George E. Wahlen Veterans Affairs
Salt Lake City Health Care System

2019 – 2020
Psychology Internship Program

Application Due Date: November 1, 2018 (noon, MST) August 5, 2019 to August 3, 2020
George E. Wahlen Veterans Affairs Salt Lake City Health Care System
Psychology Service (116B)
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WELCOME FROM THE TRAINING DIRECTOR

Dear Internship Applicant:

Thank you for your interest in the APA Accredited Psychology Internship Program at the George E. Wahlen Department of Veterans Affairs Salt Lake City Health Care System (VASLCHCS). We know you have choices and are delighted you would consider our site among your options. Internship year can be one of the most exciting, challenging, and meaningful experiences in your development as a professional psychologist. We are excited to have you consider joining us for your internship year. We value diversity and inclusivity beyond being an equal opportunity employer. We welcome diverse and unique people representing a range of cultures, backgrounds, life experiences, veterans status, religions, ages, disability status, sexual orientations and genders.

We believe that one of the greatest strengths of our program is our commitment to facilitating the transition from student to professional. As such, we take a developmental approach to clinical training and supervision. We pride ourselves on creating a friendly and nurturing environment in which trainees develop professional competencies to function across a wide range of health care settings.

VASLCHCS has a long history of clinical psychology training. Interns have been training here since 1952, and we have had over 600 interns graduate from our program as well-prepared psychologists ready for the next step in their career. We have been continuously accredited by APA* since 1979 and are re-accredited until 2020.

Our training program is committed to providing high-quality generalist education that emphasizes the interdependence between the application and science of psychology. This approach is ideal for applicants with a strong clinical background who are interested in both expanding and deepening their clinical skills.

The VASLCHCS internship offers a large range of training experiences in the areas of general mental health, assessment, PTSD, health psychology and addictions. Interns select their rotations and are encouraged to take on new challenges in areas they may not have tried before. We have a large staff of over 55 psychologists, the majority of whom are directly involved in the training program. In addition to the internship program, we also train psychology practicum students and post-doctoral fellows. We have five APA accredited postdoctoral positions in Clinical Psychology with special emphasis areas in PTSD, Health Psychology, Geropsychology, and Substance Abuse. VASLCHCS has had the good fortune of significantly increasing our psychology staff, going from a dozen psychologists a few years ago, to over 55 staff psychologists. Over half of our current staff were trainees here.

I hope this brochure reflects our enthusiasm for training. We truly enjoy facilitating professional development and welcoming new colleagues to our profession! Please do not hesitate to contact me directly with any questions about our program. We wish you the best during this exciting time in your training.

Leland “Ben” Swanson, PhD
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George E. Wahlen Department of Veterans Affairs Salt Lake City Health Care System

The Clinical Psychology Internship is sponsored by the VA Salt Lake City Health Care System (VASLCHCS) located in Salt Lake City, Utah.

The main facility is located on an 81-acre campus adjacent to the Salt Lake City Veterans Affairs Regional Office and the University of Utah. It is a midsized primary and tertiary care facility with 121 beds providing a full range of patient care services. Comprehensive health care is provided through medicine, surgery, mental health, psychiatry, physical medicine and rehabilitation, neurology, oncology, dentistry, geriatrics, and extended care.

The VASLCHCS is part of VA Network (VISN) 19, which encompasses the largest geographic area in the 48 contiguous states. We serve an area covering the entire state of Utah, the majority of Montana, Wyoming and Colorado, and portions of Idaho, Kansas, Nebraska, Nevada, North Dakota, and Oklahoma. We have eleven Community Based Outpatient Clinics (CBOCs) and two Outreach Clinics in remote areas of Utah, Idaho and Nevada.

In terms of demographics, 94% of the Veterans served by VASLCHCS are male; 6% are female. Ninety-one percent identify as Euro-American, 5% as Latino, 2% as African-American, less than 1% as Asian American, and less than 1% as Native American. The socioeconomic statuses of the veterans vary widely. VASLCHCS has a major affiliation with the University of Utah School of Medicine. Over 500 University of Utah residents, interns, and students are trained at the VASLCHCS each year. Additional Special Fellowship programs affiliated with the University of Utah are ongoing in Ambulatory Care and Medical Informatics Training Programs. Currently there are 115 physician resident positions funded at the VASLCHCS.

There are also nursing student affiliations with numerous colleges and universities throughout the United States, including local Intermountain West affiliations with the University of Utah, Brigham Young University and Westminster College. The VASLCHCS has ongoing training programs and affiliations with numerous colleges and university throughout the United States involving our Associated Health Training Program. The associated health training includes dentistry, pharmacy, social work, psychology, occupational and physical rehabilitation, audiology, physician assistant, dietetics, and podiatry training programs. Many of these training programs have been integrated into our Geriatric Research Education and Clinical Center (GRECC).

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.

