Psychology Internship Program

VA Sierra Nevada Health Care System
Mental Health Service (116)
975 Kirman Avenue
Reno, NV 89502
(775) 786-7200
http://www.reno.va.gov/

MATCH Number Program Code: 143911
Applications Due: November 13, 2017

Accreditation Status
The pre-doctoral internship at the VA Sierra Nevada Health Care System is fully accredited by the Commission on Accreditation of the American Psychological Association. Our most recent APA accreditation site visit was in December of 2016 and the program was fully re-accredited for 3 years. Our next site visit will be in 2019.

Application & Selection Procedures
Our APPIC INTERNSHIP MATCHING PROGRAM CODE# IS 143911.

Our program is utilizing the APPIC Application for Psychology Internship (AAPI) process. This means students only need to complete one application for all APPIC registered sites. The AAPI is available through the APPIC web site, www.appic.org. Please go to the APPIC web site for more information on accessing and completing the online application.

Please be aware that the “Academic Program’s Verification of Internship Eligibility and Readiness” form is to be submitted ELECTRONICALLY to the internship site by your graduate training director. Instructions regarding this part of the application process are contained in the online AAPI.

Completed applications are initially reviewed by the Training Director. Enrollment in an APA approved doctoral program in clinical or counseling psychology, completion of the dissertation or doctoral project proposal, and United States citizenship are all required of our applicants. After initial review by the Training Director, applications that are still under consideration are reviewed by two staff psychologists and then ranked according to a number of criteria, including the applicants’ number of practicum hours, assessment and intervention experience, variety of practicum placements, and letters of recommendation. Applicants’ responses to essay questions on the AAPI are used to gauge the “goodness of fit” between the student and our training site. We seek applicants who have a strong academic foundation from their university program and who have mastered basic skills in standard assessment and intervention techniques from their practicum experiences. The majority of our patients are adults who present with combined medical and psychiatric symptoms and we prefer applicants who demonstrate an interest in this population through their past exposure to similar training experiences and articulation of their future career goals. See the section below, Internship Admissions, Support, and Initial Placement Data, for more information.

As part of the application process we hold interviews by invitation only. While in-person interviews are not required, we recommend that you come for an interview if you are invited. If you cannot arrange to come in person, we will attempt to schedule a telephone interview.

We greatly value diverse experiences and backgrounds as the building blocks of a rich training environment. As such, the program emphasizes respect for trainees, patients, and staff members representing all forms of diversity, including (but not limited to) ethnicity, religion, gender, sexual orientation, disability, marital status, Veteran status, and political affiliation. Interns are entitled to equal

Updated September 11, 2017
treatment in selection decisions and freedom from harassment or unfair treatment. If an intern feels that any form of discrimination is occurring, he/she is encouraged to discuss this with the Training Director and/or follow the grievance processes which are outlined in our program handbook and/or VA Equal Employment Opportunity policies. The program seeks to obtain a diverse intern class while selecting the most qualified candidates. Individuals from diverse backgrounds are particularly encouraged to apply. The VA is an Equal Opportunity Employer and the training program follows institutional guidelines in this regard. Information regarding VA’s commitment to diversity awareness and education can be found at the website for the Office of Diversity and Inclusion (https://www.diversity.va.gov/).

Our agency provides reasonable accommodation to applicants with disabilities where appropriate. If you need reasonable accommodation for any part of the application and hiring process, please notify Dr. John Wyma, the internship Training Director, by telephone or email. Determinations on requests for reasonable accommodation will be made on a case-by-case basis.

Applicants who are invited for an interview will be notified by December 8, 2017 via e-mail. We will also contact applicants via e-mail who are not being invited for interviews by December 8, 2017. If you do not have an e-mail address, you will need to phone Dr. Wyma to inquire into your status. Dr. Wyma’s phone is 775-786-7200, x6581.

If you are invited for an interview, we will ask that you make a firm commitment to one of the dates listed below or make arrangements for a pre-scheduled telephone interview. Failure to either attend a scheduled interview date or take part in a scheduled telephone interview will result in your application being withdrawn from further consideration. If you are invited for an interview, plan on being at the medical center from 8:00 AM until approximately 4:00 PM on the day of your visit. You will be joining other applicants in a group format during the morning hours in meetings with the Training Director and current Psychology Interns and taking a tour of the medical center. During the afternoon, you will be meeting with staff psychologists for individual interviews. Responses to interview questions are evaluated according to several factors, including your responses to questions about difficult situations you’ve handled in the past, questions about difficult diagnostic dilemmas and treatment challenges you’ve faced in the past, and how well our site meets your training needs and interests. We will also ask you to read a case description so that you can respond to structured questions about differential diagnosis, tests you might consider using to assist with diagnosis, and possible treatment strategies.

INTERVIEW DATES FOR 2018-2019 TRAINING YEAR:

- Wednesday, January 10, 2018
- Wednesday, January 17, 2018

Our program is participating in the APPIC Computer Match Program so you will need to obtain an Applicant Agreement Package from National Matching Services, Inc in order to register for the Match. You can download the Applicant Agreement form at www.natmatch.com/psychint. If you do not register, you will not be eligible to match with any APPIC programs. We recommend that you carefully review the official APPIC Match Policies and the Internship Matching Program Schedule of Dates, which are also available at www.appic.org.

