

**PRE-DOCTORAL  
INTERNSHIP TRAINING PROGRAM  
IN  
CLINICAL PSYCHOLOGY**

**PSYCHOLOGY DIVISION of the MENTAL HEALTH SERVICE**

**DEPARTMENT OF VETERANS AFFAIRS  
NEW YORK HARBOR HEALTHCARE SYSTEM**

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**INTRODUCTION**

The Psychology Division of the Mental Health Service at the Manhattan campus of the Department of Veterans Affairs New York Harbor Healthcare System has a long tradition of providing training through our Pre-doctoral Internship in Clinical Psychology. We are proud of our training program and of the reputation it has achieved throughout the national psychology community. Our past interns have distinguished themselves in a wide variety of employment settings including the Department of Veterans Affairs and other medical centers and health care facilities; community agencies, clinics, and private practices; colleges, universities, and research institutes; and in business and industry settings throughout the country.

The Psychology staff maintains a strong commitment to the training of pre-doctoral interns and makes every effort to provide as enriching an experience as possible within an atmosphere of mutual respect and professionalism. We endeavor to achieve a good balance between servicing the clinical needs of the VA population and savoring the training process. This perspective is reflected in the quality and quantity of supervision that has characterized the program over the years. Our training program utilizes an apprenticeship model, where interns work alongside staff psychologists, frequently conducting assessments and treatment jointly at the beginning of a rotation or new elective. Interns are considered junior colleagues and soon function with a great deal of independence and autonomy.

We place particular emphasis on exposing interns to the breadth and variety of professional roles assumed by psychologists, including concentrated training in specialties such as Neuropsychology, Health Psychology, Posttraumatic Stress Disorder, and psychodiagnostics. We are committed to helping interns develop their own professional identities in addition to expanding and refining their clinical competencies.

Our Pre-doctoral Internship Training Program is fully accredited by the American Psychological Association. As a member of the Association of Psychology Postdoctoral and Internship Centers (APPIC), we abide by their procedures and guidelines.

David Ruhland, Ph.D., ABPP  
Director of Psychology

Christie Limpert, Ph.D.  
Director of Training

## **FACILITIES & PATIENT POPULATION**

The Medical Center at the New York campus is a modern, air-conditioned 18-story building overlooking the East River. It is located on East 23rd Street at First Avenue in Manhattan, adjacent to the New York University and Bellevue Medical Centers. The Medical Center is fully accredited by the Joint Commission on Accreditation of Hospitals and is a full-service teaching hospital providing comprehensive coverage of all medical, surgical, and dental specialties. A Dean's Committee supervises the various approved training programs. In addition to the internship in Psychology, the Medical Center maintains residencies in all medical specialties and subspecialties, almost all of which are fully integrated or affiliated with New York University-Bellevue. This integration allows for continual interaction between psychology interns and medical residents and fellows. Specialty areas include Dentistry, Endodontia, Infectious Disease, Medicine, Neurosurgery, Oncology/Hematology, Ophthalmology, Otolaryngology, Pathology, Periodontia, Pharmacy, Physical Medicine and Rehabilitation, Prosthodontia, Psychiatry, Pulmonary Disease, Radiology, Cardiac Surgery, General Surgery, Maxillo-facial Surgery, Oral Surgery, Orthopedic Surgery, Plastic Surgery, Thoracic Surgery, and Urology.

Inpatient and outpatient services are available to both male and female veterans. While many veterans seen are adult males, a significant and increasing number of female veterans are seen as well. We serve a demographically diverse population, ranging in age from young adults to geriatric patients, and representing a variety of racial, ethnic, and cultural backgrounds. Our population presents with a broad range of clinical problems and psychopathology. Patients include veterans who have served during World War II, the Korean War, the Vietnam War, the Persian Gulf War, and most recently, those returning from duty in Iraq and Afghanistan. We also provide care for veterans who have served during peacetime, and, under some circumstances, for veterans' spouses and their families as an adjunct to the veteran's treatment.

The Medical Center operates a medical library that is fully available to interns. The library contains a good selection of medical, psychological, and psychiatric books, journals, and audio-visual materials. A computerized bibliographic database (including PsychInfo and Medline) and an extensive selection of full-text electronic journals are available free of charge. In addition, the library participates in a comprehensive interlibrary loan system, providing any book or photocopies of journal articles not available on site.

## **PSYCHOLOGY DIVISION**

Sixteen clinical psychologists form the Psychology Division of the Mental Health Service. Psychology is actively involved with the hospital's inpatient Psychiatry units and with inpatient medical units including Medicine, Surgery, Neurology, Palliative Care, and Physical Medicine and Rehabilitation. Staff psychologists provide services to outpatients via the Mental Health Clinic, the Posttraumatic Stress Disorder Clinic, and the Psychosocial Rehabilitation Program, and through various medical clinics including Oncology/Hematology, the Primary Care Clinic, the Geriatric Clinic, Infectious Disease, Pain Management, Renal Dialysis, and Urology. In addition to psychodiagnostic and psychotherapeutic skills, members of our staff possess specialized skills in geropsychology, health psychology, neuropsychological assessment, cognitive rehabilitation, and group psychotherapy.

