



Psychology Postdoctoral Residency

Atlanta VA Medical Center

1670 Clairmont Rd., Decatur, GA 30033

<http://www.va.gov/atlanta/>

Co-Director of Psychology Training

Andrea B. Michels, Ph.D.

(404) 321-6111 ext 4234

Andrea.Michels@va.gov

Co-Director of Psychology Training

Evelyn A. Lemoine, Ph.D.

(404) 321-6111 ext 6027

Evelyn.Lemoine@va.gov

Applications Due: January 1, 2016

General Information

The Atlanta VA Medical Center has two postdoctoral Resident positions in Professional Psychology. Both positions are generalist in nature, with a major emphasis in Health Psychology and a minor emphasis in female veterans' mental health. The residency is a one-year, full-time training program (2,000 total hours) with an average expected workload of 40 hours per week of direct service delivery and other training activities. Residents successfully completing the program will meet the requirement for the Post-Doctoral Supervised Work Experience needed for professional licensure as a Psychologist in the State of Georgia.

Accreditation Status

The postdoctoral residency at the Atlanta VA Medical Center received the full, 7-year accreditation from the Commission on Accreditation of the American Psychological Association following our initial application and Site Visit in 2014. Our next Site Visit will take place in 2021. The program has also been a member of the Association of Psychology Postdoctoral and Internship Centers (APPIC) since 2012.

Questions regarding the accreditation status of our program may be directed to:

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

Stipend and Benefits

Postdoctoral Resident positions at the Atlanta VA Medical Center are funded by the Office of Academic Affiliations for the Department of Veterans Affairs. Residents receive a competitive stipend paid in 26 biweekly installments. VA residency stipends are determined annually by OAA and are locality adjusted to reflect the relative costs of living for different geographical areas. **The stipend for Residents at the Atlanta VA for the 2015-2016 training year is \$44,137.** Residents qualify for the same paid leave and healthcare benefits as VA employees and have a choice of medical, dental, and vision plans.

Application & Selection Procedures

Psychology postdoctoral Residents at the Atlanta VAMC must have a doctoral degree in clinical or counseling psychology from an APA-accredited training program, and must have completed an APA-accredited psychology doctoral internship. It is expected that most applicants will still be on internship at the time of application and that some will still be working on other graduate program requirements (e.g., dissertation); however, **all requirements for the doctoral degree, including internship and dissertation, must be completed successfully prior to the start of the residency.** Selection for the residency is considered provisional until all requirements for the doctoral degree are met, and offers will be revoked if the degree requirements are not completed by the designated start date for the residency. Please see the Atlanta VA's psychology training web page at www.psychologytraining.va.gov/atlanta for additional eligibility requirements for federal employment. Our training programs are committed to creating a supportive learning environment for individuals of diverse backgrounds, and as a federal agency we abide by the U.S. government EEO and Reasonable Accommodation policies. Applications from qualified minority individuals are encouraged. Individuals who wish to be considered in part on the basis of their ethnic/minority status should indicate their interest in the cover letter.

Interested applicants should submit their materials online via APPIC's centralized application service (APPA-CAS). Completed applications must include:

1. A cover letter that describes your personal training goals and perceived fit with our program. In your letter, please describe your previous educational and clinical experience relevant to the training offered in our program, your assessment of your training needs, and your general career goals. **Please review our complete brochure thoroughly before applying.**
2. A copy of your curriculum vitae
3. A letter from your dissertation Chair describing the progress of your dissertation and anticipated defense date if not yet complete, or confirming successful completion.
4. Three letters of recommendation from supervisors who are directly familiar with your clinical work. At least one letter must be from an internship supervisor. If your dissertation Chair is providing one of your letters, he/she may address your dissertation status within that letter. A separate, fourth letter on this subject is not required in that circumstance.

Deadlines: Applications must be received online by January 1, 2016 to receive consideration. The Directors of Training and select members of the Training Committee will review all submitted applications in detail and will select some candidates for interviews. All applicants will be notified of their interview status by e-mail. It is the responsibility of the applicant to ensure that correct and up-to-date contact information is supplied in the online application. Interviews will be held on-site at the Atlanta VA Medical Center in February 2016.

There is currently no Uniform Notification Date (UND), but if one is announced we will abide by it. Otherwise, we plan to make offers to selected applicants in late February 2015. The anticipated start date is August 22, 2016.

For questions about the application process or the training program please contact the Co-Directors of Training at andrea.michels@va.gov or evelyn.lemoine@va.gov.

Atlanta VA Information

Atlanta VA Medical Center (VAMC), a Joint Commission and Magnet®-designated medical facility sits on 26 acres in Decatur, Georgia—just minutes from downtown Atlanta. The main medical center is a level 1A tertiary care facility providing patient-centered healthcare via an array of comprehensive medical, surgical, geriatric specialty services, as well as state-of-the-art diagnostic testing throughout 14 sites of care. With 445 inpatient beds, including a 120-bed Community Living Center, a 40-bed domiciliary, and a 12-bed Residential Treatment Program, the Atlanta VAMC is uniquely positioned to serve the healthcare needs of more than 130,000 enrolled Veterans living in 50 counties across northeast Georgia. The Medical Center, also a teaching hospital, provides hands-on and state-of-the-art technology, education and research to residents in collaboration with Emory University School of Medicine and Morehouse School of Medicine.

In addition to comprehensive clinical services, the Medical Center has one of the largest VA research programs in the nation. The program is 1 of 13 national VA Rehabilitation Research and Development Centers and involves over 600 projects conducted by more than 140 principal investigators.