ELIGIBILITY REQUIREMENTS FOR ALL VA PSYCHOLOGY INTERNSHIP PROGRAMS:

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

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

*Updated September 11, 2017*
3. Interns and Fellows selected for training positions, like all VA employees, are subject to fingerprinting and background checks. Match result and selection decisions are contingent on passing these screens. Details about background checks can be found at: [http://www.archives.gov/federal-register/codification/executive-order/10450.html](http://www.archives.gov/federal-register/codification/executive-order/10450.html).

4. VA conducts drug screening exams on randomly selected personnel as well as new employees. Interns and Fellows are not required to be tested prior to beginning work, but once on staff they are subject to random selection for testing as are other employees.

5. To comply with federal and VA rules and provide interns with liability protection, a current and valid Affiliation Agreement between VA and the sponsoring doctoral program must be on file before the intern can be appointed. Most APA-approved doctoral programs already have an agreement on file. More information is available at [http://www.va.gov/oaa/agreements.asp](http://www.va.gov/oaa/agreements.asp) (see section on psychology internships).

If you have questions regarding APPIC procedures, their telephone number is (202) 347-0022. The telephone number for the American Psychological Association is (202) 336-5979. The number for National Matching Services is (416) 977-3431.

**For your application to be complete we must receive the following materials by November 13, 2017:**

- Online APPIC Application for Psychology Internship (AAPI).
- Your Curriculum Vitae – to be submitted as part of online AAPI.
- Three letters of recommendation – to be submitted as part of online AAPI.
- Graduate school transcripts – to be submitted as part of online AAPI.
- Your Academic Program Verification of Internship Eligibility and Readiness form – to be submitted by your academic program’s Director of Training as part of the online AAPI.

Any written inquiries can be submitted to:

**John G. Wyma, PhD, ABPP**  
Mental Health Service (116)  
VA Sierra Nevada Health Care System  
975 Kirman Avenue  
Reno, NV 89502  
(775) 786-7200, x6581

Otherwise, all materials will be submitted electronically, as part of the online AAPI. **Please read all relevant instructions carefully to assure that transcripts, letters of recommendation and the Academic Program Verification of Internship Eligibility and Readiness forms are submitted in a timely manner. Applications that are not completed by 4:00 pm PST on November 13, 2017 will not be considered, even if portions of the application have been submitted prior to that date and time.**

As a member of the Association of Psychology Postdoctoral and Predoctoral Internship Centers (APPIC), our program follows all APPIC policies regarding the intern selection process. This internship site strictly abides by the APPIC policy that no person at this training facility will solicit, accept, or use any ranking related information from any applicant. You are encouraged to read or download the complete text of their regulations governing program membership and the match process from APPIC’s Website. The Federal Government is an Equal Opportunity employer.

**Psychology Setting**

Psychologists are part of the Mental Health Service at our medical center. We maintain close interdisciplinary relationships with psychiatrists, psychiatric nursing, social work, and substance abuse specialists in our department. We currently have 23 psychologists on site in Reno, as well as one psychologist located offsite at our community based outpatient clinic (CBOC) in Auburn, CA. These
psychologists represent a variety of academic backgrounds, clinical interests, and areas of expertise. Several of our psychologists are former interns.

Our psychologists serve a wide variety of administrative and clinical roles within our department, and throughout the medical center. Psychologists provide services through the Mental Health Clinic, Behavioral Medicine and Neuropsychology programs, the Addictive Disorders Treatment Program (ADTP), the PTSD Clinical Team (PCT), Integrated Behavioral Health Care (IBHC), Compensation and Pension, and our Home Based Primary Care (HBPC) program. We also serve important leadership roles in the medical center, such as membership on committees and task forces outside of Mental Health including the Palliative Care team, Chronic Pain Management Panel, Ethics Committee, and Wellness programs. Psychologists are also employed at the regional level (Veterans Service Network 21) in program development and evaluation positions. Several psychologists hold academic appointments at the University of Nevada School of Medicine and/or the Psychology Department at University of NV.

Our facility also serves as a training site for Residents in Psychiatry, Pharmacy, Dentistry, Optometry, Internal Medicine, and Surgery, as well as Nursing students and Social Work Interns. We offer practicum opportunities students from APA-accredited PhD and PsyD programs.

During the training year, Psychology Interns provide consultation and treatment to several other health care service departments throughout the medical center, including the inpatient Medical, Surgical, ICU, Psychiatry, and Community Living Center Units, the Primary Care clinics, and the Emergency Department.

**Training Model and Program Philosophy**

The mental health staff members at the VA Sierra Nevada Health Care System are committed to the training of professional psychologists consistent with a practitioner-scholar training model. Within a supportive and collegial atmosphere, we seek to facilitate development of a reflective approach to practice that integrates empirical knowledge and delivery of clinical services. Interns are viewed as making the transition from the student role to the professional colleague role over the course of the training year, honing the clinical skills ultimately required for independent practice. Opportunities are offered for continued training in areas of practice with which interns may already be familiar, as well as introduction to unfamiliar treatment orientations and clinical challenges.

At the start of the training year, interns undergo two weeks of orientation to our service and to the medical center. They visit rotation sites and meet with potential supervisors to compose a training experience that best fits their interests and needs. The Training Director acts as an advocate for interns and other psychology trainees at the facility. The Director meets regularly with interns to respond to their concerns.

