
Department of Psychiatry
University of California, San Diego

Co-Directors
Sandra Brown, Ph.D., ABPP
Amy Jak, Ph.D.

UC San Diego Health
VA San Diego Healthcare System
Rady Children’s Hospital
Dear Prospective Applicant,

Thank you for your interest in the UCSD/VA Psychology Internship Training Program. In the following pages, you will find detailed information about our internship, including clinical training, didactic experiences, research opportunities, our faculty, and application instructions.

Our program is based on the scientist-practitioner model. As such, we seek competitive applicants interested and experienced in both research and clinical practice, particularly those interested in academic careers. Clinical training and didactic experiences integrate cutting-edge evidence-based techniques with a foundation of established empirically-supported treatments and assessment. We also recognize the importance of diversity represented by our trainees and faculty, as well as in our patients. We encourage those of diverse backgrounds, in all the many ways that diversity is defined, to apply to our program.

Our full-time internship has been accredited by APA since 1986. For the 2017-2018 year, interns paid by the VA will earn an annual stipend of $26,193 and interns paid by UCSD will earn an annual stipend of $28,744. Our competitive benefits, both for UCSD and for the VA, include health insurance, paid leave days, and paid holidays.

In accordance with regulations established by the federal government, certain criteria have to be met by applicants who are interested in applying to those Positions within our internship that are exclusively housed within the VA. Please see Section 2 for a list of the all-VA Positions. The criteria for applicants are as follows:

1. U.S. citizenship. The VA is unable to consider applications from anyone who is not currently a U.S. citizen. Verification of citizenship is required following selection. All interns must complete a Certification of Citizenship in the United States prior to the start of training within the VA.
2. U.S. citizens who are completing APA- or CPA-accredited doctoral programs are eligible for appointment for VA Psychology Doctoral Internships.
3. Male applicants born after 12/31/1959 must have registered for the draft by age 26 to be eligible for any US government employment, including selection as a paid VA trainee. Male applicants must sign a pre-appointment Certification Statement for Selective Service Registration before they can be processed into a training program. Exceptions can be granted only by the US Office of Personnel Management; exceptions are very rarely granted.
4. Interns are subject to fingerprinting and background checks. Match result and selection decisions are contingent on passing these screens.
5. The VA conducts drug screening exams on randomly selected personnel as well as new employees. Interns are not required to be tested prior to beginning work, but once on staff they are subject to random selection for testing as are other employees.
6. To comply with federal and VA rules and provide interns with liability protection, a current and valid Affiliation Agreement between the VA and the sponsoring
doctoral program must be on file before an intern can be appointed. While most APA-approved doctoral programs already have an agreement on file, it is important that you confirm with your doctoral program, before application, that a valid affiliation agreement has been established. More information is available at: http://www.va.gov/oaa/agreements.asp (see section on psychology internships).

Those applicants applying for Positions housed exclusively within UCSD must also meet employment criteria. Please see Section 2 for a list of all-UCSD Positions. Those criteria are:

1. Interns are subject to fingerprinting and background checks and drug screening exams. Individuals with convictions related to job duties are at particular risk of not passing the background check. Individuals with a positive drug screen will undergo further review by the Medical Review Office. Match result and selection decisions are contingent on passing these screens.
2. Interns must pass a physical exam and show proof of TB testing. Positive TB tests undergo further review by the Center for Occupational and Environmental Medicine to determine the course of action.

Each of our 19 Positions is comprised of two half-time year-long placements. Inside our brochure, you will find a list of these 19 Positions and the placements associated with them, as well as detailed descriptions of each placement and the supervising faculty. Please note that 12 Positions are all-VA, i.e., each half of the rotation is a clinic located with the VA, and 7 positions are all-UCSD, i.e, each half of the rotation is a clinic located within UCSD. Placement combinations are fixed and cannot be changed from what is listed here.

While you do not have to have extensive experience in both placements of the Position(s) you rank, we do value goodness-of-fit with at least one of the placements within a given Position when selecting applicants for interviews. All applications must be submitted via the APPIC portal. While the portal permits applicants to choose Positions of interest, please clearly indicate in your cover letter no more than three Positions for which you would like to be considered.

Application Procedures
The internship year begins on July 1, 2018. The application deadline is November 1, 2017. By December 15 a select number of applicants will be invited for a full day of interviews scheduled for January 8 through January 12. Serious candidates are strongly encouraged to visit San Diego if selected for an interview. Applicants who are unable to schedule a personal interview may be interviewed by phone or video conference (e.g., Skype) when possible.

Applicants will complete and submit the AAPI Online to internship programs of interest. The AAPI can be completed at http://www.appic.org. In addition, the usual application packet (cover letter, CV, letters of recommendation, DCT verification of AAPI, graduate transcripts) will all be submitted through the online application portal.
Applicants are asked to rank order **up to three Positions** that define their primary interests and for which they wish to apply (see Appendix D for the list of Positions). **Please clearly list this rank order in your cover letter.**

If you have questions about the application procedures, please call or email our Internship Coordinator, Audrey Bascom:

- **Phone:** (858) 552-8585 x2565
- **Email:** pinternship@ucsd.edu

For more information, please see our website at: [http://psychiatry.ucsd.edu/education/Programs/Pages/psychology-internship.aspx](http://psychiatry.ucsd.edu/education/Programs/Pages/psychology-internship.aspx) or feel free to contact us with questions. We wish you luck in the application process!

Sincerely,

Drs. Sandra Brown and Amy Jak
Co-Directors, UCSD/VA Psychology Internship Training Program
Tel: (858) 552-8585 x2565 Email: pinternship@ucsd.edu
Internship Program Admissions
Date Program Tables are updated: August 2017

Briefly describe in narrative form important information to assist potential applicants in assessing their likely fit with your program. This description must be consistent with the program’s policies on intern selection and practicum and academic preparation requirements:

Our internship program trains doctoral candidates to function as autonomous psychologists in health care settings that place a strong emphasis on teaching and research, using the Boulder, scientist-practitioner model. As such, we attempt to recruit students with balanced experiences in both clinical and research domains rather than students with a predominantly clinical professional focus. The majority of our Interns develop careers that include a research component.

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

<table>
<thead>
<tr>
<th>Service</th>
<th>Required</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Direct Contact Intervention Hours</td>
<td>N</td>
<td></td>
</tr>
<tr>
<td>Total Direct Contact Assessment Hours</td>
<td>N</td>
<td></td>
</tr>
</tbody>
</table>

Describe any other required minimum criteria used to screen applicants:

Interns are expected to have completed at least three years of doctoral study before beginning the internship year, including at least 1,000 clinical practicum hours; applicants must be on track to complete this requirement. Applicants should also have proposed their dissertation before applying to this internship. Only students who have completed their department’s practicum requirements and whose department indicates that the student is ready for a doctoral internship should apply. Only applicants from APA or CPA-approved doctoral programs in clinical or counseling psychology will be considered.

Financial and Other Benefit Support for Upcoming Training Year*

<table>
<thead>
<tr>
<th>Benefit</th>
<th>Amount</th>
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</thead>
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<tr>
<td>Annual Stipend/Salary for Full-time Interns</td>
<td>$26193-28744</td>
</tr>
<tr>
<td>Annual Stipend/Salary for Half-time Interns</td>
<td>N/A</td>
</tr>
<tr>
<td>Program provides access to medical insurance for intern?</td>
<td>Yes</td>
</tr>
<tr>
<td>If access to medical insurance is provided:</td>
<td>Yes</td>
</tr>
<tr>
<td>Trainee contribution to cost required?</td>
<td>Yes</td>
</tr>
<tr>
<td>Coverage of family member(s) available?</td>
<td>Yes</td>
</tr>
<tr>
<td>Coverage of legally married partner available?</td>
<td>Yes</td>
</tr>
<tr>
<td>Coverage of domestic partner available?</td>
<td>Yes</td>
</tr>
<tr>
<td>Hours of Annual Paid Personal Time Off (PTO and/or Vacation)</td>
<td>13-20</td>
</tr>
<tr>
<td>Hours of Annual Paid Sick Leave</td>
<td>0-13</td>
</tr>
<tr>
<td>In the event of medical conditions and/or family needs that require extended leave, does the program allow reasonable unpaid leave to interns/residents in excess of personal time off and sick leave?</td>
<td>Yes</td>
</tr>
</tbody>
</table>

Other Benefits (please describe): please see our brochure for full benefits/leave policies
Initial Post-Internship Positions
(Provide an Aggregated Tally for the Preceding 3 Cohorts)

<table>
<thead>
<tr>
<th>Setting</th>
<th>PD</th>
<th>EP</th>
</tr>
</thead>
<tbody>
<tr>
<td>Community mental health center</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Federally qualified health center</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Independent primary care facility/clinic</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>University counseling center</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Veterans Affairs medical center</td>
<td>8</td>
<td>7</td>
</tr>
<tr>
<td>Military health center</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>Academic health center</td>
<td>5</td>
<td>4</td>
</tr>
<tr>
<td>Other medical center or hospital</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>Psychiatric hospital</td>
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<td>0</td>
</tr>
<tr>
<td>Academic university/department</td>
<td>17</td>
<td>5</td>
</tr>
<tr>
<td>Community college or other teaching setting</td>
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<td>0</td>
</tr>
<tr>
<td>Independent research institution</td>
<td>2</td>
<td>0</td>
</tr>
<tr>
<td>Correctional facility</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>School district/system</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Independent practice setting</td>
<td>0</td>
<td>6</td>
</tr>
<tr>
<td>Not currently employed</td>
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<td>0</td>
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<tr>
<td>Changed to another field</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Other</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>Unknown</td>
<td>0</td>
<td>1</td>
</tr>
</tbody>
</table>

Note: “PD” = Post-doctoral residency position; “EP” = Employed Position. Each individual represented in this table should be counted only one time. For former trainees working in more than one setting, select the setting that represents their primary position.
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SECTION 1: OVERVIEW

The UCSD/VA Psychology Internship is a collaboration between the UCSD Department of Psychiatry, the VA San Diego Healthcare System (VASDHS) Psychology Service, UC San Diego Health, and Rady Children's Hospital. We offer a 12-month, full-time (2080 hours), APA-approved pre-doctoral internship in clinical psychology. The program begins each year on July 1. Our program trains doctoral candidates to function as autonomous professionals in a variety of health care settings, with particular emphasis on the role of the psychologist in a sophisticated university-affiliated teaching and research hospital, adult or child outpatient, and inpatient child and adolescent psychiatric settings.

Our Internship emphasizes the Boulder, Scientist-practitioner model of training in psychology and, as such, seeks applicants who desire research-oriented academic careers and have demonstrated experience in research. There are approximately 40 licensed psychologists who serve as supervisors for the Internship, most of whom have ongoing research programs in addition to their clinical work. We especially seek to recruit a diverse internship class as a reflection of our strong commitment to achievement of excellence and diversity among our faculty, staff, and trainees. We are, therefore, interested in applicants who are committed to the highest standards of scholarship and professional activities, and to the development of a climate that supports equality and diversity.

The Internship is comprised of 19 Positions, each of which includes at least two, year-long placements (see Section 2). Applicants may apply to up to 3 Positions and are requested to list their Positions of interest in their cover letters.

Our Faculty

Nearly all of our primary supervisors in the UCSD/VA Psychology Internship Program have academic appointments in the University of California, San Diego Department of Psychiatry (or are in progress), and many hold joint appointments with the VA San Diego Healthcare System. Section 5 lists a brief bio for each of the approximately 40 doctoral level psychologists who serve as Internship Supervisors. Psychologists in all settings are engaged in and are rewarded for patient care, professional training, and clinical research or program evaluation. Collectively, the faculty has many ongoing research grants and has published a great number of articles, books, and book chapters.

Objectives, Goals and Core Competencies

We aim to facilitate the development of competent professional psychologists who are ready to assume the responsibilities of an entry level doctoral psychologist position. Our internship training is directed toward developing core professional competencies, as follows:

(1) Assessment and Diagnosis: Competency in conducting clinical interview-based assessment and in administering and interpreting basic psychological tests in the areas of intellectual assessment, basic cognitive assessment, and personality assessment; familiarity with the prevailing diagnostic procedures, e.g., ability to assign appropriate diagnoses to individual patients; ability to communicate findings and recommendations orally and in writing in a clear and concise manner.

(2) Intervention and Treatment: Competency in conducting individual and group counseling/psychotherapy across a variety of problems and populations; familiarity with empirical findings concerning the efficacy of psychotherapy; an understanding and knowledge of empirically supported therapeutic approaches for specific mental disorders.
(3) Supervision: Familiarity with and understanding of methods and theories of supervision; Competency in supervising other trainees under the supervision of members of the psychology faculty.

(4) Professional values, attitudes and behaviors: Demonstration of sound professional clinical judgment and behavior in the application of assessment and intervention procedures with individuals; timely completion of work, on-time attendance at required meetings, sessions, seminars, supervision, etc.

(5) Ethical and Legal Standards: familiarity with and understanding of professional and legal standards in professional psychology; a thorough working understanding of APA ethical standards, understanding of and adherence to one’s scope of practice; patient risk management and confidentiality.

(6) Individual and Cultural Diversity: Demonstration of understanding of and sensitivity to human diversity issues in the practice of psychology; familiarity with empirical findings pertaining to diversity issues in assessment and diagnosis, tests and measurement, psychopathology, interventions and treatment; awareness of one’s own cultural and ethnic background and its impact on therapeutic relationships.

(7) Research/Scholarly Inquiry and Application of Scientific Knowledge: Demonstration of understanding and knowledge of strategies of scholarly inquiry; awareness of current empirical studies in major professional practice journals; competency in reviewing and integrating relevant scholarly literature to assist in clinical problem solving; independent ability to critically evaluate and disseminate research (e.g., case conference, scientific conference presentation, and/or publication), locally, regionally, or nationally.

(8) Consultation and Interprofessional/interdisciplinary skills: demonstration of ability to facilitate patient care or exchange of scientific, psychological, or professional information within an interdisciplinary team or professional setting.

(9) Communication and interpersonal skills: demonstration of both professional and interpersonal communication skills.

Clinical Activities
The internship is designed to offer a broad range of experiences to develop these core professional competencies. Interns have a shared responsibility in designing and planning the internship experience in collaboration with their primary supervisors, Program Co-Directors, and the Psychology Internship Training Committee (PITC). This process is intended to ensure that the intern’s training plan is integrated with the intern’s overall graduate or professional school training plan, and that the internship provides a coherent progression from the basic knowledge and practical clinical skill competencies achieved in the academic program to the core practice competencies that are to be acquired in the internship. The 12-month training year begins with an Orientation Week in which interns receive a thorough introduction to their assigned training sites and discuss their previous training and career goals with their faculty supervisors. They then jointly develop individualized training plans for the remainder of the year.

Opportunities for the interns range from diagnostic evaluations and neuropsychological assessments to brief crisis oriented therapy to individual and group evidenced-based psychotherapy. Training is available in a variety of therapeutic modalities, including individual, marital, family, and group. Our program emphasizes evidence-based treatments, and supervision is available in many.
psychotherapies, including cognitive-behavioral interventions, motivational interviewing, several trauma focused interventions (e.g., Prolonged Exposure, Cognitive Processing Therapy) and third wave interventions (e.g., Acceptance and Commitment Therapy, mindfulness). Assessment opportunities also vary depending on site and supervisor, but all interns will complete at least eight integrated written assessments. Please see Section 2: Internship Sites, Positions, and Placement Descriptions for more details.

**Seminars**
All interns are required to attend the weekly Psychology Internship Seminar Series and each will present at least one empirically informed case at this seminar during the course of the year (see Section 4 for an example schedule). Many other seminars are available and may be elective or required depending on the intern’s placements. It is generally expected that interns will spend three to four hours per week in didactic activities.

**Supervision**
Quality supervision is emphasized in our program. All interns will receive at least one hour of individual, face-to-face supervision each week in each placement. Interns will also receive at least one additional hour of supervision, often in the context of group supervision and/or team meetings in each placement. Depending on the capabilities of the specific clinics, supervision may include review of audio or video taped therapy sessions, and/or co-therapy with faculty or other senior therapists or live observation to allow for in vivo supervision.

**Research**
Intern applicants who have demonstrated interest in a research-oriented academic career are heavily recruited by this program. Interns often choose to join any number of ongoing clinical research projects, to initiate an approved and sponsored project on their own, or to continue to work on their dissertations. Aside from empirically informed case conference presentations within the context of internship training and attendance/presentation at the annual UCSD Lewis L. Judd Young Investigators Symposium, no additional participation in research outside of an intern’s home institution will be allowed until an intern has defended his or her dissertation. The vast majority of our internship graduates go on to obtain research and/or teaching oriented fellowships and positions in academic settings, many of them right here at UCSD.
SECTION 2: INTERNSHIP SITES, POSITIONS, AND PLACEMENT DESCRIPTIONS

Organization of the Training Program

The Department of Psychiatry has developed three primary institutions for the provision of training in clinical psychology:

1. The VA San Diego Healthcare System (VASDHS)
2. UC San Diego Health
3. Rady Children's Hospital

Currently, the UCSD/VA Psychology Internship Program provides training experiences at all three affiliated sites. The Program is governed by The Co-Directors with the assistance of the Psychology Internship Training Committee (PITC). The PITC is comprised of the primary supervisor(s) from each placement and two Chief Interns.