Psychology Training

Within the Medical Center, Psychology training is conducted within the context of the Mental Health Service Line (MHSL), a multidisciplinary department including professionals from the following disciplines: psychology, psychiatry, social work, and nursing. The mission of the MHSL is patient care, training and research. There are currently approximately 90 full-time psychologists on staff at the Atlanta VA Medical Center, with further growth anticipated. Approximately half of the staff psychologists serve on the Training Committee. These psychologists are distributed among the various treatment teams within the MHSL. These teams include the Mental Health Outpatient Clinic; Community Based Outpatient Clinics; Substance Abuse Treatment Program; Trauma Recovery Program; Geropsychiatry; Primary/Care Mental Health Integration, and the Mental Health Front Door. Psychologists on the Training Committee are also now embedded in other Service Lines within the Medical Center, including medical specialty clinics (e.g., sleep, pain), and the Community Living Center. Psychology training activities may take place in any of these settings.

In addition to the postdoctoral training program, the Atlanta VA offers an APA-accredited psychology doctoral internship program, as well as advanced practicum training for local psychology doctoral students from programs including Emory University, Georgia State University, and the University of Georgia. Postdoctoral Residents have the opportunity to supervise these junior trainees over the course of the training year.

Client Population

While the VA patient population is predominantly adult male, there are ample opportunities for clinical work with women and occasionally with married couples and families. Residents work with patients who differ widely in race, socioeconomic status, sexual orientation, physical ability, education, and degree of psychopathology. Psychological services are provided to veterans receiving medical, surgical, and psychiatric care in both inpatient and outpatient settings. Among the psychiatric patients, Residents will encounter a wide range of psychopathology including depression, anxiety, substance abuse, PTSD, schizophrenia, bipolar disorder, and personality disorders. In the area of medicine and surgery, there are opportunities to work with conditions such as neurodegenerative disorders and other neurological disorders, chronic pain, addictions, sexual dysfunction, smoking cessation, cardiac rehabilitation, palliative care, geriatrics, and HIV/AIDS.

Local Area Information

The metropolitan Atlanta area has a growing population of more than 5 million, is a major convention center, and hosts major league sports franchises in football, baseball, basketball, and soccer. The city

and the surrounding area have undergone phenomenal growth in recent years. Atlanta is internationally known for its Symphony Orchestra, the Carter Center, and the Martin Luther King Center. Atlanta hosted the Olympic Games in 1996, and has hosted the Super Bowl, the NBA All-Star Game, Major League Baseball's All Star Game and the NCAA Final Four. In recent years, Atlanta has been developing a reputation as the "Hollywood of the South" thanks to the burgeoning presence of the film industry. Multiple major motion pictures and TV shows are filmed locally, including AMC's "The Walking Dead," the CW's "The Vampire Diaries," and recent installments of the "Hunger Games" and "Fast and Furious" movie franchises.

The Atlanta area is rich in resources for medical research and treatment. Close to the Medical Center are Emory University and Medical School, the Centers for Disease Control, Children's Healthcare of Atlanta, and other clinical and educational facilities. Professional seminars and workshops are offered year round in the private sector and may offer reduced tuition fees to Residents.

Program Philosophy and Training Model

Training Program Mission Statement. The mission of the Atlanta VA Medical Center's Psychology Postdoctoral Residency is to train Residents to effectively function in roles that combine clinical service and scholarly inquiry. The program is generalist in nature, prioritizing the development of well-rounded clinical skills. The Residency also places a major emphasis on Health Psychology and a minor emphasis on female veterans' mental health, with a focus on delivery of evidence-based clinical services. Residents spend approximately 50% of their time in Health Psychology activities throughout the training year, and approximately 20% of their time in the Women's Wellness Primary Care/Mental Health Integration service for half of the training year. The purpose of the program is to provide the postdoctoral Residents with a variety of opportunities for advanced training in psycho-behavioral interventions with patients manifesting medical conditions.

Training Philosophy. The goal of the Atlanta VAMC Psychology Postdoctoral Residency is to produce a professional clinician who functions competently and ethically. The training program helps the Resident to set practical goals for the year and then creates an appropriate training program to meet the goals. Emphasis is placed on learning the philosophical and technical approaches grounded in empirical research and current professional standards. The training philosophy of the Residency is grounded in the premise that supervision is developmental in nature. As such, postdoctoral Residents are viewed as mature, self-motivated adult learners who bring diverse accumulated life experiences to their training. These life experiences serve as a rich resource that is enhanced by and also enhances the training environment. Our program emphasizes the development of mutually derived learning objectives and a collegial relationship between supervisor and the postdoctoral Resident.

Training Model. Training is based on a "practitioner-scholar" model of training. Our program emphasizes training in clinical skills and recognizes that clinical work is informed by well-designed research. Supervision and didactics are grounded in the scientific literature and strong efforts will be made to expose postdoctoral Residents to current research and scholarship.

Diversity Statement. The Atlanta VA serves veterans who represent a wide variety of dimensions of diversity, including but not limited to gender, race, ethnicity, sexual orientation, physical ability, regional affiliation, age, and religious/spiritual orientation. The Atlanta VA's Psychology Postdoctoral Residency is deeply committed to the appreciation of diversity and the development of multicultural competence. During the training year, Residents develop awareness, knowledge, and skills to enhance multicultural competence through a variety of experiences. These include diversity-focused presentations, readings, and learning activities; discussions with supervisors, peers, and other clinical staff; and direct provision of services to veterans with diverse backgrounds. The overall goal of diversity-related training activities is the promotion of social justice and multicultural competence within the mental health profession and society as a whole.