The Psychology Division is housed within the outpatient Mental Health Clinic. The Clinic provides a broad range of psychiatric, psychological, and social work services to our veteran outpatients and includes the Posttraumatic Stress Disorder Clinic and the Psychosocial Rehabilitation Program, among other programs and services. This location affords psychology staff and interns the opportunity to collaborate freely with the full array of mental health professionals. Psychology staff and intern offices contain PCs equipped with word processing, statistical, and other software packages including Internet access and email. All patient records are electronic and progress notes are entered online so that every clinician has easy access to the entire medical record, including remote data from other VA facilities nation-wide.

## THE PSYCHOLOGY TRAINING PROGRAM

### Training Objectives

The Manhattan campus of the VA NY Harbor Healthcare System offers an APA-approved pre-doctoral internship program in Clinical Psychology. This is a full-time (40 hours per week), 2080 hour minimum, 12-month training program which runs from July 1 to June 30 and is open to all qualified doctoral candidates ***who are U.S. citizens from APA-approved clinical or counseling programs.***

As a generalist training program, our primary goal is to teach the basic clinical principles and skills essential to the practice of Clinical Psychology. We endeavor to provide each intern with a broad range of training experiences in assessment, intervention, and consultation with a wide range of patients in medical and mental health settings.

It is expected that by the end of the internship year, through exposure to a rich variety of training settings, supervisors, and consultants, interns will emerge with a demonstrable level of clinical proficiency and professionalism. We are sensitive to the importance of role modeling at this stage of training and follow an apprenticeship training model, providing opportunities for interns to work side by side with supervisors. At the same time, we make every effort to foster each intern's creativity, growth, and autonomy. Interns carry their own cases and participate in interdisciplinary team meetings and peer review presentations along with their supervisors and independently.

Based on our perceptions of ongoing changes in professional practice and our goal to prepare interns for employment in a wide variety of settings, we have designed the internship experience to provide a broad exposure to state-of-the-art clinical roles and skills. In addition to offering advanced training in psychodiagnostics, individual psychotherapy, and group psychotherapy, we offer intensive training in the growing specialty areas of health psychology, trauma, and neuropsychology.

Our supervisory and consulting staff utilize a variety of treatment orientations and approaches, including psychodynamic, psychoanalytic, behavioral, cognitive-behavioral, systems, and eclectic modalities. We feel that exposure to such a diversity of clinical approaches and styles will not only educate and enlighten our interns, but also inspire the development of their own unique professional identities and clinical styles.

Before entering our program, interns should have had practica in individual psychotherapy and have mastered the basic technical skills of administration and scoring of a standard psychological test battery (including Rorschach, TAT, Figure drawings, Bender-Gestalt, and WAIS III). Interns should also have had previous training in test interpretation and the preparation of clinical reports. Given this foundation, interns will receive advanced training in performing in-depth assessment interviews; constructing test batteries to respond to specific diagnostic issues and referral questions; evaluating, integrating, and synthesizing clinical findings; developing formulations and recommendations and communicating these in articulate written and/or oral reports tailored to the referral source.

## **OVERVIEW OF TRAINING PROGRAM**

The internship training program consists of several required components, which are described in greater detail in the following pages.

### **1. Major Rotations**

All interns complete 3 major rotations (4 months each) in:

- Acute Inpatient Psychiatry
- Health Psychology/Primary Care
- Posttraumatic Stress Disorder

### **2. Outpatient Psychotherapy**

These are year-long training assignments. All interns carry outpatients in each of the following treatment modalities: psychodynamic psychotherapy, cognitive-behavioral therapy, and specialized treatment of Posttraumatic Stress Disorder. Interns also co-lead one long-term psychotherapy group with a staff psychologist for the year.

### **3. Assessment**

Interns are assigned testing cases on a rotating basis throughout the training year. Cases focus mainly on neuropsychological assessment. Referrals cover a wide range of neuropsychiatric disorders and emphasize differential diagnosis, assessment of residual functioning, and disposition planning. Interns will have the opportunity to test both inpatients and outpatients, as well as to participate in the interdisciplinary Memory Disorders Clinic.

Interns also conduct psychodiagnostic and personality testing. Over the course of the training year, interns typically conduct three to five psychodiagnostic assessment batteries including projective and objective measures as well as abbreviated diagnostic work-ups, as needed.

### **4. Electives**

Interns may enrich their training experience to meet individual interests and needs. Elective activities include a variety of groups, additional psychotherapy cases, and research.

### **5. Supervision and Didactics**

The various clinical training assignments are enhanced by a diverse program of supervision, seminars, and peer review presentations within the Psychology Division, throughout the VA Medical Center, as well as at neighboring institutions such as Bellevue and NYU Medical Center.

## **MAJOR ROTATIONS:**

### **Acute Inpatient Psychiatry – Dr. Limpert**

The Medical Center houses two locked, co-ed psychiatric units for acutely disturbed patients. Patients represent all of the major diagnostic categories, especially schizophrenia, schizoaffective disorder, bipolar disorder, major depressive disorder, posttraumatic stress disorder, substance abuse, and severe personality disorders, and cover a broad age range. Patients arrive in acute states and often have very little social support. These units serve as training units for NYU School of Medicine psychiatric residents as well as students of other medical and mental health disciplines.