Further information about the VA Salt Lake City Health Care System is available at http://www.saltlakecity.va.gov.
Mental Health Service

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

About Salt Lake City and Utah

According to the 2010 census, Salt Lake City has a population of approximately 182,000 with the surrounding metropolitan area having approximately 1.9 million people. Individuals unfamiliar with Salt Lake City and the state of Utah are often quite surprised at the wealth and variety of things to do and see. 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. The city is also home to acclaimed ballet dance companies, the Utah Opera Company, many fine art galleries, and historical and art museums. Professional sports fans enjoy cheering for the Utah Jazz, Utah Grizzlies and Real Salt Lake. During the summer, baseball fans flock to Franklin Covey Field to watch the Salt Lake Bees, the Triple-A affiliate of the Anaheim Angels. Finally, fans of college sports may enjoy attending University of Utah and Brigham Young University events.

For the outdoor recreational enthusiast, Utah is truly a paradise. During the winter months, Utah has "The Greatest Snow on Earth." Eleven resorts are within an hour drive of Salt Lake City. During the summer months, Utahans take advantage of over 1,000 lakes, rivers and streams. Sailing, wind surfing, kayaking, hiking, rock climbing, and mountain biking are extremely popular during the warmer months. Utah has five national parks: Arches National Park, Bryce Canyon National Park, Canyonlands National Park, Capitol Reef National Park, and Zion National Park. Yellowstone and Grand Teton National Parks are within reasonable driving distances as well.

PROGRAM GOALS

The Psychology Internship here at VASLCHCS is designed to help interns build a broad range of skills and emerge as qualified entry-level clinical practitioners who are capable of working competently and ethically in a range of settings. Over the course of the year we want interns to develop their professional identity, confidence in their clinical skills, awareness of areas they will need further training and consultation, and ultimately be able
to practice independently in an entry-level position as a newly minted psychologist. The ability to practice independently is important because in many states, such as Utah, psychology licensing is possible after completing the internship and EPPP. We hope to facilitate exploration of various career paths as well as personal and professional growth.

We want interns to have a broad range of experiences so that they have both breadth and depth in their training year.

We want interns to be able to integrate scholarship into their clinical practice consistent with the practitioner-scholar model of psychology.

At the end of their training year, interns will meet the appropriate training level across the 6 levels of competency specified by the APA:

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, cognitive and memory assessment, and personality assessment; familiarity with the prevailing diagnostic procedures, e.g. DSM-V; 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. **Consultation, Evaluation and Supervision**: competency in conducting consultations under supervision for members of the Medical Staff; familiarity with and understanding of methods and theories of evaluation and supervision.

4. **Professional and Ethical Behavior**: demonstration of sound professional clinical judgment and behavior in the application of assessment and intervention procedures; familiarity with and understanding of professional and legal standards in professional psychology; a thorough working understanding of APA ethical standards.

5. **Understanding of Human Diversity Issues in the Professional Practice of Psychology**: demonstration of an 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.

6. **Strategies of Scholarly Inquiry and Clinical Problem Solving**: 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.

The internship experience extends and integrates the training received in the intern’s academic program. The internship is designed to offer a broad range of experiences to develop these core professional competencies.
REQUIREMENTS FOR SUCCESSFULLY COMPLETING INTERNSHIP

Time

To successfully complete this internship, interns must be on-site through their official end date, which will be provided in acceptance letters. Interns must complete 2000 total hours, and 500 of those hours must be in direct service with patients.

The usual tour of duty is 8:00 – 4:30PM, although some training experiences may involve a different tour of duty (e.g., 12:30PM – 9:00PM) on some days due to scheduled program activities or other factors. Changes to interns’ regular schedules must be approved by the TD. Most interns keep their hours between 42 and 45 hours a week.

Although interns are allowed to be at the Medical Center after hours or on weekends, direct patient care activities are not allowed when a supervisor or designee is not physically present at the medical center.

As a Federal Employee, you are entitled to 10 holidays (80 hours), 13 vacation days (104 hours), and 13 sick days (104 hours). A year of work generally works out to 2080 hours for a 40 hour workweek. Interns are encouraged to use their leave, however, taking all of the leave results in being out for 288 hours, leaving the total hours at the end of the year at 1792, so it is recommended interns closely monitor their hours and track a variety of activities to meet these requirements.

Minimum Passing Criteria

There must be clinical supervisor and Training Director consensus that an intern is able to practice ethically with their skills at the proficiency level of an entry level psychologist by the end of the internship year.

At the midpoint of the year, interns should be rated as making satisfactory progress towards achieving a “Needs Occasional Supervision” rating across all competency objectives, or by obtaining “Needs Regular Supervision” or higher on all competency items, with a plan for their reaching competency by then end of internship and be in good standing with the training program (e.g. not on probation or a remediation plan). Interns must have successfully complete all required training activities such as their presentation. Interns must complete 500 hours of direct clinical service.

Formal Presentation

Being able to provide a formal professional presentation, such as a job talk or presentation at a conference, is an important skill for Psychologists. Interns will give a one-hour presentation to psychology staff on the topic of their choice.

