



**VA New York Harbor Healthcare System  
Brooklyn Campus  
Psychology Division (116B)  
800 Poly Place, Brooklyn, NY 11209**

Dear Psychology Internship Applicant:

We are pleased that you are interested in applying to the Psychology Internship Training Program at the Department of Veteran Affairs Brooklyn Campus of the VA New York Harbor Healthcare System. Our Internship Program adheres to APPIC Guidelines and we participate in the computer-matching program regarding intern selection. Please review the following information closely, particularly the application procedures and the criteria for selection. As you already know, the internship application can be obtained from the Internet web site at [www.appic.org](http://www.appic.org). You will also need to complete our application addendum available along with our internship brochure at: <http://www.va.gov/visns/visn03/psychinterns.asp> or you can access our site through <http://www.avapl.org>. Please submit all of the information requested in the application package. All application materials should be returned to us by mail NO LATER THAN November 15, 2004. Mail the applications and materials to:

**Judith E. Patterson, Ph.D.**  
**Chief of Psychology and Director of Training**  
**VA NY Harbor Healthcare System Brooklyn Campus**  
**Dept. of Veteran Affairs**  
**Psychology Division (116B)**  
**800 Poly Place Rm. 16-205**  
**Brooklyn, NY 11209**

Should you have any further questions about the internship-training program, please feel free to contact us, or leave a message with Ms. Diana La Vita at 718-630-3758.

Sincerely,

**Judith E. Patterson, Ph.D.**  
Chief of Psychology and Director of Training  
[judith.patterson@med.va.gov](mailto:judith.patterson@med.va.gov)

and

**Wayne Ayers, Ph.D.**  
Assistant Director of Training  
718-836-6600, ext. 1393  
[wayne.ayers@med.va.gov](mailto:wayne.ayers@med.va.gov)

## **APPLICATION PROCEDURE FOR PSYCHOLOGY INTERNSHIP PROGRAM**

The procedure is devised to screen for competent applicants and to assure equal opportunity and access to all applicants.

1. Applications are solicited and received by the Training Directors. Interviews are scheduled through the Training Directors.
2. The application materials consist of: APPIC Application with VA Supplement, Curriculum Vitae, graduate transcripts, three letters of recommendation, a case summary, and a psychological evaluation .
3. A personal interview with a staff psychologist is generally required of each applicant. Special arrangements for a telephone interview will be made in cases where travel is prohibitive.
4. The Training Committee reviews applicants. Based on the interviews and a review of application materials, applicants are ranked in order of preference and the Rank Order List is then submitted to APPIC Internship Matching Program.
5. In the screening of potential applicants the VA policies of equal opportunity and Affirmative Action are followed. Applications from minority applicants are encouraged.

## **ADMISSION PROCEDURE**

Applicants are screened based on VA policy and APPIC guidelines.

1. Applicants must be enrolled in an APA approved doctoral program in clinical or counseling psychology and must be a citizen of the United States. Postdoctoral applicants who are in the process of changing specialties must be certified by a Director Of Graduate Professional Training as having participated in an organized program in which the equivalent of pre-internship preparation (didactic and field experience appropriate to the applied area) has been acquired.
2. Applicants should have completed course work in individual intelligence testing and projective techniques and have 800 hours of supervised practice and/or relevant experience.

**DEPARTMENT OF VETERANS AFFAIRS BROOKLYN CAMPUS  
PSYCHOLOGY INTERNSHIP APPLICATION ADDENDUM 2004/2005**

NAME: \_\_\_\_\_  
UNIVERSITY: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
PROGRAM: \_\_\_\_\_  
DIRECTOR: \_\_\_\_\_  
DIRECTOR'S ADDRESS: \_\_\_\_\_  
DIRECTOR'S TEL# \_\_\_\_\_  
PHONES:(H) \_\_\_\_\_ (OFFICE) \_\_\_\_\_  
U.S. CITIZEN: YES \_\_\_ NO \_\_\_  
(OTHER) \_\_\_\_\_  
APA APRVD PRGM: YES \_\_\_ NO \_\_\_  
SOC.SEC.# \_\_\_\_\_

Please discuss the following statement (feel free to draw on your experience):

*A therapist's personal therapy experience has an impact on one's efficacy at providing psychotherapy.*

(Use additional paper if necessary.)