Interns function as primary therapists on the training unit, and carry up to two individual patients at a time. As a primary therapist, the intern shares responsibility for all facets of patient management with a multidisciplinary treatment team. Because stays tend to be brief, patients are seen daily for supportive psychotherapy and treatment planning. Other clinical activities include an initial interview and written admission summary, family consultation, behavioral monitoring, charting, reporting to the team on the patient's progress and medication response, team coordination, and discharge planning. Interns work closely with the attending psychiatrists who provide medical back-up for their cases.

Other clinical responsibilities on the unit include leading community meetings (bi-weekly meetings of all staff and patients) and providing group therapy. Twice a week, interns co-lead a verbal, interpersonally-oriented psychotherapy group along with a psychiatry resident. Interns also attend daily rounds, weekly interdisciplinary team meetings, case conferences, and Psychiatry Grand Rounds at NYU/Bellevue.

By the end of the Acute Inpatient Psychiatry rotation, interns will (1) be able to conduct a thorough diagnostic interview including a mental status exam; (2) develop realistic treatment plans; (3) write timely admission summaries and progress notes documenting assessment and treatment; (4) understand the symptoms and treatment of severe mental illness, including psychopharmacological and supportive therapy interventions; (5) provide crisis intervention; and (6) contribute to an interdisciplinary mental health team by providing information and making recommendations from a psychological perspective.

### **Posttraumatic Stress Disorder – Drs. Hanover, Kramer, and Nicolosi**

The PTSD Clinic consists of a multidisciplinary team (three Psychologists, two Psychiatrists, two Social Workers, one Nurse Practitioner) dedicated to the assessment and treatment of PTSD. Veterans with combat trauma (WWII, Korea, Vietnam, Persian Gulf, Iraq, and Afghanistan) as well as those with a history of military sexual trauma are seen in the PTSD Clinic. Currently serving 650+ veterans, the clinic provides specialized, comprehensive treatment to veterans suffering from PTSD, including pharmacotherapy, individual psychotherapy, and group psychotherapy. Treatment is offered in multiple modalities. Individual psychotherapy modalities include supportive,

psychodynamic, CBT, prolonged imaginal exposure, virtual reality exposure, Seeking Safety (concurrent treatment of PTSD and substance abuse), and motivational interviewing. A variety of groups are also available (supportive, problem-focused, psychoeducational, exposure-based).

On this rotation, interns conduct two intake evaluations per week, attend team meetings, provide short-term individual psychotherapy, and co-lead groups. A number of different psychotherapy groups are available within the PTSD Clinic, including Seeking Safety, Stress Management, Anger Management for PTSD, Operation Enduring Freedom/Operation Iraqi Freedom (OEF/OIF) Support Group, and PTSD/Substance Abuse Group for OEF/OIF veterans.

Upon completion of the PTSD Rotation, interns will (1) know how to conduct a thorough PTSD evaluation; (2) be able to accurately diagnose PTSD and differentiate it from other Axis I diagnoses; (3) understand the symptoms and treatment of PTSD; (4) write concise evaluations and present them to a multidisciplinary treatment team; (5) provide and be familiar with a variety of treatment techniques for PTSD and concurrent Substance Abuse; and (6) make appropriate treatment referrals and recommendations for veterans with Posttraumatic Stress Disorder.

### **Health Psychology/Primary Care – Drs. Egert, Goloff, and Vitti**

This rotation is designed to be an immersion into the practice of health psychology. A cornerstone of the rotation is participation as a treatment team member within the Medical Center's outpatient Primary Care Clinic. Other required activities involve providing individual therapy, group therapy, and traditional health psychology interventions (e.g., modifying unhealthy behaviors, treating symptoms of medical disorders that are amenable to behavioral interventions, and improving adherence to medical regimen).

#### **Primary Care (required)**

The Primary Care model seeks to provide comprehensive health care coordinated by a primary medical provider. Patients receive multidisciplinary consultation and services from a treatment team including providers from Medicine, Nursing, Social Work, Psychology, Psychiatry, and Pharmacy.

Interns serve as core members of the Primary Care treatment team providing consultative services to patients and the team. Interns are actively involved in triaging patients referred for Mental Health services, conducting in-depth psychological intake evaluations, providing psychotherapeutic and/or psychoeducational interventions, and referring patients for additional services, as appropriate. Interns conduct intake evaluations of patients with a wide range of psychiatric, substance use, and medical conditions, including PTSD evaluations of veterans returning from Iraq and Afghanistan. Interns have a small caseload of short-term primary care treatment cases focused on adjustment issues, symptom management, treatment adherence, and substance abuse

### Psychoeducational Groups (required)

Interns co-lead several of psychoeducational groups over the course of the rotation, including Relaxation Training, Smoking Cessation, and Healthy Sleep Class.

### Inpatient Health Psychology (required)

Psychology interns on the Health Psychology rotation follow medical inpatients for short-term psychotherapy, family support, team consultation and/or psychoeducation. Interns follow one patient at a time from either palliative care or the acute inpatient rehabilitation unit.