For the 2018-2019 training year we have funding for 19 full-time Internship Positions. Each Position is comprised of two or three year-long placements in which the intern will gain his/her training experience. Each of the 19 Positions has a separate APPIC match number. When an applicant matches to the UCSD/VA Psychology Internship, he/she will match into a specific Position, and therefore into a fixed combination of year-long placements for the upcoming training year. The placements in each Position are fixed for the training year and cannot be changed or substituted with another placement. The placement combinations for each of the 19 Positions for the 2018-2019 training year are listed on the following page. When applicants apply to the program, we will request that they indicate their top 3 Positions of Interest. This will help ensure that the appropriate faculty review relevant applications.
## POSITIONS FOR THE 2017-2018 TRAINING YEAR

<table>
<thead>
<tr>
<th>Placement A</th>
<th>Placement B</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>VA Positions</strong></td>
<td></td>
</tr>
<tr>
<td>1. VA Behavioral Medicine: Pain and Weight Control (Rutledge)</td>
<td>VA Primary Care Mental Health Integration (Backhaus)</td>
</tr>
<tr>
<td>2. VA General Behavioral Medicine (Mauer)</td>
<td>VA Spinal Cord Injury (McCulloch)</td>
</tr>
<tr>
<td>3. VA Family Mental Health Program (Buzzella/Wrap)</td>
<td>VA Mood Clinic (Depp/McKenna)</td>
</tr>
<tr>
<td>4. VA Mission Valley PTSD Clinic (Farrow)</td>
<td>VA Mood Clinic (Depp/McKenna)</td>
</tr>
<tr>
<td>5. VA Mission Valley PTSD Clinic (Campbell)</td>
<td>VA Center of Recovery Education (Granholm/Perivoliotis)</td>
</tr>
<tr>
<td>6. VA La Jolla PTSD Clinic (Lacefield)</td>
<td>VA Substance Abuse / Mental Illness (SAMI) Program (Trim)</td>
</tr>
<tr>
<td>7. VA La Jolla PTSD Clinic (Lacefield)</td>
<td>VA Alcohol and Drug Treatment Program (ADTP; Worley)</td>
</tr>
<tr>
<td>8. VA Substance Abuse Rehabilitation and Recovery Treatment Program (SARRTP; VA Smoking Cessation (Haller/Myers)</td>
<td>VA Behavioral Health Interdisciplinary Program (Castriotta)</td>
</tr>
<tr>
<td>9. VA Neuropsychological Assessment Unit (/Bondi/Filoteo/Jak)</td>
<td>VA Primary Care Mental Health Integration (Ruberg)</td>
</tr>
<tr>
<td>10. VA Neuropsychological Assessment Unit (/Bondi/Filoteo/Jak)</td>
<td>VA TBI Cognitive Rehabilitation Clinic / VA Neuropsychological Assessment Unit (Hanson)</td>
</tr>
<tr>
<td>11. VA Neuropsychological Assessment Unit (/Bondi/Filoteo/Jak)</td>
<td>VA La Jolla Inpatient Psychiatry (Jacobson)</td>
</tr>
<tr>
<td>12. VA ASPIRE Center (Tarasenko)</td>
<td>VA Telemental Health (Morland/Poizner)</td>
</tr>
</tbody>
</table>

### UCSD Positions

<table>
<thead>
<tr>
<th>Placement A</th>
<th>Placement B</th>
</tr>
</thead>
<tbody>
<tr>
<td>13. UCSD Medical Center Neuropsychological Assessment Program (Norman/Gooding)</td>
<td>UCSD Senior Behavioral Health (Kamat/Bangen/Delano-Wood)</td>
</tr>
<tr>
<td>14. UCSD Eating Disorders Clinic (Anderson/Wierenga)</td>
<td>Rady Inpatient Child and Adolescent Psychiatric Services (S.J. Brown)</td>
</tr>
<tr>
<td>15. UCSD Eating Disorders Clinic (Anderson/Wierenga)</td>
<td>Rady Inpatient Child and Adolescent Psychiatric Services (S.J. Brown)</td>
</tr>
<tr>
<td>16. Rady Inpatient Child and Adolescent Psychiatric Services (S.J. Brown)</td>
<td>Rady Child Outpatient Psychiatry (Williams/Brookman-Frazee)</td>
</tr>
<tr>
<td>17. Rady Inpatient Child and Adolescent Psychiatric Services (S.J. Brown)</td>
<td>Rady Child Outpatient Psychiatry (Williams/Brookman-Frazee)</td>
</tr>
<tr>
<td>18. UCSD Burn Center and Moores Cancer Center (Minassian/Cardenas)</td>
<td>UCSD Pain Clinic (D'Eon)</td>
</tr>
<tr>
<td>19. UCSD Eating Disorders Clinic (Anderson/Wierenga)</td>
<td>Rady Medical Behavioral Unit (Maginot)</td>
</tr>
</tbody>
</table>
Placement Descriptions

Each internship placement has its own unique set of opportunities and responsibilities, and a single placement may take place at more than one site. A description of each placement follows. However, the intern plays a fundamental role in formulating his or her training program and should be highly independently motivated in order to delineate desired internship experiences. A unique strength of the UCSD/VA Psychology Internship Program is its commitment to providing the intern with a well-rounded clinical experience while remaining flexible with regard to the intern's specific needs and interests. Because of the diversity of available experiences, there is no "typical" schedule for an intern. However, interns are expected to maintain a case load in each placement that provides 10-14 hours of direct service each week. The remaining hours involve supervision, didactics, preparation for patients, and documentation.

In an effort to make it easier for applicants to identify potential Positions of interest, we have grouped the placements according to six emphasis areas: Addictions, Behavioral Medicine, Child, Neuropsychology, Specialty Mental Health, and Trauma. The placements are described in detail below. Applicants are encouraged to refer to the table on the previous page to learn which Positions contain the desired placements. Listed in the description of each placement are the names of the primary supervisors. In each placement, interns will have one primary supervisor. In addition, many placements have one or more secondary supervisors available for consultation and/or supervision in specific aspects of the placement. The programs Co-Directors are also always available for help and consultation.
Placement Descriptions:

<table>
<thead>
<tr>
<th>Placement Description</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>1. VA Behavioral Medicine: Pain, diabetes, and Weight Control (Tom Rutledge)</strong></td>
</tr>
<tr>
<td><strong>Overview:</strong> This placement involves assessment, treatment, and multidisciplinary experience in three distinct medical clinics: anesthesia pain clinic, weight control clinic, and diabetes clinic.</td>
</tr>
<tr>
<td><strong>Primary Supervisor(s):</strong> Thomas Rutledge, PhD, ABPP</td>
</tr>
<tr>
<td><strong>Supervision:</strong> Supervision comprises a combination of individual and group-based experiences. These activities occur weekly.</td>
</tr>
<tr>
<td><strong>Assessment and Treatment Opportunities:</strong> Students will provide a range of groups (e.g., pain groups, MOVE classes), assessment (e.g., bariatric surgery evaluation, pre-procedure pain evaluations), and individual (1:1 therapies for behavioral medicine goals). Cognitive behavior therapy is the primary treatment modality but there are also opportunities for training in motivational interviewing and ACT therapies.</td>
</tr>
<tr>
<td><strong>Didactics/Team Meetings:</strong> Students may attend three separate rounds meetings: 1) weekly diabetes clinic rounds; 2) bimonthly weight control clinic rounds; and 3) monthly pain clinic rounds.</td>
</tr>
<tr>
<td><strong>Research Opportunities:</strong> There are multiple opportunities to develop new research or become involved in existing research depending on the interest of the student.</td>
</tr>
<tr>
<td><strong>Primary Location:</strong> La Jolla VA Medical Center</td>
</tr>
<tr>
<td><strong>Patient Population:</strong> Veterans receiving care at VASDHS</td>
</tr>
<tr>
<td><strong>Number of Staff in Clinic:</strong> 30+ (mostly non-mental health staff)</td>
</tr>
<tr>
<td><strong>Number of Trainees in Clinic:</strong> There are typically two-three psychology students in the placement, including practicum students, interns, and fellows. Trainees in allied health disciplines are also present but vary in number.</td>
</tr>
<tr>
<td><strong>2. UCSD Pain Clinic (Maya D'Eon)</strong></td>
</tr>
<tr>
<td><strong>Overview:</strong> Neuropsychiatry and Behavioral Medicine Unit (NBMU) faculty and trainees serve as behavioral medicine specialists in the multidisciplinary treatment team at the UCSD Center for Pain Medicine located at UC San Diego Health La Jolla Perlman Medical Offices. The clinic operates under the auspices of the Department of Anesthesiology and serves a patient population representing a wide range of chronic pain diagnoses.</td>
</tr>
<tr>
<td><strong>Primary Supervisor(s):</strong> Maya D'Eon, Ph.D.</td>
</tr>
<tr>
<td><strong>Supervision:</strong> Interns have weekly individual (narrative and audiotape) and group supervision. Group supervision is with other UCSD behavioral medicine trainees at all levels. The intern will also obtain experience in supervising a practicum student.</td>
</tr>
<tr>
<td><strong>Assessment and Treatment Opportunities:</strong> Interns will have the opportunity to conduct and interpret biopsychosocial assessments including: 1) Pre-procedure psychological evaluations of patients considered for invasive surgical techniques (including intrathecal pump and spinal cord stimulator procedures); 2) Chronic opiate psychological evaluations that inform treatment decisions made by pain physicians regarding use of opiates and other psychological factors that may impact response to treatment; 3) General psychological evaluations of patients with co-morbid psychiatric issues, prescription medication and illicit substance abuse problems, and other behavioral/coping-related problems. Trainees co-facilitate ongoing Pain Management psychotherapy groups, and provide short-term, individual psychotherapy using cognitive behavioral interventions, motivational and acceptance therapies, and mindfulness meditation practices.</td>
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| **Didactics/Team Meetings:** The multidisciplinary treatment team meets once per month to review patient cases and pre-procedure evaluations conducted by our service. Interns present information from the biopsychosocial evaluations to the Pain team including pain physicians, psychiatrists, nurses, and participate in the discussion of relevant psychological and medical...
issues. Weekly group supervision/didactic seminars feature case presentations and lectures on topics relevant to behavioral medicine and the practice of psychology.

Research Opportunities: The intern presents his or her own research at the didactic seminar.

Primary Location: UC San Diego Health LaJolla - Perlman Medical Offices
Patient Population: Primarily adults presenting with a wide range of chronic pain diagnoses.
Number of Staff in Clinic: Approximately 20 pain and psychology fellows and attending physicians, nurses, and administrative staff.
Number of Trainees in Clinic: 5 psychology trainees (1 intern, 4 practicum students).

3. VA Behavioral Medicine: Spinal Cord Injury Unit (SCI/D) (Corey McCulloch)

Overview: The Spinal Cord Injury/Disease (SCI/D) Unit is an interdisciplinary rehabilitation clinic for Veterans who have new and existing spinal cord conditions and various comorbid medical and mental health disorders. The SCI/D Psychology Team provides a range of services on an inpatient and outpatient basis, including comprehensive psychological assessments, cognitive screenings, individual therapy, group psychoeducation classes, participation in weekly multidisciplinary rounds and consultation to the multidisciplinary SCI/D team. Presenting problems are diverse and include numerous rehabilitation and behavioral medicine issues (e.g., medical complications following spinal cord injury, chronic pain, weight management, sleep difficulties), mental health concerns (e.g., mood and anxiety disorders, adjustment disorders, substance abuse/dependence) and behavioral management issues. Interns will spend 20 hours/week in this clinic and have the opportunity to work with newly injured veterans and veterans with long-standing SCI/D. Interns will have the opportunity to provide services through the VA Clinical Video Telehealth (CVT) Program.

Primary Supervisor: Corey McCulloch, Ph.D.

Supervision: Interns will meet with primary supervisor for individual supervision and will benefit from supervisor direct observation and review of audiotaped sessions. Supervision will include fidelity ratings for some treatment modalities. Interns will also have the opportunity for weekly group supervision with the SCI/D Psychology team.

Assessment and Treatment Opportunities: Interns will have the opportunity to continue their development of empirically-based treatments in a subgroup of patients with unique medical and functional challenges. Treatment modalities include Cognitive-Behavioral Therapy (CBT), Acceptance and Commitment Therapy (ACT), mindfulness-based interventions for behavioral medicine and mental health concerns. Interns will also have the opportunity to gain training and experience in empirically-based treatments for PTSD (i.e., Prolonged Exposure Therapy, Cognitive Processing Therapy).

Didactics/Team Meetings: Interns in SCI/D Clinic will attend the weekly Behavioral Medicine Seminar, which includes presentations and group supervisions focused on a broad range of behavioral medicine and diversity issues.

Research Opportunities: Research opportunities are available on case-by-case basis

Primary Location: VA San Diego Healthcare System, Spinal Cord Injury/Disease Unit (La Jolla)

Patient Population: Veterans who have sustained spinal cord injuries from a variety of traumatic and/or medical experiences and veterans who have certain diseases with spinal cord involvement (e.g., Multiple Sclerosis)

Number of Staff in Clinic: Approximately 75 multidisciplinary team members, including 2 psychologists

Number of Trainees in Clinic: 1

4. VA General Behavioral Medicine (Cortney Mauer, Ben Felleman)

Overview: The VA San Diego General Behavioral Medicine team provides empirically-supported
assessments and therapies for primary and tertiary care patients for whom psychological issues are impacting their health status, thus, serving veterans with a variety of physical and mental health conditions. The clinic aims to improve veterans' physical health and mental wellbeing by promoting healthy life styles, assisting patients to change health compromising behaviors, encouraging treatment compliance when coping with chronic illness, and assisting with management of chronic conditions. The Behavioral Medicine team works closely with professionals from a variety of specialty areas (e.g. primary care, neurology, pulmonary, nephrology).

**Primary Supervisor(s):** Cortney Mauer, Ph.D.  **Supervision:** Interns will benefit from individual and group supervision. Opportunities for review of audio taped sessions are available.

**Assessment and Treatment Opportunities:** Interns will lead or co-lead 1-2 psychoeducational groups per week (e.g., pain, emotional eating, diabetes), conduct full psychosocial intake interviews including behavioral and mental health assessments as necessary, and provide brief individual intervention. Additionally, the intern will provide consultation to other providers in primary care and other specialty clinics, and give lectures in multidisciplinary programs such as tobacco cessation, diabetes, and weight control groups. The intern also has the opportunity to perform pre-transplant evaluations. Primary treatment approaches include CBT, ACT, and MI.

**Didactics/Team Meetings:** Interns in the General Behavioral Medicine placement will attend the weekly Behavioral Medicine Seminar, which includes presentations, trainings, and consultations by/with experts on a variety of topics relevant to behavioral medicine settings. Interns will also attend the weekly clinic team meeting (group supervision).

**Research Opportunities:** Interns may participate in co-writing manuscripts if interested.

**Primary Location:** Mission Valley VA Outpatient Clinic

**Patient Population:** Male and female veterans from all conflicts (e.g., Vietnam War, Korean War, Iraq and Afghanistan). Typical patient problems include chronic medical conditions (e.g., diabetes, obesity), somatic symptoms (e.g., fatigue, pain), health-threatening behaviors (e.g., noncompliance) and mental health concerns (e.g., stress, depression).

- **Number of Staff in Clinic:** 2
- **Number of Trainees in Clinic:** 2-3

5. **UC San Diego Health Regional Burn Center (Arpi Minassian)**

**Overview:** The UC San Diego Health Regional Burn Center is a surgery service that provides treatment to burned adults and children. The intern works with inpatients and their families in the 8-bed Intensive Care Unit and the 10-bed Special Care Unit. Duties include: (1) psychological/psychiatric intake interview to assess psychiatric disorders and substance abuse, (2) interventions and provision of support for patients and families in coping with physical injuries and treatment (behavioral interventions for acute pain, responses to trauma, discussion of body image concerns, brief motivational interviewing for substance use-related injuries), and (3) providing recommendations to multidisciplinary staff. The intern will learn about burn care and the physical and psychological effects of burn injury. S/he works closely with other medical disciplines, combines assessment and brief intervention in the span of a few sessions, and tailors recommendations to fit with the fast-paced trauma care environment.

