



Psychology Postdoctoral Handbook 2009-2010 Salt Lake City, Utah



**Psychology Service
VA Salt Lake City Health Care System**



VA Salt Lake City Health Care System Psychology Postdoctoral Handbook Salt Lake City, Utah

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for 2009-2010 Fellows

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POSTDOCTORAL FELLOWSHIP TRAINING ACTIVITIES

Fellowship in Brief

The VA Salt Lake City Health Care System (VASLCHCS) postdoctoral fellowship is a full-time, 12-month continuous appointment focused on specialty training in the evaluation and treatment of veterans with Post-Traumatic Stress Disorder. Postdoctoral Fellows will be active members of two interdisciplinary treatment teams: 1) the PTSD Clinical Team through the Mental Health Department, and 2) the Polytrauma Team through the Physical Medicine and Rehabilitation Department. Fellows will also provide community outreach to returning veterans from Afghanistan (Operation Enduring Freedom; OEF) and Iraq (Operation Iraqi Freedom; OIF). Especially relevant to the VA Mental Health Strategic Plan, psychological services are provided within the complementary areas of emotional trauma (e.g., military combat, military sexual trauma), physical trauma (e.g., TBI, orthopedic injuries), substance abuse, and couples/family discord, primarily within the OEF/OIF veteran population.

Post Traumatic Stress Disorder Clinic Team (PCT)

The PTSD Clinical Team (PCT) is designed to provide assessment and treatment of military-related PTSD. Sources of PTSD are primarily combat-related, but may also include military sexual trauma or other traumatic events occurring during the military, such as motor vehicle accidents or physical assaults. Goals for fellows at the completion of their postdoctoral residency are to have developed competency and expertise in the assessment of military related PTSD, to become familiar with dynamics of PTSD, and to institute evidence-based treatments (e.g., *Cognitive Processing Therapy, Exposure Based Therapy and Acceptance and Commitment*

Therapy) in individual and group settings. Fellows will gain experience in the assessment and treatment of PTSD, including brief treatment models, psychoeducational strategies, and process-oriented group psychotherapy, as well as individual psychotherapy, couples/family therapy, and structured didactics. Fellows will gain expertise in utilizing the Clinician Administered PTSD-Scale (CAPS), and opportunities for Tele-Mental Health are also available. Typically, trainees from several disciplines, such as Social Work and Psychiatry, will also be receiving training in the PCT along with psychology interns and practicum students from local universities.

Military-Related PTSD

Veterans who have experienced combat or non-combat military trauma are the focus of the PTSD Clinic at VASLCHCS. Noncombat trauma can be the result of accidents (vehicular, job-related, non-job related), physical assault, medical duties (body and casualty retrieval), and mortuary duties. These traumas occur while the veteran is on active duty. Postdoctoral fellows have an opportunity to participate in Coping Skills Groups (*Dialectical Behavior Therapy; DBT*), *Cognitive Processing Therapy (CPT)*; individual and/or group settings), *Seeking Safety* groups, and in applied research. *Seeking Safety* is a present-focused, dual-diagnosis program established to treat co-occurring PTSD and substance abuse problems, with an emphasis on safety and stabilization. Fellows will work in collaboration with Substance Abuse staff to identify appropriate referrals, facilitate groups, and gather outcome data to determine the effectiveness of the *Seeking Safety* program with veterans.

Roles/responsibilities may include the following:

- Participating in weekly PTSD Evaluation Group by assessing 2-3 veterans/week
- Facilitating training for local law enforcement officers regarding the nature of PTSD
- Conducting individual/group therapy at local college for veterans attending classes on site
- Conducting group therapy for outpatient drug abuse facilities for veterans with PTSD
- Conducting a variety of groups for VA patients (DBT, ACT, Seeking Safety, CPT)
- Carrying an individual caseload of 8-12 veterans at any given time
- Providing supervision to doctoral-level practicum students training in PTSD assessment and treatment

Meet your supervisors

Steven N. Allen, Ph.D.

Position: Staff Psychologist and Team Leader, Post Traumatic Stress Disorder Clinical Team

Length of Service: 1990

Degree: University of Wyoming, Clinical Psychology

Faculty Appointments: Adjunct Clinical Professor, Department of Educational Psychology; Adjunct Associate Professor, Department of Psychiatry, University of Utah

Clinical/Research Interests:

My current responsibilities included coordination of the outpatient PTSD program for the VASLCHCS. The program provides psychological assessment and evidence based treatment for veterans with military related PTSD. I am frequently involved in the supervision of PTSD diagnostic assessments, especially by psychology practicum students. Reflecting the importance of community involvement in treatment of PTSD, I am involved in several state groups providing outreach and coordination of care to veterans. Our current research projects include participation in the VA cooperative studies research program investigations of risperidone and prazosin in the treatment of PTSD.



Mary (Kitty) Roberts, Ph.D.

Position: Staff Psychologist, PTSD Clinical Team and Tele-Mental Health

Length of Service: 2003

Degree: University of North Texas, Clinical Psychology

Faculty Appointments: Associate Instructor, Westminster College; Clinical Assistant Professor, Department of Psychiatry, School of Medicine, University of Utah

Clinical/Research Interests:

I have an interest in TeleMH as 70% of my caseload consists of veterans with PTSD who live more than 50 miles from the VASLCHCS. I have presented research on the efficacy of TeleMH at the American Telemedicine Association's annual meetings. I have also presented research at the ISTSS Annual meetings regarding the efficacy of Insomnia Group therapy for veteran with PTSD, as well as the long-term effects of the Insomnia Group therapy. I am currently investigating the efficacy of using an Insomnia Workbook on an individual basis in lieu of attending the Insomnia Group. I am a Co-PI on a VA Cooperative Studies investigating treatment efficacy of Prazosin in patients diagnosed with PTSD.



OEF/OIF Outreach

The Operation Enduring Freedom/Operation Iraqi Freedom (OEF/OIF) component of the PTSD Clinic provides a wide range of services for veterans and their families. One focus of this program is to assess and provide treatment for veterans with PTSD and possible co-occurring TBI. Interventions are provided in group, individual, and couples formats using a variety of approaches, including *Cognitive Processing Therapy (CPT)*, *Coping Skills Training*, and *Seeking Safety*. A second focus of this program is on providing clinical services for veterans who are sub-diagnostic for PTSD but report difficulties with readjustment post-deployment.