- *Palliative Care*: The Palliative Care team works with patients who are terminally ill to provide comfort and assist with medical decision making at end of life. Interns become full members of the interdisciplinary consult team which includes a nurse practitioner, physician, social workers, and chaplain in caring for palliative patients. Work with these patients involves general psychiatric diagnostics and intervention, assessing patients' understanding of their medical condition and prognosis as well as patients' thoughts and feelings about dying. Interns act as consultants to the treating medical teams, facilitating understanding of the patient's psychological adjustment and in advocating for palliative interventions.
- *Physical Medicine and Rehabilitation (PM&R)*: The Physical Medicine and Rehabilitation service is an acute inpatient unit for patients with a variety of medical problems including strokes, traumatic brain injury, amputations, neurosurgery, cardiac surgery, and orthopedic surgery. Psychology's role on the rehab unit is to provide psychological evaluation and intervention with patients with acute adjustment issues and more long-standing psychiatric illness. Intervention is short-term and from a variety of intervention perspectives based on the patient's needs. Interventions include cognitive-behavioral therapy, short-term dynamic therapy, relaxation training, stress management and pain management.

### Electives

- *Pain Management Team*: Interns can elect to participate in the Pain Management Team, an interdisciplinary group including Psychology, Neurology, Anesthesiology, Pharmacy, and PM&R that takes a biopsychosocial approach to the management of complex chronic pain conditions such as back conditions, arthritis, and neuropathy. Treatment is often multimodal including medication, physical and occupational therapy, behavioral intervention, and acupuncture. Psychology staff evaluate patients for psychiatric conditions that may impact on the experience of pain and for referring to appropriate services. We also see patients referred for cognitive behavioral interventions aimed at enhancing symptom management and coping skills. Assessment of misuse of pain medication and need for substance abuse treatment are also routinely assessed and referrals are made as needed.

- *Biofeedback*: Interns have the opportunity to treat patients utilizing biofeedback. Biofeedback interventions involve the use of instrumentation to monitor and modify psychophysiological processes relevant to autonomic arousal and muscle tension. Biofeedback is most often used for relaxation and pain management.
- *Other*: Psychological evaluations of dialysis patients including transplant evaluations, evaluations for peritoneal dialysis, and general psychological evaluations for short-term treatment

Upon completion of the Health Psychology Rotation, interns will (1) understand the role of the psychologist in the assessment and treatment of patients who initially present with medical complaints as well as patients with chronic, debilitating, severe, and/or terminal illness; (2) be familiar with research on and practice of state-of-the-art treatments in behavioral medicine; (3) be able to function as an integral member of an interdisciplinary medical team providing psychological input and feedback to that team.

## **OUTPATIENT PSYCHOTHERAPY:**

Over the course of the year, interns will work with outpatients in a number of different treatment modalities. Typically, interns carry at least five psychotherapy cases at one time for short-term and long-term individual therapy. Individual patients are referred from services throughout the Medical Center.

- **Posttraumatic Stress Disorder – Drs. Hanover, Kramer, and Nicolosi**

In addition to the four month major rotation in the PTSD Clinic, interns will carry two long-term PTSD patients for the duration of the year. Interns receive a half-hour of individual supervision per case per week.

- **Psychodynamic Psychotherapy – Drs. Kennedy, Limpert, Miller, and Vitti**

Interns carry two patients for the full training year and have the opportunity to treat a range of both Axis I and Axis II psychopathology. Interns receive a half-hour of individual supervision per case per week.

- **Cognitive-Behavioral Therapy – Dr. Ruhland**

Interns typically carry one CBT patient at a time. Treatment is usually short-term and thus interns are able to treat a number of different cases over the course of the year. Interns attend a weekly group supervision where they have the opportunity to present their own work and participate in clinical discussion of other cases; individual supervision is also provided on an as-needed basis.

- **Group Psychotherapy**

A rich variety of group therapy training experiences are available, including support, psychoeducational, and interpersonal approaches to group work. Each intern will co-lead a long-term psychotherapy group with a staff psychologist for the duration of the training year. Some recent examples of groups open to interns are:

- Alzheimer's Caregivers Support Group
- Gay Men's Support Group
- Life Stages Group
- Sobriety Maintenance Group
- Depression Group

## **ASSESSMENT:**

### **Neuropsychological Testing – Drs. Cercy and Green**

Neuropsychology provides testing and evaluation of patients referred from services throughout the Medical Center, with the majority of referrals coming from Primary Care, Neurology, and Psychiatry. Typical consultations involve evaluation of Alzheimer's disease, vascular dementia, Parkinson's disease, traumatic brain injury, stroke, neoplasm, hydrocephalus, multiple sclerosis, HIV-related dementia and other neurological disorders and infectious diseases. Referrals may involve such questions as differential diagnosis of schizophrenia-spectrum and major affective disorders from primary neurodegenerative processes, evaluation of cognitive impairment associated with medical illness such as diabetes and obstructive sleep apnea, and diagnosis of adult residual attention deficit hyperactivity disorder and learning disabilities. Evaluations focus primarily on outpatient assessments, but inpatient consultations are available to interns who demonstrate an interest in such patients.

Interns will gain training and experience performing neuropsychological evaluations using a hypothesis driven assessment approach and in the provision of feedback and psychoeducation to veterans and their families. Interns will also have plentiful opportunities to attend departmental case conferences, rounds, and seminars on site and at Bellevue Hospital.