The Diversity Education Committee for Psychology Training (DEC-PT) functions as an extension of the Psychology Training Committee to assist psychology trainees in developing multicultural competencies, appreciating diversity in all its forms, and promoting social justice. Within its roles with the Psychology Doctoral Internship and Postdoctoral Training Programs, the DEC-PT seeks to cultivate an environment that supports open and respectful dialogue, exchange of ideas, and self-reflection.

The DEC-PT is composed of Atlanta VA psychologists who are invested in helping to promote trainees' multicultural competence for working with a highly diverse patient population and to explore how, as mental health professionals, our individual differences, worldview, biases, theoretical framework, and life experiences affect our clinical work. In conjunction with the Core Training Committee, the DEC-PT facilitates the Multicultural Lunch and Learn Series and the Multicultural Seminar Series for the Internship program. Postdoctoral Residents are required to serve on the DEC-PT and to assist with the development of these activities throughout the training year.

Unique Veterans Seen during Calendar Year 2014

Total Veterans at Atlanta VAMC and Associated Clinics	96,703
Veterans seen by Mental Health Service	27,100
Sex	
Female	17.7%
Male	81.4%
Age	
<25	0.8%
25-34	12.8%
35-44	13.7%
45-54	22.2%
55-64	25.2%
65-74	20.5%
75-84	2.7%
>84	1.0%
Race	
American Indian or Alaskan Native	0.5%
Asian	0.4%
Black or African American	58.2%
Declined to Answer	3.3%
Native Hawaiian or Pacific Islander	0.6%
Other Race	1.1%
White	35.0%
Ethnicity: Hispanic or Latino	1.8%

Program Goals and Objectives

The Psychology Postdoctoral Residency at the Atlanta VA Medical Center strives to promote the development of the full range of generalist skills required for independent functioning as a psychologist, as well as specialized skills in the areas of Health Psychology and female veterans' mental health.

The following specific goals and objectives represent the areas in which postdoctoral Residents at the Atlanta VA Medical Center are evaluated:

GOAL 1: COMPETENCE IN PROFESSIONAL CONDUCT, ETHICS AND LEGAL MATTERS

Objective: Professional Interpersonal Behavior

Professional and appropriate interactions with treatment teams, peers, and supervisors, seeks peer support as needed

Objective: Seeks Consultation/Supervision

Seeks consultation or supervision as needed and uses it productively

Objective: Uses Positive Coping Strategies

Demonstrates positive coping strategies with personal and professional stressors and challenges; maintains professional functioning and quality patient care

Objective: Professional Responsibility and Documentation

Responsible for key patient care tasks (e.g., phone calls, letters, case management), completes tasks promptly; all patient contacts, including scheduled and unscheduled appointments and phone contacts are well documented; records include crucial information

Objective: Efficiency and Time Management

Efficient and effective time management; keeps scheduled appointments and meetings on time; keeps supervisors aware of whereabouts as needed; minimizes unplanned leave, whenever possible

Objective: Knowledge of Ethics and Law

Demonstrates good knowledge of ethical principles and state law; consistently applies these appropriately, seeking consultation as needed

Objective: Administrative Competency

Demonstrates a growing ability to accomplish administrative tasks; prioritizes appropriately; shows a growing autonomy in management of larger administrative, or clinical projects

GOAL 2: COMPETENCE IN INDIVIDUAL AND CULTURAL DIVERSITY

Objective: Patient Rapport

Consistently achieves a good rapport with patients

Objective: Sensitivity to Patient Diversity

Sensitive to the cultural and individual diversity of patients; committed to providing culturally sensitive services

Objective: Awareness of Own Cultural and Ethnic Background

Aware of own background and its impact on clients; committed to continuing to explore own cultural identity issues and relationship to clinical work

GOAL 3: COMPETENCE IN THEORIES AND METHODS OF PSYCHOLOGICAL DIAGNOSIS AND ASSESSMENT

Objective: Diagnostic Skill

Demonstrates a thorough working knowledge of psychiatric diagnostic nomenclature and DSM multiaxial classification; utilizes historical, interview, and psychometric data to diagnose accurately

Objective: Psychological Test Selection and Administration

Promptly and proficiently administers commonly used tests in his/her area of practice; appropriately chooses the tests to be administered; demonstrates competence in administering a variety of diagnostic measures

Objective: Psychological Test Interpretation

Interprets the results of psychological tests in his/her area of practice; demonstrates competence interpreting chosen measures

Objective: Assessment Writing Skills

Writes a well-organized psychological report; answers the referral question clearly and provides the referral source with specific recommendations

Objective: Feedback Regarding Assessment

Plans and carries out a feedback interview; explains the test results in terms the patient and/or caregiver can understand; provides suitable recommendations and responds to issues raised by patient or caregiver

GOAL 4: COMPETENCE IN THEORIES AND METHODS OF EFFECTIVE PSYCHOTHERAPEUTIC INTERVENTION

Objective: Patient Risk Management and Confidentiality

Effectively evaluates, manages, and documents patient risk by assessing immediate concerns such as suicidality, homicidality, and any other safety issues; collaborates with patients in crisis to make appropriate short-term safety plans, and intensify treatment as needed; discusses all applicable confidentiality issues openly with patients

Objective: Case Conceptualization and Treatment Goals

Formulates a useful case conceptualization that draws on theoretical and research knowledge; collaborates with patient to form appropriate treatment goals

Objective: Therapeutic Interventions

Interventions are well-timed, effective and consistent with empirically supported treatments

Objective: Effective Use of Emotional Reactions in Therapy

Understands and uses own emotional reactions to the patient productively in the treatment