Participation with the PTSD team involves assessment, triage crisis management, community outreach, and liaison with community organizations. Fellows deliver services to returning OEF/OIF veterans through ongoing outreach into active branches of the Air Force, Army, Marine Corps, and Navy. They will conduct presentations to community and service members, may hold clinic hours and conduct group and family/couples therapy on military bases, and expand electronic services for veterans (i.e., tele-mental health services, internet services).

This program also places an emphasis on outreach to veterans who continue to serve their country in the National Guard. The PTSD clinic has been working closely with the National Guard and regularly provides psychoeducational presentations, assessments, consultations, and direct clinical contact. This relationship has been useful for reaching veterans who were having difficulty but were unsure of the resources available to them. Many Guardsmen and women who have returned from deployment have multiple opportunities to interact one-on-one with therapists who will “check-in” with them during official National Guard trainings and activities. This allows Guardsmen and women to become familiar with VA staff and make them more approachable if needed in the future. Fellows assist in conducting *Post-Deployment Health Re-Assessments (PDHRA's)* over the VASLCHCS's large geographical catchment area.

Future plans for the OEF/OIF program are to cultivate and maintain relationships with local organizations who serve veterans. Part of this work comes through participation in the OEF/OIF Taskforce, which is a multi-organization group that shares information and coordinates programming to reach OEF/OIF veterans throughout the Utah and parts of Idaho.

Roles/responsibilities may include:

- Attending PTSD Clinical Team meetings
- Attending the OEF/OIF taskforce meetings

- Screening, assessment, diagnosis, and treatment of PTSD and readjustment disorders both on and off site
- Conducting psychoeducational presentations about readjustment issues and PTSD
- Planning and participating in outreach activities related to OEF/OIF veterans

Meet your supervisors

Tanya Miller, Psy.D.

Position: Staff Psychologist

Clinical Assignments: PCT Clinic

Length of Service: 2007

Degree: Argosy University–

Phoenix, Clinical Psychology

Clinical/Research Interests:

Currently my interests involve treatment of OIF/OEF veterans presenting with combat trauma, readjustment issues, and/or Military Sexual Trauma (MST). I enjoy meeting with soldiers who have recently returned from deployment, and working with soldiers/veterans and their families regarding the readjustment process. I have experience treating veterans who present with comorbid PTSD and substance abuse and/or other self-harm behaviors, and frequently utilize the *Seeking Safety* program to improve coping strategies. I also treat veterans who experienced MST, and whom frequently are also survivors of childhood sexual and/or physical abuse using a variety of treatment modalities, based on the veteran's presenting issues.



Thomas Mullin, Ph.D.

Position: Staff Psychologist,
PTSD Clinical Team

Length of Service: 2005

Degree: University of Utah,

Counseling Psychology

Clinical/Research Interests:

My dissertation explored tracking the relationship between long-term diabetes control and the subjective experience of



distress. As a part of my graduate training, I completed a predoctoral internship at the VASLCHCS. This training has a generalist psychology training perspectives that has medical, psychiatric inpatient, and mental health outpatient elements. As a staff psychologist at the VASLCHCS, I provide assessment and treatment for veterans, with an emphasis on veterans from Operation Iraqi Freedom/Enduring Freedom. I use several types of interventions in his work including empirically supported Cognitive Processing Therapy, Cognitive Behavioral Therapy, Coping Skills, among other approaches. I also co-facilitate an Iraq/Afghanistan readjustment group that offers support and readjustment education to veterans and their support persons. I provide outreach to National Guardsmen and Reservists who have completed deployments and are readjusting to post-deployment life.

Military Sexual Trauma

The Military Sexual Trauma (MST) program was developed to assist men and women who were the recipients of unwanted sexual attention and/or were sexually assaulted during their period of service. This PTSD program offers a broad variety of treatment modalities aimed at serving each veteran at his or her particular level of functioning.

For veterans who experience significant PTSD symptoms with minimal ability to cope with daily stressors, fellows will have an opportunity to enhance coping skills through use of the Seeking Safety program. This program is designed to assist veterans in identifying ways to more effectively manage stressful situations, and highlights multiple domains in which trauma can affect their lives. This is a highly structured treatment that can be utilized in both individual and group formats.

For those veterans who possess a solid foundation of coping strategies, and/or who

have successfully completed the *Seeking Safety* program, fellows will have an opportunity to utilize *Cognitive Processing Therapy (CPT)* in order to further process traumatic events, while simultaneously identifying and processing “stuck points” in the trauma. It is anticipated that the majority of veterans will be able to complete CPT or other exposure-based treatment during their course of treatment, either in an individual or group format.

Fellows will evaluate and treat men and women who experienced Military Sexual Trauma (MST). MST Coping Skills and Process Groups are available for both men and women, with the aim of mediating PTSD-related symptomatology and decreasing maladaptive coping strategies commonly utilized by this population (e.g. substance abuse, self-harm, etc.). Cognitive Processing Therapy is available in both individual and group settings. Post-doctoral fellows will facilitate these treatments alongside Social Workers and other psychology trainees on the MST team.

Roles/responsibilities may include:

- Providing group psychotherapy to veterans who have experienced MST, utilizing *Seeking Safety and Cognitive Processing Therapy*
- Conducting individual psychotherapy to reduce PTSD symptoms by utilizing evidenced-based treatments
- Attending MST meetings and participating in monthly MST teleconferences aimed at improving care provided to MST veterans

Meet your supervisors

Tanya Miller, Psy.D.

(see OEF/OIF Outreach)

Mary (Kitty) Roberts, Ph.D.

(see Military-Related PTSD)

Polytrauma Team

The VASLCHCS is a Level III Polytrauma Support Clinic Site which provides outpatient assessment and treatment services to returning OEF/OIF soldiers and veterans with Polytrauma and Traumatic Brain Injury (TBI). Fellows will be members of the Polytrauma treatment team, which is an interdisciplinary rehabilitation team, including members from Medicine, Nursing, Physical Therapy, Occupational Therapy, Speech and Language Pathology, Social Work, and Psychology. This team works together to evaluate and treat patients with complicated physical and psychological presentations. Fellows participate in the interdisciplinary Polytrauma clinic, assisting in the evaluation and treatment of OEF/OIF veterans with possible brain injury and other co-morbid physical injuries and psychological concerns. Clinic duties may include the following:

- Evaluating for history of military related concussion
- Examining the pattern of cognitive, behavioral, and emotional sequelae of polytrauma
- Assessing psychosocial issues and psychological functioning.
- Making recommendations to assist with diagnosis and treatment planning
- Providing veterans and families with education about brain injury and mental health concerns

Fellows will have the opportunity to gain understanding and knowledge about TBI and the associated physical, cognitive, behavioral, and emotional sequelae. They receive specific training in the evaluation and treatment of mild traumatic brain injury and comorbid psychological disorders. These experiences aim to enhance the fellow's ability to work with patients with challenging neuropsychiatric presentations in a variety of evaluative and therapeutic settings.