For six months of the year, interns conduct comprehensive outpatient assessments. For the other six months, interns participate in the Memory Disorders Clinic. This clinic is a weekly multidisciplinary service consisting of providers in Neurology, Neuropsychology, Psychiatry, Geriatrics, and Social and provides comprehensive evaluation and management of patients with suspected or known disorders of cognition. Interns conduct one evaluation per week, which involves a brief screening of cognition, emotion, and adaptive functioning. Interns then present their findings in the context of the multidisciplinary team meeting. Referrals for future comprehensive neuropsychological evaluation and other aspects of patient management are made as determined by the integrated multidisciplinary findings.

### **Psychodiagnostic Testing – Drs. Kramer, Limpert, Miller, and Vitti**

Interns typically conduct three to five psychodiagnostic assessment batteries over the course of the year. Tests administered include projective and objective personality measures (e.g., Rorschach, TAT, Bender-Gestalt, Figure Drawings, PAI, MMPI-2). Referral questions include differential diagnosis, functional assessment, and disposition planning. Referrals may be from the acute inpatient unit or from outpatient services. Individual supervision is provided on each case with the goal of producing comprehensive, integrated test reports, as well as sharpening skills in interviewing, testing, and diagnostic formulation.

## **ELECTIVES:**

Our internship program enjoys the advantage of being situated within a full service Medical Center. This allows us to offer a wide range of clinical experiences to round out an intern's training program. While time does not permit the pursuit of all available activities, interns may choose from a number of additional training opportunities. It is important to note that elective choices will inevitably vary each year. Particular programs may not be available in a given year while new opportunities are always being created.

On each of the major rotations, there is the possibility of expanding the interns' clinical activities in particular areas of interest. Similarly, interns may elect to increase their outpatient caseload in a specific treatment modality. Interns may also elect to conduct additional therapy groups. Recent examples of groups offered by psychology staff and interns include Pain Management, Hepatitis-C Support Group, Insomnia Treatment Group, Women's Stress Management Group, and Creative Arts Group.

Interns may participate in ongoing research or initiate their own investigations at the Medical Center. A number of our interns have completed dissertations at the VA. Interns may use VA patients as subjects (with approval from the Medical Center's Research Committee) or may pursue their own research interests and populations. The Medical Center Library is available with a full range of research support services. Examples of research conducted by Psychology and Psychiatry staff include investigation of AIDS-related dementia, neuropsychological sequelae of cardiac surgery, visual memory, ADHD, right hemispheric processing, and outcome research in PTSD and in chronic pain treatment.

Finally, interns are encouraged to consider creating an elective tailored to their interests. All efforts will be made to accommodate individual training needs when possible.

## **SUPERVISION AND DIDACTICS:**

### **Supervision**

At the Manhattan VA, supervision is seen as a powerful vehicle for promoting professional and personal growth. In keeping with an apprenticeship model, interns work closely with each of their supervisors, gaining independence as each training experience progresses. All psychology staff participate in the internship and thus interns have the opportunity for supervision in a variety of modalities (e.g., psychodynamic, psychoanalytic, interpersonal, cognitive-behavioral, behavioral, systems, and eclectic).

Interns receive daily informal supervision on their major rotations, along with at least one hour weekly formal individual supervision for the rotation. Both individual and group supervision is provided for outpatient psychotherapy cases. There are numerous opportunities for interns to present their work at case conferences throughout the year. All psychology staff maintain an open door policy and interns are free to request additional supervision/consultation at any time.

### **Training Seminars**

Our seminar program is an integral part of internship training. There are two regularly scheduled intern seminars each week. Seminars consist of lectures, case presentations, and patient interviews, and are taught by Psychology Division staff and consultants from within the Medical Center and from other settings. Intern training seminars provide a rich and varied sampling from different facets of the field.

As an essential part of the intern seminar program, interns have many opportunities to present their work and to practice skills in order to receive feedback and direct instruction. Toward this end, interns participate in live diagnostic and mental status interviewing. They also present therapy and psychodiagnostic cases, and are encouraged to present their research or other areas of expertise.

Regular topics in the seminar series include clinical interviewing, psychodiagnostic testing, Axis I psychopathology, character pathology, group psychotherapy, health psychology, PTSD, and neuropsychology. Seminars on each of these topics are conducted on an ongoing, monthly basis. In addition, other special topics are presented over the course of the year. Recent seminar subjects have included ethical issues, women's health psychology, cognitive-behavioral treatment for PTSD, forensic psychology, suicide assessment and prevention, disaster relief mental health, military sexual trauma, diagnosis and treatment of substance abuse, motivational interviewing, health disparities, neuroanatomy, and psychopharmacology.

In addition to our own seminar program there are a multitude of additional seminar and grand rounds offerings available within the Medical Center and at NYU/Bellevue. Interns are encouraged to attend these seminars when their schedules permit.

