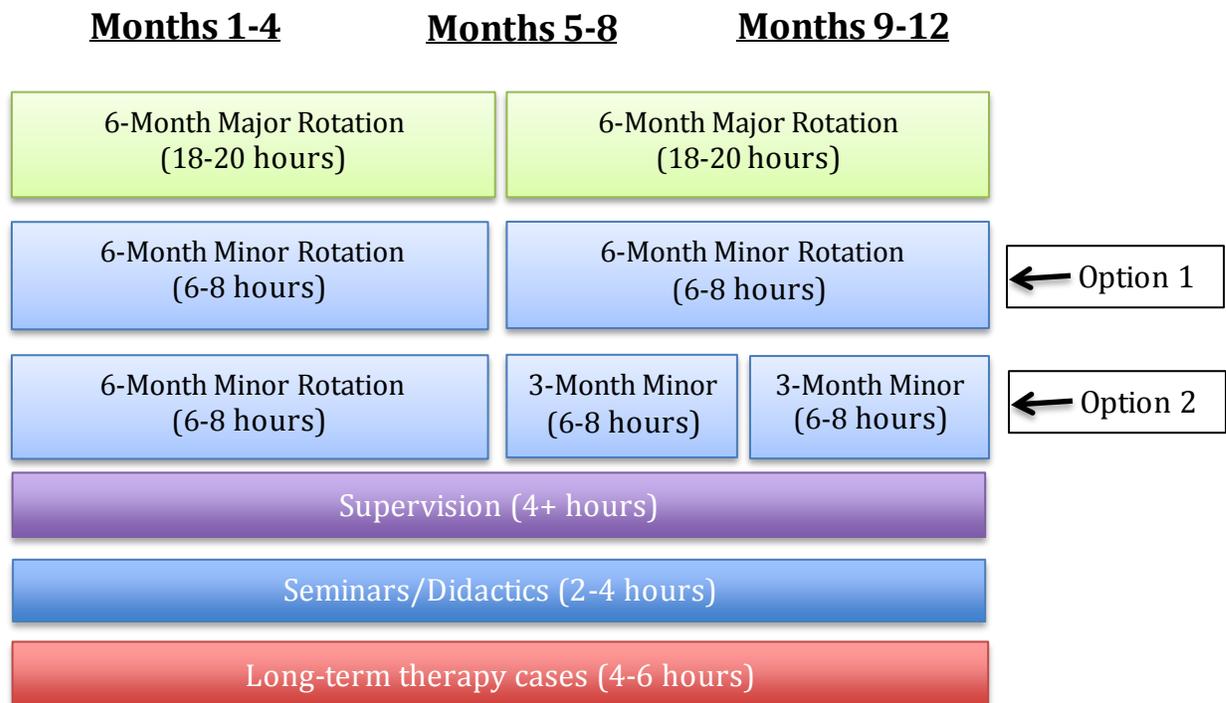
of, and appreciation for, the role of cultural diversity and individual differences in professional practice through didactic and experiential training in multicultural issues, and through exposure to a culturally and personally diverse patient population.

**Program Description**

For the 2016-2017 training year, the Bath VA Psychology Internship will offer two positions, each providing generalist training with the option to continue to explore areas of interest further throughout the year via minor rotations. Residents will be required to provide long-term psychotherapy for four patients at the Domiciliary or Outpatient Mental Health clinic for the year. Residents are required to spend at least 25% of their time performing clinical activities, for a minimum of 500 clinical contact hours over the course of the internship year. Residents will receive a minimum of two hours per week of individual, face-to-face supervision, in compliance with APA standards. In addition, they will receive at least two hours of group supervision per week. Figure 1 is an example of training structure.

**Rotations:** Major rotations last for six months each, resulting in two semesters, and include General Mental Health and the Domiciliary. Major rotations will comprise 18-20 hours of the intern’s week. Residents choose among various minor rotations for each of the semesters. These combined experiences account for approximately 6-8 hours/week.