Roles/responsibilities in this setting may include:

- Conducting psychological and neuropsychological assessments with OEF/OIF

veterans with TBI and other co-morbid physical and psychological issues

- Consulting with places of employment and academic institutions to set up appropriate accommodations and facilitate best possible functioning
- Providing individual and couples therapy to veterans with brain injury and other traumatic injuries working on issues of adjustment to disability and acceptance
- Conducting psychoeducational groups for veterans with polytrauma and/or TBI
- Engaging in outreach and community education about traumatic brain injury as available
- Providing supervision to doctoral-level practicum students participating in neuropsychological assessment training

Meet your supervisor

Jennifer Romesser, Psy.D.

Position: Staff Psychologist

Clinical Assignments: Polytrauma Team and PCT Team

Length of Service: 2007

Degree: Pepperdine University,
Clinical Psychology

Clinical/Research Interests:

My clinical interests include providing evaluation and treatment services for OEF/OIF soldiers and veterans with possible traumatic brain injury (TBI) and other co-morbid physical injuries and psychological concerns. I enjoy conducting neuropsychological evaluations with this population as well as providing individual and couples therapy focusing on issues of adjustment to change in functioning. I serve as a liaison between the Polytrauma Clinical Team and other mental health specialty clinics consulting about TBI and other patient care issues. I provide community outreach and education about brain injury and mental health issues in the returning soldier population. I am



involved in several research projects exploring the relationship between mild traumatic brain injury, post traumatic stress disorder and depression. I also serve as the Site Investigator on a VA Cooperative Study evaluating the efficacy of Prazosin for treatment of nightmares in patients diagnosed with PTSD.

Affiliated Programs

Inpatient Psychiatry

This 21-bed Inpatient Psychiatry program delivers crisis-oriented services to patients with a wide range of presenting problems. Patients represent all adult age groups and a variety of diagnoses. There are two different multidisciplinary treatment teams, who develop treatment plans in cooperation with the patients. Program options include individual and group therapy, comprehensive psychological assessment, psychopharmacology, and structured psycho-educational groups. The Inpatient Psychiatry Unit has a strong commitment to training. Students from each of the major disciplines (e.g., Psychiatry, Psychology, Social Work, and Nursing) rotate through the unit.

Inpatient Mental Health Consultation/ Liaison Team (MH Consult)

The MH Consult team is an interdisciplinary team consisting of Psychiatry, Psychology, and Clinical Pharmacy. This team provides mental health services to patients within inpatient medical settings including Acute Medicine, Surgery, Neurology, and Intensive Care Units by utilizing a consult-liaison model. Common referral issues include: medical decision-making capacity, cognitive functioning, adjustment to illness, evaluation/ management of psychiatric symptoms (e.g., depression, anxiety, psychosis), and substance abuse/detoxification.

Physical Medicine and Rehabilitation

This small (6-bed) specialty unit provides inpatient rehabilitation to patients presenting with a variety of disabling diagnoses/illnesses, including: stroke, TBI, spinal cord injury, amputation, pain syndromes, and deconditioning/debility secondary to prolonged illness. Treatment is provided within an interdisciplinary/transdisciplinary team environment, consisting of representatives from Physical Medicine, Nursing, Occupational Therapy, Physical Therapy, Speech and Language Pathology, Social Work, Recreational Therapy, and Psychology.

Geriatric Primary Care

The Geriatric Primary Care rotation is sponsored through the VASLCHCS Geriatric Research, Education, and Clinical Center (GRECC). The GRECC is a local, regional, and national resource for geriatric education and training and integration of new and existing geriatric knowledge and skills into clinical practice. The Home Based Primary Care (HBPC) Program is an outpatient service with a mission of providing comprehensive, interdisciplinary primary care in the homes of veterans with complex medical, social, and behavioral conditions for whom routine clinic-based care is ineffective.

Behavioral Health/Pain Clinic

On the Behavioral Health/Pain Clinic rotation, interns see a variety of patients with both medical and psychological issues. The Behavioral Health Service is a Consult/Liaison service to all of the primary care clinics and the team consists of attending physicians, residents, interns, NPs, PAs, nurses at all levels, and dieticians. In the Pain Clinic, assessments and short-term interventions are used to address the psychological underpinnings of acute and chronic pain, and provide alternative pain-reduction methods to be used in conjunction with, or in the place of, opioid medication.

Substance Abuse Treatment Program

The North Star Substance Abuse Treatment program consists of three programs offering treatment for veterans with an identified alcohol and/or drug problem: 1) General Outpatient Program—ASAM Level I treatment intensity, 2) Intensive Outpatient Program—ASAM Level II.1, 3) Eagle's Nest Program—ASAM Level III.5. Substance abuse treatment is conducted within an interdisciplinary team comprised of a physician assistant, pharmacist, psychologist, social workers, addiction therapists, psychology technicians, registered nurse, and vocational rehabilitation specialist. The basic treatment approach is broad spectrum with an emphasis on a cognitive-behavioral Relapse Prevention model.

Homeless Program

Our Homeless Program, within the Health Care for Homeless Veterans (HCHV) clinic, provides extensive outreach, evaluation, treatment, referrals and ongoing case management to homeless veterans with mental health and substance abuse problems. The program staff conducts outreach to identify homeless veterans, and performs psycho-social evaluations and treatment interventions to homeless individuals in community-based sites. The program aims to provide a continuum of care to include evaluation, support, and treatment; assisting clients to achieve their highest level of functioning. The HCHV program is comprised of an interdisciplinary team (psychologist, nurse practitioner, social workers, mental health associates, and a vocational rehabilitation specialist). There are four Grant and Per Diem Programs that involve a partnership between the VA and the community to provide transitional housing and treatment for homeless veterans.