Interns receive informal feedback from supervisors throughout the year in addition to formal mid-rotation and end-of-rotation evaluations and mid-year and end-of-year comprehensive competency evaluations by supervisors and the Training Committee. Evaluations emphasize the intern's strengths and identify areas in need of improvement. In turn, interns evaluate their supervisors and the supervision experience. Evaluations are mutually shared and discussed between intern and supervisor in an atmosphere that fosters personal and professional development. Written summaries of these evaluations are furnished to the intern. The mid- and end-of-year comprehensive competency evaluations are sent to the interns' graduate institution at mid-year and at the end of the training year. It is expected that interns will differ in the extent to which they require training in the expected competencies. It is further expected that there may be instances where an intern's behaviors, attitudes, or other characteristics impact the learning process, relationships with others, and/or patient care. These issues are typically addressed in supervision, but if skill deficits are noted in any of these areas, a formal remediation plan may be established to address the deficits. If skill deficits cannot be remediated, provisional completion of the internship and/or termination from the internship will be considered.

*Updated September 11, 2017*
Program Aims & Required Competencies

In alignment with the APA Council on Accreditation’s Standards of Accreditation (http://www.apa.org/ed/accreditation/about/policies/standards-of-accreditation.pdf), our program has articulated the following Vision Statement, Aims, and related Competencies:

Vision Statement: “To prepare our psychology interns for long-term success in health service psychology.”

Aims:

1. To develop in our interns strong core generalist skills in health service psychology through competency-based supervised training.

2. To prepare interns to function competently within an integrated health care system, particularly the Veterans Health Administration.

3. To support our interns in preparing for the next step in their professional careers.

Profession-Wide Competencies:

Research

Ethical and Legal Standards

Individual and Cultural Diversity

Professional Values, Attitudes, and Behaviors

Communication and Interpersonal Skills

Assessment

Intervention

Supervision

Consultation and Interprofessional/Interdisciplinary Skills

Program-Specific Competency:

Working With Military Veterans.

Program Structure

Our internship offers full-time, generalist training in the practice of professional psychology within a multidisciplinary Veterans Affairs medical center. We accept 4 interns per year. Our program is fully accredited by the American Psychological Association, and complies with all standards and regulations of the Association of Psychology Postdoctoral and Internship Centers (APPIC), as well as APPIC Match Policies and Procedures. The 2018-19 training year begins on August 6, 2018 and ends on August 2, 2019. The deadline for receipt of applications is November 13, 2017. The anticipated federal stipend is $24,014. Applicants must be students in an APA-accredited or provisionally-accredited program in clinical or counseling psychology and must be United States citizens in order to be employed at a
VA healthcare facility. We accept students from both PsyD and PhD programs. All new employees are subject to background checks.

The internship training year includes four 3-month long rotations in the practice of clinical psychology. Required and optional rotations are described below. Weekly group supervision is provided as well. We utilize an apprenticeship model of training, where the intern begins each rotation by observing their supervisor and then gradually transitions into more independent functioning. Our program emphasizes training in the practice of clinical psychology, so research activities are not a required component of the program. Administrative and program evaluation experiences may be possible in various rotations or as a long-term experienced, which is described in the following section. Since our program is small, all interns have the opportunity to take part in optional rotations of their choosing. The program also includes weekly didactic seminars, covering topics such as psychological assessment, individual and cultural diversity, law and ethics, and empirically supported treatments, as well as a monthly “brown bag” training on theory and practice of clinical supervision. A monthly Journal Club provides interns with an opportunity to present and interact with each other about current professional research relevant to the work of a psychologist and to consider how the research might be applied to practice, individually and systemically.

We encourage interns to adhere to a 40 hour work week, although fluctuations in workload may sometimes require limited overtime work or use of free time to pursue training related readings. Approximately 32 hours of the 40 hour work week are devoted to patient contact and related administrative duties, with the remaining 8 hours reserved for seminars, supervision meetings, and other miscellaneous duties. Interns receive at least 2 hours of individual supervision and 2 hours of group supervision per week. Direct in-room supervision of clinical work is provided, and some supervisors utilize audiotapes to enhance the provision of individual supervision. There are opportunities to co-lead psychotherapy treatment groups with supervisors and to observe the administration of psychological tests prior to transitioning into independent test administration. Interns may have the opportunity to provide mentoring and supervision to psychology and/or social work trainees, though this cannot be guaranteed.

Training Experiences & Rotations

We anticipate 2 required rotations:

• **MENTAL HEALTH CLINIC (Full-time):** During this rotation, interns conduct intakes, assessments, and psychotherapy with patients who are referred to the Mental Health Clinic with a variety of presenting complaints. The intern is responsible for conducting both outpatient individual and group psychotherapy, as well as completing psychological assessments such as personality, ADHD, or Learning Disorder testing. The MHC rotation provides the opportunity to learn evidence-based treatments through individual and/or group modalities. Examples of current groups include Cognitive Behavioral Therapy for Depression, Anxiety, or Insomnia, Acceptance and Commitment Therapy for Mood Concerns, Anger Management, Mindfulness, and much more. The MHC is comprised of a multidisciplinary team including psychologists, social workers, and psychiatrists, and interns are provided opportunities to interact and consult with other disciplines. Interns are also required to attend interdisciplinary program team meetings and other team meetings that are relevant to patient care activities.