Objective: Group Therapy Skills and Preparation

Intervenes in group skillfully, attends to member participation, completion of therapeutic assignments, group communication, safety, and confidentiality. If the group is psychoeducational, readies material for group, and understands each sessions goals and tasks

GOAL 5: COMPETENCE IN SCHOLARLY INQUIRY AND APPLICATION OF CURRENT SCIENTIFIC KNOWLEDGE TO PRACTICE

Objective: Seeks Current Scientific Knowledge

Displays necessary self-direction in gathering clinical and research information; seeks out current scientific knowledge as needed to enhance knowledge about clinical practice and other relevant areas

GOAL 6: COMPETENCE IN PROFESSIONAL CONSULTATION

Objective: Consultation Assessment

Performs an assessment of the patient referred for consultation, incorporating mental status exam, structured interview techniques or psychological assessment, as needed, to answer the referral question

Objective: Consultative Guidance

Gives the appropriate level of guidance when providing consultation to other health care professionals, taking into account their level of knowledge about psychological theories, methods, and principles

GOAL 7: COMPETENCE IN SUPERVISION

Objective: Knowledge and Application of Supervision Methods

Demonstrates good knowledge of supervision and is able to apply a variety of theoretical models of supervision

Objective: Rapport with Supervisees

Able to establish effective working relationships with supervisee(s)

Objective: Supervision of Supervision

Demonstrates ability to use supervision of supervision in an effective way to explore own growth as a supervisor

Objective: Evaluation of Supervisees

Demonstrates an ability to provide constructive/corrective feedback and evaluation of supervisees' competencies

GOAL 8: COMPETENCE IN HEALTH PSYCHOLOGY INTERVENTIONS

Objective: Knowledge of Health Psychology Techniques for Behavior Change

Is knowledgeable about behavioral and psychological techniques for behavior change and wellness, and is informed by the professional psychological and medical literature

Objective: Health Psychology Individual Therapy Skills

Effectively implements behavioral and psychosocial treatment interventions for nicotine addiction, pain management, stress, sleep disturbance, sexual health concerns, weight management, compliance, relapse prevention, emotion control and other habits of living that may impact behavior change, health, and wellness promotion

Objective: Health Psychology Group Therapy Skills

Effectively facilitates behavioral and psychosocial treatment interventions for group therapy applications including smoking cessation, pain management, stress management, relaxation therapy, and anger management

GOAL 9: COMPETENCE IN HEALTH PSYCHOLOGY ASSESSMENTS

Objective: Knowledge of Psychological Assessment Methods for Presurgical Candidates

Demonstrates good knowledge base of interview methods and instruments for assessing medical patients who are in need of an organ transplant, bariatric surgery, or other medical procedure

Objective: Pre-transplant Assessment Write-ups

Demonstrates proficiency in preparing written pre-transplant and bariatric psychological evaluations

Objective: Knowledge of Psychological Assessment Methods for Pain Patients

Demonstrates good knowledge base of interview methods and instruments for assessing medical patients who are in need of treatment for chronic pain

Objective: Pain Assessment Write-ups

Demonstrates proficiency in preparing written pain evaluations

GOAL 10: COMPETENCE IN ADMINISTRATION AND PROGRAM DEVELOPMENT/EVALUATION

Objective: Knowledge of Program Evaluation Methods

Demonstrates good knowledge of techniques of program evaluation

Objective: Program Development and Implementation

Designs and proposes new health psychology patient care initiatives in the form of individual and group interventions

Objective: Needs Assessment

Consults with various hospital staff concerning patient care needs in the areas of health psychology and wellness interventions

GOAL 11: COMPETENCE IN TEACHING

Objective: Knowledge of Motivational Interviewing

Demonstrates knowledge and understanding of Motivational Interviewing techniques for behavior change

Objective: Training Staff in Psychological Interventions

Participates as co-facilitator and presenter in Motivational Interviewing teaching and training for hospital staff

Program Structure

Orientation

Residents begin the training year with several days of orientation to the VA, the Medical Center, and the training program. Residents meet with the Directors of Training and with supervisors from all clinical rotations to review the training opportunities available with each. Residents also meet with relevant Mental Health leadership representatives and with members of the Diversity Education Committee for Psychology Training (DEC-PT). This process allows time for Residents to begin to develop familiarity with the Medical Center, clinical activities, record keeping, personnel issues, and procedures specific to the Mental Health Service Line. Residents will inform the Directors of Training of their elective rotation preferences at the end of orientation.

Training Plans and Evaluation

During orientation, Residents complete a self-assessment of their relative strengths and weaknesses with respect to the goals and objectives described above. The Directors of Training then meet individually with each Resident to develop a personalized training plan for the year. The goal of the training plan is to identify needed and desired learning activities to round out the Resident's general training, to further develop fundamental clinical skills, to address deficits in skill or experience, and to gain exposure to new patient populations and methods of assessment and intervention. The Directors of Training make every effort to honor the preferences of the Resident; however, they reserve the right to require certain training experiences if a significant need is identified. The training plan may be revisited and amended at any point in the training year as new interests or needs are identified. At mid-year and end-of-year all

Residents will formally review their training plans and progress with the Directors of Training and the Core Training Committee.

Evaluation of Resident progress is ongoing throughout the training year and occurs both informally and formally. Informal feedback is provided continually in weekly supervision and in communication between training staff members. Resident progress is formally discussed by the training staff in monthly meetings of the Core Training Committee; areas of strength and areas for growth are documented in the Committee's meeting minutes. Residents are also formally evaluated by each of their clinical supervisors at the end of each quarter; the written feedback is reviewed between Resident and supervisor and is submitted to the Directors of Training for inclusion in the training file. At a minimum, Residents meet with the Directors of Training and the Core Training Committee twice (at mid-year and at end-of-year) for formal discussions of progress and review of training plans. Additional formal feedback may be scheduled as needed.