**Primary Supervisor(s):** Arpi Minassian, Ph.D.

**Supervision:** Individual supervision (narrative and “live”) as well as a one-hour weekly behavioral medicine group supervision/didactic seminar. The intern will also obtain experience in supervising a practicum student.

**Assessment and Treatment Opportunities:** Bedside interventions with patients and family members, using techniques from CBT, mindfulness, MI, and ACT. Psychological testing is limited to brief cognitive and symptom screens. The intern will also gain knowledge in psychopharmacology and assessment and treatment of delirium.
Didactics/Team Meetings: The intern attends weekly multidisciplinary rounds with the Burn Team where s/he discusses assessment and treatment recommendations. Weekly group supervision/didactic seminars feature case presentations and lectures on topics relevant to behavioral medicine and the practice of psychology. The intern can also attend weekly education seminars on the Burn Service.

Research Opportunities: The intern presents his or her own research at the didactic seminar.

Primary Location: UC San Diego Health, Hillcrest.

Patient Population: Children, adults, and families of all ages with burns or skin disorders such as chronic wounds, Stevens-Johnson’s Syndrome, and others.

Number of Staff in Clinic: Approximately 30 physicians, mid-level providers, nurses, rehabilitation therapists, social workers, pharmacists, dieticians, child life specialist, and others.

Number of Trainees in Clinic: 2 (one intern, one practicum student)

6. UC San Diego Health, Moores Cancer Center (MCC) (Veronica Cardenas)

Overview: The Patient and Family Support Service at MCC is a full-service psychosocial oncology program. It provides psychiatric evaluation and medication management as well as evidenced-based individual, couples, family, and group psychotherapy to cancer patients and their caregivers/families. The program also includes a holistic treatment component that may include yoga, art therapy, expressive writing, mindfulness training, relaxation/meditation, hypnotherapy and state-of-the-art approaches to non-medication-based treatment of insomnia. MCC offers these services to any cancer patient in active treatment or during survivorship, and to their caregivers and family members.

Primary Supervisor(s): Veronica Cardenas, Ph.D.

Supervision: Individual and group supervision.

Assessment and Treatment Opportunities: The focus is on delivery of individual, couples, family and group psychotherapy to treat psychological issues that arise in a cancer setting. Interns will attend a ‘Cancer 101’ class so they have a basic understanding of medical aspects of cancer diagnosis and treatment. They will conduct intake interviews, develop treatment plans, implement treatment, and plan/implement treatment termination. Cancer patients present with issues specific to their disease, its treatment, and prognosis; however, given that cancer can be viewed as a major stressor, issues not specific to the cancer commonly present and are treated, as well. Existential issues are commonly evoked, such as those associated with significant changes to the body and its function, the possibility of a foreshortened future, and end-of-life planning. Interns will learn to interact with multidisciplinary teams that may include medical, surgical and radiation oncologists; psychiatrists; pharmacists; nurses; social workers; genetics counselors. Interns will also learn to use the EPIC electronic medical record to communicate effectively with other members of the patient’s treatment team.

Didactics/Team Meetings: Interns at MCC will attend weekly group supervision and ad hoc didactic presentations.

Research Opportunities: As time and interest permits, interns may participate in research examining archival clinical data and/or any active investigations, and/or co-authoring manuscripts.

Primary Location: UC San Diego Health – La Jolla, Moores Cancer Center, 3rd Floor.

Patient Population: Cancer patients throughout the cancer trajectory (pre-diagnosis; post-diagnosis; in active initial treatment; during survivorship) and their caregivers and/or family members.

Number of Staff in Clinic: 8: 3 Psychiatrists; 5 Psychologists

Number of Trainees in Clinic: 4: 1 intern, 3 practicum students.

7. VA Behavioral Medicine and Primary Care Mental Health Integration (Autumn Backhaus)
Overview: The Behavioral Medicine/Primary Care-Mental Health Integration (PCMHI) Clinic at the La Jolla VA Medical Center provides assessment and evidence-based psychotherapy for veterans presenting with comorbid medical and mental health symptoms within primary care and medical specialty clinics.

Primary Supervisor(s): Autumn Backhaus, Ph.D.

Supervision: Weekly one-hour individual supervision (review of audio-recorded sessions and narrative) and weekly group supervision within the VA Behavioral Medicine Seminar.

Assessment and Treatment Opportunities: Interns will conduct psychological assessments consistent with formulating a biopsychosocial conceptualization of cases and will develop skills in reviewing medical diagnostic and treatment histories. Interns will also perform mental health evaluations for organ or stem cell transplant procedures and write comprehensive assessment reports. Outpatient individual and group psychotherapy are provided for veterans diagnosed with chronic or progressive conditions such as cancer, diabetes, heart disease, obesity, pain, and tinnitus. Within PC-MHI, interns will provide brief assessment, consultation and time-limited behavioral treatment for veterans presenting with symptoms of depression, anxiety and adjustment concerns within a primary care setting. Interns will facilitate groups for chronic pain using Acceptance and Commitment Therapy (ACT) and Cognitive Behavioral Therapy, ACT for tinnitus related distress and a psychoeducational group on chronic pain for veterans receiving inpatient treatment for substance use disorders.

Didactics/Team Meetings: Interns attend a weekly VA Behavioral Medicine seminar, which includes group supervision, case presentations and didactic presentations on topics such as diabetes management, pharmacological management of chronic pain.

Research Opportunities: Interns may co-author manuscripts if interested/available.

Primary Location: VA Medical Center in La Jolla

Patient Population: Primarily male veterans (18 through 80+) receiving medical services through primary care or specialty medicine clinics

Number of Staff in Clinic: 4 (psychologist/supervisor, 2 PC-MHI nurse care manager, 1 psychiatrist)

Number of Trainees in Clinic: 5

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8. VA Primary Care Mental Health Integration (PCMHI) (Josh Ruberg)

Overview: The VA San Diego Primary Care Mental Health Integration team in Mission Valley provides mental health services for veterans seen within a busy primary care setting. Interns will work closely with a large team of physicians, nurses, and ancillary providers (e.g., clinical pharmacists, social workers, dieticians) to provide timely and efficient assessment, consultation, and brief psychotherapy services to patients whose care is best served when delivered within the primary care setting. The PCMHI model provides for brief treatment for veterans who experience mild to moderate symptoms associated with mood, anxiety, substance use, and life adjustment concerns.

Primary Supervisor(s): Joshua Ruberg, Ph.D.

Supervision: Interns will benefit from individual and group supervision. Opportunities for review of audio taped sessions are available.

Assessment and Treatment Opportunities: Interns will interact with veterans presenting with a broad array of mental health conditions. Interns will conduct brief (20-50 minute) psychological assessments with veterans who are referred for evaluation by their primary care providers, ideally occurring on the same day as the veteran’s scheduled primary care visit (referred to as “warm hand-offs”). Interns will also manage a caseload of individual psychotherapy patients who fit the PCMHI model, as well as leading a weekly stress management group. Primary treatment approaches include CBT, ACT, and MI. Finally, interns will regularly interact with the primary care team, providing a range of consultation services, including helping to develop treatment plans,
assisting with behavioral management of difficult patients, helping to manage patients in acute crises, and collaborating with the provider to help patients make health behavior changes.

**Didactics/Team Meetings:** Weekly Behavioral Medicine Seminar; weekly clinic team meeting (group supervision combined with Mission Valley General Behavioral Medicine Program).

**Research Opportunities:** Interns may participate in co-writing manuscripts if interested/available.

**Primary Location:** Mission Valley VA Outpatient Clinic

**Patient Population:** Adult male and female veterans from all conflicts and all ages

**Number of Staff in Clinic:** 4 (2 psychologists/supervisors, PC-MHI nurse care manager, psychiatrist)

**Number of Trainees in Clinic:** 3-4

9. UC San Diego Health Eating Disorders Center for Treatment and Research (UCSD EDC) (Leslie Anderson/ Christina Wierenga)

**Overview:** UCSD EDC provides day treatment and intensive outpatient treatment for adolescents and adults with anorexia, bulimia, BED, ARFID and EDNOS. The multidisciplinary treatment team consists of psychologists, social workers, psychiatrists, marriage and family therapists, nurses, and dieticians.

**Primary Supervisor(s):** Leslie Anderson, Ph.D. and Christina Wierenga, Ph.D.

**Supervision:** Interns participate in weekly individual and group supervision. Feedback on videotaped individual sessions is provided.

**Assessment and Treatment Opportunities:** Adult patients can be in Day Treatment (10 or 6 hrs a day) or IOP (4 hrs a day) and Adolescent patients can be in Day Treatment (10 or 6 hrs a day) or IOP (3 hrs a day). Our adult clinic is run according to a dialectical behavior therapy (DBT) model, and we also offer CBT, expressive arts, ACT, cognitive processing therapy, and a variety of other types of therapy groups. Our adolescent clinic is run according to a Maudsley (Family-Based Therapy) model, and families are made a primary part of treatment. DBT skills are offered and behavioral principles are used in milieu management. In both programs, interns will eat meals with patients and gain experience providing meal support in an intensive treatment environment. Interns also have the opportunity to conduct brief neuropsychological assessments and write integrated reports to address referral questions from the treatment team.

**Didactics/Team Meetings:** We have weekly didactics, which are taught by in-house and visiting experts on topics relevant to treating eating disorder patients. Multidisciplinary treatment team meets from 2-2.5 hours per week per program.

**Research Opportunities:** We have many research opportunities, including FMRI and genetics research, and treatment development and outcomes. Interns often stay on after internship as clinical or research fellows.

**Primary Location:** Chancellor Park Outpatient Clinic

**Patient Population:** Adolescents are ages 11-18, Adults are age 18+, but the majority are between 18 and 30. Most are Caucasian, but we also have Hispanic, Asian and African-American patients. 90% are female.

**Number of Staff in Clinic:** ~60

**Number of Trainees in Clinic:** 2 psychology interns, 6-8 MFT, PhD or PsyD practicum students, 6-8 postdoctoral fellows.

10. VA Center of Recovery Education (Eric Granholm/Dimitri Perivoliotis)

**Overview:** The Center Of Recovery Education (CORE) is the VA San Diego Healthcare System's Psychosocial Rehabilitation and Recovery Center (PRRC), which provides Veterans a transitional education center that will inspire and assist them to reclaim their lives, instill hope,
validate strengths, teach life skills, and facilitate community integration in meaningful self-
determined roles. CORE provides evidence-based practices to Veterans with psychotic
disorders to help them define and pursue personalized recovery goals.

**Primary Supervisor(s):** Dimitri Perivoliotis, Ph.D./Eric Granholm, Ph.D.

**Supervision:** One hour of individual and 1.5 hours of group supervision, including direct
observation through co-therapy and review of videotaped sessions.

**Assessment and Treatment Opportunities:** Group and individual psychotherapy
using evidence-based practices for people with schizophrenia and other psychotic disorders
(CBT, SST, IMR, Dual-Diagnosis); psychological and neuropsychological assessment; intake
evaluations using sections of the SCID; family interventions; manualized interventions in
randomized psychotherapy clinical trials. All in the context of a Recovery Model.

**Didactics/Team Meetings:** Weekly CORE Team meeting 11-12 Tuesdays and weekly
Psychosocial Rehabilitation (PSR) Seminar 12-1 Tuesdays, which includes journal club and
presentations on the recovery model and assessments and treatments for schizophrenia.

**Research Opportunities:** Interns may participate in research as a therapist in randomized
clinical trials, and can mine large existing databases from previous psychosocial intervention
trials to present data at professional conferences and/or publish peer-reviewed research reports.

**Primary Location:** La Jolla VA Medical Center.

**Patient Population:** Veterans (primarily male) with psychotic disorders of all ages and diverse
backgrounds with a GAF below 50.

**Number of Staff in Clinic:** Interprofessional team, including psychologists, psychiatrist, social
worker, and supported employment specialist, as well as psychology postdoctoral fellows, post-
masters social work fellows, and post-masters vocational rehabilitation or occupational therapy
fellows, and clinical psychology practicum trainee.

**Number of Trainees in Clinic:** 1 Intern, 4 fellows, 1 practicum student

11. VA Mood Clinic: **Primary Supervisor(s):** (Colin Depp, Ben McKenna)

**Overview:** This clinic trains psychologists and other mental health professionals in cognitive
behavioral treatments (CBT) for mood disorders. The focus is on learning skills in traditional
and third wave cognitive behavioral interventions and developing a solid theoretical
understanding of these interventions. Interns are encouraged to develop both clinical and research
interests related to this placement (e.g., co-leading a group that is of particular interest to the
intern, conducting outcome research, etc).

**Supervision:** 1.5 hours of individual supervision, 0.5 hours of group supervision. Supervision
includes individual supervision, group supervision, team meetings, review of audio/videotape
sessions, didactics, and co-therapy.

**Assessment and Treatment Opportunities:** There is a strong emphasis on the application of
empirically supported treatments, the use of a case formulation approach to cognitive behavioral
therapy and training in evaluating the effectiveness of clinical interventions. Group therapies are
manualized and structured. Individual therapy is guided by theoretically-grounded case
conceptualization. Interns work with clients presenting with mood disorders as primary diagnoses
and many of the Veterans also present with a variety of comorbidities, especially Posttraumatic Stress
Disorder and physical health difficulties. Training opportunities include: a) individual and group CBT
(traditional and third wave) for unipolar depression; b) individual and group CBT for bipolar
disorder; and c) semi-structured and structured clinical interviews for assessing psychiatric disorders.

**Didactics/Team Meetings:** 1 hour clinic seminar in evidence-based psychotherapy; 1 hour interdisciplinary team meeting

**Research Opportunities:** Mostly related to program development/evaluation, with exposure to more experimental research possible.

**Primary Location:** La Jolla VA Medical Center

**Patient Population:** Veterans from all eras of services, about 50% racial/ethnic minorities; age range of approximately 20-85 years

**Number of Staff in Clinic:** 2 psychologists, 2 psychiatrists, nursing, peer support specialist

**Number of Trainees in Clinic:** 4 psychology trainees (1 practicum student, 2 interns, 1 postdoc), 2-4 psychiatry residents

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**12. VA Behavioral Health Interdisciplinary Program (Natalie Castriotta)**

**Overview:** The Behavioral Health Interdisciplinary Program (BHIP) consists of an interdisciplinary team that works with a panel of Veterans experiencing a wide array of difficulties associated with trauma, mood, anxiety, and functioning within important life roles. The goal of BHIP is to provide comprehensive, interdisciplinary care to Veterans that is grounded in research and theory. Interns within BHIP will learn skills and theory in trauma-focused therapies, third-wave Cognitive Behavioral Therapies (CBT), how to apply treatment in a transdiagnostic setting, and how to work within an interdisciplinary team.

**Primary Supervisor:** Natalie Castriotta, Ph.D.

**Supervision:** 1.5 hours of individual supervision, 0.5 hours of group supervision. Supervision includes individual supervision, group supervision, team meetings, co-therapy during treatment groups, and didactics.

**Assessment and Treatment Opportunities:** BHIP offers the opportunity to train in many evidence based therapies and to treat a large variety of diagnoses. Interns have the opportunity to gain experience in: a) diagnostic assessment; b) individual therapy; c) group therapy; d) consultation with other disciplines. There is a strong emphasis on the application of empirically supported treatments. Our theoretical orientation centers on CBT with incorporation of 3rd wave CBT models such as Dialectic Behavior Therapy (DBT) and Acceptance and Commitment Therapy (ACT). The primary diagnoses treated within the clinic are PTSD (including military sexual trauma and interpersonal trauma), anxiety disorders (including OCD, panic disorder, social anxiety disorder, generalized anxiety disorder), mood disorders, insomnia, and disorders related to interpersonal dysfunction, thus we also provide Cognitive Processing Therapy (CPT), Prolonged Exposure (PE), CBT for Insomnia (CBT-I), and exposure based therapies for anxiety. Group therapies are manualized and structured, and Interns will learn to deliver interventions in a transdiagnostic setting that emphasizes common mechanisms underlying symptoms and functional difficulties. Individual therapy is guided by theoretically-grounded case conceptualization.

**Didactics /Team Meetings:** 1 hour seminar in evidence-based psychotherapy; 1 hour interdisciplinary team meeting

**Research Opportunities:** Mostly related to program development/evaluation

**Primary Location:** La Jolla VA Medical Center

**Patient Population:** Veterans from all eras of services, about 50% racial/ethnic minorities; age range of approximately 20-70 years, with a large group of OEF/OIF/OND Veterans between the ages of 28 and 35.