## **EVALUATION OF INTERNS AND SUPERVISORS**

Interns' work is evaluated for each major rotation, outpatient therapy cases, assessment, group psychotherapy, and any elective activities. Evaluations are accomplished by means of structured forms based on expected performance standards for the pre-doctoral level of training in the following areas: clinical work, adherence to administrative standards (timeliness of charting, responding to consults, etc.), ethics, and preparation for supervision. Informal bi-directional feedback is actively encouraged as part of the ongoing supervisory process. Formal meetings between interns and supervisors are held in conjunction with the evaluation process. Intern-Training Director meetings are held at mid-year and end-of-year, and also on an as needed basis to provide an additional forum for feedback in both directions.

A brief verbal evaluation is completed by rotation supervisors at the midpoint of each rotation for the purpose of reassessing training goals and identifying areas of strength as well as areas for improvement. Supervisors formally evaluate interns at the end of each major rotation. These forms are discussed and then signed by the intern, supervisor, and Director of Training. Copies are sent to the student's Director of Training at his/her university as progress reports and are included in the intern's permanent file with the Psychology Division.

Supervisors of year-long assignments, such as group or outpatient individual therapy and assessment, evaluate interns after six months and at year's end. Near the end of the training year, interns will submit a portfolio containing samples of their work, including intakes, psychotherapy notes and summaries, assessments, etc. This portfolio is a performance-based measure that allows each intern to demonstrate his/her mastery of the skills necessary for successful completion of the internship.

Interns are asked to complete written evaluations of their supervisors at the end points of each rotation and training assignment. Interns also complete overall evaluations of the internship as a whole at the end of the year.

## **INTERNSHIP AGREEMENT**

Interns are expected to complete a minimum 2080 hour, 12-month pre-doctoral internship from July 1 to June 30. Within this framework, interns may take up to 13 days leave for vacation and up to 13 days sick leave, in addition to 10 Federal holidays. Requests for educational leave are granted for participation in conferences, conventions, or for dissertation-related meetings at the intern's university.

The Veterans Administration internship stipend is \$25,024 per annum and is considered by the Internal Revenue Service as taxable income. Health care benefits are available. A routine physical examination is provided upon employment, as is on-site emergency health care.

## INTERNSHIP QUALIFICATIONS

The NY VA Medical Center sponsors five internship positions each year. The following are prerequisites for application to the internship:

- United States citizenship
- Matriculation at an APA-approved Clinical or Counseling doctoral psychology program
- Completion of all coursework
- Practicum training in psychotherapy and psychodiagnostic assessment (including basic proficiency in the administration and interpretation of both cognitive and projective instruments (WAIS-III, Rorschach, TAT, Bender-Gestalt, and Figure Drawings))

According to VA policy, training can be given only to students who are U.S. citizens and are enrolled in APA-accredited doctoral programs in clinical or counseling psychology. In addition, we require that a prospective intern's university advisor or director of training verify that he or she approves and recommends that the student receive an internship at this facility as verified on the APPIC "Academic Program's Verification of Internship Eligibility and Readiness" form. Only full-time, year-long internships are available. We do not currently offer part-time or unpaid internships.

The VA New York Harbor Health Care System Psychology Division follows all federal guidelines regarding non-discriminatory hiring practices and we encourage minority and physically challenged candidates to apply. We strictly abide by the APPIC Uniform Notification Procedures. The APPIC guidelines can be accessed on the APPIC Web site:

<http://www.appic.org>.

**Please Note:** Before being accepted for employment in the VA system, all potential employees, including interns, must pass a pre-employment physical examination and a background check. These will be performed after Match day, but before the beginning of the internship. Applicants who match to our program but do not successfully pass the physical and/or background investigation will be dismissed from the internship (see APPIC Match Policy 4a). No intern has ever been refused employment as a result of the physical exam or the background check, but several have had difficulty, in all cases either because of past legal problems or significant medical problems they chose not to reveal during the application process. The background check includes an FBI name check, fingerprint check, written inquiries to previous employers and references listed on the application for employment, and verification of educational degrees. The pre-employment physical includes a PPD screening, bloodwork, and drug-testing.

## APPLICATION PROCEDURE

To apply for our internship program, please follow the steps detailed below. Our mailing address and telephone are as follows:

**Christie Limpert, Ph.D.**  
**Director of Training**  
**Psychology Division (11M)**  
**2<sup>nd</sup> Floor, Clinical Addition, Room 2674**  
**Department of Veterans Affairs**  
**NY Harbor Healthcare System**  
**423 East 23rd Street**  
**New York, New York 10010**

**Phone (212) 686-7500 Ext. 7698**  
**Fax (212) 951-6357**  
**Email: [Christie.Limpert@med.va.gov](mailto:Christie.Limpert@med.va.gov)**

Our APPIC Matching Program Code Number is **148011**.

**1. Please include the following materials in your application packet.**

- Completed APPIC standardized application form, available on APPIC homepage ([www.appic.org](http://www.appic.org)), including Verification of Internship Eligibility and Readiness
- Supplementary application (see following page of this brochure)
- Curriculum vita
- A psychodiagnostic testing report that includes objective and projective personality measures
- Official transcript from each graduate psychology program
- Three letters of recommendation (at least one from a practicum supervisor)

**2. *PLEASE NOTE: ALL APPLICATION MATERIALS SHOULD BE SUBMITTED AS SOON AS POSSIBLE FOR GREATEST FLEXIBILITY IN SCHEDULING AN INTERVIEW.***

***ALL APPLICATIONS ARE DUE BY NOVEMBER 15.***

- 3. Please wait to hear from us regarding an appointment for a group orientation and individual interview.** The entire process takes place in one visit in either a full morning or afternoon. Interviews are held on designated days between mid-December and late January. We regret that we are unable to interview all applicants.
- 4.** We will participate in the APPIC Internship Matching Program and will abide by the Match Policies enumerated on the APPIC Web site: [www.appic.org](http://www.appic.org). Please be sure to register for the program.