Training Activities - Emphasis Areas

Health Psychology – Health Psychology services at the Atlanta VAMC are currently provided by the Health Behavior Coordinator for the Medical Center (Dr. Mark Ackerman, a health psychologist), as well as a full-time pain psychologist (Dr. Jennifer Steiner) and a part-time sleep psychologist (Dr. Sharon Shatil). As the Health Behavior Coordinator, Dr. Ackerman is responsible for integration of health services into PC clinics, consistent with the Patient-Centered Medical Home model. Current services include Pain Management, Nicotine Addiction Treatment, Sleep Management, and Sexual Health services. Residents will have opportunities for both individual and group interventions in these areas and will work with veterans who are suffering from adjustment issues related to their medical diagnoses. There will also be opportunities for psychological assessment of both veterans referred for pain management and of veterans with complex health concerns referred for diagnostic clarification. Further, Residents will assist the staff with expansion and development of services and will help determine the role of future postdocs providing these services. For example, our Residents have assisted with the expansion of Health Psychology services to the CBOCs via clinical video telehealth. Residents also serve as liaisons between Health Psychology and multiple other departments through service on hospital committees and attendance in administrative meetings. Residents spend approximately 50% of their time in Health Psychology training activities.

Smoking Cessation Program: Smoking is one of the leading causes of preventable death in the United States and there is a great demand within the Atlanta VA for smoking cessation intervention. Residents co-lead a structured psycho-educational counseling program that emphasizes cognitive-behavioral interventions. These groups provide experience with techniques of effective habit change, group facilitation, as well as increased familiarity with the medical consequences of tobacco use.

Chronic Pain Management Program: Patients referred to the Psychology Pain Management program may present with pain of varying severity, which often has not fully remitted despite medical interventions. In addition to suffering from chronic musculo-skeletal pain conditions, these patients may also present with co-morbid depression, anxiety, adjustment disorder, and/or substance abuse issues which complicate the clinical presentation, yet provide targets for interventions, and valuable training experiences. Residents conduct individual assessments, co-facilitate group interventions, and see pain patients for individual psychotherapy. Primary treatment modalities include behavioral, CBT, and Acceptance and Commitment Therapy.

Sexual Health Counseling: Patients experiencing chronic illness often develop difficulties that impact their sexual functioning (e.g. diabetes, atherosclerosis). Various medical and psychiatric conditions may require medications that impede sexual functioning (e.g. SSRI's for depression, anti-hypertension medications, and medications prescribed for prostate conditions), while certain addictive behaviors (e.g. alcohol, tobacco, and other chemical dependencies) frequently interfere

with sexual adjustment. Selected sexual functioning difficulties are referred for treatment on this rotation from around the Medical Center and Residents will have the opportunity to assess and treat such conditions as erectile dysfunction, premature ejaculation, impaired sexual desire, anorgasmia and compulsive sexual behavior disorders.

Sleep Management Program: A high percentage of veterans suffer from sleep disturbance: 50-53% with sleep apnea syndromes, and 40-50% with some form of insomnia. While Positive Airway Pressure (PAP) therapies are currently the best treatment for sleep apnea, many veterans report that they cannot tolerate the treatment. Residents will have the opportunity to evaluate veterans and provide individual desensitization treatment, which has been shown to increase tolerance of and compliance with PAP therapies. Additionally, Residents may evaluate and conduct individual therapy for treatment of insomnia, nightmares, circadian rhythm sleep-wake disorder, and adjustment to narcolepsy, as well as conduct group intervention for insomnia. General treatment models used are behavioral, cognitive behavioral, and ACT.

Cardiology Consultation: Cardiovascular Disease is one of the leading causes of veteran morbidity and mortality. Health Psychology has established a consultation program with Cardiology Services to help identify veterans in need of making lifestyle changes through interventions including habit modification and wellness promotion. Clinical activities with this population of veterans may include: assessment and intervention for personality issues of relevance to cardiac rehabilitation specifically targeting hostility reduction and Type A Personality traits, depression management and anxiety reduction, preparation for stressful and invasive diagnostic procedures, family counseling and emotional support following surgical procedures including stent placement and bypass surgery, interventions to enhance compliance and adherence to recommended lifestyle changes, stress management and relaxation training, and sexual counseling within the context of cardiac rehabilitation. Interns and Post-Doctoral Residents working with Cardiology patients will have the opportunity to attend Cardiology Medical Rounds and consult closely with medical residents and attending physicians within that service line.

Pre-transplant Evaluation Consultation Service: The completion of pre-transplant psychosocial evaluations for patients who have been referred by various specialty services occurs with selected patients for liver, kidney, lung, and bone marrow transplants. Residents are trained in the methods of these evaluations and will complete them throughout the training year. The transplant evaluations assess the psychological and psychosocial factors considered to be important predictors of successful transplant surgery and recovery including, treatment adherence, psychological stability, substance abuse, and social support. Evaluations involve a chart review and clinical interview. They also involve completing a report in which recommendations are made regarding a patient's appropriateness for transplant surgery, as well as recommendations regarding further services or behavioral changes that might enhance the patient's candidacy for a transplanted organ.