**Number of Staff in Clinic:** 1 psychologist, 1 licensed clinical social worker, 2 psychiatrists, 1 clinical pharmacist, 1 licensed vocational nurse, and 1 peer support specialist
Number of Trainees in Clinic: 2 psychology trainees (1 intern, 1 psychology fellow)

13. VA Family Mental Health Program (FMHP): (Brian Buzzella, Elizabeth Wrape)
Overview: The VA San Diego Family Mental Health Program provides empirically-supported couple therapy services to Veteran couples. This interdisciplinary team consists of one psychologist, two postdoctoral fellows, one psychology intern, and one Marriage and Family Therapist. Psychiatry residents and/or psychology practicum students are sometimes also involved in the program. The team meets weekly.
Primary Supervisor(s): Brian Buzzella, Ph.D., ABPP
Supervision: Interns will benefit from weekly, individual and group supervision, including review of videotaped sessions.
Assessment and Treatment Opportunities: The focus is on developing empirically-based assessment and treatment skills in order to address relational problems in Veteran couples. Interns will learn to conduct multi-session, multi-modal assessment (interviews, self-report questionnaires, behavioral observation) to inform problem formulations and treatment plans consistent with Integrative Behavioral Couple Therapy (IBCT) and Emotionally-Focused Couple Therapy (EFT). Interns have opportunities to act as co-therapists with other trainees as well as with more senior clinicians.
Didactics/Team Meetings: Interns in the FMHP placement will attend the weekly team seminar, which includes presentations and trainings in Emotionally-Focused Couple Therapy, Integrative Behavioral Couple Therapy, and Cognitive-Behavioral Couple Therapy. Presentations include didactic components as well as experiential learning strategies (e.g., video review, role-playing). Didactic presentations on special topics in Couple/Family Psychology (e.g., intimate partner violence) are also offered.
Research Opportunities: The FMHP is hosting a RCT evaluating Cognitive Behavioral Conjoint Therapy for PTSD (in-home vs telehealth) and a family education condition. Data from this project may be available for analysis and presentation, if interested.
Primary Location: Sorrento Valley Annex/La Jolla VA Medical Center
Patient Population: Veterans and their significant others reporting relational distress.
Number of Staff in Clinic: Approximately 6 (2 psychologists, 1 Marriage and Family Therapist, 2 postdoctoral residents, 1 predoctoral intern)
Number of Trainees in Clinic: 3

14. VA Inpatient Neurocognitive Screening/Psychology Assessment: (Mark Jacobson)
Overview: This VA clinic sees both inpatients hospitalized on the VA Psychiatric Ward as well as outpatients who are referred for co-morbid cognitive and psychological disorders. We provide brief neurocognitive screenings, neuropsychiatric assessments, and short-term treatment interventions for Veterans with acute mental health needs. Psychological services in the inpatient milieu include 1) brief neurocognitive and psychological assessments for diagnostic clarification and treatment planning purposes, and 2) implementation of evidence-based psychotherapies (individual and group) utilizing short-term, recovery-oriented protocols. This clinic actively participates in the Inpatient Multidisciplinary Treatment Team rounds following patients during their hospitalization. We also provide Outpatient evaluations for patients with co-morbid cognitive/psychological disorders, and offer feedback and follow-up with brief CBT-based psychotherapies. We serve Veterans who have both cognitive complaints and a wide-range of psychiatric conditions who are referred by Psychiatry, Physical Medicine, Neurology and other Psychology clinics.
Primary Supervisor(s): Mark W. Jacobson, Ph.D.
Supervision: Primarily Individual supervision.
Assessment and Treatment Opportunities: The assessment component combines a brief, flexible neurocognitive screening battery, often with standardized, psychological assessment
tools (MMPI2-RF, MCMI3, PAI, etc). Training includes formulation of integrated reports, presentation of results to providers and treatment teams, and utilizing feedback sessions to implement recommendations and recovery planning. Training in treatment modalities takes place in a range of clinical settings and with diverse patient groups: inpatient treatment can include Social Skills Training (group therapy), and individual behavioral-based techniques, and CBT-based interventions modified for severe mental illness. Outpatient psychotherapy protocols are brief, CBT-based treatments modified for Veteran's with co-occurring cognitive deficits secondary to stroke, tumor resection, TBI, ADHD or mild neurocognitive disorders.

**Didactics/Team Meetings:** Trainees attend Inpatient Psychiatry Treatment Team meetings, individual supervision, group didactics, and Psychiatry Case Conferences w/ Didactics.

**Research Opportunities:** As time and interest permits, this clinic collaborates with a number of investigators who can discuss ongoing research projects.

**Primary Location:** La Jolla VA Medical Center

**Patient Population:** Veterans (all ages) with acute, severe mental illness, and outpatients with both neurocognitive disorders, ADHD, and academic underachievement, usually occurring with affective and personality disorders.

**Number of Staff in Clinic:** 1 primary, with interdisciplinary interactions via team meetings

**Number of Trainees in Clinic:** 3: 1 intern (half-time), 2 practicum students (part-time).

15. **VA Neuropsychological Assessment Unit (Mark Bondi/Vince Filoteo/Amy Jak)**

**Overview:** The VA San Diego Neuropsychological Assessment Unit provides hospital-wide consultation/liaison services to patients referred for comprehensive neuropsychological assessments of cognitive and emotional functioning.

**Primary Supervisor(s):** Mark W. Bondi, Ph.D., ABPP/CN (Director), J. Vincent Filoteo, Ph.D., Amy Jak, Ph.D.

**Supervision:** Supervision from our board certified clinical neuropsychologists is provided in both group and individual settings. Interns are assigned a year-long primary individual supervisor as well as attend group supervisions of cases twice weekly.

**Assessment and Treatment Opportunities:** The Neuropsychological Assessment Unit placement provides the intern with the opportunity to conduct comprehensive neuropsychological evaluations on a wide range of patient populations, including but not limited to neurologic, psychiatric, geriatric, rehabilitation, and general medicine patients. Unit staff and trainees conduct complete neuropsychological assessments of patients, including chart review, clinical interview, standardized test administration and scoring, interpretation and report writing, and patient and family feedback. Trainees may also obtain some experience interacting with treatment and rehabilitation teams to integrate the results of the neuropsychological assessments into such programs. Minor rotation opportunities for assessment and cognitive rehabilitation for veterans of Iraq or Afghanistan with mild to moderate traumatic brain injury are also available. Interns are taught how to use the Boston process approach to interpret a wide range of assessment instruments (e.g., Boston Naming Test, Wechsler Memory Scale - IV; California Verbal Learning Test - 2; Delis-Kaplan Executive Function System, etc.), to provide detailed feedback to patients and families, and to work with referring sources to integrate the results of our neuropsychological assessment procedures into treatment planning.

**Didactics/Team Meetings:** Interns attend the Clinical Neuropsychology Seminar series once a week and have the opportunity to attend other team staff meetings, such as the monthly Geropsychiatry Interdisciplinary team meeting, to present cases in a broader multidisciplinary diagnostic and treatment context.

**Research Opportunities:** There are many opportunities to integrate research projects with clinical service activities within our Unit as well as with affiliated research projects conducted by our primary supervisors. Many of our projects are at the forefront of neuropsychological,
neuroimaging, genetic and other investigatory techniques into the causes and consequences of brain dysfunction.

**Primary Location:** La Jolla VA Medical Center

**Patient Population:** As a hospital-wide consultation/liaison service, a wide range of patients are referred from many sources, including primary care, neurology, psychiatry, and other specialty clinics. Patients suspected of mild cognitive impairment, dementia, stroke, traumatic brain injury, and a variety of other neurologic, medical and systemic disorders are typically referred for our assessment services.

**Number of Staff in Clinic:** Approximately 7 (4 supervisors, 3 psychometricians)

**Number of Trainees in Clinic:** Approximately 8-9 (4 interns, 4-5 doctoral practicum students).

16. VA Traumatic Brain Injury Cognitive Rehabilitation Program: (Amy Jak/Karen Hanson)

**Overview:** The TBI Cognitive Rehabilitation Clinic provides neuropsychological assessment, feedback, and cognitive rehabilitation to Veterans with a history of traumatic brain injury. The Cognitive Rehabilitation Clinic serves all Veterans with a history of TBI who have cognitive complaints, though the majority of Veterans are post-9/11 Veterans with mild to moderate TBI in the post-acute/chronic phase of injury. This clinic is a component of the larger TBI Polytrauma Treatment team, an interdisciplinary team consisting of rehabilitation physicians, neuropsychologists, social workers, nurse case managers, occupational therapists, physical therapists, audiologists, speech therapists, psychiatrists, and optometrists/low-vision specialists. This team meets weekly as does the core Cognitive Rehabilitation clinic staff.

**Primary Supervisor(s):** Karen Hanson, Ph.D., Amy Jak, Ph.D.

**Supervision:** Individual and group supervision.

**Assessment and Treatment Opportunities:** The focus is on using comprehensive neuropsychological assessment data to inform treatment. Interns will learn how to 1) provide structured compensatory cognitive rehabilitation in both group and individual formats to address objective deficits noted on neuropsychological testing; 2) enhance neuropsychological feedback skills in a TBI population; 3) enhance clinical neuropsychological interviewing skills in individuals with a history of TBI; and 4) broaden neuropsychological test interpretation and report writing skills in this population. Interns will also gain an appreciation of how neuropsychological assessment informs treatment decisions, including cognitive rehabilitation, and how neuropsychology and cognitive rehabilitation are integrated into a Veteran’s larger, multidisciplinary treatment plan. Interns will also see cases in the Neuropsychological Assessment Unit (see above) to ensure a breadth of assessment experience.

**Didactics/Team Meetings:** Interns in the TBI Cognitive Rehabilitation placement will attend weekly clinic supervision, group supervision within the larger Neuropsychological Assessment Unit, and the Clinical Neuropsychology Seminar series once a week. As their schedule allows, interns attend the TBI Polytrauma weekly Treatment Team meeting.

**Research Opportunities:** As time and interest permits, interns may participate in research examining archival clinical TBI data, data from an ongoing TBI/PTSD intervention trial, and/or co-authoring manuscripts.

**Primary Location:** La Jolla VA Medical Center

**Patient Population:** Predominantly Iraq and Afghanistan Veterans with a history of mild to moderate brain injury, now in the post-acute/chronic phase

**Number of Staff in Clinic:** 2

**Number of Trainees in Clinic:** 3: 1 intern, 2 post-doctoral fellows, 1 practicum student.

17. UCSD Senior Behavioral Health (Rujvi Kamat/Lisa Delano-Wood/Katherine Bangen)

**Overview:** The UC San Diego Health Senior Behavioral Health Program (SBH) provides comprehensive psychiatric and neuropsychological services for patients 65 or older. The
SBH inpatient unit serves geriatric patients in both in- and outpatient contexts. The SBH multidisciplinary inpatient team consists of psychologists, psychiatrists, a social worker, nurses, mental health workers, a geriatric internist, and an occupational therapist. The team meets thrice weekly. The SBH outpatient program also serves geriatric patients seeking treatment for a wide variety of psychosocial and psychiatric issues. The psychologist and intern conduct comprehensive neuropsychological assessments in the context of dementia work-ups. Testing and assessment for those with suspected memory or neurocognitive disorders is also available at the outpatient Memory, Aging, and Resilience Clinic (MARC).

Primary Supervisor: Rujvi Kamat, Ph.D., Lisa Delano-Wood, Ph.D., Katherine Bangen, Ph.D.

Supervision: Interns will be provided individual and group/treatment team supervision. Additional supervision with attending psychiatrist(s) available upon request.

Assessment and Treatment Options: The focus is on conducting comprehensive neuropsychological assessments. Interns will learn how to 1) administer and interpret full psychosocial intake interviews of both the patient and collateral source(s) and 2) administer, score, interpret, and write integrated reports based on the results of the neuropsychological evaluation. Interns will also engage in weekly process-oriented groups (or other types of groups based on the patient population) on the inpatient unit. Interns will also have the opportunity to follow inpatients post-discharge, for individual psychotherapy with a cognitive-behavioral focus.

Didactics/Team Meetings: Interns will attend multidisciplinary team meetings, each about two hours in length, at least once per week.

Primary Location: UC San Diego Health, Hillcrest and MARC Outpatient Clinic in La Jolla.

Patient Population: Mostly geriatric patients age 65 and older (with a small number of younger patients suspected of having dementia)

Number of Staff: Approximately 50

Number of Trainees in Clinic: variable; usually one psychology practicum student, and various medical students, and psychiatry and internal medicine fellows

18. UC San Diego Health Hillcrest Medical Center Neuropsychological Assessment Program (Marc Norman/Amanda Gooding)

Overview: The UCSD-Medical Center Neuropsychology placement (UCSD/NP) is ideal for those who have trained in neuropsychology and want to further develop their skills in the use of integrating standardized neuropsychological testing results, as well as specialized neurobehavioral examination techniques. Interns evaluate adults with cognitive, central nervous system and medical disorders. Multidisciplinary teams consist of colleagues from medicine (i.e., neurology, hepatology, pulmonology, nephrology, cardiology) and surgery (e.g., neurosurgery, cardiothoracic surgery, and abdominal surgery), in addition to Infectious Disease, social work, and pharmacy.

Primary Supervisor(s): Marc Norman, Ph.D., ABPP, Amanda Gooding, Ph.D.

Supervision: Interns will benefit from individual supervision and group supervision.

Assessment and Treatment Opportunities: In addition to traditional neuropsychological assessment, placement specific opportunities include intraoperative brain mapping and IntracarotidAmytal (aka Wada) Procedures with the UCSD Comprehensive Epilepsy Service and Neuro-oncology Program. Other neurologic populations include Multiple Sclerosis, Dementia, Strokes and others with various neurologic involvement. Solid organ transplant assessments are conducted on prospective organ candidates and provided information about neurocognitive and emotional functioning. Transplant teams rely on these assessments to determine whether or not individuals are appropriate transplant candidates. Finally, trainees can also participate in specialized concussion assessment and Fitness for Duty evaluations.
**Didactics/Team Meetings:** As time permits, interns are encouraged to attend multidisciplinary weekly Heart, Lung, Kidney/Pancreas, and/or Liver Transplant as well as Stroke team meetings. Also, interns are encouraged to attend monthly Epilepsy Team meetings. Didactics include weekly Group Supervision with other Medical Center trainees and a weekly Neuropsychology Clinical Training Seminar. The overall goal of this seminar is to understand the relationship between brain and behavior through a strong foundation of neuroanatomy and neuropathology. We will review neuroanatomy, neuropathology, and clinical syndromes in addition to ABPP neuropsychology-style Fact Finding exercises.

**Research Opportunities:** Interns may participate in research co-writing manuscripts, or reviewing journal articles if interested and as time permits.

**Primary Location:** UCSD Medical Center, Hillcrest

**Patient Population:** Culturally and ethnically diverse populations with primary medical/neurological illnesses.

**Number of Staff in Clinic:** Approximately 10 – 30, depending on specific service.

**Number of Trainees in Clinic:** 2-4

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19. **VA Alcohol Drug Treatment Program** (Matt Worley)

**Overview:** The VASDHS San Diego Alcohol and Drug Treatment Program (ADTP) provides empirically-supported assessments and therapies for Veterans with Substance Use Disorders (SUDs). A large proportion of ADTP patients have concomitant Axis I or Axis II diagnoses. ADTP consists of four levels of care: Residential (SARRTP), Intensive Outpatient (IOP), Outpatient (OP), and Substance Abuse and Mental Illness (SAMI). Assignment of patients is guided by the American Society of Addiction Medicine Guidelines and is also influenced by assessment of comorbid psychopathology, functional assets of the individual patient, as well as life circumstances. Psychologists and psychology trainees provide clinical services to the SARRTP, IOP, and OP aspects of the ADTP.

**Primary Supervisor(s):** Matt Worley, Ph.D.

**Supervision:** Interns will benefit from individual and group supervision, including direct observation during the provision of services.

**Assessment and Treatment Opportunities:** Interns will learn how to administer and interpret intake interviews, self-report symptom questionnaires, and urine toxicology results. Interns will also participate in the completion of treatment plans and treatment plan updates for Veterans in the OP.

Interns will learn empirically-supported individual and group treatments for SUDs, including CBT, ACT, and MI. Interns will participate in providing lectures on the SARRTP including topics such as Relapse Prevention, Stress Management, and Sleep Hygiene. Interns can receive training in couples therapy (individual or group) based on patient needs. Interns will have the opportunity to observe FOR A WHOLE MONTH one of the primary supervisors model how to conduct ALL group therapy and lectures prior to taking on these responsibilities.

**Didactics/Team Meetings:** Interns in the ADTP placement will attend the weekly SUD Seminar, which includes presentations and trainings by experts in assessments, treatments, and conditions associated with SUDs.

**Research Opportunities:** depending on interest

**Primary Location:** La Jolla VA Medical Center

**Patient Population:** Primarily male veterans with a wide age range.

**Number of Staff in Clinic:** 2 Psychiatrists, 3 Psychologists, 1 Nurse Manager, 3 Social Workers, 1 Clinical Nurse Specialist, 4 Registered Nurses, 7 Licensed Vocational Nurses, 12 Addiction Therapists, 1 Chaplain, 1 Pharmacist, 1 Nutritionist, 1 Recreational Therapist, and 2 Clerks.