**APPLICATION CHECKLIST  
IN ORDER TO BE CONSIDERED AN APPLICANT YOU MUST SEND THE FOLLOWING IN A  
COMPLETED PACKAGE:**

1. APPIC Application
2. The VA NYHHS Brooklyn Campus Psychology Internship Application Addendum.
3. Graduate Transcripts
4. Curriculum Vita
5. Case Summary
6. Psychological Evaluation
7. Three letters of reference

**MAIL APPLICATION AND ALL MATERIALS TO:**

JUDITH E. PATTERSON, Ph.D.  
CHIEF OF PSYCHOLOGY AND TRAINING  
VA NY Harbor Healthcare System Brooklyn Campus  
Dept. of Veteran Affairs  
Psychology Division (116B)  
800 Poly Place - Rm. 16-205  
Brooklyn, NY 11209

## **INTRODUCTION**

The Psychology Division of the VA NY Harbor Healthcare System, Brooklyn Campus offers internships in Clinical Psychology that are fully accredited by the American Psychological Association (APA). APA is located at 750 First Street NE, Washington DC 20002 and can be contacted by phone (202) 336-5500 or their Web site [www.apa.org](http://www.apa.org). The Internship is full time with 40 hours per week of clinical work, supervision and seminars. Interns work 12 months, September through August. Applicants must be citizens of the United States and come from an APA approved program in Clinical or Counseling Psychology. The program adheres to the guidelines established by the American Association of Psychology Internship Centers. Applicants must be certified by their university to be ready for an internship. Applicants should have completed course work in individual intelligence testing and projective techniques and have 800 hours of supervised practica and/or relevant field experience. The Psychology Division does not discriminate against applicants based on sex, race, religion, ethnic background, or sexual orientation. The Psychology Division functions as an integral part of the Mental Health Service within the VA facilities. Staff members' backgrounds and training vary greatly and include: psychodynamic, interpersonal, cognitive-behavioral and post-doctoral institute training. Supervision is intense and frequent, emphasizing professional growth and self-development. A program of clinical and didactic seminars, as well as a required weekly process group accompanies supervision for interns. As an inner city Medical Center, there is an interesting and diversified patient population of male and female veterans, their spouses and occasionally children. There are a variety programs, such as Brief Psychiatric Treatment Unit and Mental Health Intensive Outpatient Service, a post-traumatic stress disorder program, drug and alcohol programs, Day Hospital, Mental Hygiene Outpatient Clinic, Primary Care, Oncology, and other specialized settings, e.g. Hepatitis-C clinic. There is a full service professional library that offers literature searches and locates difficult to find articles. Extensive computerization offers a full menu of psychological assessment tools that are available to the intern. There is an Exercise Center, free of charge, a few steps from the interns' offices. There is also a daycare center on the medical center grounds. The Medical Center is located in a beautiful setting, and there is a spectacular view of New York Harbor and the Verrazano-Narrows Bridge. There is fine dining in Bay Ridge, with many ethnic restaurants and specialty shops. The VA NY Harbor Healthcare System Brooklyn Campus is accessible by car, subway, railroad or bus from Manhattan, Long Island or the Bronx. It is easily accessible from New Jersey and from Staten Island. Free parking is available within the medical center complex.

## **THE PSYCHOLOGY DIVISION**

The Psychology Division functions in an integrated multiple facility medical center which includes the hospital, an extended care facility and an outpatient clinic. The Chief of Psychology heads the Service. A Training Committee coordinates the internship program. The committee is composed of the Directors of Training, and staff psychologists. Interns serve in an advisory capacity, meeting on a timely basis with the Directors and/or the Training Committee. The Training Committee is responsible for the selection, assignment, and evaluation of interns and the training program. Should it become necessary, there is a formal due process procedure for issues that cannot be worked out through daily working relationships or the regular Training Committee. The procedures are available in the Training Policy and Procedure Manual. The Psychology Division serves the entire Medical Center, providing psychological consultation and clinical services to the Psychiatry, Substance Abuse, General Medicine, Primary Care, Surgery and Rehabilitation Medicine Departments. The staff consists of Doctoral level clinical and counseling psychologists.

## **PROGRAM PHILOSOPHY AND TRAINING MODEL**

It is the philosophy of the training staff of the Brooklyn VA New York Harbor Healthcare System that interns be trained as generalists through immersion in clinical work and careful supervision. We define our model as the Practitioner Model. The Practitioner Model focuses on the development of clinical skills that prepare interns to function successfully in treating patients with a variety of psychological problems in both mental health and medical settings, and in a competitive healthcare marketplace.

**We believe that interns should be trained in multiple roles that prepare them for entry level practice.** These roles should include clinical excellence informed by scholarly inquiry, consultation, education, professional and ethical identifications and beginning supervisory abilities. Instruction and supervisory experiences consistently emphasize the importance of scholarly inquiry. In addition to the various clinical experiences that highlight the integration of science and practice, interns have valuable exposure to on-going program development and scientific investigations being conducted by medical center personnel. For example, since 1997 our interns have played a key role in the Hepatitis C project where patients are being treated in an innovative multidisciplinary program that includes the assessment of mood disorders and levels of psychological distress as crucial components of the treatment regimen. Interns have assisted in conducting literature reviews, and collecting and analyzing data. The findings of these investigations have been presented at scholarly meetings and will be submitted for publication in scientific journals. Interns have had the opportunity to see first hand how scientific data reciprocally influences clinical practice. In another setting, interns in our Primary Care Clinic have been key players in the annual mental health assessment of veterans. To this end they have been involved in reviewing research data and selecting appropriate clinical instruments for this purpose. They have worked in collaboration with staff psychologists in collecting and analyzing this data for program development and assessment.