## **SUPPLEMENTARY APPLICATION**

Please answer the following question on a separate sheet of paper and include it with your application packet.

***Write a brief synopsis of a psychotherapy case. Please address why this case was particularly meaningful to you.***

Please submit an original essay, rather than a treatment summary you may have previously prepared. Please do not exceed 500 words.

## **APPENDIX A**

### **NEW YORK VA MEDICAL CENTER PSYCHOLOGY DIVISION STAFF**

Steven Cercy, Ph.D., Southern Illinois University

Neuropsychologist

Clinical Assistant Professor, NYU School of Medicine, Department of Psychiatry

Clinical activities: Neuropsychological assessment

Research interests: Cognition in macular degeneration; development and validation of cognitive screening measures; development and validation of cognitive assessment measures in low vision; dissimulated cognitive impairment; Lewy Body disease

Corey Chen, Ph.D., University of North Carolina

Clinical Psychologist/Geropsychologist, Home-based Primary Care

Clinical activities: Evaluation, brief psychotherapy, psychoeducation, and psychological and neuropsychological testing with home-bound veterans and family members.

Research interests: Dementia, depression, and caregiving of older adults; treatment interventions for older adults and caregivers.

Jennifer Egert, Ph.D., Duke University

Clinical Health Psychologist; VISN Coordinator for Psychological Palliative Care Services

Clinical Assistant Professor, NYU School of Medicine, Department of Psychiatry

Clinical activities: Assessment and treatment of problems related to medical illness, disability, and loss; cognitive-behavioral individual and group interventions

Research interests: Adjustment to chronic illness and disability; issues related to death, dying, and bereavement; pain management

Marc Goloff, Ph.D., ABPP, New York University

Clinical Psychologist; Director of Psychological Services in Primary Care

Clinical Instructor, NYU School of Medicine, Department of Psychiatry

Clinical activities: Evaluation and short-term cognitive behavioral therapy for primary care and pain management patients; use of specialized interventions such as biofeedback and hypnosis

Research interests: Psychological aspects of chronic pain

Susan Green, Psy.D., ABPP-CN, Yeshiva University

Clinical Neuropsychologist

Instructor, NYU School of Medicine, Department of Psychiatry

Clinical activities: Neuropsychological assessment

Research interests: Neuropsychological sequelae of cardiac surgery; Alzheimer's Disease

Ronald E. Hanover, Ph.D., Syracuse University

Clinical Psychologist; Director of Psychological Services in PTSD Clinic

Clinical activities: Individual and group treatment of PTSD

## **NEW YORK VA MEDICAL CENTER PSYCHOLOGY DIVISION STAFF (con't)**

Wendy Katz, Ph.D., Teachers College, Columbia University  
Counseling Psychologist; Coordinator of OEF/OIF Mental Health/Readjustment Services  
Clinical activities: Assessment and treatment of combat veterans returning from Iraq and Afghanistan; preventative health interventions; outreach services  
Research interests: Resilience; PTSD; Alzheimer's' Disease; pain management

Janet K. Kennedy, Ph.D., New York University  
Clinical Psychologist; Assistant Director, Mental Health Clinic  
Clinical Assistant Professor, NYU School of Medicine, Department of Psychiatry  
Clinical activities: Assessment and treatment of mood disturbance and adjustment difficulties due to medical problems; preventative health interventions; individual and group psychotherapy  
Research interests: Relationship conflict patterns; efficacy of behavioral interventions in the context of medical care.

Michael Kramer, Ph.D., Long Island University  
Clinical Psychologist  
Clinical activities: Cognitive behavioral, Virtual Reality, and exposure therapy for PTSD; CBT for anxiety-spectrum disorders; psychodiagnostic assessment  
Research interests: Resiliency to trauma in combat veterans and disaster relief workers; heat exposure in the treatment of PTSD and hyperarousal symptoms; the effectiveness of peer mentorship in the treatment of chronic substance abuse.