• **BEHAVIORAL MEDICINE CONSULTATION & LIAISON (Half-time):** During this rotation, the intern will have the opportunity to work with the Behavioral Medicine/Consultation & Liaison Service. The psychologists on this team respond to consultation requests from the inpatient Medicine, Surgery, ICU, and Community Living Center units. The intern will conduct brief neuropsychological screening evaluations, utilize interview and questionnaire data to evaluate psychiatric symptoms, and generate reports describing their findings to assist physicians, nurses, and other treatment team members in planning for patient discharge and ongoing outpatient care. Interns will also participate in daily rounds where team members discuss current patient status and there will be ample opportunity to interface with attending physicians and resident physicians, as well as other team members, from the medicine, surgery, geriatrics, and palliative/hospice teams. The intern will also spend one day each week working...
with a social worker in the ER, evaluating Veterans who present with a variety of psychiatric concerns, including those with suicidal/homicidal ideation and other psychiatric crises. Interns are encouraged to take part in outpatient treatment modalities that relate to the practice of Behavioral Medicine, e.g., pain management group, cancer support group, CBT for insomnia, smoking cessation classes, etc. While a half-time rotation in B-Med is required, interns may elect to extend this to a single full-time rotation or two half-time rotations if desired.

Optional rotations: Interns have the opportunity to complete up to five half-time optional rotations or to combine these into full-time and half-time optional rotations, depending on availability of supervisory coverage.

- **Integrated Behavioral Health Care (IBHC) (Half-time):** The Integrated Behavioral Healthcare (IBHC) Program is a blended model. It combines a co-located, collaborative care model with care management to address the needs of a diverse patient population presenting in the primary care setting. During this rotation, the IBHC intern collaborates with primary care providers; RNs, pharmacists, and psychiatrists on a regular basis. Additionally, other treatment providers (including social work, dietitians, and specialty medical and mental health providers) are consulted on an as-needed basis. It is a busy, relatively fast-paced program. Interns who succeed in this rotation learn to quickly assess patient needs via a focused assessment; present the case very concisely to a supervisor or to a physician to inform or to implement immediate plans for change; be available for “curbside” consultations and warm handoffs from medical providers; develop an overall treatment plan for behavioral health intervention, which may include a multidisciplinary approach; and provide brief, evidence-based treatment for a wide variety of both medical and behavioral health issues. Additionally, brief cognitive evaluations are frequently requested and administered by IBHC interns and psychology staff. The intern is included in both IBHC community living center and primary care staff meetings, as well as other team meetings which may align with training goals or interests.

- **PTSD Clinical Team (PCT) (Full-time):** During this rotation, the intern will conduct intake evaluations and psychotherapy with patients who are referred to the PTSD Clinical Team (PCT) for evaluation of PTSD and trauma/stressor-related disorders. Psychotherapy groups which may be open to intern participation and co-facilitation include Seeking Safety, Cognitive Processing Therapy (both co-ed and women’s groups), Skills Training in Affective and Interpersonal Regulation (STAIR), CBT-Insomnia, and Imagery Rehearsal Therapy (IRT). Interns also conduct individual psychotherapy, which often focuses on teaching coping skills for PTSD. Interns who demonstrate strong foundational psychotherapy skills may be approved to provide individual trauma focused psychotherapy (Cognitive Processing Therapy or Prolonged Exposure). The intern will attend our weekly interdisciplinary team meetings. Training focuses on developing strong differential diagnostic and treatment planning skills.

- **Alcohol and Drug Treatment Program (ADTP) (Full-time or Half-time):** The ADTP rotation consists of evaluations and interventions for veterans referred for substance use disorders and/or gambling disorder in an outpatient setting. Evaluation experiences will include screening appointments, intakes, and psychological assessment batteries, with particular emphasis on differential diagnostic skills and formulating appropriate treatment recommendations. Intervention experiences will primarily be in the group format, with treatment modalities ranging from CBT, Mindfulness-based, and 12-Step approaches. Individual intervention opportunities may also be available, with particular emphasis on developing Motivational Interviewing skills. Other opportunities may include inpatient consults, inpatient groups, individual and/or group interventions for gambling disorder, and exposure to Suboxone (buprenorphine) treatment for opioid use disorder with medical staff. Interns will attend weekly case conference and staff meetings with the multidisciplinary ADTP team.

- **Geropsychology and Home Based Primary Care (Full-time or Half-time):** Geropsychology offers the opportunity to deliver geriatric services in the Community Living Center, and through Home Based Primary Care (HPBC). The CLC is a skilled nursing facility where interns work with veterans, many of whom are older adults undergoing short-stay or long-stay rehabilitation. The CLC also has

*Updated September 11, 2017*
dedicated beds for veterans admitted for palliative care for chronic illnesses, and hospice care at the end of life. In contrast, HBPC gives interns exposure to home bound older adults living in the community who are adapting to the challenges of disability, and aging in place. In these settings, the intern typically works on interprofessional teams and provides conceptualizations from a biopsychosocial perspective while collaborating with providers from a number of disciplines. In addition, the intern may educate other providers on these teams about psychological and/or aging issues through consultation. The intern performs assessment (e.g., psychological, cognitive, neuropsychological, decision-making and capacity, risk, etc.) and intervention skills commonly used for older adult issues (e.g., grief, end-of-life, caregiving, chronic health problems, role/life transitions, etc.).

- **Neuropsychology (Full-time or Half-time):** During this rotation, the intern will conduct neuropsychological evaluations on veterans referred for testing for a variety of concerns including effects of traumatic brain injury and possible dementia. The intern will gain exposure to a variety of test batteries depending on the referral question and will also be responsible for writing a comprehensive neuropsychological report for each veteran they evaluate.