Access Crisis Team (ACT)

The Access/Crisis Team (ACT) serves as a point of access to mental health (MH) services for veteran patients. ACT performs intake assessments with patients who are seeking MH services for the first time, and facilitates appropriate follow-up and intervention with MH providers and clinics. In addition, ACT triages and assesses veteran patients presenting with MH crises and determines the appropriate level of care to address their individual needs. ACT also serves as "gatekeepers" for the VA Clinics and the Inpatient Psychiatric Unit (IPU), facilitating the admission of patients to the IPU and the transfer of patients to community psychiatric hospitals when beds are not available. ACT provides services to patients in the Emergency Department, Outpatient MH, and other outpatient clinics throughout the medical center. Currently, there is one Psychologist, two Advanced Practice Nurses, and five Social Workers assigned to this team. Some training is provided to assist fellows as they perform the responsibilities of their fellowship. Further training and experience with the ACT may be available upon request.

Vocational Rehabilitation Program

The primary purpose of the Vocational Rehabilitation Program is to promote the vocational and community adjustment of veterans we serve. Vocational rehabilitation specialists work with the multidisciplinary treatment teams to seek to ensure that vocational rehabilitation efforts are coordinated with the other parts of a patient's treatment plan. Vocational rehabilitation specialists provide services to patients from a variety of clinics; however, most patients served have psychiatric and/or substance abuse problems. Although fellows are not routinely assigned to the Vocational Rehabilitation program, they receive some training in this area, and are encouraged to seek out additional experiences as desired.

Mental Illness Research, Education and Clinical Center (MIRECC)

The MIRECC was established to generate new knowledge about the causes and treatments of mental disorders, apply new findings to model clinical programs, and disseminate new findings through education to improve the quality of veterans' lives and their daily functioning in their recovering from mental illness. The primary focus of the MIRECC is on suicide prevention. The MIRECC team is comprised of people representing a variety of disciplines including psychology, psychiatry, genetics, and pharmacy. Researchers participating in the MIRECC are conducting studies involving behavioral, genetic, neuropsychological and neurofunctional approaches to understanding suicide and suicidal ideation. Fellows have the opportunity to work with MIRECC investigators in a variety of ways, including: supervising research assistants on ongoing projects, helping design new research projects within the MIRECC, participating in meetings of research teams and the MIRECC, teaching VA staff about suicide and suicide prevention.

Training Requirements

General Information

The VASLCHCS is a full-time postdoctoral placement, with fellows completing a total of 2,080 training hours over a continuous 12-month period. The Fellowship begins on August 31, 2009, with a full orientation from VA Human Resources and Psychology Service, and ends on August 27, 2010. A stipend of \$41,069.80 is paid in equal installments over 26 bi-weekly pay periods. Fellows are not covered by civil service retirement, but are eligible for federal employee group life insurance and health benefits.

Fellows are expected to devote eight hours per day, 40 hours per week, to the training program. The usual tour of duty is 8:00 a.m. – 4:30 p.m., although some assignments require evening work with a delayed shift of 11:30 a.m. – 8:00 p.m. on Mondays and Tuesdays. Additionally, some weekend work is required for outreach activities, with time being taken off within that same week. Fellows who work 40 hours per week can easily fulfill their commitment and still have ample time for vacations and sick leave. Occasionally, the completion of clinical duties will require working extra hours; however, it is the position of the Training Committee that fellows should not exceed a 40-hour workweek on a regular basis. Over the course of the year, fellows will earn approximately 13 vacation days and 13 sick days, in addition to 10 federal holidays. Fellows may also apply for limited hourly credit for attendance at national and regional professional meetings and workshops through their primary supervisor and Training Committee.

Training Philosophy

The Postdoctoral Fellowship at the VASLCHCS is committed to providing high quality specialty training in the areas of PTSD and Polytrauma. We subscribe to the scholar-practitioner model, based on awareness and understanding of the interdependence between the application and the science of psychology. The goal of the post-doctoral program is to train psychologists to develop advanced skills in evidence-based assessment, treatment, and consultation skills with the PTSD and Polytrauma clinical populations. Clinical training experiences are complemented with didactic activities designed to expose fellows to scientific and professional issues in the field of psychology. The primary goal of the program is to train fellows for advanced-level practice and leadership roles in professional psychology through comprehensive, interdisciplinary, specialty clinical and research training. We aim to attract high quality psychologists who will serve the OEF/OIF veteran population and eventually assume roles as leaders in the VA health care system.

Educational Activities

In addition to direct service delivery, fellows spend time each week in other training and educational activities.

Psychology Seminar Series

The Psychology Seminar Series is conducted by psychology staff members, other disciplines from the medical center, and community professionals, with topics varying from year to year depending on programmatic issues and fellow needs/interests. This series is directed primarily toward pre-doctoral interns, with fellows being responsible for presenting on topics related to their post-doctoral training. For example, during the 2008-

2009 training year, fellows will be presenting on Cognitive Processing Therapy and Exposure Based Therapies for PTSD. Fellows are welcome to attend presentations of interest or relevance to their postdoctoral training, such as:

- Military Culture
- Traumatic Brain Injury & Psychological Health Issues
- Neuropsychological Assessment (Two-Day Series)
- Ethical Dilemmas in Clinical Practice
- Ex-POW Issues
- Clinical Supervision

Psychology Internship Training Collaboration

The Psychology Internship Training Collaboration includes trainees and presenters from the VASLCHCS, University of Utah Neuropsychiatric Institute (UNI), Primary Children's Medical Center (PCMC), and Utah State Hospital (USH). This collaboration aims to expose trainees to a variety of topic areas and presentation styles that may not be available at our facility. In addition, trainees will have the opportunity to establish contact with outside facilities and engage in collegial relationships with other trainees. The following specialty topics, scheduled for the 2008-2009 training year, may be of interest to postdoctoral fellows:

- PTSD Overview, MST, OEF/OIF Issues, Evidence-Based Treatment
Steve Allen, PhD and other PTSD Psychologists (VASLCHCS)
- Interpersonal Reconstructive Therapy and Case Conference
Lorna Smith Benjamin, PhD & Kenneth Critchfield, PhD (University Neuropsychiatric Institute)
- EPPP Prep and Early Career Issues
Jennifer Romesser, PsyD and other early career psychologists (VASLCHCS)

- The Role of Functional Neuroimaging in Clinical Neuropsychology
Erin Bigler, PhD, ABCN (Brigham Young University)
- GLBTQ Issues
Lee Beckstead, PhD (University Neuropsychiatric Institute)
- Motivational Interviewing
Kelly Lundberg, PhD (VASLCHCS)
- Native American Culture
Lacey Harris (Primary Children's Medical Center)
- Ethical Issues/Dilemmas
Bruce Carpenter, PhD, Chair of DOPL Psychologist Licensing Board

Local Conferences

Fellows are welcome to attend *Psychiatry Grand Rounds* and *Regional Medical Education Center Conferences* that are frequently held at this VA. Because they are considered VA employees, fellows have the opportunity to attend such conferences at no or low cost. Recent conferences have been facilitated by nationally renowned professionals, and have included such topics as Suicide Risk Assessment, Geriatric Evaluation and Treatment, and Hospice and Palliative Care. Additionally, fellows are invited to attend lectures at the Brain Institute of the University of Utah, addressing state of the art research in the area of neuropsychiatry.