**We believe that preparation as a practitioner also involves an appreciation of the need for continuing professional and personal development.** By this we mean that thinking as a psychologist is practiced so that it defines and underlies all of the work. Thus, interns learn to apply and integrate knowledge of current clinical practices informed by scientific knowledge. Interns then combine this knowledge with systematic collection of information about patients. Concurrently, they engage in an exploration of their own responses to the clinical experience. Intense supervision is a key element in this process. We believe that experiential learning is the primary way interns develop both professionally and personally. Through intense supervision we encourage students to reflect on their experience and translate this awareness into clinical approaches.

**We believe that practitioners should be able to adapt to the changing healthcare delivery system and to changes in the competitive marketplace.** During the past year the medical center decided to close the acute inpatient unit because of fiscal concerns. This development will undoubtedly influence the type of training experiences to which our interns will be exposed. However, as the healthcare field has undergone rapid change over the last few years, we are committed to integrating psychological care into the changing marketplace. With the help of our intern staff, we were able to maintain our commitment to the treatment of veterans who suffer from more serious psychiatric disorders. Interns and staff developed a program of Intensive Psychological Services where veterans at risk of psychiatric decompensation are assessed and treated. New learning experiences have been stimulated by these developments and our training program has been influenced accordingly. We have also been able to intensify our services in other sectors in the Medical Center, including Primary Care, the Hepatitis C Project, and Oncology. In large part these changes have brought about an increase in the interdisciplinary collaborations among diverse members of the professional staff. Interns have the opportunity to observe the need for flexibility and resourcefulness in a changing healthcare environment. This past year interns have participated as presenters in the Medical Center's important 12 week Education of Practitioners in End of Life Care. Therefore, Interns are encouraged to participate in many of these experiences and are afforded the opportunity to develop their professional skills under the supervision of the training staff.

**At the same time, we believe that educational, clinical and supervisory experiences should be organized as to provide an in-depth experience.** It is the philosophy of the program that concentration in selected clinical areas is preferable to many superficial experiences. As a result, we change rotations only every six months, so that students can get to know patients and staff and function independently in the areas to which they are assigned.

**We believe that psychological health includes an integrative understanding of the relationships between biological, psychological and social dimensions.** We challenge interns to focus on these dimensions whether they work in traditional mental health settings or in medical and primary care areas. Interns work with interdisciplinary teams and with medical students/residents to share perspectives in an integrated approach.

**We believe that training experiences should take into account the stage of development that each intern has mastered and the degree of complexity and level of autonomy that is appropriate.** Interns are provided with more intense and specific supervision earlier in their experience and gradually are expected to take on more complex functions and to do so with increased autonomy. For example, in the professional issues seminar, they are initially given detailed guidance in areas such as record keeping, initiating patient contact and how staffs function. Later, more complex issues such as ethics and maintaining a professional identity are explored in more depth. In group therapy supervision, areas such as patient selection and maintaining group boundaries are emphasized early on, and interns are expected to create their own groups by the end of the year. The program also offers a unique feature. Towards the end of the internship, interns have been provided with the opportunity to supervise our extern trainees (first and second year doctoral psychology students). As numbers permit, we will continue this practice. We believe this experience prepares them for what they will be expected to do soon after graduation. Our evaluation forms have been designed to monitor not only intern functioning, but assess the complexity and autonomy levels they have attained.

The Psychology Training Program is committed to supporting the overall mission of the Department of Veteran Affairs (DVA), which seeks to provide quality healthcare to veterans by offering a full range of services that is readily accessible and responsive to change. Like the DVA, we value excellence, communication and teamwork, and encourage our interns to be respectful and compassionate of the rights and needs of our veteran population. Our program differs from other training programs in the Medical Center in that it places a primary emphasis on understanding the role that psychological factors play in the treatment of veterans and delivery of healthcare services. Psychologists are expected to bring not only their professional expertise to the clinical work, but also to incorporate psychological principles to program development, research ventures, and other collaborative activities within the medical center setting.