Christie Limpert, Ph.D., New York University  
Clinical Psychologist; Director of Training  
Clinical Assistant Professor, NYU School of Medicine, Department of Psychiatry  
Clinical activities: Psychodynamic psychotherapy; interpersonal group psychotherapy; psychodiagnostic testing; treatment of severe mental illness  
Research interests: The role of insight in schizophrenia; phenomenology and significance of delusions

Abigail S. Miller, Psy.D., Yeshiva University  
Clinical Psychologist; Geropsychologist  
Clinical activities: Geropsychological and psychodiagnostic assessments; psychodynamic individual and group therapy for patients and caregivers  
Research interests: Narcissism, envy, and self-esteem; Alzheimer's disease; vascular dementias

C. Matthew Nichols, Ph.D., Fordham University  
Counseling Psychologist, Suicide Prevention Coordinator  
Clinical activities: Assessment, identification, and intervention with veterans at risk for suicide/parasuicide  
Research interests: suicidal and self-injurious behavior; coping behaviors of patients and family members with psychiatric and medical illness; assessment and treatment of prodromal states of schizophrenia and psychotic illness



## **NEW YORK VA MEDICAL CENTER PSYCHOLOGY DIVISION STAFF (con't)**

Jessica B. Nicolosi, Psy.D., Argosy University/Phoenix

Clinical Psychologist

Clinical activities: Assessment and treatment of combat trauma, sexual trauma, and substance abuse; adjustment of returning combat veterans; diversity and cultural issues; cognitive behavioral, interpersonal, and group psychotherapy

Research interests: Program development and evaluation, factors related to resiliency or vulnerability in combat and sexual trauma, treatment of chronic substance abuse

David Ruhland, Ph.D., ABPP, University of Michigan

Clinical Psychologist; Director of Psychology; Assistant ACOS for Mental Health, New York Harbor Healthcare System

Adjunct Associate Professor, Department of Psychology, New York University; Clinical Assistant Professor, NYU School of Medicine, Department of Psychiatry

Clinical activities: Cognitive behavioral therapy and supervision

Research interests: Relationship of personality variables to psychological and medical problems

Elizabeth Salick, Psy.D., Yeshiva University

Clinical Psychologist

Clinical activities: Compensation and pension evaluations; outpatient psychotherapy; health interventions for diabetes and weight management

Research Interests: Medical trauma; adjustment to and coping with chronic illness

Susan Vitti, Ph.D., Derner Institute at Adelphi University

Clinical Psychologist

Clinical Activities: Assessment and treatment of substance abuse disorders; preventative health interventions; individual and group psychotherapy; motivational enhancement therapy

Research interests: Alcohol and substance abuse disorders; trauma; brief psychotherapy interventions

## **APPENDIX B**

### **PSYCHOLOGY TRAINING PROGRAM CONSULTANTS**

Consultants to our program provide ongoing supervision to interns in their areas of expertise.

Lenard Adler, M.D., Emory University School of Medicine  
Attending Psychiatrist, Unit Chief (17N), NYVA Mental Health Service  
Associate Professor of Psychiatry and Neurology, NYU School of Medicine  
Psychopharmacology, Attention-Deficit Disorder

Danika Altman, Ph.D., Temple University  
Independent Practice  
Etiology and treatment of Axis II pathology

Sarah Brazaitis, Ph.D., Teachers College, Columbia University  
Associate Professor of Psychology & Education, Department of Organization & Leadership,  
Columbia University  
Racial identity, group dynamics and group relations

Brian Bronson, M.D., New York University School of Medicine  
Director of Consultation and Liaison Psychiatry Services, NYVA Mental Health Service  
Clinical Assistant Professor of Psychiatry, New York University School of Medicine  
Consultation-Liaison Psychiatry

Robert Delgado, M.D., New York University School of Medicine  
Attending Psychiatrist (17N), NYVA Mental Health Service  
Clinical Assistant Professor of Psychiatry, New York University School of Medicine  
General adult psychiatry, psychopharmacology, psychotherapy

Marion Eakin, M.D., Harvard Medical School  
Director, Outpatient Psychiatry, NYVA Mental Health Service  
Clinical Assistant Professor of Psychiatry, New York University School of Medicine  
Post Traumatic Stress Disorder, Military Sexual Trauma, Attention-Deficit Disorder

Grace Hennessy, M.D., Tufts University School of Medicine  
Director, Substance Abuse Recovery Program (SARP)  
Co-occurring substance use and psychiatric disorders, pharmacologic treatments for  
substance use disorders

## **PSYCHOLOGY TRAINING PROGRAM CONSULTANTS (con't)**

Ira Jasser, M.D., SUNY Downstate Medical Center College of Medicine  
Attending Psychiatrist, Mental Health Clinic, NYVA Mental Health Service  
Clinical Instructor of Psychiatry, New York University School of Medicine  
Psychopharmacology, Organic brain syndrome

Donald L. Schuman, Ph.D., ABPP, Yeshiva University  
Independent Practice  
Clinical Assistant Professor, NYU School of Medicine  
Psychodiagnostic assessment, clinical interviewing

Arthur Sinkman, M.D., University of Pittsburg School of Medicine  
Attending Psychiatrist (17N), NYVA Mental Health Service  
Clinical Associate Professor of Psychiatry, New York University School of Medicine  
Psychodynamic theory

John Tatarakis, R.N., M.S., M.P.H., Columbia University  
Patient Care Team Coordinator, Psychiatric Mental Health Clinical Nurse Specialist,  
Psychiatry Service, NYVA Mental Health Service  
Adjunct Clinical Instructor, Borough of Manhattan Community College, CUNY  
Inpatient psychiatry, group psychotherapy

Kathlene Tracy, Ph.D., New School for Social Research  
Director of NIDA CTN-NY Node Training  
Director of Community Research & Prevention Program (CRPP)  
Assistant Professor of Psychiatry, New York University School of Medicine  
Community interventions for psychiatric and substance abuse disorders