**Number of Trainees in Clinic:** 2-4
20. VA Substance Abuse Rehabilitation and Recovery Program: (SARRTP; Moira Haller)

Overview: The VA Substance Abuse Residential Rehabilitation Treatment Program (SARRTP), combat PTSD track, provides empirically-supported assessments and therapies for Veterans with concurrent Posttraumatic Stress Disorder (PTSD) and Substance Dependence (SUD). This program employs a multidisciplinary team that meets daily and consists of psychologists, psychiatrists, social workers, nurses, chaplains, addiction therapists, occupational therapists, peer support specialists, and a pharmacist.

Primary Supervisor(s): Moira Haller, Ph.D.

Supervision: Interns will benefit from individual supervision and group supervision, including a review of audio taped sessions.

Assessment and Treatment Opportunities: The focus is on delivering PTSD treatment to patients in a residential setting. The primary treatments utilized are motivational interviewing and exposure therapy, with the opportunity to employ different modalities as needed. Interns will also learn the state-of-the-art individual and group treatments for PTSD, including Prolonged Exposure Therapy, Cognitive-Processing Therapy, and guilt-based interventions through this placement. Interns are taught to integrate substance use treatment (relapse prevention, motivational interviewing/enhancement, and CBT) into PTSD interventions to concurrently treat these disorders. Interns will experience what it is like to work on the residential unit and observe crisis management, team interventions, and multi-disciplinary teamwork.

Didactics/Team Meetings: Interns in the SARRTP placement will attend a weekly Addiction Seminar.

Research Opportunities: Interns are welcome to collaborate with VA faculty on research projects as time permits.

Primary Location: La Jolla VA Medical Center

Patient Population: Primarily male combat Veterans, aged 20 and older, who served during the Vietnam War, Korean War, the Persian Gulf, Iraq and Afghanistan.

Number of Staff in Clinic: Approximately 30

Number of Trainees in Clinic: 1 psychology intern, 1-2 postdoctoral fellows

21. VA Substance Abuse/Mental Illness (SAMI) Program (Ryan Trim)

Overview: The VA San Diego Substance Abuse/Mental Illness (SAMI) Program provides empirically-supported assessments and therapies for Veterans with co-occurring substance use and psychiatric disorders (e.g. depression, PTSD, anxiety). This interprofessional team operates as a specialty mental health clinic within the larger Alcohol & Drug Treatment Program (ADTP) and the staff consists of members from psychology, psychiatry, social work, and research.

Primary Supervisor(s): Ryan Trim, Ph.D.

Supervision: The intern will benefit from a range of supervision modalities. During initial training, the intern will first observe clinical staff and then be observed and given feedback prior to seeing Veterans independently. The intern will have 1 hour/week of individual supervision with Dr. Trim incorporating case note reviews, role-play simulations, audiotape reviews, and other forms of narrative therapy. This supervision is supplemented by feedback in both the SAMI interprofessional team meeting and the group supervision meeting for ADTP/SAMI trainees (“SUD seminar”), as well as informal supervisor planning and feedback before and/or after group therapy sessions. The intern will also participate in group supervision for all therapists providing manualized PTSD/AUD treatments (Seeking Safety and COPE) within the clinical research study (see below); they will receive training in one or both of these treatments by fellows and faculty on the research team with ongoing feedback and supervision focusing on treatment fidelity throughout the year.

Assessment and Treatment Opportunities: This placement offers a wide range of clinical opportunities, with a focus on group therapy and psychological assessment with dually
diagnosed Veterans. The intern will learn how to administer and interpret psychosocial/diagnostic interviews (with an emphasis on differentiating between substance-induced versus independent psychiatric problems). The intern will also serve as co-facilitators for treatment groups that integrate empirically supported interventions (i.e. CBT, ACT, MI, RP, etc.) for veterans at varying levels of recovery from substance use and psychiatric disorders. The intern will also serve as a therapist (typical caseload of 1-2 Veterans) for an ongoing VA clinical research study (PI: Sonya Norman) comparing individual therapies for Veterans with co-occurring PTSD and alcohol use disorder; there are also opportunities to conduct brief, individual therapy with veterans not enrolled in the research study. The intern may choose to provide informal, “layered” clinical supervision in the later stages of training (via structured format and feedback sessions with graduate student therapists).

Didactics/Team Meetings: Interns attend the weekly SAMI interprofessional team meeting (including group supervision for the clinical research trial) and the weekly Substance Use Disorder seminar (which includes a 16-week didactic course on addictions designed to meet state pre-licensure requirements).

Research Opportunities: The Biobehavioral Addictions Research seminar meets approximately every other Wednesday (4-5pm) and focuses on professional development, lab overviews, conference presentations, practice job/dissertation talks, and grant feedback. Additional research opportunities may be available with addictions faculty at VASDHS/UCSD (completion of dissertation is strongly encouraged prior to taking on new collaborative research projects).

Primary Location: La Jolla VA Medical Center
Patient Population: Veterans with co-occurring substance use and psychiatric disorders, ranging in age from early 20s to late 60s, primarily male, ethnically diverse.
Number of Staff in Clinic: Approximately 3
Number of Trainees in Clinic: 1-2 psychology graduate students; 1 psychology intern; 1 social work intern; 1-2 psychology postdoctoral fellows

22. Mental Health Tobacco Cessation Program (Mark Myers)

Overview: Part of the VA San Diego National Tobacco Cessation Clinical Resource Center, the Mental Health Tobacco Cessation Program provides tobacco cessation treatment for veterans with psychiatric disorders. Interventions are group based and provided in inpatient and outpatient settings, including the Substance Abuse Residential Rehabilitation Program (SARRTP) and the outpatient Mental Health Clinic. The treatment team consists of psychologists, pharmacists and social workers.

Primary Supervisor(s): Mark Myers, Ph.D.
Supervision: Interns participate in individual supervision. Supervision is done by direct observation and discussion/verbal report.

Assessment and Treatment Opportunities: The goal of this placement is for interns to become proficient in evidence-based treatment for tobacco use, and to gain skills for motivating veterans to quit tobacco use and utilize evidence-based treatment. Providing treatment exclusively for veterans with psychiatric disorders is a unique aspect of this placement. Our tobacco cessation program is based on cognitive-behavioral principles and focuses on behavior change skills including managing urges to smoke, coping with high-risk situations and relapse prevention. Motivational interviewing skills and strategies are an important part of services provided by the program, which includes a motivational enhancement group and a telephone-delivered treatment engagement intervention. Trainees will also become knowledgeable regarding medications commonly used for tobacco cessation. Trainees usually have opportunities to co-lead groups with staff from other disciplines.

Didactics/Team Meetings: Interns will attend the weekly Addiction Seminar that consists of presentations and trainings by experts in substance use disorder treatment. The seminar also
includes a 16-week didactic course on addictions designed to meet CA state pre-licensure requirements). Interns are invited to attend the UCSD Addictive Behavior Research Seminar.

Research Opportunities: Interested interns are welcome to become involved in ongoing research projects and to access previously collected data for writing manuscripts. Interns are invited to attend the Biobehavioral Addictions Research seminar. This seminar meets approximately every other week at the La Jolla VA and focuses on professional development, lab overviews, conference presentations, practice job/dissertation talks, and grant feedback.

Primary Location: La Jolla Medical Center

Number of Staff in Clinic: 3
Number of Trainees in Clinic: In addition to the intern, this rotation includes at least 1 postdoctoral fellow and typically 1 predoctoral practicum student.

23. Rady Child and Adolescent Psychiatric Services (CAPS) (Sandy Brown)

Overview: CAPS is a locked inpatient unit dedicated to providing assessment and intervention to children and adolescents under the age of 18 who have diagnoses of severe mental illness. The children and adolescents hospitalized at CAPS typically have more than one Axis I diagnosis which may include depression, anxiety, bipolar disorder, posttraumatic stress disorder, schizophrenia, ADHD, and substance abuse, as well as co-morbid illnesses and conditions. Additionally, the children and adolescents often have histories of abuse and neglect and the families may have transgenerational histories of psychiatric disorders, substance abuse and mental illness. An additional component of the training experience at CAPS is the multicultural nature of the milieu. It is common for the milieu to reflect such diverse cultures as Latino, Asian, African and Native American. Therapists must often work cross-culturally and typically learn how to incorporate cultural sensitivity into their assessment and treatment plans.

Primary Supervisor(s): Sandra J. Brown, Ph.D., ABPP

Supervision: Interns are supervised in a variety of ways. All interns receive a minimum of 1 hour weekly in individual supervision but on-going "drop in" supervision occurs regularly throughout each week. Interns also participate in weekly 1-2 hour group supervision in which interns present and discuss the children/adolescents they are working with, from both assessment and treatment perspectives. Narrative supervision is the primary modality for supervision but this is supplemented by in vivo supervision as well. Interns also have the opportunity to provide direct supervision to advanced practicum students.

Assessment and Treatment Opportunities: At CAPS, interns provide both intervention and assessment services. With regard to intervention, interns work intensively with patients on one team from the point of admission through discharge. Interns are responsible for both individual and family therapy for the children/adolescents on their caseload. Interns also co-facilitate one CBT or DBT group weekly. Primary intervention techniques commonly include CBT, DBT, and MI. All assessment and intervention is done within the inpatient setting. Interns also share responsibility for cognitive and personality assessments with practicum students. Assessments are done on a referral basis with (typically) 1-2 children/adolescents referred for testing weekly. While the majority of the testing is done by practicum students, interns have considerable opportunity to develop their skill in assessment through direct administration of tests, report writing and in-depth supervision, in both individual and group formats.

Didactics/Team Meetings: Interns attend multidisciplinary treatment team meetings daily and a weekly seminar co-facilitated by the psychiatry and psychology faculty. Interns are encouraged to attend weekly Pediatric Psychiatry Grand Rounds and are welcome to attend other specialized didactic opportunities, depending on their individual interests.
Research Opportunities: Interns are welcome to initiate research activities when/if their dissertations are completed.

Primary Location: CAPS is physically located at Rady Children’s Hospital but all faculty and trainees are members of the Department of Psychiatry at UCSD.

Patient Population: All children/adolescents are younger than the age of 18 and typically have diagnoses of severe mental illness.

Number of Staff in Clinic: CAPS is staffed by a wide assortment of disciplines. Primary faculty includes one psychologist, three psychiatrists, one pediatrician and two social workers. Additional staff includes nursing, occupational therapy, recreational therapists, pharmacologists and dietitians.

Number of Trainees in Clinic: Four interns are among many other trainees at CAPS which includes 4 fellows in child psychiatry and typically 2-3 psychology practicum students. Second year residents in Psychiatry also rotate through the unit as do both third and fourth year medical students.

24. UCSD Child Outpatient Psychiatry (Katherine Williams/Lauren Brookman-Frazee)

Overview: Rady Children’s Outpatient Psychiatry Clinic serves diverse needs of children and their families from San Diego and Imperial Counties as well as from the hospital. The clinic is the largest provider of county-funded outpatient mental health services for children and adolescents with a wide variety of psychiatric disorders. Client age range is 2-21 years old. Depending on the patient characteristics and funding mechanisms, some patients and families receive intensive short-term treatment, whereas others may remain in treatment for up to a year. Work with the families often includes case management and community liaison activities, including interaction with child protective services, family or juvenile courts, other health care providers, and the school systems.

Primary Supervisor(s): Katherine Nguyen Williams, Ph.D. and Lauren Brookman-Frazee, Ph.D.

Supervision: Interns will participate in individual and group supervision on a weekly basis.

Assessment and Treatment Opportunities: Interns have the opportunity to obtain experience in the following: a) diagnostic assessment; b) individual psychotherapy; c) family psychotherapy; d) group therapy; e) psychological testing of children and adolescents; and f) consultation (e.g., schools, psychiatrists). Approach to treatment: evidence-based therapies in the context of developmental psychopathology.

Didactics/Team Meetings: Child and Adolescent Psychiatry Grand Rounds, RCHOP-Central Seminars (in-service clinical trainings/talks), and Inter-disciplinary Treatment Team Meetings.

Optional Didactics: Child & Adolescent Psychiatry Fellowship Seminars/Courses (e.g., Forensic, Neuropsychology, Psychopharmacology), ADOS Trainings (psych testing), Autism Seminars, Trauma Seminars, and Eating Disorder Seminars.

Research Opportunities: Opportunity to make connections with research investigators at the Child and Adolescent Services Research Center to discuss potential post-doctoral research opportunities.

Primary Location: Rady Children’s Hospital

Patient Population: Interns will gain experience with a diverse patient population, ranging in age from toddlers through adolescents and presenting with a variety of diagnoses, including disruptive, mood, anxiety, substance abuse, and developmental disorders. The patient population is also diverse in terms of socio-economic status, race/ethnicity, and family composition.

Number of Staff in Clinic: 14 (psychiatrists, psychologist, licensed marriage and family therapists, and licensed clinical social workers)

Number of Trainees in Clinic: 16-18 (9 psychiatry fellows, 2 psychology interns, 1-3 psychology practicum students, 4 MFT trainees)

25. Rady Children’s Hospital Medical Behavioral Unit (MBU) (Tamara Maginot).
Overview: Rady Children’s Hospital San Diego’s Medical Behavioral Unit offers medical stabilization for children, adolescents and young adults (up to age 30) with eating and feeding disorders. The unit is located on a medical floor and the primary focus is acute medical stabilization of malnutrition. The average length of stay for patients is two weeks. Patients and their families receive daily psychological treatment including brief behavioral interventions, Family Based Treatment (FBT; Maudsley approach) as well as CBT and DBT skills training. Work with families also includes case management. Additionally, the psychology team provides consultation services to other medical specialties (e.g., gastroenterology, neurology, and nephrology) for children hospitalized at Rady Children’s Hospital with feeding and eating issues.

Primary Supervisor(s): Tamara Maginot, PhD
Supervision: Interns will participate in individual and group supervision on a weekly basis. Supervision will entail live observations.

Assessment and Treatment Opportunities: Interns have the opportunity to obtain the following: a) Family Based Treatment (FBT; Maudsley Approach); b) individual therapy; c) group and milieu therapy; d) meal supervision; e) consultation services with other medical specialties. Approach to treatment is evidence based therapy in the medical setting.

Didactics/Team Meetings: Child and Adolescent Psychiatry Grand Rounds; Eating Disorder Seminar; Multidisciplinary rounds; Optional Didactics: Child & Adolescent Psychiatry Fellowship Seminars/Courses (e.g., Forensic, Neuropsychology, Psychopharmacology)

Research Opportunities: Opportunities are available to make connections with research investigators at the UCSD Eating Disorder Center and Medical Behavioral Unit to discuss potential post-doctoral research opportunities.

Primary Location: Rady Children’s Hospital San Diego
Patient Population: Interns will gain experience with a diverse patient population, ranging in age from elementary aged children through young adulthood (up to age 30) presenting to the hospital with a primary medical diagnosis. Interns will gain exposure to a variety of psychiatric diagnoses, including eating disorders, feeding disorders, obsessive compulsive disorder; conversion disorder; disruptive behavior disorders as well as mood and anxiety disorders. The patient population is diverse in terms of socio-economic status, race/ethnicity, and family composition.

Number of Staff on the Unit: Three adolescent medicine attending physicians, 2 Child Psychiatrists; 1-2 psychologists, 2 Licensed Marriage and Family Therapists, 1 dietitian, nursing.
Number of Trainees on the Unit: Rotating psychiatry fellows, 1 post-doctoral fellow; 1 psychology intern, 1 psychology practicum student, 1 MFT trainee).

26. VA La Jolla PTSD Clinical Team (Katharine Lacefield)
Overview: The La Jolla PTSD Clinical Team serves Veterans of all service eras (e.g., Vietnam, Korea, Persian Gulf, Iraq, Afghanistan, Global War on Terror) with PTSD due to combat/military trauma, civilian trauma, interpersonal trauma, and military sexual trauma (MST). The multidisciplinary La Jolla PTSD Clinical Team meets weekly and consists of psychology, social work, nursing, and peer support providers who deliver treatment at the VA Medical Center in La Jolla.