Psychology Intern Presentation Series

Fellows participate in the Psychology Intern Presentation Series, both as colleagues and as presenters. Over the course of the training year, predoctoral interns conduct two formal presentations, one of which is based on a clinical case, and the other of which is focused on a topic of interest. Fellows attend intern presentations as audience members and professional colleagues, and also prepare and deliver at least one presentation based on their own interesting, complicated, and/or intriguing case.

PTSD Seminar

Finally, fellows facilitate a monthly PTSD seminar (“Pub Club”). This seminar includes Psychology Staff, Fellows, Interns, and Practicum students and reviews the empirical literature pertaining to a number of different topics relevant to PTSD, OEF/OIF issues and Polytrauma. Relevant topics may include epidemiological research findings, diagnostic research, treatment, physiological findings, psychopharmacology, and cultural factors involved in PTSD.

Supervision Overview

Members of our Psychology Service, PTSD Team, and Polytrauma Team represent a wide range of backgrounds, clinical interests, and treatment approaches; thus, fellows are exposed to a diverse array of professional activities and therapeutic styles. Fellows receive individual and group supervision from 2-3 supervisors during their post-doctoral year, including a minimum of two hours of face-to-face individual supervision, and two hours of other training/supervision, each week. Typically, supervision is more intensive at the beginning of the training year, with the supervisor taking a more “hands-on” approach. As the fellow’s skill level and needs become better defined, and as he/she demonstrates increased ability to function independently, greater freedom and responsibility is provided.

Fellows also have the opportunity to provide supervision to doctoral-level practicum students training in the areas of PTSD assessment and treatment and Polytrauma/Neuropsychological Assessment. Under the supervision of a licensed psychologist (who is ethically and legally responsible for the practicum student), fellows gain valuable expertise/competency supervision roles, professional identity, mentoring relationships, ethical and legal issues, and teaching skills.

Professional Competency Development

In November, 2005, the Council of Chairs of Training Council (CCTC) recommended to the APA Board of Educational Affairs (BEA) that a set of organized and sequential competency benchmarks be established for Professional Psychology. A work group was assigned to identify competencies that extend through the sequence of doctoral education and training and determine possible methods of assessing attainment of these benchmarks. In June, 2007, the following document was released for public comment: *Assessment of Competency Benchmarks Work Group: A Developmental Model for the Defining and Measuring Competence in Professional Psychology*. In concert with the shift to a “culture of competence” (Roberts, Borden Christiansen, & Lopez, 2005) in professional psychology, the VASLCHCS Psychology Internship provides training experiences aimed at enhancing the following Core Competency Domains:

Foundational Competencies

Relationships — the capacity to relate meaningfully and work effectively with individuals, groups, and/or communities.

Ethical and Legal Standards — able to integrate ethical and legal standards into competent and professional interactions.

Reflective Practice and Self-Assessment — reflective and professional practice conducted within the boundaries of competence, and commitment to lifelong learning, critical thinking, and the development of the profession.

Scientific Knowledge and Methods — the ability to understand and actively integrate science and practice across a number of domains (i.e., biological and cognitive/affective bases of behavior, life-span human development).

Interdisciplinary Systems — identification, knowledge, and cooperative involvement with one's colleagues and peers.

Individual and Cultural Diversity — awareness and sensitivity in working professionally with diverse individuals, groups and communities who represent various cultural and personal backgrounds.

Functional Competencies

Assessment — assessment, diagnosis, and conceptualization of problems and issues associated with individuals, groups, and/or organizations

Intervention — interventions designed to alleviate suffering and to promote health and well-being of individuals, groups, and/or organizations.

Consultation — expert guidance or professional assistance in response to the needs/goals of individuals, groups, and/or organizations.

Research/Evaluation — the generation of research that contributes to the professional knowledge base and/or evaluates the effectiveness of various professional activities.

Supervision/Teaching — supervision, training, and/or evaluation of the professional knowledge base.

Leadership/Administration — managing the direct delivery of services (DDS) and/or the administration of organizations, programs, or agencies (OPA).

Research Opportunities

Some fellows are interested in conducting research during the course of the postdoctoral year. Although the primary focus of our training program is the development of applied skills, fellows may have the opportunity to participate in ongoing clinical research activities and to develop their own research interests. Current research projects include two VA Cooperative Studies investigating treatment efficacy of 1) Risperidone and 2) Prazosin in patients diagnosed with PTSD. A third proposed research study intends to examine early intervention and application of internet technology in treating OEF/OIF veterans in rural areas. Other research opportunities include participation in Cognitive Processing Therapy outcome research to determine the effectiveness of CPT with veterans experiencing combat trauma and/or MST.

Within the area of Polytrauma, fellows may opt to participate in projects examining the relationship between PTSD and persistent post-concussive symptomology (PPCS). For example, one study proposes to examine the therapeutic benefit of participating in structured treatment of PPCS alongside repeated neuropsychological evaluation. Another examines outcomes of psychotherapy with patients with co-morbid PTSD and PPCS, integrating several treatment methods (mTBI treatment with evidence-based PTSD treatment approaches).

Spending Your Postdoctoral Year at the Salt Lake City VA

Veterans Affairs Salt Lake City Health Care System



The Psychology Postdoctoral Program is sponsored by the VASLCHCS, which consists of the George E. Wahlen Department of Veterans Affairs Medical Center in Salt Lake City, Utah, eight Community Based Outpatient Clinics (CBOCs), and one Outreach Clinic in Utah, Idaho and Nevada. The medical center is a mid-sized affiliated tertiary care facility. It is a teaching hospital, providing a full range of patient care services, emergency department, as well as education and research. The VASLCHCS is ranked in the Complexity Level 1a Group based on the 2005 Facility Complexity Model. Comprehensive health care is provided through primary care and tertiary care in areas of medicine, surgery, psychiatry, physical medicine and rehabilitation, neurology, oncology, dentistry, geriatrics, and extended care. The VASLCHCS is part of VA Network 19, which is the largest geographic area in the 48 contiguous states and serves an area covering the state of Utah, most of Montana, Wyoming and Colorado and portions of Idaho, Kansas, Nebraska, Nevada, and North Dakota. During fiscal year 2007 the VASLCHCS served 40,727

veterans through 415,379 outpatient visits and 5,471 inpatients were treated.