- **Compensation and Pension Evaluations for service-connected disability (C&P) (Half-time):** The intern on the Compensation and Pension (C&P) rotation will be conducting forensic (i.e., medical-legal) evaluations with active duty service members and veterans who are engaged in the process of applying for disability benefits through the Veterans Benefits Administration (VBA). The evaluations involve determining the presence of a psychological condition, evaluating the claimed condition’s relationship to active duty military service, and assessing for the level of social and occupational impairment. The examination typically consists of a thorough clinical interview and a comprehensive review of VA treatment records, as well as the service member’s or veteran’s claims file. The intern will also have an opportunity to incorporate psychometric testing including personality, feigning/effort, and cognitive assessment measures. The intern on this rotation will be expected to produce timely, clear, and concise reports that incorporate these multiple sources of data. Interns interested in pursuing a career with the VA may find this an especially valuable rotation.

- **Psychosocial Rehabilitation and Recovery Program (PRRC) (Half-time):** During this rotation, the intern will work with veterans in the PRRC, an intensive outpatient program for veterans diagnosed with serious mental illness (SMI) such as schizophrenia and bipolar disorder. The intern will conduct intakes, treatment plans, individual and group therapy, cognitive and personality screenings, and community case management. Interns will work on a multidisciplinary team including psychologists, social workers, psychiatrists, peer supports, and nurse practitioners. Interns will gain exposure to evidence based treatments for SMI and will be given the opportunity to create groups in which they are interested for this population.

**LONG-TERM EXPERIENCE:** Psychology interns are encouraged to participate in one year long, or one or two six-month long, supervision experiences to explore specific areas of clinical interest and in which to receive more in-depth training. Interns will be provided with a list of available supervisors and their specialty areas (e.g., PTSD, addictions, DBT, neuropsychology, geropsychology, ACT, eating disorders, Motivational Interviewing, pain management, smoking cessation, MOVE, compensation and pension exams, SMI, personality assessment, etc.). Interns will be allowed to choose a supervisor based on availability, interest, gaps in training, or enhancement of current skills.

**Requirements for Completion**

Our required competencies were listed in an earlier section of this document. Specific skills for each competency area are rated across 6 levels:

1 = Does not demonstrate basic skill on this element
2 = Demonstrates minimal skill on this element
3 = Demonstrates basic skill but requires further supervisory instruction
4 = Demonstrates intermediate skill

*Updated September 11, 2017*
5 = Demonstrates an intermediate-to-advanced level of skill on this element
6 = Demonstrates an advanced level of skill on this element

**Minimum Levels of Achievement (MLAs):** For rotation evaluations, it is expected that most interns will progress from 3 - 5 on each required element over the course of the training year. At conclusion of the **first rotation**, an intern is expected to achieve ratings of “3” or higher on at least 75% of the elements in each competency area, with no ratings below “2”. At conclusion of the **second rotation**, ratings of “4” or higher on at least 75% of elements are expected, with no ratings below “3”. By the conclusion of the **third rotation**, an intern is expected to achieve a rating of “4” or higher on 100% of the elements in each competency area. By the end of the **fourth** rotation, an intern is expected to achieve a rating of “5” on 75% of all elements in each competency area, with no ratings below “4”.

For the Mid- and End-of-Year Comprehensive Competency Evaluations: In the mid-year comprehensive evaluation, an intern is expected to achieve ratings of “3” or above on all competency elements. Ratings of “4” and above are expected at the final, end-of-year comprehensive evaluation. Performance below the expected levels will trigger a review of the intern’s progress by the rotation supervisor(s) and the Training Committee to determine if remediation or other actions are necessary.

Should a trainee not achieve competency goals as described above, a collaborative written remediation plan may be established by rotation supervisor(s), the Training Committee, and the Training Director. Any rating of “1” will require development of a remediation plan, while ratings of “2” will result in appropriate discussions between rotation supervisors, the Training Committee, and the Training Director to determine whether a remediation plan is necessary to help the intern progress in the program. Ratings less than “4” at the end of the training year in any competency area may result in either requirements for continued internship training and/or documentation of a “provisional” recommendation by the Training Director when the intern later seeks licensure and/or employment.

Our Internship Handbook includes guidelines for Interns to seek redress when they believe they are not being evaluated fairly or if they believe they have been the target of discrimination or other unfair treatment by supervisors or other staff.

**Facility and Training Resources**

Each intern is provided with office space equipped with a personal computer. All personal computers are connected to the VA Computerized Patient Records System (CPRS), the VA VistA system, e-mail, internet, and VA intranet. Telephones with private voicemail are also provided. Interns will be issued voice recorders at the beginning of the training year, to use for the purpose of recording psychotherapy sessions. Textbooks on the topics of cultural and individual diversity, law and ethics, and psychopharmacology are also available to interns. The Mental Health Service employs several full-time Medical Service Assistants (MSAs) who provide clerical and administrative support, but professional staff (including interns) are expected to enter their own written notes into CPRS (e.g., typing services are not provided by our clerical staff). Personal computers include programs such as Word, Excel, Access, and Power Point. The Mental Health Service maintains a “shared drive” where important forms and other information are archived and updated as needed.

**Administrative Policies and Procedures**

In addition to earned Annual Leave and Sick Leave, each Intern may be granted up to 5 days of Authorized Absence to attend professional conferences, and/or attend VA post-doctoral or VA employment interviews. Authorized Absence is granted at the discretion of the Psychology Training Director. One day of Authorized Absence may be granted for dissertation defense activities.

Our privacy policy is clear: We will not collect personal information about you when you visit our website. We do not require self-disclosure of sensitive personal information during our interviews.
Training Staff

Our Psychology Staff members are described below, in alphabetical order:

**Jordan Bonow, Ph.D.,** University of Nevada, Reno, 2013. Facility Health Behavior Coordinator. Professional interests include primary care integration, behavioral health, behavior therapies including third wave therapies, and suicide risk assessment and prevention. Personal interests include home improvement projects, exercising, watching movies, and anything involving my kids.