#### TRAINING PROGRAM

The program of training is designed to train interns as generalists through immersion in clinical work and careful supervision. Interns undertake two half-year rotations with major and minor training assignments for each rotation. The program provides excellent and intensive experience and supervision in both inpatient and outpatient experiences, group therapy, substance abuse, post-traumatic stress, and primary care, geriatrics and pain. An evaluation of each person's background is considered in making training assignments with a view toward developing and broadening the intern's skills. Major rotations are offered in a variety of specialties that are listed in the next section. Two major half-year rotations are required of all interns. Rotations may include acute mental health intensive services, primary care, oncology, outpatient clinic, PTSD program, Day Hospital, and substance abuse programs. The training staff makes final determination of the rotation choice. Each intern also receives training and experience in providing couples therapy throughout the year. It is the philosophy of the program that in-depth concentration in selected clinical areas is preferable to many superficial experiences.

#### PSYCHOLOGY INTERNSHIP TRAINING PROGRAM MODEL AND GOALS

Our internship-training program has established the following as the goals we expect our students to achieve. We believe that these goals represent the core characteristics necessary for an individual who is about to embark on a career in professional psychology. We define our model as the Practitioner Model. The Practitioner Model focuses on the development of clinical skills that prepare interns to function successfully in treating patients with a variety of psychological problems in both mental health and medical settings, and in a competitive healthcare

marketplace. Our goals include the acquisition of professional skills in the areas of psychological assessment, psychological treatment in clinical settings, and the development of beginning skills in leadership, management, consultation, education and supervision. We also strive to have interns develop appreciation for individual differences, and for each individual's capacity for change. Our goal is to produce psychologists who are open and flexible and who have a firm sense of professional identity.

### **Training Activities**

We enrich the learning experience through a program of seminars and group learning experiences that are led by competent staff and consultants. In addition, we provide a weekly process group for our interns. This unique feature of the program helps create cohesion among the interns and gives them the opportunity to work through issues that arise among them or as a consequence of their work. Interns describe this as one of the most valued parts of their experience and as such we have made it a requirement of our program.

Rotations are generally six months in length. Possible rotations are: Intensive Psychological Services, which includes the Brief Psychiatric Inpatient Unit (BTU) and the Mental Health Intensive Outpatient Service (MHIOS); Primary Care; Oncology, including palliative care; Geriatrics; Hepatitis C Clinic; and Pain Management Clinic. Other rotations can include part-time experiences in all of the above plus other specialty areas such as PTSD, the Women Veterans Healthcare Program, and the Ambulatory Substance Abuse Program (ASAP). The training staff makes the final determination of the rotation choice in which interns participate. Treatment takes the form of individual, group and couples/family therapy. During the last few years' new settings have been added to the rotation schedule to enhance the experience of interns. We consider that these areas are excellent training opportunities and give the interns a breadth of experience that should make them more marketable upon graduation.

Interns are provided with a diverse range of training activities including clinical work with patients, didactic instruction, clinical supervision, participation in research projects and mentoring. In each type of activity experiential learning is emphasized. Attention is given to the sequence and complexity of the learning tasks and interns are guided through their experience, adjusting for level of ability and expertise. Rotations are designed to extend over a six-month period so that more in depth experience can be attained. A description of the clinical rotations that are available is listed below.

### **Possible Clinical Rotations**

**Intensive Psychological Services: Brief Psychiatric Treatment Unit (BTU)/Mental Health Intensive Outpatient Treatment Service:** There are two programs that are designed to provide more intensive, crisis-oriented services for veterans who are experiencing acute psychiatric distress. The BTU is a four-bed inpatient unit where patients who are in acute distress are provided with brief, focused treatment. The MHIOS is designed for patients who do not meet the criteria for admission to the hospital but who require urgent and immediate care to address their significant distress. Assessment and treatment are provided in an ongoing format, including both individual and group psychotherapy. The targeted length of this program is two weeks. In both programs, interns have the opportunity to contribute their expertise to a patient's treatment plan. They learn to accurately diagnose and treat patients in acute distress and to identify referral options for continued care. Assuring proper treatment and referral requires a good deal of interaction between the intern and the members of the inpatient and outpatient teams. This team approach provides interns with opportunities to compare differing and overlapping ways of understanding and treating people. It also exposes interns to a wide variety of patients who are experiencing severe difficulties in living. The focus is on individual, short-term psychotherapy training, stressing the patient-therapist relationship and the therapist's participation in the therapy process. Training opportunities include: group, individual therapy, psychological assessment (including testing, peer consultation, and interviewing skills), treatment planning, crisis intervention and report writing.