Female Veterans' Mental Health – The Women Veterans Health Program promotes the health, welfare, and dignity of women veterans and is a component of the Atlanta Primary Care Service, which has the largest number of women veterans (6200+) enrolled in VISN 7. The Women's Wellness Clinic in Atlanta encompasses a dedicated staff that provides primary care and gender specific care for 2700+ assigned female veterans. The clinic provides a wide range of services including general preventive medicine and specialty care services including STD screening, birth control planning, pregnancy screening and medical management, breast and cervical cancer screenings, gynecological care and menopausal management. It is multidisciplinary and utilizes the clinical expertise of a clinical psychologist, social worker, nutritionist and doctor of pharmacy as well as 3.9 physicians, 2 clinical practitioners and nursing staff. The clinic operates according to the Primary Care/Mental Health Integration model in which a co-located psychologist provides brief initial assessments, short-term individual therapy, and referrals to specialty mental health services. Residents working with the Women's Wellness Clinic will gain experience working with female veterans in group and individual therapy, as well as conducting assessments. Interventions will focus

on general health-related issues, such as weight management, chronic pain and stress reduction, as well as health concerns specifically related to females, including coping with infertility or unwanted pregnancy, care giving issues, and coping with diagnosis of diseases affecting women, such as cancer (i.e., breast, ovarian, uterine, etc.), heart disease, and sexually transmitted diseases. Each Resident will complete a 6-month rotation working in the Women's Wellness Clinic one day per week.

The specific Women's Wellness Primary Care-Mental Health Integration skills trainees will develop as postdoctoral Residents include:

1. Gaining perspective and experience on the role of a psychologist in a women's primary care clinic and working as a member of an interdisciplinary team.
2. Conducting brief but comprehensive psychological assessments and treatment plans with female veterans as referred by primary care providers who are either: (a) experiencing a mental health crisis; (b) new to mental health services, (c) in need of specialty care mental health services and/or (3) transferring mental health care from another VA or outside provider.
3. Providing initial screening for such sensitive issues as military sexual trauma, combat trauma, and childhood trauma and discussing veteran's treatment options to consider.
4. As appropriate, providing short-term psychotherapy (4-6 sessions) for a variety of presenting problems including anxiety; depression; chronic pain and debilitation; relationship and/or adjustment issues; dealing with a serious medical illness; grief and loss; acute reaction to sexual trauma and/or intimate partner violence; and homelessness/poverty.
5. Gaining experience with brief therapy techniques including, but not limited to motivational interviewing, cognitive-behavioral therapy, and behavioral activation, as well as providing solid generalist practice.
6. Assisting various medical staff (i.e., physicians, nurses, medical Residents) with evaluation and treatment planning for medical patients whose status is affected by psychological and behavioral factors;
7. Completing and submitting, in written form and on a timely basis, the consultative requests assigned during the course of this training experience.
8. Also may participate in interdisciplinary research projects and or group therapy assignments as possible.

Other Training Activities

General Therapy Cases: To round out the generalist nature of the training program, in addition to the training experiences in the emphasis areas outlined above Residents are expected to carry a caseload of approximately 3 general (long- or short-term) individual, group, or couples/family psychotherapy cases. Cases are assigned by the Directors of Psychology Training and are supervised by various members of the Training Committee with the goal of exposing Residents to various theoretical orientations and areas of expertise.

Assessments/Psychological Testing Consults: Residents are required to complete a minimum of 2 psychological testing cases during the training year. Consults are submitted by providers throughout the Mental Health Service Line and are assigned to Residents, who will be supervised by a member of the Training Committee. The emphasis of this training experience is on enhancing general diagnostic, clinical interviewing, and overall assessment/testing skills. Each assessment case is unique and varies broadly along a spectrum of cognitive and personality evaluations. As such, there is no standard test battery or report format. Residents will also be required to perform 1-2 presurgical psychological evaluations per month of veterans who will be undergoing an organ or stem cell transplant, bariatric surgery, or other medical procedure (see description above, in Health Psychology).

Elective Minor(s): Residents select one or two minor training experiences outside the emphasis areas, which will account for up to 20% of their time. Residents have the option of choosing one minor for the entire training year, or two minors of 6 months' duration each. Options include specialized mental health services such as Inpatient Psychiatry, the Trauma Recovery Program (TRP), geropsychology, or the Substance Abuse Treatment Program (SATP), as well as general outpatient mental health, neuropsychology, palliative care, or Primary Care/Mental Health Integration (e.g., Infectious Diseases Clinic, OEF/OIF, general PC). Residents may also choose to participate in an ongoing VA research study as an elective minor, pending availability, or to propose and develop a new minor training experience.

Supervision: Postdoctoral Residents are considered junior colleagues and are expected to demonstrate a considerable degree of autonomy and self-motivation. APA guidelines require that Residents receive a minimum of two hours of individual supervision each week. Supervision of psychotherapy cases is provided by at least two licensed psychologists, each of whom typically spends one hour per week reviewing cases with the Resident. Supervision of assessment work involves additional scheduled, formal supervision. Less formal supervision occurs during seminars and through mentoring from training staff. Supervision by professionals from other disciplines may be arranged when desired and appropriate.

Didactics: Residents are required to participate in three didactics, as described below, with additional elective didactic opportunities if desired.

Health Didactic – This didactic occurs biweekly and is presented by a diverse range of Mental Health and Medical staff on topics related to the assessment and treatment of various chronic illnesses, as well as the psychological correlates/implications of chronic medical problems. Topics have included HIV/AIDS, MS, hand transplantation, pharmacology, diabetes, addiction, cardiac, organ transplantation, and physical medicine and rehabilitation/ortho among others.

Professional Development Didactic – This didactic also occurs on a biweekly basis, alternated with the Health Didactic. Postdoctoral Residents meet with the DOT's as well as other Psychology Training staff to discuss topics related to general professional development, adjusting to the transition of becoming an independent practitioner, preparing for the EPPP, licensure, updating a CV, etc.