Figure 1. Training Structure



## **MAJOR ROTATIONS**

### **General Mental Health**

*The Behavioral Health Outpatient Clinic (BHOC)* provides a range of outpatient mental health services to veterans reflecting a broad spectrum of mental health diagnoses and concerns. Most common diagnoses include PTSD and depressive disorders, followed by substance use and other serious psychiatric disorders (e.g., psychosis, bipolar disorder). The BHOC multidisciplinary team is comprised of psychiatrists, psychologists, psychiatric nurse practitioners, social workers, nursing case managers, and medical support assistants. Treatment team meetings involving all outpatient clinical staff, as well as representatives from PRRC and MHICM teams and the Suicide Prevention Coordinator, are conducted on a twice-weekly basis to collaboratively discuss and address complex treatment concerns. Residents will have the opportunity to engage in individual and group psychotherapy, psychological and cognitive assessment, frequent formal and informal consultation with the multidisciplinary team, and consultation with other medical professionals within the facility. Residents will participate in educational seminars, and will have the opportunity to learn a number of empirically-based treatments, such as problem solving therapy, cognitive behavioral therapy, cognitive processing therapy, prolonged exposure therapy, and acceptance and commitment therapy.

### **Substance Use Treatment**

*The Domiciliary Residential Rehabilitation Treatment Program (DRRTP)* is a 187-bed residential treatment program that serves veterans who are dealing with issues such as substance abuse, mental health, homelessness, and unemployment. The Domiciliary provides a residential, rehabilitative, therapeutic environment with a goal of successfully reintegrating veterans back into the community. The DRRTP patient population is comprised of a culturally diverse group of veterans with dual diagnosis (substance use disorders as a co-morbidity of another mental illness). Residents will have the opportunity to engage in individual and group psychotherapy, psychological and cognitive assessment, and consultation with professional staff. Residents will also have the opportunity to learn a number of evidence-based treatment modalities such as cognitive-behavioral therapy for chronic pain, mindfulness-based relapse prevention, cognitive-behavioral therapy for depression, cognitive processing therapy, and motivational interviewing.

## **MINOR ROTATIONS**

Residents have the option of extending their major rotations throughout the internship year and/or participating in the minor rotations below, which will be reflected in their individualized training plan. Dependent on interest and availability, other clinical opportunities may be available, and tailored to the resident's needs.

### **Health Psychology**

*The Home Based Primary Care Program (HBPC)* provides services to homebound veterans dealing with numerous and complex medical issues. The patient population is

comprised of an older adult population; average age is 75 years and nearly one-third struggle with cognitive deficits. HBPC patients often need skilled services, case management, and assistance with activities of daily living (e.g., bathing and getting dressed) or instrumental activities of daily living. In that regard, all patients are provided comprehensive care from a close-knit interprofessional team of psychologists, social workers, nurses, nurse practitioners, physical therapists, and dieticians. Residents will have the opportunity to engage in individual psychotherapy for patients and caregivers, psychological and cognitive assessment (with particular emphasis on adjustment to medical difficulties and capacity), and frequent formal and informal consultation within the interprofessional team. Residents will also participate in monthly HBPC case conferences and monthly education seminars, and will have the opportunity to learn a number of time-limited empirically-based treatments, such as problem-solving therapy and cognitive behavioral therapy, in addition to motivational interviewing and acceptance and commitment approaches.

### **Neuropsychology**

Interested residents have the opportunity to learn about and provide neuropsychological clinical interviews, selection of appropriate neuropsychological assessment instruments, test administration, scoring, report writing, and how to provide patient feedback. In addition, there may be opportunities to perform evaluations for medical or decision-making capacity, as well as capacity to live independently.

### **PTSD**

This minor rotation (six-month rotation) offers the resident exposure to the assessment, diagnosis, and treatment of veterans in recovery from PTSD. There are opportunities to understand the dual-diagnosis aspects of PTSD, the role of cultural variables in conceptualization and treatment, and the accumulated effects of trauma across the lifespan behaviorally, interpersonally, and intrapsychically. The resident will gain experience in evidence-based psychotherapies for PTSD, such as cognitive processing therapy and prolonged exposure therapy, and in the role of a psychologist as a treatment provider, interdisciplinary team member, and consultant.

**SUPPLEMENTAL EXPERIENCES:** Depending on their interest, residents may have additional learning opportunities within the Psychosocial Rehabilitation and Recovery Center (an intensive outpatient treatment program), Suicide Prevention Program, Integrated Mental Health, End of Life Services, the Homeless Program, Community Living Center, and Bariatric Surgery.

**Seminars (4 hours):** Instruction in a wide range of clinical and professional issues takes place in the weekly Special Topics Seminar. Topics typically covered in the seminar include psychopathology, treatment-specific interventions, and areas of professional development. A Diversity Seminar series meets monthly. Finally, residents may be given authorized time to attend regional and national professional conferences and continuing education workshops.