Primary Supervisor(s): Katharine Lacefield, Ph.D.
Supervision: Individual supervision with possible video/audio-taping or direct supervision, group consultation, and possibly opportunities for interns to provide vertical supervision to practicum students

Assessment and Treatment Opportunities: Interns will develop empirically-based PTSD assessment and treatment skills through conducting comprehensive intake interviews with differential diagnosis, utilizing self-report measures for PTSD and related symptoms, and learning the Clinician Administered PTSD Scale (CAPS). Interns will conduct empirically
supported individual and group psychotherapy for PTSD, primarily prolonged exposure (PE) and cognitive processing therapy (CPT). Interns may also conduct empirically-based cognitive behavioral- or ACT-focused interventions for posttraumatic anger, guilt, readjustment to civilian life difficulties, and comorbid conditions, particularly substance use disorders and TBI-related cognitive difficulties. Interns will learn to conduct individualized treatment planning, consult with multidisciplinary treatment team members, and assist with other VA clinic and community referrals.

**Didactics/Team Meetings:** Weekly La Jolla PTSD Clinical Team meeting; weekly didactic PTSD training seminar

**Research Opportunities:** Interns may examine research questions through the ongoing clinic evaluation study and have the opportunity to collaborate on manuscripts if interested.

**Primary Location:** VA Medical Center in La Jolla

**Patient Population:** Primarily male Veterans from all service eras with diverse racial and ethnic backgrounds

- Number of Staff in Clinic: 7
- Number of Trainees in Clinic: 2 interns, 1-2 graduate practicum students, 1 postdoctoral fellow, 1 psychiatry resident (variable)

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**27. VA Mission Valley PTSD Clinic (Lisa Campbell, Victoria Farrow, Abigail Angkaw)**

**Overview:** The VA Mission Valley PTSD Clinical Team serves Veterans of all service eras (e.g., Vietnam, Korea, Persian Gulf, Iraq, Afghanistan, Global War on Terror) with PTSD due to all trauma types, e.g., combat/military trauma, military sexual trauma, interpersonal trauma, civilian trauma, childhood trauma. The multidisciplinary VA Mission Valley PTSD Clinical Team meets weekly and consists of psychology, psychiatry, nursing, social work, chaplain, and peer support providers who deliver treatment at the VA Outpatient Clinic in Mission Valley.

**Primary Supervisor(s):** Lisa B. Campbell, Ph.D., Victoria Farrow, Ph.D., Abigail Angkaw, Ph.D.

**Supervision:** Individual supervision with possible video/audio-taping or direct supervision, group consultation, and opportunities for interns to provide vertical supervision to practicum students

**Assessment and Treatment Opportunities:** Interns will develop empirically-based PTSD assessment and treatment skills through conducting comprehensive intake interviews with differential diagnosis, utilizing self-report measures for PTSD and related symptoms, and learning the Clinician Administered PTSD Scale (CAPS). Interns will conduct empirically supported individual and group psychotherapy for PTSD, primarily prolonged exposure (PE) and cognitive processing therapy (CPT). Interns may also conduct empirically-based cognitive behavioral-, ACT-, or DBT-focused interventions for posttraumatic anger, guilt, readjustment to civilian life difficulties, complex trauma, and comorbid conditions, particularly substance use disorders and TBI-related cognitive difficulties. Interns will learn to conduct individualized treatment planning, consult with multidisciplinary treatment team members, and assist with other VA clinic and community referrals.

**Didactics/Team Meetings:** Weekly Mission Valley PTSD Clinical Team meeting; weekly didactic PTSD training seminar; possible opportunities for CPT consultation, PE consultation, & complex trauma consultation

**Research Opportunities:** Interns may examine research questions through the clinic evaluation study and have the opportunity to collaborate on manuscripts if interested.

**Primary Location:** VA Mission Valley Community Based Outpatient Clinic

**Patient Population:** Male and Female Veterans from all service eras with diversity in terms of race, ethnicity, gender identity and sexual orientation

- Number of Staff in Clinic: 16
### Number of Trainees in Clinic:

- 2 psychology interns
- 1-3 psychology postdoctoral fellows
- 1 graduate practicum student
- 1 social work intern
- 2-3 psychiatry residents
- 1 clinical pharmacy resident

### 28. The VA ASPIRE Center (Melissa Tarasenko, Ph.D.)

**Overview:** The ASPIRE Center is a 40-bed residential treatment facility focused on recovery from PTSD and TBI in homeless/risk of homeless OEF/OIF/OND Veterans. Although symptom reduction is an important treatment goal of learning-based interventions for PTSD, intervention targets have expanded to include quality of life and functioning in social and instrumental role domains among patients with more complex psychosocial needs and comorbidities. As such, the focus of rehabilitation and recovery efforts at the ASPIRE Center is to ultimately improve real-world community functioning. The program model parallels that of a community college, in which Veterans design, through shared decisions, a treatment plan that maps onto their individualized recovery plan. The Center provides state-of-the-art interprofessional rehabilitation, and the trainee will collaborate with ASPIRE staff representing the full range of disciplines, including nursing, psychiatry, psychology, neuropsychology, social work, vocational rehabilitation, chaplaincy, addiction therapists, and OT.

**Primary Supervisor:** Melissa Tarasenko Ph.D.

**Supervision:** Intern will have one primary supervisor and will interact regularly with other psychologist, postdoctoral fellow and ASPIRE Center staff (e.g., psychiatrist, social work) through group supervision, team meetings and co-therapy.

**Assessment and Treatment Opportunities:** Interns have the opportunity to gain hours in almost every category of clinical care, including: a) diagnostic assessment; b) individual therapy; c) group therapy; d) supervision and didactics. Interns will learn to deliver evidence-based interventions for PTSD (e.g., Cognitive Processing Therapy and Prolonged Exposure). In addition, interns will learn to administer, score and interpret comprehensive neuropsychological assessments for Veterans with history of TBI, and provide feedback regarding test results. Students will gain from participating in a multidisciplinary training environment, which includes diverse clinicians and trainees and clinical and translational academic researchers.

**Didactics/Team Meetings:** Interns will participate in daily, interdepartmental treatment team meetings to orchestrate care; staff typically include psychiatry, pharmacy, social work, nursing, vocational rehabilitation, occupational therapy, dietician, chaplain. Interns will also attend the following weekly seminars: PTSD and Clinical Neuropsychology Seminar.

**Research Opportunities:** As time and interest permits, interns may participate in research examining archival clinical data, performance improvement data, affiliate with research projects conducted by supervisors, and/or co-author manuscripts.

**Primary Location:** Old Town San Diego at the ASPIRE Center

**Patient Population:** Male and female Veterans who are younger (aged 20 to 40 is typical) and who have been diagnosed with either PTSD or TBI and who are unstably housed. There is also opportunity to work with a subset of the Veterans who have primary diagnoses of psychotic disorders, chronic pain, mood disorders, or anxiety disorders other than PTSD

**Number of Staff in Clinic:** 26 full-time staff, including psychiatry, pharmacy, nursing, psychology, chaplain services, vocational rehabilitation, occupational therapy, health education, recreation opportunities, dietary services, and yoga and mindfulness-based interventions.

**Number of Trainees in Clinic:** 1 psychology intern

### 29. VISN 22 Telemental Health Center (Leslie Morland/Jeffrey Poizner)

**Overview:** The VISN 22 TMH Center has 13 offices with state-of-the-art telehealth technology utilized for clinical care of Veterans across the VISN 22 Region. This Center consists of a multidisciplinary team of psychiatrists, psychologists, social workers, and researchers and a
A robust training program focused on proving Evidence-based Psychotherapy (EBP) specialty care to Veterans using live, interactive videoconferencing; particularly targeting those Veterans in rural and underserved communities. The VISN 22 TMH Center resides within the VASDHS operating under the Mental Health Care Line, providing individual, couple, and group therapy in addition to medication management to Veterans presenting with a range of mental health issues including PTSD, Depression, and Anxiety. The VISN 22 TMH Center provides opportunities to a range of clinical trainees to develop their EBP clinical skills and develop a niche in the field working with rural veterans and innovative technology applications. Interns will work directly with Veterans who are referred for specialty services, specifically EBP for PTSD, Anxiety, Depression, and Anger Management. The intern will have opportunities to learn about EBPs and then have the unique opportunity to provide such therapies to Veterans using our innovative technology platforms. Trainees will learn to develop skills necessary to work with various cultural groups in a unique way.

**Primary Supervisor:** Leslie Morland, PsyD, Jeffrey Poizner, PsyD

**Supervision:** Weekly individual

**Assessment and Treatment Opportunities:** Initial psychological evaluation experience as well as training in evidence-based practices for PTSD (Cognitive Processing Therapy and Prolonged Exposure Therapy), Depression (Cognitive Behavioral Therapy and Acceptance Commitment Therapy), Anxiety (Cognitive Behavioral Therapy and Acceptance Commitment Therapy), and Insomnia (Cognitive Behavioral Therapy for Insomnia).

**Didactics/Team Meetings:** Weekly staff meetings; bi-weekly case consultation and didactics

**Research Opportunities:** Current ongoing randomized clinical trials with telemental health and PTSD.

**Primary Location:** Old Town San Diego at the ASPIRE Center

**Patient Population:** Male and Female veterans; multiple war eras

**Number of Staff in Clinic:** The TMH team includes 8 psychologists, 2 social workers, 1 psychiatrist, administrative support staff, and several research psychologists

**Number of Trainees in Clinic:** 1 psychology intern, 1 psychology practicum student, 1 social work intern, 3 psychiatry residents
SECTION 3: INTERNSHIP POLICIES AND PROCEDURES

This section presents our current policies regarding a number of common issues affecting internships.

Qualification Standards
The following general qualification standards are required for a student’s application to be considered:

- Only applicants from APA- or CPA-approved doctoral programs in clinical or counseling psychology will be considered.
- Interns are expected to have completed at least three years of doctoral study before beginning the internship year, including at least 1,000 clinical practicum hours; applicants must be on track to complete this requirement.
- Applicants should also have proposed their dissertation before applying to this internship.
- Only students who have completed their department's practicum requirements and whose department indicates that the student is ready for a doctoral internship should apply.

Our internship program trains doctoral candidates to function as autonomous psychologists in health care settings that place a strong emphasis on teaching and research, using the Boulder, scientist-practitioner model. As such, we attempt to recruit students with balanced experiences in both clinical and research domains rather than students with a predominantly clinical professional focus. The majority of our Interns develop careers that include a research component.

Accreditation
The Internship Program is accredited by APA. To confirm status contact APA at the following address:

- Office of Program Consultation and Accreditation
- American Psychological Association
- 750 First Street, N.E.
- Washington, DC 20002-4242
- Phone: (202) 336-5979
- Fax: (202) 336-5978
- Email: apaaccred@apa.org

Selection of Interns-APPIC
The UCSD/VA Psychology Internship Training Program is a member of the Association of Psychology Postdoctoral and Internship Centers (APPIC). Offers are tendered to applicants through the APPIC National Computer Match process in strict compliance with APPIC policy regarding internship offers and acceptances. Instructions for the APPIC-MATCH Procedures can be found on the APPIC Web Site at www.appic.org/match. This internship site agrees to abide by the APPIC policy that no person at this training facility will solicit, accept or use any ranking-related information from any intern applicant. Applicants are similarly expected to conform their behavior to the requirements of the AAPIC program. All participating agencies of the UCSD/VA Psychology Internship Program are Equal Opportunity Employers and we encourage ethnic minority applicants.

Supervision
Each rotation has a primary supervisor identified for internship training. Supervisors are responsible
for the direct training of the intern throughout the year it is the intern's responsibility to confer regularly with their supervisors. In some instances primary supervisors may be changed during the year if faculty leave the program or a change proves advantageous for the intern.

In addition to the primary supervisors, each intern may have several other placement supervisors assigned to him or her during the course of the year. Placement supervisors are senior psychologists assigned to the unit or clinic in which the intern is placed. Nearly all supervisors have faculty or staff appointments in the Department of Psychiatry at UCSD.

**Training Methods**

In helping interns acquire proficiency in the core competency areas noted previously (see Section 1), a training approach is used in which internship learning objectives are accomplished primarily through experiential clinical learning under the supervision and mentoring of licensed psychologists. All work performed by interns during the internship year must be under the supervision of a licensed psychologist. Interns work with and are supervised by psychologists who serve as consultants to medical staff members or who serve as members of multidisciplinary teams in treatment units or programs. The internship is primarily learning oriented and training considerations take precedence over service delivery. Generally, an intern's training in a given placement will follow a progression from observation to increasingly autonomous, albeit monitored and supervised, activity.

Essentially a developmental approach to experiential clinical learning and supervision is utilized. Interns receive a minimum of four hours of supervision each week, i.e., 2 hours of individual supervision and 2 hours of group supervision. In addition to the core competency areas, supervisors also teach and provide supervision to interns in specific methods of assessment and in evidence-based treatment approaches, depending on the particular placement and particular supervisor. Complementing basic individual and group supervision, through the process of working closely with a number of different supervisors, interns are also exposed to role modeling and mentoring on an ongoing basis.

**Office Hours and Vacation Policy**

The general office hours for the internship cover Monday through Friday. Interns are typically expected to work 40-45 hours/week. However, the intern’s professional responsibilities may extend the work week beyond its customary 45 hours at various times throughout the year. Additionally, some placements require evening clinics on one night of the week. Interns and supervisors will collaborate to develop the exact schedule to meet the needs of the intern and of the clinic.

VA-paid interns will accrue leave based on the formulas found here: [https://www.opm.gov/policy-data-oversight/pay-leave/leave-administration/fact-sheets/annual-leave/](https://www.opm.gov/policy-data-oversight/pay-leave/leave-administration/fact-sheets/annual-leave/) though for most interns this will be 4 hours of annual leave and 4 hours of sick leave per pay period. For UCSD-paid interns, vacation time, insurance and all other benefits are administered through the Office of Graduate Medical Education [https://meded.ucsd.edu/index.cfm/gme/](https://meded.ucsd.edu/index.cfm/gme/). All interns must reserve 4 days of leave until his/her dissertation is defended. This will help ensure adequate time is available to return to the home university for the defense. No annual/vacation leave is allowed in June, July, or during interview week in January unless by approved by the Training Directors. In addition to the leave described above, regularly scheduled paid holidays and those designated by appropriate administrative authority are available to the interns (please see: [https://www.opm.gov/policy-data-oversight/snow-dismissal-procedures/federal-holidays/#url=2016](https://www.opm.gov/policy-data-oversight/snow-dismissal-procedures/federal-holidays/#url=2016) and [http://blink.ucsd.edu/HR/benefits/time-off/holidays.html](http://blink.ucsd.edu/HR/benefits/time-off/holidays.html) ).
On VA rotations, interns must formally request annual leave at least 60 days in advance from both primary supervisors. Supervisors and the intern must sign leave slips BEFORE leave is approved. This is necessary to plan for coverage in the intern’s absence. An exception to the ADVANCED SUPERVISOR APPROVAL rule would be a true emergency (i.e., a death in the family). Emergency leave would count against the total leave. The Internship Program Assistant is responsible only for keeping track of approved leave. Reports are issued to the Directors and intern’s primary supervisors, so they can be aware of accumulated leave taken. All interns are, however, responsible for appropriately entering time and leave into relevant VA and UCSD timekeeping systems. Any leave taken outside of the above procedures would be subtracted from the leave amounts detailed above.

APPIC encourages its member programs to be as creative and flexible as possible in accommodating family leave or other reasons for extended leave needs of trainees and also encourages trainees to be open-minded, realistic and collaborative when requesting leave. In collaboration with human resources departments and relevant policies to ensure compliance with relevant regulations and standards, prospective and current trainees and the internship program will consider what is appropriate and reasonable, what is practical and feasible for the site, and how to ensure that the trainee receives the full benefit of the training experience when considering extended leave situations. Please see http://www.appic.org/Portals/0/downloads/APPIC_GUIDELINES_FOR_PARENTAL_LEAVE_1-21-16.pdf, http://vaww.oaa.med.va.gov/FAQS/details.aspx?TID=26&Cat=3, and/or https://meded.ucsd.edu/index.cfm/gme/house_officer/house_officer_benefits/insurance_benefits/leave_of_absence/ for additional extended leave policies.

A more detailed office hour and vacation policy is located in the intern handbook but is available to applicants upon request to the Internship Coordinator.

**Requirements for Completion of the Internship**

To successfully complete the internship, interns are expected to meet the following requirements:

1. **2080 Hours**: Requirement of one year of full-time training to be completed in no less than 12 months. Interns must complete 2080 hours of supervised on-duty time during the internship year.

2. **Patient Contact**: Interns are expected to average 20-24 hours each week minimum in direct patient contact. These minimums may, at times, be exceeded. Direct patient contact includes only "face to face" contact with patients for any type of group or individual therapy, psychological testing, assessment activities, or patient education. Successful completion of the internship requires a minimum of 1000 hours of direct patient contact.

3. **Psychotherapy**: In major rotations in which treatment is a significant element, interns will typically be expected to be involved in at least one form of intervention. Most major rotations offer opportunities for group therapy. The intern and supervisor will coordinate their caseload consistent with the expectation of at least 50% time being spent in direct patient care.