Multicultural Lunch & Learn - The Diversity Education Committee for Psychology Training plans the monthly Multicultural Lunch & Learn Series. These lunch-time presentations are open to all psychology staff and are required for psychology Interns and Residents. As noted above, Residents also serve on the DEC-PT and assist with the development of this series. Speakers address a variety of topics relevant to specific patient populations and to the promotion of multicultural competence (e.g., cultural perceptions of psychotherapy and psychotherapists, spirituality, LGBTQ/transgendered veterans, individuals from rural areas, aging, women's issues, etc.).

Elective Didactics – Residents have the option to attend two elective didactics, if they do not conflict with the Residents' required activities. They may attend Emory University Psychiatry Grand Rounds, which occurs approximately every other week during Emory's academic year. Grand Rounds presentations cover a wide range of topics including summaries of current research, treatment techniques, and presentations from prominent figures in psychiatry and the behavioral sciences. They are presented by the Emory School of Medicine via teleconference to the Atlanta VA. Residents may also attend the weekly Psychiatry Case Conference presentations, which involve case presentation by an Emory Psychiatry Resident and live interview of an inpatient veteran by the Resident's faculty discussant.

Supervision Training: Residents have the opportunity to supervise one or more practicum students and/or psychology Interns on either an individual therapy case, a group, and within the Health

Psychology Service. Residents are provided with supervision of supervision (1-2 hours per week), and attend the monthly Supervision Group.

Supervision Group – The supervision group meets once per month and is comprised of members of the Psychology Training staff who supervise Interns. This group does not serve as an evaluation forum for tracking trainees' progress in the respective programs. Rather, it was established to discuss various issues that might arise in supervision (e.g., dual relationships, giving feedback to Interns, how to initiate remediation plans, managing parallel processes, etc.), review relevant research in the field of supervision, and provide supervision of supervision.

Teaching: As junior members of the psychology training staff, Residents are required to present on topics in their area of interest and/or expertise in at least two of the following didactic seminars: the psychology Interns' Assessment Seminar, the psychology Interns' General Seminar, and/or the Multicultural Lunch & Learn series. Residents also serve as members of the Diversity Education Committee and assist with planning of discussion topics for the Multicultural Lunch & Learn and training activities for the Interns' Multicultural Seminar series (part of their General Seminar). Alongside the Health Behavior Coordinator, there will also be additional opportunities to conduct in-service workshops teaching Motivational Interviewing techniques to other healthcare staff, such as nurses and physicians. Residents have also served on the Health Promotion and Disease Prevention committee for the Medical Center, which organizes annual campaigns for the flu shot, the Great American Smoke-Out, etc.

Requirements for Completion

Hours

Residents must complete 2000 professional hours within the 52-week training year in order to complete the Residency. Residents are encouraged to maintain a record of their hours. Accrued paid leave time and authorized absences for professional development activities are counted toward the 2000 hour requirement.

Demonstration of Competency

As outlined above (see Program Structure, p.9), Residents are continuously evaluated throughout the training year. Evaluation focuses on the successful demonstration of competency in the areas outlined in the Program Goals and Objectives section above (pp. 6-9). Residents must demonstrate at least high competence in all areas by mid-year and at least advanced competence in all areas by end-of-year in order to successfully complete the program.

Licensure

Throughout the training year, much emphasis is placed on preparing Residents for licensure and independent practice. Specifically, the Professional Development seminar incorporates topics related to the process of obtaining licensure, including completing the EPPP, preparing for the jurisprudence examination, and completing critical licensing board paperwork in a timely fashion. At the completion of the residency, Residents will have completed, at a minimum, the 1500 hours of supervised direct service experiences required for licensure in the State of Georgia, as well as all other jurisdictions that fall under the Association of State and Provincial Psychology Boards.

Facility and Training Resources

Residents have full access to the same level of clerical and technical support as staff psychologists. They are provided with computers that have full access to the hospital network, Microsoft Office, and access to

the Internet. Printers and secure fax machines are readily available in all treatment areas of the hospital. Support staff is available to assist Residents in scheduling appointments, administrative tasks, coordination of multimedia equipment, and negotiating the Medical Center's bureaucracy. Residents have access to technical support for their computers and telephones through the Information Technology Service, a representative of which works within the Mental Health Service Line (MHSL) and is available by phone or email.

The VA network has a number of psychological tests available for computer-based administration. In addition, the psychology staff has an extensive inventory of tests and test materials. Residents are also able to use the Medical Center's library, which provides them with access to computer-based resources, a variety of in-house materials, and almost unlimited access to materials available through affiliation with other libraries. Professional journals are available online via a link with the Emory University Library. Multimedia equipment, including video and audio machinery, can be accessed through the Medical Media Service.

Each Resident has a private office, located on the 5th floor of the Medical Center. Both offices are equipped with desks, computers, and locked cabinets to secure sensitive information and personal belongings. While space at the Atlanta VA Medical Center is always in high demand, Residents are always provided with sufficient clinical and administrative space. Conference rooms and group therapy rooms throughout the Medical Center are used for group sessions and training seminars.

Training Staff

Depending on the elective and general therapy and assessment experiences chosen, Residents may work with any of the approximately 50 members of the psychology training staff during the course of the year. Information for the core faculty for the Residency is listed below.