### **Oncology**

The Psychology Division participates as a full member of the interdisciplinary treatment teams on both inpatient and outpatient oncology units. Psychologists and psychology interns provide psychological assessment, psychological intervention, psychoeducation and consultative services to patients and the treatment team. Additional services include screening and assessment of psychological disorders amongst oncology patients. These can be directly related to their medical condition or indicative of preexisting psychopathology. Another important role of psychology involves psychotherapeutic work with patients and their families to assist them with the emotional impact of their medical illness. This type of work is generally multifaceted. That is, the psychology intern often helps the patient and/or family work through end-of-life and bereavement issues in conjunction with supportive interventions aimed at shoring up coping mechanisms and improving family and marital relationships.

### **Geropsychology**

This rotation is designed to provide interns with specialized training with regard to psychological assessment and treatment of geriatric patients. Students have an opportunity to work in a variety of inpatient and outpatient settings that provide mental health and medical care to older veterans. Students work with team members in the Geriatric Oncology Program, the St. Alban's Extended Care Facility, and in the Primary Care Geriatric Program. The geriatric rotation includes opportunities for interns to interview patients with medical students and then process their observations with a psychologist supervisor. At the St. Albans Extended Care Facility, interns have the opportunity to work with both inpatients and outpatients and in specialized programs, such as the Day Program and the Dementia Unit. Interns gain competency in understanding the unique needs of this population including identification of the characteristics of organic impairment. Interns become aware of the interaction of emotional and social issues with illness. Psychosocial issues that effect this population such as, loss, retirement and lifestyle transitions are emphasized.

### **Post Traumatic Stress Disorder (PTSD) Unit**

The PTSD unit is an outpatient program providing treatment services to veterans with problems related to post-traumatic combat stress. Emphasis is placed on the psychology interns role and contribution in an interdisciplinary setting. The team on the unit is composed of a psychiatrist, psychologist, nurse and social workers. Individual, group and family treatment are provided for PTSD and related issues such as substance abuse and depression. Interns have the opportunity to provide long-term individual therapy. Other training opportunities include: psychological assessment, treatment planning, crisis intervention and report writing.

### **Primary Care Clinic**

This program is an innovative, highly integrated system of healthcare that is designed to provide comprehensive services to veterans at the point at which they first seek assistance for medical services. Primary Care covers a range of services including, initial assessment, health promotion, disease prevention, urgent services, management of acute and chronic biopsychosocial conditions and referral for specialty treatment and rehabilitation. Interns participate as core members of the interdisciplinary team providing psychological assessment, psychological intervention, psychoeducation, and consultative services to patients and to the treatment team. They are responsible for: 1) assessment and treatment of psychological conditions; 2) assessment and evaluation of psychological factors which contribute to the etiology, maintenance and/or exacerbation of acute and chronic medical or mental conditions and 3) education of patients as to the interaction of psychological factors with their medical condition and the effect of their behavior on their health.

The Primary Care model places special emphasis on the mind/body interface and on accessibility to health services in an integrated system. As such it affords the intern the opportunity to work in close collaboration with other providers and to promote psychological services as a standard part of routine health care.

### **Women's Health Program Clinic**

This is a Primary Care based program especially designed to address the health care needs of women veterans. Interns are provided with the opportunity to perform psychological evaluations and time-limited treatment and work in collaboration with other medical professionals. Wide ranges of clinical issues are addressed. These include stress reactions, adjusting to chronic illness, depressive syndromes and other anxiety-related conditions.

### **Substance Abuse Treatment**

This program involves both inpatient and outpatient treatment of substance abuse. It also utilizes a variety of psychological and biological treatment modalities. Through treatment the addicted patient not only begins to gain insights into his/her emotional-behavioral deficiencies and excesses, but also must adapt him/herself to the social limits of the community. There is opportunity to provide psychological assessment through testing, interviewing or observation. Also, interns serve as therapists for outpatient MICA groups, recovery groups, and they have an opportunity to provide substance abuse treatment in their other rotations. All interns are expected to gain a basic knowledge of the major effects of a variety of intoxicants upon the physical, emotional, and behavioral aspects of human functioning.

### **Hepatitis C Clinic**

Interns have the opportunity to work in a highly integrated health care delivery program. In this rotation interns learn to perform in-depth psychological evaluations to help medical specialists determine Interferon/Riboviron appropriateness in patients infected with the Hepatitis-C virus. They may also provide time-limited psychological treatment to veterans who are diagnosed with Hepatitis-C and who may be at a higher risk for developing depression or anxiety while on the treatment protocol. Interns will also gain experience leading a Hepatitis-C support group for patients who are experiencing significant stress related to both diagnosis and/or treatment side effects, as well as have the opportunity to perform liver transplantation evaluations.

### **Pain Management Clinic**

In this rotation interns will have the opportunity to work with a multidisciplinary clinic providing short-term, focused individual and group therapy to patients suffering from both acute and chronic pain conditions. Interns will gain an understanding of the mind-body connection regarding treatment of patient's with chronic pain. The psychology intern screens all patients in the pain clinic in order to provide greater insight into the biopsychosocial etiology and impact of the patient's pain.