4. **Psychological Assessment**: Completion of eight comprehensive assessment reports is the target during the training year, though many interns (e.g., neuropsychology interns) will complete substantially more. These assessments must be based on data integrated from multiple sources.
and must include written reports with diagnostic impressions and recommendations. Assessments based solely on interviews or single tests do not meet this requirement. An integrated psychological testing report includes a review of history, results of an interview and at least two psychological tests from one or more of the following categories: personality/symptom report measures, intellectual tests, cognitive tests, and neuropsychological tests relevant to their rotation(s).

5. **Didactic Training:** Interns are required to attend the weekly Psychology Internship Seminar Series. Interns are encouraged and often required to attend in-service conferences and other didactic presentations associated with their placements.

6. **Case Presentations:** In addition to informal case presentations made in group supervision, interns are required to present one empirically informed psychotherapy/counseling case or one assessment/diagnostic case as part of the Psychology Internship Seminar Series in order to demonstrate competency in these areas (See Evaluation Section). As part of each case presentation, the intern should review and discuss research literature relevant to that case.

7. **Competencies:** At the end of each placement, in the judgment of his/her supervisor and the Training Directors, each intern must have achieved a satisfactory level of competence. To successfully complete the internship, interns must meet minimal competency requirements [Level 3] in 80% of the competency objectives (see Section 1 above) and have no unacceptable competency ratings.
## SECTION 4:

Sample Internship Seminar Schedule

<table>
<thead>
<tr>
<th>Date</th>
<th>Name</th>
<th>Topic</th>
</tr>
</thead>
<tbody>
<tr>
<td>July 6, 2017</td>
<td>Tom Rutledge</td>
<td>Is it Depression or Disease</td>
</tr>
<tr>
<td>7/13/2017; 12:30-3:30 VA Admin bldg 1006</td>
<td>Safety/Assault Prevention Training</td>
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<tr>
<td>July 20, 2017</td>
<td>Natalie Castriotta</td>
<td>ACT/MI</td>
</tr>
<tr>
<td>July 27, 2017</td>
<td>Sandy and Amy</td>
<td>Beach Party</td>
</tr>
<tr>
<td>August 3, 2017</td>
<td>Laura Dorman</td>
<td>DBT</td>
</tr>
<tr>
<td>August 10, 2017</td>
<td>Moira Haller</td>
<td>PE and CPT</td>
</tr>
<tr>
<td>17-Aug-17</td>
<td>Dimitri Perivoliotis</td>
<td>CBT for Psychosis</td>
</tr>
<tr>
<td>August 24, 2017</td>
<td>Mark Jacobson</td>
<td>Working with LGBTQ Clients</td>
</tr>
<tr>
<td>August 31, 2017</td>
<td>Heidi Kraft</td>
<td>Military Culture</td>
</tr>
<tr>
<td>September 7, 2017</td>
<td>Sandy and Amy</td>
<td>2 month check in</td>
</tr>
<tr>
<td>September 14, 2017</td>
<td>Veronica Cardenas</td>
<td>Working with Latino clients</td>
</tr>
<tr>
<td>September 21, 2017</td>
<td>Lisa Eyler</td>
<td>Unconscious Bias in the Work Place</td>
</tr>
<tr>
<td>September 28, 2017</td>
<td>Katherine Williams</td>
<td>Childhood Psychopathology</td>
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<tr>
<td>October 5, 2017</td>
<td>Nicole Stadnick</td>
<td>Autism</td>
</tr>
<tr>
<td>October 12, 2017</td>
<td>Post Doc Panel</td>
<td>What do I want and how do I find It?</td>
</tr>
<tr>
<td>October 19, 2017</td>
<td>Robert Heaton</td>
<td>Mentoring/Professional Development</td>
</tr>
<tr>
<td>October 26, 2017</td>
<td>Andrew Sarkin</td>
<td>Program Evaluation</td>
</tr>
<tr>
<td>November 2, 2017</td>
<td>Sandy J. Brown</td>
<td>Assessment : Pediatric Assessment</td>
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<tr>
<td>11/9/17; 12:30-4:30pm</td>
<td>Sparta, Kalichman, &amp;</td>
<td>Law &amp; Ethics</td>
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<td>November 16, 2017</td>
<td>Vince Filoteo</td>
<td>Assessment: Consultation Liaison</td>
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<td>THANKSGIVING</td>
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<tr>
<td>November 30, 2017</td>
<td>Marc Norman</td>
<td>Assessment: Assessment in Medically Ill Populations</td>
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<tr>
<td>December 7, 2017</td>
<td>Sandy and Amy</td>
<td>Holiday Party</td>
</tr>
<tr>
<td>December 14, 2017</td>
<td>Amy Jak</td>
<td>Assessment: TBI and Functional Consequences</td>
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<td>January 4, 2018</td>
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<td>Beth Twamley</td>
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<td>Matt Worley</td>
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<td>Lavinia Fiorentino</td>
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<td>Leslie Morland</td>
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<td>Melissa Tarasenko</td>
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<td>June 29, 2018</td>
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</tbody>
</table>
SECTION 5:

PSYCHOLOGY INTERNSHIP PROGRAM
ORGANIZATIONAL CHART

Igor Grant, M.D.
Chairman, Department of Psychiatry

Sandra J. Brown, Ph.D., ABPP
Co-Director of Internship Training

Amy Jak, Ph.D
Co-Director of Internship Training

PSYCHOLOGY INTERNSHIP TRAINING COMMITTEE (PITC)

Leslie Anderson, Ph.D.
Autumn Backhaus, Ph.D.
Katherine Bangen, Ph.D.
Mark W. Bondi, Ph.D.
Lauren Brookman-Frazee, Ph.D.
Sandra J. Brown, Ph.D.
Brian Buzzella, Ph.D.
Lisa Campbell, Ph.D.
Natalie Castriotta, Ph.D
Veronica Cardenas, Ph.D.
Lisa Delano-Wood, Ph.D.
Maya D’Eon
Colin Depp, Ph.D.
Vicki Farrow, Ph.D.
J. Vincent Filoteo, Ph.D.
Amanda Gooding, Ph.D.
Eric Granholm, Ph.D.
Karen Hanson, Ph.D.
Moira Haller, Ph.D.
Mark Jacobson, Ph.D.

Amy Jak, Ph.D.
Rujvi Kamat, Ph.D.
Katharine Lacefield, Ph.D.
Tamara Maginot, Ph.D.
Cortney Mauer, Ph.D.
Corey McCulloch, Ph.D.
Benjamin McKenna, Ph.D.
Arpi Minassian, Ph.D.
Leslie Morland, Psy.D.
Mark G. Myers, Ph.D.
Marc Norman, Ph.D.
Dimitri Perivoliotis, Ph.D.
Jeffrey Poizler, PsyD
Joshua Ruberg, Ph.D. T
Thomas R. Rutledge, Ph.D.
Melissa Tarasenko, Ph.D.
Ryan S. Trim, Ph.D.
Christina Wierega, Ph.D.
Katherine Williams, Ph.D.
Matt Worley, Ph.D.
PSYCHOLOGIST TRAINING FACULTY

Vitae Abstracts

Dr. Leslie Karwoski Anderson is a clinical assistant professor and the Training Director at the UCSD Eating Disorders Center. She has a Ph.D. in Clinical Psychology from the University of Kansas and completed her clinical internship at Duke University Medical Center. Before coming to UCSD, she held a clinical faculty appointment at the University of Washington and was a supervisor in Marsha Linehan’s DBT training clinic. She currently oversees the training and clinical supervision of the UCSD EDC staff and conducts individual, family, and group therapy for eating disorders. Her research interests are in treatment development and outcomes, especially with regards to adaptations of DBT and FBT and complex presentations of eating disorders, and she has published multiple papers in this area. She is also the Associate Editor for Eating Disorders: The Journal of Treatment and Prevention. She frequently gives talks and workshops on DBT, eating disorders, suicidality, and related topics in the community and at national conferences and is currently serving as the Co-Chair of the Academy for Eating Disorders Suicide Special Interest Group.

http://eatingdisorders.ucsd.edu/faculty/

Autumn L. Backhaus, Ph.D. received her Ph.D. in psychology from the University of Nebraska-Lincoln, and completed her clinical internship and postdoctoral fellowship at the University of California, San Diego (UCSD). Dr. Backhaus is an Assistant Clinical Professor of Psychiatry at UCSD and a staff psychologist with VASDHS as a Primary Care Mental Health Integration Psychologist and the Behavioral Medicine Clinic in Mission Valley. Her current research activities and interests include: program and policy evaluations and outcomes, binge eating and obesity in veterans, the role of trauma on binge eating and treatment, Military Sexual Trauma and health outcomes, and Veteran clinical characteristics and problems with the law. She provides psychotherapy and supervision in empirically supported and trauma informed treatments including prolonged exposure, cognitive processing therapy, and acceptance and commitment therapy. Dr. Backhaus is a supervisor for the Behavioral Medicine rotation in the Mission Valley Outpatient Clinic. She conducts clinical work and supervision focused on the use of Acceptance and Commitment Therapy and Cognitive Behavioral Therapy to treat chronic pain and other chronic medical conditions.

http://profiles.ucsd.edu/autumn.backhaus

Katherine Bangen, Ph.D. earned her Ph.D. in Clinical Psychology, with an emphasis in neuropsychology, from the San Diego State University/UC San Diego Joint Doctoral Program. She completed a predoctoral internship at the UCLA Semel Institute for Neuroscience and Human Behavior specializing in neuropsychological assessment. Dr. Bangen completed a NIH postdoctoral fellowship in geriatric mental health at UC San Diego School of Medicine as well as a fellowship in traumatic brain injury and cognitive rehabilitation at the VA San Diego Healthcare System. She is currently an Assistant Professor in the UCSD School of Medicine. Dr. Bangen provides neuropsychological assessment services at the UCSD Memory, Aging and Resilience Clinic (MARC), a multi-disciplinary team providing comprehensive cognitive, emotional and physical health evaluations of older adults. She provides clinical supervision to SDSU/UCSD Joint Doctoral Students and UCSD interns at the MARC. Her research interests involve applying brain imaging and neuropsychological tools to study cognitive and brain changes with normal aging, mild cognitive impairment and dementia, such as Alzheimer’s disease. Dr. Bangen is the recipient of a VA Career Development Award, an Alzheimer’s Association New Investigator Research Grant, and an Alzheimer’s Disease Research Center Pilot Study Award.

http://profiles.ucsd.edu/katherine.bangen

Mark W. Bondi, Ph.D. received his Ph.D. in Clinical Psychology from the University of Arizona in 1991 after completing a Predoctoral Internship in Clinical Psychology and Neuropsychology at the Veterans Affairs
San Diego Healthcare System (VASDHS) and the University of California, San Diego (UCSD) School of Medicine (1990-1991). He then completed an NIH Postdoctoral Fellowship at UCSD from 1991-1993 prior to joining UCSD's faculty. Dr. Bondi is currently a Professor of Psychiatry at UCSD and Director of the Neuropsychological Assessment Unit at the VASDHS. He is a Diplomat of the American Board of Professional Psychology – Clinical Neuropsychology subspecialty – and Fellow of APA Division 40 (Clinical Neuropsychology) and the National Academy of Neuropsychology. He serves on the Board of Governors of the International Neuropsychological Society and on the Board of Directors for the American Board of Clinical Neuropsychology. Dr. Bondi is the current recipient of a Mid-Career Investigator Award in Patient-Oriented Research from the National Institute on Aging, and he is principal investigator of additional NIH and Alzheimer’s Association grants. His research interests center on the cognitive and brain changes of individuals at risk for dementia. He has published two books and over 120 articles and book chapters, serves as a reviewer for a number of journals and grant agencies, and he is Associate Editor for the Journal of the International Neuropsychological Society.

http://profiles.ucsd.edu/Mark.Bondi

Lauren Brookman-Frazee, Ph.D. received her Ph.D. from the Counseling, Clinical, and School Psychology Program at the University of California, Santa Barbara. She completed her pre-doctoral clinical internship at UCSD and her post-doctoral fellowship at UCSD and the Child and Adolescent Services Research Center. She is currently an Associate Professor in the UCSD Department of Psychiatry, primary supervisor at the Rady Children's Hospital Outpatient Psychiatry rotation, Research and Training Director at the Autism Discovery Institute at Rady Children's, and Associate Director at the Child and Adolescent Services Research Center. Her clinical expertise is in the areas of autism spectrum disorder, disruptive behavior problems, and parent training interventions. Her NIMH-funded research studies are focused on examining the effectiveness and implementation of evidence-based practice strategies for children with autism spectrum disorders in publicly-funded mental health services and the sustainment of evidence-based practices for a broad population of children in these service settings.

http://profiles.ucsd.edu/lauren.brookman-frazee

Sandra J. Brown, Ph.D. received her Ph.D. in clinical neuropsychology from the University of Windsor in 1987 after completing an Internship at Henry Ford Hospital in Detroit, specializing in neuropsychology. She is currently a Clinical Professor of Psychiatry in the UCSD School of Medicine, the Co-Director of Internship Training and directs the internship rotation training program at the Child and Adolescent Inpatient Psychiatric Service (CAPS). Dr. Brown is also a Diplomat of the American Board of Professional Psychology with a specialty in Neuropsychology, a member of Division of 40 of the American Psychological Association and a member of the International Neuropsychological Society. Her clinical interests include neuropsychological functioning in children and adults with neurological and psychiatric disorders.

http://profiles.ucsd.edu/Sandra.Brown

Brian Buzzella, Ph.D., ABPP received his Ph.D. in Clinical Psychology from Boston University in 2011. Dr. Buzzella attended the UCSD/VA San Diego Psychology Internship Training Program (2010-2011), splitting time between the VA’s Family Mental Health Program and UCSD’s Child and Adolescent Psychiatric Services (CAPS) inpatient unit. He completed fellowship in the OEF/OIF/OND PTSD Treatment Clinic through the VASDHS/UCSD Clinical Psychology Postdoctoral Residency Program. Dr. Buzzella is currently an Assistant Professor of Psychiatry in the UCSD School of Medicine, as well as the Director of the Family Mental Health Program in the VASDHS Psychology Service. His research focuses on the prevention and amelioration of relational distress. His clinical work uses Cognitive Behavioral Couple Therapy, Integrative Behavioral Couple Therapy, and elements of Emotionally Focused Couple Therapy to treat relational distress among Veteran couples with a wide range of presenting complaints (e.g., preventative relationship education, repair from an emotional hurt, recovery from an affair).

http://profiles.ucsd.edu/brian.buzzella
Lisa B. Campbell, Ph.D. received her Ph.D. in Clinical Psychology from the University of Nevada, Reno in 2004 after completing her predoctoral internship at the VA Loma Linda Healthcare System. She then completed her postdoctoral training in behavioral medicine, anxiety disorders, and military sexual trauma at VA San Diego. Dr. Campbell is currently a staff psychologist at VASDHS, where she provides service in the Telemental Health program and directs the South County PTSD program which specializes in treatment of combat related trauma for veterans of all eras at the Mission Valley outpatient clinic. Her clinical interests include treatment of PTSD with empirically supported treatments including Prolonged Exposure and Cognitive Processing Therapy.

Natalie Castriotta, Ph.D. received her Ph.D. in Clinical Psychology from the University of California, Los Angeles (UCLA) in 2013 after completing a predoctoral internship in clinical psychology at the VA Long Beach. She completed postdoctoral fellowships within both the VA San Diego/UCSD Postdoctoral Residency Program and the UCLA Anxiety and Depression Research Center, where she specialized in evidence-based treatment for anxiety and related disorders. Dr. Castriotta is a Staff Psychologist at the VA San Diego within the Behavioral Health Interdisciplinary Program (BHIP). Dr. Castriotta’s clinical interests center on the use of cognitive behavioral therapy (CBT, including third-wave) in the treatment of a wide range of anxiety, mood, trauma, and personality disorders. Dr. Castriotta’s research interests include the mechanisms of change following cognitive and behavioral treatments, strategies for optimizing the effectiveness of exposure-based therapies, and means of disseminating evidence-based treatments.