The VASLCHCS is located on an 81-acre campus adjacent to the Salt Lake City Veterans Affairs Regional Office and the University of Utah. As a Dean's Committee Medical Center, the VASLCHCS is closely affiliated with the University of Utah School of Medicine, located less than one mile away. In addition to its longstanding affiliation with the University of Utah, the VASLCHCS maintains active affiliations with several other Utah colleges and universities, and serves as a training site for students, interns, and residents from a variety of health care professions. It is home to the Salt Lake City Geriatric Research, Education, and Clinical Center (GRECC), activated in 1991, as well as being selected as a site for a Mental Illness Research, Education, and Clinical Center (MIRECC). Finally, it also serves as the location for the VHA Headquarters funded Mental Health Strategic Health Care Group Informatics Section.

In 2006, VASLCHCS was designated a Level III Polytrauma Center to respond to the needs of veterans of the Afghanistan and Iraq conflicts who have suffered multiple traumatic injuries, including TBI and PTSD. A Polytrauma Support Clinic team consists of clinicians from Physical Medicine and Rehabilitation, Psychology, Social Work, Speech Pathology, Occupational Therapy, and Physical Therapy. This team provides assessment and intervention services to these veterans on an outpatient basis, and, when warranted, facilitates referrals to higher levels of care at inpatient Polytrauma programs in the VHA system.

Although officially designated a General Medical and Surgical facility, the VASLCHCS also provides mental health treatment through



Healing Gardens - Purtkwahgahm
Covered Sweat Lodge and Fire Pit

a variety of inpatient, residential, and outpatient services and programs. The various programs of the Mental Health Services provide comprehensive mental health care by a multidisciplinary staff including psychiatrists, psychologists, clinical social workers, advanced practice nurses, vocational specialists, addiction therapists, and mental health associates. There are more than 700 admissions per year to the Inpatient Psychiatry Unit, with an average daily census of 18. More than 7,000 unique patients per year are seen on an outpatient or consultation basis by Mental Health Services personnel, resulting in over 50,000 patient contacts.

The VASLCHCS is an Equal Opportunity Employer. The Psychology Service actively supports and is in full compliance with the spirit and principle of Affirmative Action in the recruitment and selection of staff and interns. We provide equal opportunities in employment and training for all qualified persons and do not discriminate on the basis of race, color, religion, sex, national origin, age, disabilities, ethnicity, or sexual orientation. In accordance with federal government employment regulations, only citizens of the United States are eligible for training positions funded by the Department of Veterans Affairs.

Frequently Asked Questions (FAQs) About the VA Health Care System

Are all VA Medical Centers alike?

Each medical center, while being part of the largest health care delivery system in the free world, has its own character and specialty services. Some VA Medical Centers have geriatric units, substance abuse units, and day hospitals, while others focus on psychiatric treatment or provide domiciliary care. Prospective applicants should carefully examine the brochure of each VA to verify the available training opportunities. Our medical center provides a full range of medical and psychiatric services in affiliation with the University of Utah Medical School. Along with other specialty services, the VASLCHCS is one of three designated organ transplantation centers in the VA system, is an official site for conducting research in mental illness (MIRRECC), and has developed many of the computer assisted psychological assessment packages now used throughout VA. VASLCHCS also serves a Level III Polytrauma Center, essential in our service to our most recent veterans from Iraq and Afghanistan.

Are all VA patients men?

Although the majority of veterans are men, an increasing number of female veterans are seeking mental health and medical treatment



Healing Gardens - GEM Court Garden

through the VA. Psychology interns have the opportunity to work with female patients from Inpatient Psychiatry, Outpatient Mental Health, the Medicine/Surgery/Rehab Units, and Primary Care. In addition, the Military Sexual Trauma program, which offers services to veterans who have been sexually harassed or assaulted while in the military, primarily serves the female patient population. Several staff members facilitate groups that address women's mental health issues; interested interns may have the opportunity to participate in these groups as deemed appropriate by their Outpatient Mental Health supervisors. Finally, as comprehensive treatment often consists of treating the family system, interns frequently find themselves working with spouses and children of the veteran being served. The VASLCHCS staff offers unique opportunities for increasing awareness of issues that arise in working with a primarily male patient population. Interested staff and interns may meet to discuss such issues, as well as to propose and implement changes aimed at creating a positive environment for both staff and patients. Of note, there is also emerging age-based diversity in our veteran population, with younger veterans from recent conflicts.

Do most VA patients have chronic psychiatric problems?

Only a few VA facilities specialize in the treatment of chronic psychiatric patients. The VASLCHCS is an acute care facility with patients admitted for medical, surgical, neurological and mental health care. Other than having served in the military, the patient population at this medical center is typical of the population at other hospitals in the public sector. The majority of our veterans are seen as outpatients in primary care, specialty, and mental health clinics, and relatively few are considered chronically mentally ill. Inpatient psychiatric hospitalization rarely exceeds three weeks, and patients requiring longer-term care are transferred to another facility.

What is the quality of care and research provided in VA Medical Centers?

VA does not view research as separate from clinical practice but sees research and exploration as an integral part of innovative and effective treatment. It has the highest hiring standards for entry level psychologists of any agency in the country, and supports a number of psychologists with distinguished research credentials as full-time Career Scientists. Psychologists at the VA have made significant research contributions to such areas as substance abuse treatment, health psychology, PTSD, MST, neuropsychology and computerized assessment. VA has extensive Quality Assurance programs, including internal and external audits and accreditation (e.g., Joint Commission on Accreditation of Healthcare Organizations) and specialty accreditation (e.g., Commission on Accreditation of Rehabilitation Facilities), processes in which psychologists actively participate.

What role does VA play in training psychologists?

VHA is the largest single employer of psychologists in the world, with 36% of all licensed psychologists having had part of their training in a VA setting. Over 75% of newly hired psychologists in the VHA have had VA training, and 16% of the 2006 internship match (437 interns) were to VA settings. Our facility alone has participated in the training of over 475 psychologists since its accreditation in 1979; in addition to internship and post-doctoral training, students from local universities enjoy practicum opportunities in our PTSD clinic, GRECC, Behavioral Health Clinic, Homeless Program, and MH Consult service.



Salt Lake City Skyline

Utah and Salt Lake City

Individuals unfamiliar with the State of Utah and Salt Lake City are often quite surprised at the wealth and variety of “things to do and see.”