**Adam Bradford, Psy.D.,** Midwestern University, Glendale, AZ, 2013. Staff Psychologist in the PTSD Clinical Team. Professional interests include PTSD coordination of care, Grief and Loss, TBI/PTSD assessment/diagnostic clarification, fitness/alternative therapies for PTSD symptom reduction, Virtual Reality Exposure therapy. Personal interests include skiing, boating, kayaking, hiking, camping, weight lifting, gigging (piano/vocal performance/jazz), DJ-ing, writing, travel.

**Kelly Cramond, Ph.D.,** Brigham Young University, 2010. Staff Psychologist in the Behavioral Medicine Program, Certified Brain Injury Specialist (CBIS). Responsibilities include outpatient neuropsychological evaluations and weekly Brain Boosters groups. Professional interests include neuropsychology, brain injury assessment and management, cognitive rehabilitation, and assessment and management of dementia. Personal interests include snowboarding and backpacking.

**James A. D’Andrea, Ph.D., ABPP,** Saint Louis University, 1994. Staff Psychologist in the Community Living Center. Professional interests include CBT for dementia caregivers, managing challenging behaviors in long-term care settings, ethnogeriatrics, capacity evaluations in cognitively impaired older adults, surrogate decision making under conditions of uncertainty, and aging with a disability. Personal interests include cross country glider flying in the Sierras, skiing, and I’m a Francophile.

**Eric Diddy, Ph.D.,** Alliant International University-CSPP at Fresno, 2013. Staff Psychologist in the Addictive Disorders Treatment Program. Trained and certified in Cognitive Processing Therapy for PTSD. Professional interests include PTSD, substance use disorders, behavioral health, and the integration of spirituality into the therapeutic process. Personal interests include skiing, mountain biking, kayaking, and fitness, and I’m a certified foody.

**Marie R. Ehrler, Ph.D.,** Palo Alto University, 2012. Staff Psychologist in the Mental Health Clinic since 2016; prior VA experience in PCT. EBP certifications include Cognitive Processing Therapy and Interpersonal Psychotherapy for Depression. Professional interests include personality assessment, neuropsychological assessment, drug abuse research, and psychosis. Personal interests include travel, sailing, reading, cooking, skiing and Nintendo.

**Kris Harris, Ph.D.,** Southern Illinois University, Carbondale, 2013. Supervisor, Mental Health Clinic. Completed EBP training for Integrated Behavioral Couples Therapy. Professional interests include anxiety, anger, eating disorders/body image, personality disorders, identity concerns, relationship distress, family of origin concerns, and addictive disorders/co-dependence. Personal interests include playing music, reading, hiking, fitness, my dog, video games, and photography.

**Mary T. Harrison, Ph.D.,** Fielding Graduate University, 2015. Geropsychologist in the Home Based Primary Care program. Professional interests include advocacy for aging adults; environmental enrichment of cognitive abilities; aging in place; end-of-life care; and justice-involved veterans. Personal interests include motherhood, animal rescue, and hiking in the Sierra.

**Deborah Henderson, Ph.D.,** University of Nevada at Reno, 2006. Staff Psychologist in the Integrated Behavioral Health Care program, co-located within Primary Care. Professional interests include behavioral health/primary care integration, behavior therapies, ACT, anxiety disorders, weight management, managing chronic illness. Personal interests include spending time with my dogs, my friends, my family, my garden, my books, my countless DIY home improvement projects, and a nice glass of wine.

*Updated September 11, 2017*

John H. Krogh, Ph.D., Idaho State University, 2007. Staff Psychologist on the PTSD Clinical Team. Trained and certified in Prolonged Exposure Therapy, Cognitive Processing Therapy, and Cognitive-Behavior Therapy for Insomnia. Professional interests include cognitive-behavioral treatments, PTSD, anxiety disorders, motivational interviewing, stress management, and crisis intervention. Involved in local, state, and federal law enforcement training. Personal interests include family time, the mountains, snowboarding, biking, hiking, abseiling, Burmese Pythons, and garden/yard care.


Michael Moradshahi, Ph.D., Rosemead School of Psychology, La Mirada, CA, 2015. Staff Psychologist in the Mental Health Clinic. Professional interests include psychodynamic psychotherapy, projective assessment, couples therapy, moral injury, and religion/spirituality. Personal interests include coffee, travel, outdoorsy stuff, and finding awesome things to watch on YouTube.

Yelena Oren, Ph.D., University of Nevada, Reno, 2015. Staff Psychologist in the Mental Health Clinic. Professional interests include behavior therapies including third wave therapies, anxiety disorders, chronic illness, chronic pain, stress management, sleep, trauma, integrated behavioral health, cultural influences on treatment, and psychotherapy process. Personal interests include spending time with my family, traveling, reading, hiking, and cooking.

Ernesto Reza, Psy.D., Arizona School of Professional Psychology in Phoenix, Arizona, 2015. Compensation and Pension Psychologist in the Behavioral Medicine Program. Professional interests include: Forensic Evaluations, Family Systems, Integrative Behavioral Couples Therapy (IBCT), and working with disenfranchised populations. Personal Interests include: Spending time with family, working out, hiking, and watching a variety of sporting events (e.g., baseball, basketball, and football).

Lacey Sommers-Tarca, Ph.D., Pacific Graduate School of Psychology, Palo Alto, CA, 2015. Compensation and Pension Psychologist in the Behavioral Medicine Program. Professional interests include Dialectical Behavior Therapy, PTSD and trauma-specific treatment modalities, neuropsychological and personality assessment, forensic evaluations, and residential treatment. Personal interests include running, baseball (playing, watching, fantasy), traveling, reading, and spending time with my dogs.