Core Postdoc Training Committee Members (2015-2016):

MARK D. ACKERMAN, Ph.D. – Health Psychology Supervisor – (Counseling Psychology, University of Missouri, 1982) is the Health Behavior Coordinator and provides a broad range of health psychology and wellness promotion services at the Medical Center. He directs the nicotine dependence treatment program and offers group therapy and consultative services for smoking cessation, chronic pain, anger management, sexual health, cardiovascular wellness, sleep management, and weight management. Ongoing funded research projects include nicotine dependence and sexual health. He supervises all trainees in health psychology (practicum students, Interns, and Residents) and is the primary supervisor for the Residents throughout the training year.

ERIN C. ELLIOTT, Ph.D., ABPP – Co-Chair of the DEC-PT – (Counseling Psychology, Auburn University 2008) provides outpatient individual and group psychotherapy at the General Mental Health Clinic and is Co-Chair of the Diversity Education Committee for Psychology Training. Her theoretical orientation is best characterized as integrative with an emphasis on Acceptance and Commitment Therapy (ACT) and Motivational Interviewing (MI). Her professional interests include multiculturalism, psychological adjustment to role changes, severe and persistent mental illness, supervision and training, healthy psychology, and suicide prevention.

CATHERINE G. DEERING, Ph.D., ABPP – Supervision of Supervision – (Clinical Psychology, University of Rhode Island, 1991) is a part-time consulting psychologist at the Atlanta VA and a Professor of Psychology at Clayton State University in Atlanta. Her professional interests include group therapy training, family therapy, and teaching. She leads a weekly supervision of supervision group for the Residents focused on their work with the psychology Interns.

EVELYN A. LEMOINE, Ph.D. – Co-Director of Psychology Training – (Clinical Psychology, Nova Southeastern University, 2005) is a clinical psychologist and Co-Director of Psychology Training for both the APA-accredited Internship and Postdoctoral training programs. Clinically, she works part-time with

Primary Care/Mental Health Integration (PCMH) in the Infectious Diseases Clinic, performing brief diagnostic evaluations, providing consultative services, and conducting short-term psychotherapy with primary care patients. She also spends a portion of her time in assessment related activities, including conducting pre-employment and annual psychological evaluations for police officers and pre-transplant evaluations for medical patients, as well as coordinating and supervising psychological testing case for the trainees. Her professional interests include anxiety disorders, psychological assessment, supervision and training.

MIKE MARTIN, Ph.D. – Psychologist Executive, Immediate Past Co-DOT – (Counseling Psychology, Auburn University, 1999) serves as Psychologist Executive for the Atlanta VA Medical Center. His interests include administration and leadership, clinical supervision, Primary Care/Mental Health Integration, telehealth, ethics, neuropsychology, and psychological adjustment to trauma and disability. He provides group supervision, individual supervision, didactic presentations, and testing supervision to psychology trainees.

ANDREA B. MICHELS, Ph.D. – Co-Director of Psychology Training and TRP Supervisor – (Clinical Psychology, Florida State University, 2006) is a psychologist with the Trauma Recovery Program's PE/CPT team and Co-Director of Training for both the Internship and Postdoctoral training programs. She conducts diagnostic evaluations and provides individual and group psychotherapy and psychoeducation services, and leads a weekly PE peer supervision group. While her current work focuses on the treatment of combat-related PTSD in veterans of all eras of service, other clinical and research interests include major depression and suicide. Dr. Michels also coordinates general therapy case assignments for Interns and Postdoctoral Residents. In all her work she is committed to the utilization of a scientific approach to psychology, including the prioritization of empirically supported treatments. Dr. Michels is a former Atlanta VA Intern and Emory University Postdoc.

SHARON R. SHATIL, Ph.D. – Health Psychology Seminar Coordinator and Sleep Psychologist – (Clinical Psychology, Marquette University, 2012) is a Clinical psychologist in the Sleep Medicine Clinic. She provides assessment and treatment of problems with insomnia, nightmares, and CPAP use. Dr. Shatil coordinates the Health Psychology Seminar series for the postdoctoral residency and supervises residents and interns in psychotherapy. Her professional interests, other than health psychology, include mindfulness and 3rd wave behavioral approaches to psychotherapy, the very broad area of trauma, and supervision and training. She completed her internship and residency at the Atlanta VAMC.

CHRISTIE T. SPENCE, Ph.D. – Professional Development Seminar Coordinator – (Clinical Psychology, Washington University in St. Louis, 2012) is a Primary Care/Mental Health Integration (PCMHI) psychologist at the Fort McPherson CBOC. As a PCMHI psychologist, she performs brief diagnostic evaluations, provides consultative services, and conducts short-term psychotherapy with patients in the Primary Care setting. Dr. Spence coordinates the Professional Development Seminar Series for the postdoctoral residents and is also a member of the Diversity Education Committee for Psychology Training (DEC-PT). Her interests include personality assessment, motivational interviewing, brief therapy, and training.

JENNIFER L. STEINER, Ph.D – Pain Psychologist and Multicultural Lunch & Learn Co-Chair - (Clinical Psychology, Indiana University-Purdue University, Indianapolis, 2013) is a Clinical psychologist in the Physical Medicine & Rehabilitation Clinic; her work focuses primarily on the psychological and behavioral management of chronic pain. Dr. Steiner provides both group and individual interventions using psychoeducation, CBT, and Acceptance and Commitment (ACT). She supervises residents and interns in both individual and group interventions, as well as pain evaluations. Her professional interests outside of chronic pain and health psychology include working with female veterans, ACT, research/program development, and supervision and training. Dr. Steiner is currently the Co-Chair of the Multicultural Lunch & Learn series and participates as a member of the Diversity Education Committee for Psychology Training. Dr. Steiner completed her doctoral internship at the Salem VAMC in Virginia and postdoctoral residency at the Atlanta VAMC.