Geography

Most of Utah lies on a plateau above 4,000 feet in elevation. The Wasatch and High Plateau Ranges of the Rocky Mountains span the heart of the state for 300 miles from north to south. To the east is the Uintah Range, Utah’s most rugged and highest mountain wilderness. To the east and south is the Colorado River Plateau with its famed red rock country, accented by snowcapped mountains and ten national parks and monuments. To the west, Utah’s Rocky Mountains slide into the state’s major communities and farmland and then roll away to the remote mountain ranges of the Great Basin Desert. Carving a large slice out of northwestern Utah are the Great Salt Lake and the Bonneville Salt Flats

Weather

There’s a saying here in Utah: “If you don’t like the weather, wait five minutes.” Our weather is as varied as our terrain. Some of our mountains receive over 500 inches of snow in the winter. In the summer, parts of the state can reach temperatures well over 100°F. Spring and fall bring every type of weather imaginable—sunny mornings, rainy afternoons, snowy nights, and everything in-between. Our advice? Come prepared for anything!

Population

As of the 2008 census, the population of Utah was about 2.85 million. Utah has a high fertility rate, which has contributed to a 29.6% growth in population during the past decade. Utah is among several states in the Intermountain West experiencing significant immigrations and increasing diversity. Persons of color (Hispanic, African-American, American Indian, Asian American, Native Hawaiian, and other Pacific Islander) now make up nearly 12% of the population. In recent years, the fastest growing ethnic group in Utah has been the Latino — a population now making up 11% of the overall population.

Sports

Sports enthusiasts find plenty of exciting year-round athletic action throughout the state of Utah. The Salt Lake Metropolitan area is home to four professional sports teams. Basketball fans may watch the NBA’s Utah Jazz in action at the Energy Solutions Arena (formally the Delta Center). Major League Soccer has come to Utah, with Real Salt Lake currently constructing a new state-of-the-art venue in Salt Lake County. Utah’s newest professional sports team is the Utah Blaze, playing in the Arena Football League. Ice hockey fans can watch the AHL Utah Grizzlies at The “E” Center, Utah’s newest entertainment center. During the summer, baseball fans enjoy watching the Salt Lake Bees, the Triple-A affiliate of the Anaheim Angels at Franklin Covey Field, which offers a

“classic baseball” experience. Fans of college sports will find one of the NCAA's most entertaining and bitter rivalries between the Brigham Young University Cougars and the University of Utah Utes.

Outdoor Recreation

For the outdoor recreational enthusiast, Utah is truly a paradise. Boasting “The Greatest Snow on Earth,” Utah is home to 13 world class ski resorts, not to mention being the host of the 2002 Winter Olympics. Utah is world famous for its skiing, due to a favorable combination of great mountains, elevation, and storms that gather strength over the warm waters of the Great Salt Lake before dumping light, dry snow. During the 2007-2008 ski season, more than 800 inches of snow fell at some ski resorts. When you arrive in Utah, you will immediately notice the proximity of the mountains to the Salt Lake City metropolitan area. With 11 resorts within an hour drive of Salt Lake City, skiers and snowboarders will be thrilled to call themselves “locals” in this winter wonderland.

Twenty three percent of the state is administered by the National Forest Service. There are hundreds of miles of backcountry roads and trails, many of which are accessible only by four-wheel drive and/or hardy backpacking. Utah has over 1,000 lakes, rivers and streams and there are over 375 public and private campgrounds throughout the state. Jeeping, sailing, wind surfing, kayaking, rock climbing and mountain biking are extremely popular during the warmer months of the year (April through October). The sport of whitewater river rafting began in Utah and there are over 400 miles of raftable rivers, including the Green, Colorado, and San Juan Rivers. A Utah bike trip will color your thinking forever, whether it's a wide open desert ride with spectacular red rock vistas or a lush green mountain trail lined with yellow wild flowers. Utah has developed a world class reputation from Moab's famous Slickrock trail and is fast becoming known for wonderfully diverse alpine



Arches National Park

mountain biking, including lift-served access at many ski resorts.

With five national parks, Utah is America's “National Parks Capital” (distances from Salt Lake City): Arches National Park (232 miles) — contains the world's largest concentration of natural stone arches. The 73,000-acre region has over 2,000 of these “miracles of nature.” Bryce Canyon National Park (256 miles) — thousands of delicately carved spires and pinnacles rise in brilliant color from the amphitheaters of Bryce Canyon. The etched cliffs come alive with the rising and setting of the sun. Canyonlands National Park (249 miles) — here you will see thousands of feet down to the Green and Colorado Rivers, or thousands of feet up to red rock pinnacles, cliffs and Spires. As Utah's largest national park, Canyonlands has been naturally sliced into three distinctive districts: The Island in the Sky, The Needles, and The Maze. Capitol Reef National Park (229 miles) — this park is characterized by sandstone formations, cliffs, and canyons, and a 100-mile long bulge in the earth's crust called the Waterpocket Fold. Capitol Reef has been intriguing visitors with its twisting canyons, massive domes, monoliths and spires . of sandstone for the past century. Zion National Park (321 miles) — Designated in 1919, Zion is Utah's oldest national park. Zion Canyon features soaring towers and monoliths that suggest a quiet grandeur. Zion is also

known for its incredible slot canyons, including “The Narrows,” which attracts hikers from around the world.

Utah is also home to seven National Monuments — Cedar Breaks, Dinosaur, Hovenweep, Natural Bridges, Rainbow Bridge, Timpanogos Cave, and the new Grand Staircase-Escalante, as well as two National Recreation areas. Flaming Gorge is one of the largest freshwater lakes in America and has excellent power-boating, fishing, water skiing and parasailing. Glen Canyon contains Lake Powell, the second-largest man made reservoir in the world. Lake Powell is 200 miles long, contains almost 2,000 miles of sand-stone shoreline and offers superb fishing, boating, scuba diving, water skiing, parasailing and swimming.

[City Life](#)

Salt Lake City is a montage of modern high-rises, commercial centers, unique sightseeing attractions, classic buildings, historic sites, excellent restaurants, and beautiful shopping malls. Twelve public golf courses are within 30 minutes of the downtown area. The city is home to three nationally acclaimed ballet dance companies, as well as the Utah Opera Company and many fine art galleries and historical and art museums. The Utah Symphony is world renowned and performs 260 concerts yearly. The orchestra frequently records with the world famous Mormon Tabernacle Choir. Salt Lake’s evolution continues forward with the recent debut of the architecturally stunning Library Square in downtown Salt Lake City and the excitement of hands-on learning at the Clark Planetarium and Children’s Museum of Utah within the Gateway Mall.