### **Day Hospital Program**

The Day Hospital Program is typically a four-month, five-days per week milieu therapy program serving veterans of all ages with a wide range of emotional and adjustment problems. The treatment team consists of a psychologist, social worker, recreation therapist, nurse clinical specialist, and psychiatrist. An intern in the Day Treatment Program can expect to share in duties and responsibilities as a member of the interdisciplinary treatment team. These include: initial screenings, sponsorship of individual patients, individual psychotherapy, co-therapy in one or more group modalities, psychological testing, team consultation, and a staff relations group. Interns in the program are encouraged to work out their own level of involvement with the program patients and staff, and to discover and develop all aspects of themselves that can be applied therapeutically in a vibrant and active treatment community.

### **Experiential Learning**

As noted in the descriptions above, interns have considerable opportunity to participate in and influence clinical programming and delivery of services to our veteran population. In each rotation experience, they are considered as full members of the team and respect for them as professionals is expected and encouraged. Access to supervisors is readily available and interns frequently present cases in a group format so that styles and orientations can be compared and explored. Interns attend psychology meetings and conferences with other

members of the staff so that they can observe how systems function, and they gain exposure to the perspective those psychologists contribute to an issue or topic.

There are opportunities for mentoring and role modeling. Interns work side-by-side with staff psychologists on research projects or in collaborative activities on treatment teams. For the last four years, trainees have been critically involved in the Hepatitis C Project. This project was designed to provide veterans with an innovative treatment strategy involving the use of interferon. This medication can have significant psychological side effects, primarily depression. Interns conduct an evaluation clinic for Hepatitis C patients to determine who may be at risk for depression or other mental health disorders. Our interns and externs take part in ongoing clinical research that is part of their clinical experience. Over the past few years, students working in the Hepatitis C Clinic have been involved in a number of funded research projects.

Interns are encouraged to implement new programming. Most recently an intern was an integral participant in the development of the Mental Health Intensive Outpatient Service. When the Psychiatric Inpatient Unit was scheduled for closure, the intern working on the unit collaborated with the staff psychologist to help delineate psychological services that could be offered to patients at risk for hospitalization. Intensive treatment interventions were designed and strategies for referring patients to the program were developed and disseminated. Interns have helped develop the Women's Program and have introduced a Caregivers Support Group and Pain Management Group.

Interns have frequent opportunity for consultative guidance. They meet weekly in didactic instruction with the psychodiagnostics consultant and the couples therapy consultant and bi-monthly with the consultant who supervises case presentations. In addition, there are many other consultants who work with students in the areas of PTSD, multicultural issues and group process. Intern representatives serve on the training committee and attendance at weekly Mental Health Grand Rounds is required. One of the unique aspects of our training program has been the provision of an Intern Process Group. This group experience has been described as one of the most valuable experiences in the program and has been a standard offering in the program for over 15 years. An outside consulting psychologist facilitates this group, and it affords the interns an opportunity to grapple with issues, concerns, and questions about themselves as psychologists and to receive constructive feedback using the group dynamic experience.

### **Supervision**

Careful supervision is a central component of the program. The program is well known for the excellent quality of the supervision and for the concern that professional staff have for the personal and professional development of interns.

Supervision is intense. Interns receive at least one hour of individual supervision per week from both their primary and secondary supervisors. In addition, there are other weekly supervision seminars on couples therapy, psycho-diagnostics, group therapy, and a process group. Bi-weekly there are seminars in professional issues, and case supervision. Other planned seminars focus on multicultural issues, PTSD, time-limited therapy, trauma and dissociation and psychopharmacology.

Supervision is the central focus and strength of our training program. It is an integrated and complementary approach where each element - individual, group, process sessions and seminars - fit together into a unified, well thought out process. Beginning with the interview process at the time of application we concentrate on getting a sense of who the intern is and how flexible they are with themselves and how open they are to learning. During the interview, we attempt to give the prospective interns an experience of what supervision will be like and what the rotation experiences may entail. We believe we succeed in this. We are consistently told that the quality and intensity of the supervision came across clearly in the interviews and the quality of supervision was considered a main strength of the program. We receive comments like: "I was impressed with the amount of supervision and the amount of peer interaction. It was clear that the

interns feel challenged, but supported." "You take care in getting to know applicants and conducting a meaningful, genuine, humane interview. You place emphasis on personal/professional growth and show a genuine concern for interns." "I was so impressed by the staff, the work, the atmosphere, the bay view (perks) that I nearly 'forgot' my interest in neuropsychology." "I can honestly say that the interview was unforgettable because I felt that you had no preconceived notions of me and let me present myself. I heard myself and thought about it later." "You recognize the importance of diversity; I was impressed by your emphasis on the supervision experience as an extremely vital component of the training experience". As interns progress through the program, they give similar reports of their supervision experiences.