**Evaluation of Residents:** Residents will undergo individualized planning and periodic reassessment of goals. At the beginning of each six-month rotation, residents will describe their individual learning goals in that placement. At the mid-point of each major rotation (i.e., at three months), residents evaluate themselves, as well as the placement, in order to identify those factors that help or hinder the attainment of their own training goals. Concurrently, supervisors will written evaluations of residents' performance, with consideration for the residents' stated goals, the standard of practice in the clinical setting, and the exit criteria of the pre-doctoral internship program. Formal, written evaluations will be conducted at the mid-and end-points of each major rotation, for a total of four written evaluations throughout the year.

### **PSYCHOLOGY FACULTY**

**Dr. Erin Shae Johns** is a licensed clinical psychologist, serving with the Domiciliary Residential Rehabilitation Treatment Program (DR RTP). Dr. Johns earned her Ph.D. in Clinical Psychology and M.S. in Clinical Psychopharmacology from Nova Southeastern University. She completed her pre-doctoral internship in clinical/military psychology at Brooke Army Medical Center in San Antonio, TX, where she was commissioned as an Active Duty officer in the Army. She utilizes motivational interviewing, cognitive behavioral, cognitive processing therapy, prolonged exposure and other evidence based treatment modalities to treat military and veteran patients with PTSD, depression, and suicidality.

**Dr. Jim Kittleson** serves as Chief of Psychology. In addition to duties as Chief of Psychology, Dr. Kittleson serves as licensed clinical psychologist for the Behavioral Health Outpatient Clinic. His clinical interests and duties include neuropsychological and psychological assessment, as well as therapy with individuals who struggle with symptoms of PTSD, depressive disorders, other anxiety disorders, and co-morbid substance use and mood disorders. Dr. Kittleson earned his Psy.D. in Clinical Psychology at Wheaton College, Wheaton, IL. He completed his pre-doctoral internship at the Department of Veterans Affairs Western NY Healthcare System, Buffalo, NY, and his post-doctoral fellowship in the Federal Bureau of Prisons at the Federal Medical Center, Rochester, Minnesota. He has been board certified in Clinical Psychology by the American Board of Professional Psychology since 2010. Dr. Kittleson has participated in VA approved grant research in the area of traumatic brain injury and he has co-authored articles related to traumatic brain injury.

**Dr. Carlie Phillips** is a licensed clinical psychologist in the Behavioral Health Outpatient Clinic, serving as the PTSD/SUD Specialist. Dr. Phillips earned her Psy.D. in Clinical Psychology from Spalding University in Louisville, Kentucky. She completed her pre-doctoral internship and post-doctoral training at the Lexington VA Medical Center in Lexington, Kentucky. Dr. Phillips specializes in the assessment and treatment of PTSD and comorbid disorders, integrating both cognitive-behavioral and interpersonal theories and interventions. She provides evidence-based treatments to veterans in

individual and group settings and is a certified provider in cognitive processing therapy and prolonged exposure therapy. Her clinical and research interests include trauma, anxiety disorders, exposure-based therapies, and post-deployment readjustment in OEF/OIF/OND veterans. Recent presentations have included topics such as assessment of trauma, treatment considerations and approaches with comorbid substance use and PTSD, and mental health protective factors in veterans returning from Iraq and Afghanistan.

**Dr. Elaine M. Rivas** is a licensed clinical psychologist at the Bath VA serving with the Behavioral Health Outpatient Clinic. Dr. Rivas earned her Ph.D. in Clinical Psychology from University of Tennessee, Knoxville, and completed her pre-doctoral internship at NYU Bellevue Hospital Center in New York, New York. She has been trained in psychodynamic psychotherapy, motivational enhancement therapy, acceptance and commitment therapy, and cognitive processing therapy. Her clinical interests include diagnostic assessment and working with individuals with personality disorders, severe and persistent mental illness, and posttraumatic stress disorder.

**Dr. Danielle L. Terry** is the Director of Training for the Bath VA Medical Center Pre-Doctoral Internship program, and serves as the licensed clinical psychologist for the Home Based Primary Care (HBPC) program. In this capacity, she provides time-limited behavioral therapy, using motivational interviewing, cognitive behavioral, and acceptance and commitment approaches. Dr. Terry earned her Ph.D. in Clinical Psychology from Syracuse University and completed a behavioral health pre-doctoral internship at Geisinger Medical Center in Danville, Pennsylvania. Her current clinical interests include health psychology, end-of-life issues, and bereavement. Dr. Terry's published research has encompassed the areas of alcohol and tobacco use, and media use and multitasking.