Michele Steever, Ph.D., University of Nevada, Reno, 2009. Staff Psychologist in the Psychosocial Rehabilitation and Recovery Program (PRRC). Professional interests include serious mental illness, addictions, DBT, FAP, and psychotherapy process. Personal interests include knitting, traveling, being a fun mom, and incorporating movie quotes into everyday conversation.

Valerie L. Williams, Ph.D., University of Alabama at Birmingham, 1992. Staff Psychologist in the Behavioral Medicine Program. Professional interests include chronic illness, neuropsychology, medical and health psychology, assessment and management of dementia. Personal interests include horseback riding and protecting open lands from development.
Cynthia J. Willmon, Ph.D., Texas Tech University, 2011. Staff Psychologist in the Mental Health Clinic. Professional interests include: Acceptance & Commitment Therapy (ACT), depression, diagnostic assessment, motivational interviewing, addictive behaviors, harm reduction, and anger management. Personal interests include spending time with family and friends, spending time with my dogs, being oblivious to most things involving social media, watching home improvement shows, reading, hiking, snowboarding, and music.

Christine Winter, Ph.D., University of Oregon, 1990. Staff Psychologist in the Mental Health Clinic since 2015; prior to that worked at a rural community mental health center for 24 years. Professional interests include autism spectrum disorder, prescriptive authority for psychologists, and advocacy for clients and our profession AKA politics (am a former school board member and past president of Wyoming Psychological Association). Personal interests include gourmet cooking, snowboarding, soccer refereeing and visiting wine country.

John G. Wyma, Ph.D., ABPP, California School of Professional Psychology, San Diego, 1987. Director of Psychology Training, staff psychologist in Telemental Health. Professional interests include: psychology training; treatment of depression, anxiety, chronic pain, and PTSD; program development; and integration of psychology and spirituality. Personal interests include: family time, road trips, hiking and camping in and around the Sierras, music of all kinds, gardening, wildlife viewing, and discovering excellent Mexican food restaurants.

Don Yorgason, Ph.D., University of Memphis, 2011. Substance Use Disorder Specialist on the PTSD Clinical Team. Professional interests include addictive behaviors, cultural influences on treatment, PTSD, motivational interviewing and psychotherapy process. Personal interests include reading, playing music, home improvement projects, long-distance running, and family time.

Sheila Young, Ph.D., Utah State University, 1990. Supervisor, Behavioral Medicine Program and Chair of the Healthcare Ethics and Research and Development Committees. Professional interests include consultation and liaison with medicine, surgery, and geriatrics, health psychology, neuropsychology, end of life care; professional ethics for psychologists, professional licensure and practice issues.

Current and Past Trainees

Our current intern cohort consists of trainees from Pacific Graduate School of Psychology – Palo Alto University, PGSP-Stanford PsyD Consortium, Rosemead School of Psychology, and Alliant International University – CSPP San Francisco. The 2016-2017 class included interns from Alliant University/CSPP (San Diego, Los Angeles and San Francisco campuses) and the Wright Institute. The 2015-2016 class included trainees from Pacific Graduate School of Psychology, Alliant University/CSPP, and Northern Illinois University. The 2014-2015 class included interns from: University of Nevada, Reno; Fielding University; Alliant University; and PGSP-Stanford Psy.D. Consortium. Previous internship classes have included clinical and counseling students from a variety of programs. Some of the other programs that have been represented over the past 8 to 10 years include Jackson State University (Jackson, MS), University of Denver (Denver, CO), University of Nevada at Las Vegas, and Brigham Young University.

Since our program was first accredited by APA (in 1983), we have matched with several students from University of Nevada, Reno.

After graduation, our interns have moved on to a variety of professional positions. We are proud that 6 of our current staff psychologists are former interns. The majority of our interns secure either post-doctoral training positions or employment in professional psychology upon completion of our program. For the 2016-2017 class, all four secured post-doctoral training positions, two at VA medical centers and two in prestigious private medical centers. The types of positions that interns have entered since 2000 have included private practice, VA medical centers, medical school faculty, university counseling centers, and various post-doctoral training programs. Typically, our former interns have become licensed psychologists within a few years of graduation, many in the states of Nevada and California. A 2016 survey of our

Updated September 11, 2017
graduates indicated that, among respondents who had completed our program between 2009 and 2014, 87.5% (21 of 24 respondents) had achieved licensure.

**Internship Admissions, Support, and Initial Placement Data**

Date Program Tables updated: 9/1/2017

**Internship Program Admissions**

The VA Sierra Nevada Health Care System offers a doctoral internship program to U.S. citizens who are enrolled in a doctoral degree program in Clinical or Counseling Psychology at an APA-accredited institution. The VASNHCS internship program requires that applicants have completed **at least 1200 total practicum hours** (assessment + intervention + supervision) prior to the start of internship (see details below). Per VHA policy, all selections are conditional pending a criminal background check and passing a physical examination. As an equal opportunity training program, the internship program welcomes and considers without discrimination applications from all qualified candidates, regardless of racial, ethnic, religious, sexual orientation, disability or other minority status. Our trainees and staff reflect a wide range of socioeconomic, cultural and religious affiliations, including people with disabilities. We strongly encourage people from diverse backgrounds to apply. We gladly provide reasonable accommodations as needed to people with disabilities during both the application and training process; please feel free to request such accommodation as necessary.