### **Professional Issues: Research and Practice**

Regularly scheduled seminars are conducted for the interns so that current concepts and practices in psychology are examined and explored. Our Consultant staff bring their practical experience to their presentations. In addition, our interns have joined other area interns in specialized learning opportunities that emphasize various theoretical orientations and treatment strategies. For example, they have been to a day long seminar given by Albert Ellis on Rational Emotive Therapy, have attended a day long seminar on psychodrama and have participated in the seminars given by the VISN 3 Mental Illness Research and Education Center. Weekly Grand Rounds presentations cover diverse topics in the mental health field. Recognized psychologists from the metropolitan area frequently present new and innovative theories and clinical reports dealing with important issues facing psychologists in clinical settings. A six-month seminar is designed to address professional issues, including a review of the ethical code for psychologists, professional standards of care and professional practice issues.

### **Psychodiagnostic Testing**

During the year interns are expected to complete, as a minimum: (a) four psychodiagnostic batteries and reports and (b) six assessments of patients based on interviews and partial testing, if necessary. The content of the battery will be determined in consultation with the supervisor and will depend on the referring question and the intern's training needs.

### **Computer Access**

Personal Computers: Interns are given access to Personal Computers that are equipped with software to perform word processing, data analysis, electronic mail systems, Internet access, and the hospital-wide record keeping system, CPRS.

### **The Psychology Seminar Series**

Throughout the training year we conduct a seminar series covering areas such as multicultural issues, psychopharmacology, post-traumatic stress disorder, ethical and professional issues, sexual issues between therapist and patient with ethical considerations, alcohol rehabilitation, death and dying issues, trauma and dissociation, short term therapy and cognitive behavioral therapy. Consultants from the New York area's rich pool of universities and post-doctoral training programs conduct psychology seminars that include seminars emphasizing both psychotherapy and assessment. Projective tests, structured personality, intelligence, neuropsychological, and vocational evaluations are covered in the assessment seminars. Many consultants hold seminars on a weekly basis so that a group can develop an open atmosphere conducive to learning. Several consultants focus on ethnicity, including the range of multicultural issues that characterize the experience of our diverse veteran population. Staff provides seminars in diagnostics, professional issues, group supervision and psychotherapy interviewing. A weekly process group for interns, facilitated by an outside consulting psychologist, is an important part of our training program. Very few internships in the New York area offer this unique experience. The group provides an opportunity for interns to grapple with issues, concerns, and questions about themselves as psychologists and to receive feedback. The group has been part of our program for over 15 years, and has been described by interns as one of the most valuable experiences of the program.

## **Other Supervision and Seminars**

Professional staff and consultants provide the following seminars for interns:

### **Supervision**

Issues in Geropsychology: 1 ½ hrs/week Donna Waters, Ph.D.  
Case Presentation/Mindfulness Training: (1 ½ hrs every other week) Phil Morse, Ph.D.  
Psychodiagnostics: 1 ½ hrs./week, Donna Waters, Ph.D.  
Process Group: 1 ½ hrs/week, Suzanne Schulman, Ph.D.  
Couples Therapy Seminars: 1 hr/week - Jill Allen, Ph.D  
Group Supervision: 1 ½ hrs/week - Paul Rhindress, Ph.D.

### **Seminars**

PTSD Treatment seminar: Paul C. Liebman, Psy.D.  
Psychopharmacology: Bennett Cohen, MD  
Crisis Intervention: Paul Rhindress, Ph.D.  
Issues of Culture & Ethnicity: Dolores Morris, Ph.D.  
Clinical Aspects of Pain Management: Eric Sessions, MD  
Oncology Seminar: Carol Luhrs, MD  
Medical Ethics: Alice Beal and Robert Moran, MD  
Multicultural Perspectives: William Bracero, Ph.D.  
Substance Abuse: Jerome Carroll, Ph.D.  
Cognitive Behavioral Therapy: Robert Katz, Ph.D.  
Evidence Based Treatments—  
    a. Short Term Dynamic Psychotherapy: Paul Liebman, Psy.D  
    b. Introduction to Dialectical Behavior Therapy: Wayne Ayers, Ph.D.  
Professional Issues in Psychology: Judith Patterson, Ph.D.; Paul Liebman, Psy.D.; Paul Rhindress, Ph.D.; Daniel Feld, Psy.D.,

### **Training Term, Stipend & Benefits**

The internship is a full-time commitment for one year, beginning about Labor Day and ending just prior to that holiday on the following year. Interns are entitled to 10 federal holidays and earn sick leave and vacation days at a rate of 4 hours per two-week pay period. Unused sick leave may be used in future federal employment; however, unused vacation days will lapse and therefore must be used within the year. Limited authorized leave may be approved for attendance at conferences and workshops or to complete activities required by your university. The internship is generally limited to a 40-hour workweek, and interns usually do not take work home. For this year (2004-2005) the VA headquarters has notified us that we received six full time internship positions. The current stipend is \$18,750 per year. State and federal income tax and FICA (Social Security) are withheld from intern's checks. The United States Government covers interns for malpractice under the Federal Tort Claims Act. The VA also provides a benefits package of Federal health insurance programs.