Application Procedures

The Psychology Postdoctoral Program at VASLCHCS is in the process of becoming a member of the Association of Psychology Postdoctoral and Internship Centers (APPIC) and will abide by all APPIC guidelines regarding fellowship recruitment and notification procedures.

We seek applicants who have a sound clinical and scientific knowledge base from their academic program and internship; strong entry-level professional skills in standard assessment, intervention, and research techniques; and the personal characteristics necessary to function well as a doctoral-level professional in a medical center environment. The selection criteria focuses on all aspects of the application materials, with emphasis placed on background training, experience, and an applicant's clear articulation of training goals and professional aspirations. The Psychology Service of VASLCHCS supports and is in full compliance with the spirit and principle of Affirmative Action in the recruitment and selection of psychology fellows. We actively seek candidates from diverse theoretical orientations, training programs, geographic areas, and personal backgrounds, including age, ethnicity, religion, gender, sexual orientation, and life experience. The VASLCHCS is an Equal Opportunity Employer.

Eligibility

Applicants must meet the following eligibility requirements for the postdoctoral training program:

1. Completion of doctoral degree, including defense of dissertation, from an APA-accredited doctoral program before the fellowship start date.*
2. Completion of an APA-accredited psychology internship program before the fellowship start date.*
3. U.S. citizenship.
4. In accord with the Federal Drug-Free Workplace Program, fellows may be asked to submit a urine specimen at the beginning of the training year. Other branches of the federal government (Office of Personnel Management) may conduct routine background checks at their discretion.

Those not meeting the eligibility requirements will be notified as soon as possible

*If you have not yet completed your internship and degree by the time of the application, the Training Directors of both your doctoral programs and internship must verify that you are expected to complete these requirements prior to the start of the postdoctoral fellowship. Applicants must provide verification of a degree prior to an agreed upon postdoctoral training start date. In unique situations, extensions may be applied as deemed appropriately by the training committee.

Failure to meet the above qualifications prior to the fellowship start date could nullify an offer to a candidate.

Application Checklist

All application materials must be received by January 19, 2009. Please submit the following:

1. Letter of interest including the following elements:
 - a. The history of your interest in PTSD
 - b. Educational, clinical, and research experiences relevant to PTSD
 - c. A self-assessment of your training needs
 - d. Your personal goals for the fellowship
 - e. A statement of your career goals
2. De-identified work samples consisting of:
 - a. A Psychological and report co-signed by a licensed psychologist. This should be an integrated report using data from clinical interview and multiple psychological testing instruments (e.g. MMPI-2, WMS-III, WAIS-III, MCMI-III).
 - b. A Cognitive Assessment report co-signed by a licensed psychologist. This should be an integrated report using data from clinical interview, collateral information, and multiple cognitive testing instruments.
 - c. A Psychotherapy Case Summary. This case summary should document the course and outcome of a completed case or a current case to date. This summary should not be a collection of progress notes or psychotherapy notes and it does not need to be co-signed by a licensed psychologist.
3. Three letters of recommendation including one from a faculty member personally familiar with your graduate school performance and at least one from a primary clinical supervisor during the pre-doctoral internship with a signature of the writer across the sealed flap.
4. Curriculum Vitae.
5. An official transcript of graduate work
6. Copy of diploma for doctoral degree OR letter from doctoral training program director regarding dissertation status and anticipated graduation date.
7. Copy of certificate of internship OR letter from internship training director verifying date you are expected to complete internship.
8. Completion of the Application for Federal Employment (OF-612), which may be obtained at the following website:
<http://www.opm.gov/forms/html/of.asp>.

Address all application materials to:

Mari Hanson
Program Support Assistant, Psychology
Service (116B)
VA Salt Lake City Health Care System
500 Foothill Drive
Salt Lake City, Utah 84148
Phone: (801) 584-1269

Each set of application materials received by January 19, 2009 will be reviewed by two randomly assigned members of the selection committee. Independent ratings are based on educational, intervention, and assessment experiences, cover letter, report writing, and professional letters of recommendation. After an average score is calculated, the selection committee addresses significant discrepancies in scores, and determines the cut-off score to participate in the interview process. All applicants will be notified whether they remain under consideration by January 30, 2009.

If you would like confirmation of receipt of application, please include a self-addressed, stamped postcard, which will be mailed to you upon our receipt of your information.

Open House/Interview Days are conducted over the course of two Fridays during the month of February. In addition to being interviewed by two members of the Selection Committee, applicants will have the opportunity to meet current interns, fellows, and staff members, as

well as participate in a tour of the facility. Telephone interviews are available for applicants unable to attend the Open House. Following all interviews, the Selection Committee will meet to identify the top candidates and alternates for the two postdoctoral fellowship positions. These selections are based on an integration of file and interview ratings, with the entire list of interviewees being reviewed to ensure that all candidates have received fair and equal consideration.

The VASLCHCS Postdoctoral Fellowship participates in the Uniform Notification Date of February 26, 2009. Candidates will be contacted by the program by telephone, and are expected to verbally accept or decline an offer within 48 hours. Those who are no longer under consideration will be notified promptly.

Applicants with questions about the post-doctoral psychology training or about the VASLCHCS should contact:

Dr. Kitty Roberts at (801) 582-1565, ext 2389, Mary.Roberts2@va.gov or

Dr. Tom Mullin at extension 2382, Thomas.Mullin2@va.gov

Dates to Remember

- Application materials due:
January 19, 2009
- Interview notification:
January 30, 2009
- Uniform Notification:
February 26, 2009

For additional information, please contact:

Kimberly O. Sieber, Ph.D.
Director of Psychology Training
Department of Psychology (116B)
VA Salt Lake City Health Care System
500 Foothill Drive
Salt Lake City, UT 84148
Phone: (801) 585-1565, ext. 2724
Email: kimberly.sieber@va.gov

The predoctoral psychology internship at the VASLCHCS is accredited by the American Psychological Association, and it is anticipated that the postdoctoral fellowship will become APA accredited during the 2009-2010 training year. For information regarding APA accreditation of this or other accredited training programs, please contact:

Commission on Accreditation (CoA)
American Psychological Association
750 First Street, NE
Washington, DC 20002-4242
Phone: (202) 336-5979
FAX: (202) 336-5978
Email: apaaccred@apa.org

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