**Dr. Anastasia Zyuban** serves as a licensed clinical psychologist at the Center's Domiciliary Residential Rehabilitation Treatment Program (DRRTP). In this capacity, she provides individual and group psychotherapy, psychological and cognitive assessment, and consultation to professional staff concerning clinical assessment findings and appropriate intervention and treatment plans. Dr. Zyuban earned her Ph.D. in Clinical Psychology from Long Island University, Brooklyn, and completed her pre-doctoral internship at Creedmoor Psychiatric Center, Queens, New York. While her background is mostly relational and psychodynamic, she also provides a number of evidence-based treatment modalities in both the group and individual setting. These include cognitive-behavioral therapy for chronic pain, mindfulness-based relapse prevention therapy, cognitive-behavioral therapy for depression, cognitive processing therapy, and motivational interviewing.

## **APPLYING TO THE PROGRAM**

### **Application Materials**

Our internship program participates in the APPIC match and applications must be submitted through the online AAPI (which can be found at the APPIC website: [www.appic.org](http://www.appic.org)). Deadline for application is November 10th. No mail or email application materials will be accepted. It is required that applicants include: curriculum vitae and three letters of recommendation. All candidates are to be certified by their Directors of Training that they are academically ready to start internship. Applicants curriculum vitae and three letters of recommendation should also be submitted through the online AAPI. Applicants are encouraged to complete the application as early as possible so that ample time will be available for application review.

This internship site abides by the [APPIC policy](#) that no person at this training facility will solicit, accept or use any ranking-related information from any intern applicant. Additionally our program follows the APPIC policy on nondiscrimination, in regard to race/ethnic background, age, gender, sexual orientation or disabilities.

### **Selection Procedures and Interviews**

Our internship program utilizes a two-part selection procedure. First, application materials are reviewed for basic eligibility, strength of training and experience, and goodness of fit with our program. The selection committee will subsequently develop a pool of applicants to invite for a formal interview based on these criteria. Interviews are an integral part of our selection process, and an on-site or phone interview is required. Upon the completion of our interviews, applicants will be ranked in terms of their suitability for our program in accordance with APPIC guidelines. This final group is ranked, with the results of the ranking being submitted for the Match.

Start date for the internship is around August 22<sup>nd</sup>, 2016.

**Requests for further information should be directed to:**

Danielle L. Terry, Ph.D., Director of Training  
Bath VA Medical Center  
76 Veterans Ave, Bldg 32  
Bath, NY 14810  
E-mail: [Danielle.Terry@va.gov](mailto:Danielle.Terry@va.gov)

Jim Kittleson, Psy.D., ABPP, Chief of Psychology  
Bath VA Medical Center  
76 Veterans Ave  
Bath, NY 14810  
E-mail: [Jim.Kittleson@va.gov](mailto:Jim.Kittleson@va.gov)

## Bath and the Finger Lakes Region



The Bath VA is located in the city of Bath, New York, at the heart of the beautiful Finger Lakes region. With a population of over 12,000, Bath is surrounded by quaint small towns, rural agricultural areas, and small city communities.

The Finger Lakes is well known as wine country, and the scenic area provides opportunities for numerous outdoor activities, including kayaking, sailing, hiking, swimming, x-country and downhill skiing, snowshoeing.

Bath is also located near numerous scenic parks including the “Grand Canyon of the East” at Letchworth State Park (ranked the #1 State Park in the Nation in 2015), beautiful Watkins Glen State Park, and Ithaca’s gorges. The city of Watkins Glen, less than an hour from Bath, is also home to Watkins Glen International, the sports car racing facility and host of the United States Grand Prix. Bath is also only a half hour drive from the historic city of Corning, home to the Corning Glass Museum, and the Rockwell Museum of Art. Bath is only a short drive from larger cities such as Rochester, Buffalo, and Binghamton.

**Cost of living:** The average rent is \$536 per month, and the average cost of a home is \$86,156. On-station housing for residents may be available at a monthly rate, and is dependent on availability.

**Climate:** Bath experiences four distinct seasons, with an average snowfall of 47 inches per year.

**Transportation:** Although there is a local bus route, the majority of people get to and from Bath VA by car.

**Local Attractions:**

[Letchworth State Park: "Grand Canyon of the East"](#)

[Corning Museum of Glass](#)

[The Rockwell Museum](#)

[Finger Lakes Wine Country](#)

[Watkins Glen State Park](#)

[Ithaca Gorges](#)

[Greek Peak Mountain Resort](#)

[The New York State Fair](#)

[Finger Lakes Boating](#)

[Auto Racing and Nascar](#)