## **THINKING DURING INTERNSHIP**

While practicing psychotherapy during internship, interns apply many definitions of psychotherapy in order to broaden their technique and deepen their understanding of their practices. Interns learn to work with violent, suicidal and chronic patients, as well as those in the incipient stages of psychosis. With these and other types of patients, questions are pursued in the effort to define, differentiate and consolidate the intern's identity as a psychologist and as a person. During the training experience interns and supervisors pursue the central questions that each psychologist must seek to define, and then re-define, for him or herself. These questions may take a lifetime pursuit.

### **BASIC QUESTIONS ARE ASKED, SUCH AS:**

What is psychotherapy? How does it compare with psychoanalysis? How do the various schools of psychoanalysis differ? What are the differences between various psychotherapies?

### **PRAGMATIC QUESTIONS ARE ASKED, LIKE:**

How does one earn a living in this field?

What issues should a clinician be concerned with when doing psychotherapy within a hospital setting, a clinic or a private practice?

What are the goals of psychotherapy compared to other related fields?

How important is the patient's history in psychotherapy?

What happens if you work without history and concentrate on the present experience between patient and therapist?

How can the therapist learn to reconstruct the patient's past from the transference-countertransference phenomena? How important are the "shared moments" of honesty?

What are some of the definitions and uses of transference, counter-transference, resistance, counter-resistance, anxiety, awareness, insight?

What is "Change"? How does psychotherapy produce it?

What are the main questions to ask a patient in order to organize the patient's material?

### **PARADOXICAL PHENOMENA IN PSYCHOTHERAPY ARE EXPLORED, FOR EXAMPLE:**

Why is it when a therapist tries to "help" a patient, she/he will fail?

Why is supportive therapy NOT psychotherapy?

What are the advantages of treating diagnostic symptoms as if they are "failed solutions," not problems?

How is it that therapists' mistakes and errors are useful to the patient?

Why is it important for a psychotherapist to establish a therapeutic frame?

How is it useful to think about anxiety as being the absence of knowledge?

When a therapist asks a patient detailed questions about the "story" of his life, how is it that the patient's anxiety increases and transference and resistance are set into motion?

When is "going" with patient's resistance a therapeutic goal?

### **EXPLANATION OF THE MEANING AND PROCESS OF THERAPY IS A CENTRAL PURSUIT, AS EXEMPLIFIED IN THE FOLLOWING:**

As Graham Greene, the novelist, said when asked why he wrote his autobiography, "I wrote it for the same reason I write novels--to create some kind of order out of Chaos."

As a VA supervisor once said, "This is not a bad definition of psychotherapy".

Erich Fromm said: "Therapy is a wrestling match," while someone else, said it's more like two people sitting in a room trying to tell the truth.

## **PSYCHOLOGY STAFF**

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## **DIRECTIONS TO BROOKLYN CAMPUS OF THE VA NY HARBOR HEALTHCARE SYSTEM**

### **By Subway:** From Manhattan or Coney Island:

"N" train to 8th Avenue stop; #70 bus to Veterans Administration Medical Center. Or "B" train to t Street. Transfer to "R" train to 95th Street; #8 bus to Veterans Administration Medical Center. Or "B" of "F" train to 18th Avenue; #8 bus to Veterans Administration Medical Center.

### **By Auto: From Long Island:**

Belt Parkway to Exit 4 (14th Avenue--Bay 8th Street)- proceed to light and make a left; at the next light make a left, continue around golf course and the Medical Center will be on your left.

### **By Auto: From Manhattan:**

Brooklyn Bridge of Battery Tunnel to Brooklyn Queens Expressway (BQE) - once on the BQE follow signs to Verrazano Narrows Bridge which will lead you into BQE extension; exit 92nd Street (last exit before bridge); at light make a left (over parkway) to 7th Avenue; make a right and continue around to golf course to the Medical Center.

### **By Auto: From Staten Island:**

Verrazano Narrows Bridge to 92nd Street exit (1st exit); at light make a right turn; proceed to 7th Avenue; make a right a continue around the golf course to the Medical Center.