Factors considered by the committee in selecting interns include:

- the breadth and depth of clinical experience obtained through practicum training;
- scholarly preparation evidenced by academic transcripts, research experience, and publications and presentations;
- evidence of personal maturity and readiness for internship training;
- the degree to which the applicant’s stated training objectives match the training opportunities available in our setting;
- preference to applicants who have completed or are well advanced towards the completion of their doctoral dissertation.

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

<table>
<thead>
<tr>
<th>Total Direct Contact Intervention Hours</th>
<th>Y/N</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Y</td>
<td>400</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Total Direct Contact Assessment Hours</th>
<th>Y/N</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Y</td>
<td>200</td>
<td></td>
</tr>
</tbody>
</table>

Describe any other required minimum criteria used to screen applicants:

Prior to the start of internship, applicants are expected to have completed **at least 1200 total practicum hours** (assessment + intervention + supervision). These hours should be listed as completed and/or anticipated hours verified by the Director of Clinical Training on the AAPI. The 1200-hour requirement includes *desired minimums* of 200 assessment hours and 400 intervention hours, with consideration given to an applicant’s overall training background and fit with the program. Any anticipated hours at the time of the AAPI submission should be explained fully in the applicant’s cover letter.

In addition:

- Applicants must be U.S. Citizens, and verification of citizenship is required prior to beginning internship.

- Male applicants 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.

*Updated September 11, 2017*
**Financial and Other Benefit Support for Upcoming Training Year**

**Annual Stipend/Salary for Full-time Interns:** $24,014  
**Annual Stipend/Salary for Half-time Interns:** N/A

| Program provides access to medical insurance for intern? | Yes |
| Is trainee contribution to cost required to obtain medical insurance? | Yes |
| Is coverage of family members available? | Yes |
| Is coverage of legally married partner available? | Yes |
| Is coverage of domestic partner available? | Yes |
| Hours of Annual Paid Personal Time Off (PTO/Vacation) | 104 |
| Hours of Annual Paid Sick Leave | 104 |
| In the event of medical conditions and/or family needs that require extended leave, does the program allow reasonable unpaid leave to interns/residents in excess of personal time off and sick leave? | Yes |
| Other Benefits: | Dental insurance, life insurance, professional development time (e.g., dissertation defense, VA interviews, conference attendance) |

**Initial Post-Internship Positions**

| 2014-2016 |
| Total # of interns who were in the 3 cohorts | 12 |
| Total # of interns who did not seek employment because they returned to their doctoral program/are completing their doctoral degree | 0 |

| PD | EP |
| Community mental health center |
| Federally qualified health center |
| Independent primary care facility/clinic |
| University counseling center |
| Veterans Affairs medical center | 6 |
| Military health center |
| Academic health center |
| Other medical center or hospital | 5 |
| Psychiatric hospital |
| Academic university/department |
| Community college or other teaching setting |
| Independent research institution |
| Correctional facility |
| School district/system |
| Independent practice setting | 1 |
| Not currently employed |
| Changed to another field |
| Other |
| Unknown |

*Updated September 11, 2017*
Note: “PD” = Post-doctoral residency position; “EP” = Employed Position. Each individual represented in this table should be counted only one time. For former trainees working in more than one setting, select the setting that represents their primary position.

**Local Information**

The VA Sierra Nevada Health Care System serves one of the largest geographical areas in the VA system. This area includes much of northern Nevada and northeastern California (some 380,000 square miles) with an estimated veteran population of close to 53,000. Our system also includes outpatient VA clinics located in Auburn, CA, Minden, NV, Fallon, NV, and Susanville, CA. The Reno-Sparks area and surrounding Truckee Meadows, located at the base of the eastern slope of the Sierra Nevada, has a population of about 456,000. At an elevation of 4,400 feet, Reno's climate is generally sunny and dry, with wide variations in temperature during a 24-hour period.

Reno is just minutes away from mountains, forests, and lakes as well as high desert areas complete with ghost towns and historical communities, such as Virginia City, the location of the Comstock gold strike of the 1850s. It offers many exciting opportunities for outdoor recreation, including backpacking, biking, kayaking, boating, fishing, hunting, camping, and skiing (both downhill and cross-country). Beautiful Lake Tahoe, about an hour’s drive from Reno, is known around the world for its year-round recreational opportunities. The Reno/Tahoe area contains the world's largest concentration of ski resorts - 19 in all - and has an unusually long ski season.

A wide variety of social and cultural activities are offered throughout the year in Reno. These range from big-name entertainment to community theatre, opera, ballet, community concerts, exhibits at Reno's excellent art museum, and activities held on the University of Nevada-Reno campus. Popular annual events include the month-long ArtTown festival, the Hot Air Balloon Festival, Hot August Nights, Burning Man, the Italian Festival, National Championship Air Races, Best of the West Rib Cookoff, Street Vibrations, and much more.

Both Carson City, one of the nation’s smallest state capitals, and Virginia City, a mining town founded in 1859, are just a short drive away. Northern California is also easily accessible, with flight time to San Francisco less than an hour, and driving time to Sacramento only two hours.

The information provided in this brochure is designed to provide a general description of our program and medical center setting. We look forward to answering any specific questions you might have by e-mail or telephone. The program Training Director is John G. Wyma, Ph.D., and his contact information is as follows: email john.wyma@va.gov, phone (775) 786-7200, ext 6581.

**The contact information for the APA Commission on Accreditation is:**

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apaaccred@apa.org

*Updated September 11, 2017*