Veronica Cardenas, Ph.D. is an Assistant Clinical Professor of Psychiatry at UCSD and the Associate Director for Training and Education, Psychiatry and Psychosocial Services at the UCSD Moores Cancer Center. Dr. Cardenas received her doctorate from Pacific Graduate School of Psychology, Palo Alto, and completed a clinical internship at Sharp Mesa Vista Hospital, San Diego and an NIMH postdoctoral fellowship at the University of California, San Diego (UCSD). Her current research interests include evaluating the implementation of evidence-based mental health treatments in non-traditional mental health settings (i.e., primary care clinics, cancer treatment centers). She provides training and supervision on psychological assessment, diagnosis or ongoing therapy for patient and families who are experiencing issues that are either related to the cancer experience or are interfering with cancer treatment. Her clinical training includes the delivery of individual, couples, family and group interventions using evidenced-based treatments such as CBT, ACT, Problem-Solving Therapy, and Meaning Centered Therapy in a cancer treatment setting.

http://profiles.ucsd.edu/Veronica.Cardenas

Lisa Delano-Wood, Ph.D. is an Associate Professor of Psychiatry within the School of Medicine at UCSD, Clinic Director of the UCSD Memory, Aging and Resilience Center (MARc), and Staff Neuropsychologist at the Veterans Affairs San Diego Healthcare System. She received her doctorate in Clinical Psychology with a specialization in Neuropsychology from Michigan State University in 2005. She then completed a postdoctoral fellowship in Neuropsychology at the San Diego VA Healthcare System/UCSD from 2005-2006 and a National Institutes of Mental Health fellowship in Geropsychiatry at UCSD from 2006-2008.

http://profiles.ucsd.edu/Lisa.Delano-Wood

Maya D’Eon, Ph.D.

Colin Depp, Ph.D. is an Associate Professor in the Department of Psychiatry at the School of Medicine of the University of California, San Diego (UCSD). He is a Staff Psychologist in the VA San Diego and Director of the Mood Disorders Program. Dr. Depp is also the Deputy Director of the Education and Training Division of UC San Diego’s Clinical and Translational Research Institute and he is a faculty member at UCSD’s Sam and Rose Stein Institute for Research on Aging. Dr. Depp received his bachelor’s degree from the University
of Michigan and his doctorate in clinical psychology from the University of Louisville. He then completed a pre-doctoral internship at the Palo Alto Veteran’s Administration and a National Research Service Award post-doctoral fellowship in the Division of Geriatric Psychiatry at UCSD.

http://profiles.ucsd.edu/Colin.Depp

Victoria A. Farrow, PhD received her PhD in clinical psychology from American University. She completed her predoctoral training at the Salem VA Medical Center, and postdoctoral training within the VASDHS/UCSD Postdoctoral Residency program, focusing on evidence-based assessment and treatment of PTSD. She currently serves as a staff psychologist at VASDHS within the Mission Valley PTSD Clinic, and is an Assistant Clinical Professor of Psychiatry at UCSD. Dr. Farrow provides evidence-based treatments (e.g., PE, CPT) for PTSD and trauma-related distress. She is interested in the long-term effects of prolonged and repeated traumatization and has a special interest in working with interpersonal trauma survivors (e.g., survivors of military sexual trauma, civilian sexual assault, childhood physical and sexual abuse).

J. Vincent Filoteo, Ph.D. received his Ph.D. in Clinical Psychology in 1994 from the Joint Doctoral Program in Clinical Psychology at the University of California, San Diego, and San Diego State University. He completed his internship at the University of California, San Diego and the Veterans Administration Hospital in San Diego, where he specialized in adult neuropsychology. Dr. Filoteo is a Professor, In Residence, in the Department of Psychiatry at the University of California, San Diego. His research interests are in the cognitive neuroscience of learning, memory, and attention, as well as the neuropsychology of dementia (Alzheimer's disease, Dementia with Lewy Bodies) and basal ganglia disorders (Parkinson's disease). His clinical interests include dementia and neurocognitive dysfunction in rehabilitation medicine.

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Amanda Gooding, Ph.D. completed her Ph.D. in Clinical Psychology at Fordham University with an emphasis in Neuropsychology and Health Psychology. She completed her predoctoral internship at the UCSD/VA Psychology Internship Program and her postdoctoral fellowship at the Comprehensive Epilepsy Center at Columbia University Medical Center. As a member of the UCSD faculty, Dr. Gooding provides clinical neuropsychological services to individuals with a wide range of neurological, medical, neurodevelopmental and psychiatric conditions, as well as other cognitive and learning disorders. She provides pre- and post-operative evaluations for individuals with epilepsy and brain tumors, and she has specialty training in intra-operative language mapping and intracarotid sodium amobarbital (i.e., Wada) procedures. Broadly, Dr. Gooding’s research interests focus on the impact of neurological disease on cognition and behavior, with a particular emphasis on improving post-operative functional recovery in neurosurgical populations. Dr. Gooding serves on the Board of Directors of the Hispanic Neuropsychological Society (HNS), and is the Programming Officer for the APA Division 40 Early Career Neuropsychologist Committee (ECNPC).


Eric Granholm, Ph.D. received his Ph.D. in Clinical Psychology from the University of California, Los Angeles, in 1991. At the UCLA Neuropsychiatric Institute, he completed both a Clinical Psychology Internship and a Post-Doctoral Fellowship in schizophrenia research. Dr. Granholm is a Professor of Psychiatry at the UCSD Medical School, and Acting Chief, Psychology Service, and Acting Division Director, Psychosocial Rehabilitation and Recovery Services at VASDHS. He is a member of the Neuropsychology and Experimental Psychopathology Tracts of the SDSU/UCSD Joint Doctoral Program in Clinical Psychology. He is an active basic and clinical researcher in the areas of CBT and SST (CBSST), neuropsychology, and psychophysiology (pupillometry) in consumers with schizophrenia.

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Moira Haller, Ph.D. received her Ph.D. in Clinical Psychology from Arizona State University in 2013, and completed a predoctoral internship at the UCSD/VA Psychology Internship Training program. She also completed a postdoctoral fellowship in Addictions Treatment at VASDHS/UCSD. Dr. Haller is currently an Assistant Clinical Professor of Psychiatry in the UCSD School of Medicine and a staff psychologist at VASDHS. She supervises the SARRTP PTSD track rotation, which provides evidence-based PTSD treatment to veterans currently engaging in residential substance use disorder (SUD) treatment. Dr. Haller’s research and clinical interests both center on better understanding and treating individuals with PTSD/SUD.

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Mark W Jacobson, Ph.D. received his Ph.D. in Clinical Psychology from Wayne State University in 1999 after completing a predoctoral internship in clinical psychology at the VASDHS and UCSD. He completed a postdoctoral fellowship in neuropsychology at the VASDHS/Veteran’s Medical Research Foundation. Dr. Jacobson is an Associate Clinical Professor of Psychiatry, UCSD School of Medicine, and Staff Neuropsychologist at VASDHS. Dr. Jacobson’s research interests include integrating neuropsychology and psychological assessment, and neuroimaging of neurocognitive disorders.

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Amy J. Jak, Ph.D. received her Ph.D. in Clinical Psychology from the University of Cincinnati in 2004 after completing a predoctoral internship in clinical psychology at the VASDHS and UCSD. She completed a postdoctoral fellowship in neuropsychology at the VASDHS/Veteran’s Medical Research Foundation. Dr. Jak is an Associate Professor of Psychiatry, UCSD School of Medicine, Staff Neuropsychologist and Director of the Traumatic Brain Injury Cognitive Rehabilitation Clinic at the VASDHS, and the Co-Director of Internship Training. She is the Secretary of APA Division 40, Society for Clinical Neuropsychology and on the Editorial Board of the Journal of Clinical and Experimental Neuropsychology. Dr. Jak’s research interests include integrating neuropsychology, neuroimaging, behavioral variables, and genetics to better understand traumatic brain injury as well as disorders of aging with funding from the DoD, VA, and Alzheimer’s Association.

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Leslie Morland, PsyD is the Director of the Veterans Integrated Service Network (VISN) 22 Telemental Health Center and a Clinical Psychologist at the Department of Veterans Affairs San Diego Healthcare System. Dr. Morland devotes time to regional and national leadership roles focused on the strategic
planning and implementation of the use of technology to increase access to posttraumatic stress disorder (PTSD) specialty care in the Veterans Health Administration. Dr. Morland is frequently called upon as a consultant by the Department of Veterans Affairs Central Office regarding the provision of telemental health (TMH) services, project design, educational training, and program implementation. Dr. Morland is also a Research Psychologist at the Department of Veterans Affairs, National Center for PTSD where she designs and implements multiple federally funded research projects examining the clinical and cost aspects of using technology to provide evidence based PTSD services for rural Veteran populations. In addition, Dr. Morland provides research consultation and mentorship on multiple research projects and national initiatives. Dr. Morland’s TMH research has resulted in numerous peer-reviewed publications and personally invited presentations.

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Mark G. Myers, Ph.D. received his Ph.D. in clinical psychology in 1991 from the UCSD/SDSU Joint Doctoral Program in Clinical Psychology, completed his predoctoral internship at Brown University, and completed a post-doctoral fellowship at the Brown University Center for Alcohol and Addiction Studies. Dr. Myers is a Staff Psychologist at VASDHS where he serves as Lead Clinician for Tobacco Cessation and Associate Director of the VASDHS National Tobacco Cessation Clinical Resource Center. He is also a Professor in the Department of Psychiatry at UCSD. Dr Myers is a licensed psychologist in the State of California. His clinical role includes providing tobacco cessation services to veterans with psychiatric disorders and overseeing cognitive-behavioral group-based tobacco cessation treatment in VASDHS. His research includes smoking cessation among individuals with co-morbid psychiatric disorders and youth tobacco use and smoking cessation.

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Marc A. Norman, Ph.D. received his Ph.D. in Clinical Psychology from Brigham Young University. He is a Clinical Professor of Psychiatry at the University of California, San Diego. He completed the University of California, San Diego/VA Psychology Internship program and a neuropsychology postdoctoral fellowship at the UC San Diego Alzheimer’s Disease Research Center. Dr. Norman earned a Diplomat from the American Board of Professional Psychology, specializing in Clinical Neuropsychology. He provides clinical service to the Heart/Lung, Kidney/Pancreas, and Liver transplant teams. Also, he provides general neuropsychological evaluations as well as intracarotid amytal (aka Wada) procedures and awake brain surgery language mapping for the UC San Diego Epilepsy and Brain Tumor Teams. Dr. Norman is a Fellow and serves on the Board of Directors for the National Academy of Neuropsychology. He is an examiner for the American Board of Clinical Neuropsychology and on the Professional Advisory Board for the American Epilepsy Foundation San Diego Chapter.

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Jeffrey Poizner, Psy.D. is a Staff Psychologist at VA San Diego and specializes in providing evidence-based treatments to veterans via Telemental Health. Dr. Poizner received his Psy.D. in Clinical Psychology from the California School of Professional Psychology at Alliant International University, San Diego, and completed his pre-doctoral internship at UCLA and post-doctoral fellowship at UCSD. He is involved with training clinicians nationwide in Prolonged Exposure as a consultant in the VA Prolonged Exposure Training Initiative. Clinical and research interests include reducing barriers and improving access to evidence-based treatments for veterans with PTSD.

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Joshua L. Ruberg, Ph.D., received his Ph.D. in Clinical Psychology from the University of Louisville in 2009 after completing his pre-doctoral internship at the UCSD/VA Psychology Internship Training Program. He
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Thomas R. Rutledge, Ph.D., ABPP received his Ph.D. in clinical psychology from the University of British Columbia in 1999. He completed his internship at the Toronto Hospital, and a postdoctoral fellowship specializing in the study of behavioral factors in cardiovascular disease at the University of Pittsburgh. Dr. Rutledge is an Associate Professor In-Residence with the UCSD School of Medicine, and a clinical psychologist in the Psychology Service at the VA Medical Center. He is board certified in clinical health psychology by the American Board of Professional Psychology. Dr. Rutledge directs the behavioral medicine services in the Weight Control Clinic in La Jolla and provides chronic pain assessment and treatment services for the Anesthesia Pain Clinic. Each of these clinics is comprised of multidisciplinary provider teams in which psychology offers a variety of services ranging from consultation, to treatment, and research. Dr. Rutledge provides clinical supervision for these rotations to practicum students in the UCSD/SDSU Joint Doctoral program and to psychology interns in the VA/UCSD psychology internship program. Training in these clinics includes a strong focus on rehabilitation and health behavior change.

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Melissa Tarasenko, Ph.D. received her Ph.D. in Clinical Psychology from the University of Nebraska-Lincoln in 2013. She completed a predoctoral internship in clinical psychology at the UCLA Semel Institute for Neuroscience and Human Behavior and a postdoctoral fellowship in research and treatment of severe mental illness at the VASDHS Mental Illness Research, Education, and Clinical Center (MIRECC). Dr. Tarasenko is a staff psychologist at the VASDHS ASPIRE Center, a residential rehabilitation program that primarily serves Veterans with PTSD and substance abuse disorders. Dr. Tarasenko’s research interests include utilizing neurophysiological biomarkers to personalize the provision of cognitive enhancement interventions, as well as evaluating the effectiveness of cognitive remediation and other rehabilitative interventions.

Ryan Trim, Ph.D. received his Ph.D. in Clinical Psychology from Arizona State University after completing an APA-approved internship at the VA San Diego. He then served as an NIAAA postdoctoral fellow at UCSD, and was appointed as faculty in the UCSD Department of Psychiatry in 2009. His research has focused on the development of substance use disorders across the lifespan. Drawing from developmental psychopathology and ecological systems perspectives, Dr. Trim has focused on three major areas of research: 1) Cognitive processes underlying the development of substance use in adolescence and young adulthood 2) Family and environmental characteristics that exacerbate risk for substance use outcomes across development and 3) Exploring antecedents and consequences of substance use changes over time. Consistent with these research areas, he has an overarching interest in longitudinal data analysis and utilizing statistical models of change to capture dynamic patterns of substance use behaviors. Currently, Dr. Trim is funded by NIAAA for his research on young adult alcohol-tobacco co-use. He is also a co-investigator on several other NIAAA, NIDA, and VA research projects at UCSD/VASDHS. Dr. Trim holds a concurrent appointment in the VASDHS Psychology Service (as Director of the SAMI Dual Diagnosis Clinic) and serves as a primary clinical supervisor for psychology students and interns in the SAMI Clinic. He also
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Christina E. Wierenga, Ph.D. received her Ph.D. in Clinical Psychology with a specialization in Neuropsychology, Neurorehabilitation, and Clinical Neuroscience from the University of Florida in 2005 and completed an NIH postdoctoral fellowship at UCSD in Biological Psychiatry and Neuroscience. Dr. Wierenga is currently an Associate Professor of Psychiatry in the UCSD School of Medicine. She co-directs the research program at the UCSD Eating Disorders Treatment and Research Center. Her research focuses on treatment development and brain functioning in ill and recovered adolescents and adults with eating disorders. She uses innovative functional neuroimaging and neuropsychological methods to examine the neurobiology of eating disorders. Clinically, Dr. Wierenga conducts neuropsychological assessments of children, adolescents and adults with a range of psychological and neurological disorders. Her clinical work also uses FBT, DBT, and CBT to treat anorexia nervosa, bulimia nervosa, binge eating disorder and EDNOS. Dr. Wierenga is actively involved in training graduate students, interns and postdoctoral fellows.

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Katherine Nguyen Williams, Ph.D. received her undergraduate degree in Psychology at UCSD and graduate degrees in Clinical Psychology at Pepperdine University & Loma Linda University. She completed her doctoral internship at the UCSD/VA program, and postdoctoral research fellowship at the Child & Adolescent Services Research Center. Dr. Williams is the leading supervising psychologist at the Department of Outpatient Psychiatry, Rady Children's Hospital. She is an Assistant Clinical Professor of Psychiatry at UCSD, where she teaches and mentors medical students and psychiatry fellows within the School of Medicine, and supervises UCSD psychology interns and SDSU/UCSD Joint Doctoral Program practicum students. Dr. Williams has presented at Grand Rounds, conducted clinical trainings, and co-authored articles and research presentations nationally and internationally. Her clinical interests include modular approach to cognitive-behavioral therapy, as well as assessment of autism spectrum disorders. Her research interests focus on understanding factors that influence the fidelity and effective implementation of evidence-based practices in the treatment of childhood emotional and behavioral disorders. Dr. Williams is an adjunct faculty member at University of San Diego, and maintains a private practice in La Jolla, California specializing in psychological assessments for children and adolescents.

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Matt Worley, Ph.D. received his Ph.D. in Clinical Psychology from the San Diego State University/University of California, San Diego Joint Doctoral Program in 2013 after completing a predoctoral internship in clinical psychology at the Seattle VA Medical Center. Following a NIDA-funded postdoctoral research fellowship in the Center for Behavioral and Addiction Medicine in the UCLA Department of Family Medicine, in 2015 Dr. Worley joined the UCSD Department of Psychiatry as an Assistant Professor of Psychiatry and the VASDHS as a Staff Psychologist in the Alcohol and Drug Treatment Program. He is Principal Investigator of an NIH-funded mentored career development award to examine the role of maladaptive decision-making in prescription opioid addiction in chronic pain patients. Dr. Worley's research interests include underlying mechanisms of addictive behavior, mediators of behavioral and pharmacological interventions for substance use disorders, and the integration of advanced statistical methods for identifying mechanisms of change in clinical trials and longitudinal studies.

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