The interns will have the opportunity to work with the Training Director (TD) or the Associate Training Director (ATD) to develop or update the rubric for training program faculty to use in evaluating the presentation. Interns are encouraged to facilitate discussion during their presentation and to use active learning strategies. The specific goals and parameters for the presentation will be developed collaboratively by the interns with input from the TD/ATD.
Approximately 4-6 weeks prior to their presentation, interns will meet with the TD/ATD, and discuss their topic, the learning objectives and a general outline for their presentation. Interns are strongly encouraged to present on a topic other than their dissertation. This is to facilitate broader learning and develop skills in providing a formal presentation in addition to work they may have already done. Interns may not repeat their dissertation defense presentation. If an intern wants to present on an aspect of their dissertation, they will need to demonstrate how their presentation will differ from their dissertation defense. Topics that facilitate professional growth and interests, as well as reflect the goals in the intern’s training plan are ideal.

At least two weeks prior to their presentation, interns will rehearse their presentation with the TD/ATD, who will provide them feedback and suggestions for improving the presentation.

**INTERN ROLES**

Interns are encouraged to take an active role in defining and maintaining the psychology training program. Interns may rotate through various roles over the course of the year as determined by the cohort.

**Chief Intern (1 Intern)**
The Chief Intern role was created to provide experiences in leadership including program evaluation, project management, program development, leading change and learning how to accomplish goals in a large and complex organizational system. The interns decide as a group how they want to conduct the selection process. The specific duties are negotiated with the Training Director based on the intern’s interests and available options. They will typically attend the monthly psychology all-staff meeting. Interns may choose to serve for 6 months and then another intern could rotate into the position.

**Diversity Training and Inclusion Advocates (1-2 Interns)**
The Diversity and Inclusion Advocates may work with the training program, faculty, and other training programs to enhance diversity training and recruitment in Behavioral Health and/or the Psychology Training Program. These positions may involve being a liaison to community agencies, outreach, project development and/or program evaluation. The specific duties depends on the intern’s interests, experience and available projects. Interns may propose projects and work with various Behavioral Health staff to complete them.

**Presentation Coordinator (1 Intern)**
The presentation coordinator organizes and arranges the intern presentations including gathering and collating audience feedback. The coordinator sends reminder emails, including the title and presenter, to staff, fellows, and interns the week prior to and the day before the scheduled presentations. The coordinator introduces the speakers, including relevant professional and personal background, ensures sufficient seating, evaluation forms, pens etc., and distributes evaluation forms at each presentation. Finally, the coordinator will help to revise evaluation forms as needed.

**Social Organizer (1 Intern)**
There are three levels of psychology training at the SLCVAHCS: practicum, internship, and the postdoctoral fellowship. We want to encourage additional, informal exchange among the trainees. The social organizer will be responsible for organizing an event quarterly.
**Didactic Coordinator** (1-2 Interns)
Weekly didactics and seminars are one of the more important aspects of internship training. There is considerable coordination required to keep abreast of the cohort’s interests and preferences, keeping the schedule current, contacting presenters, sending reminders, and making arrangements for the external SLCVAHCS internship collaboration.

**Clinic Optimization & Utilization Czars** (2 Interns)
Behavioral Health has trainees across multiple disciplines and a limited amount of office space. The Czars facilitate the identification and communication of available office space for all trainees in Behavioral Health to maximize access and utilization of clinical resources.

**EVALUATIONS**

**Intern Evaluations**
Interns are formally evaluated in writing at the end of each rotation based on developmental assessment of performance in the Profession Wide Competencies. This provides six data points total, from two Core rotations and four Elective rotations. Having a minimum of at least six different supervisors, each intern receives a range of supervision experiences and feedback.

Interns receive formal, written evaluations from their supervisors on the extent to which they are meeting internship requirements and performance expectations. The feedback addresses the intern’s performance and progress in terms of professional conduct and psychological knowledge, skills, and awareness in the competencies for psychology.

**Evaluations of Supervisors**
Interns are encouraged to provide verbal and direct feedback to their supervisors about whether their training objectives are being met by their rotation, the supervisory process and their overall experiences on the rotation. At the end of each rotation, the intern completes the *Supervisor/Rotation Evaluation Form*. Although we encourage you to share these results with your supervisor, your written feedback will remain confidential and—barring glaring deficiencies that require immediate attention—evaluations will not be discussed with the supervisor until the end of internship.

**Psychology Training Log**
Interns will be provided with a comprehensive Training Activity Log to document their internship hours. The intent is to ensure they are receiving adequate training and supervision, assist with time management and balance, and provide a detailed record of training activities and supervision that will be needed for licensure. The logs may be maintained daily or weekly. The TD/ATD may request to review intern logs at any time. The logs will be sent to the TD/ATD prior to the regular individual check-in meetings. Completed logs for the entire training year must be submitted during the final check-out process at the end of the training year and will be retained by the training program for future verification.
INTERNSHIP TRAINING STRUCTURE

Training Plans

Interns will work with the TD/ATD to create and regularly review their training program plan. The plan is developed taking into account previous clinical experiences, career plans, competencies, as well as training needs and interests. The training plan will be modified throughout the year based on changing interests and needs, supervisor feedback, and when goals are achieved. Interns are encouraged to discuss these plans with their clinical supervisors in formulating their goals on a rotation, and the training plan may be updated as a result of these conversations. The intent for a training plan is that it provides an over-arching training focus for the year. Interns are likely to focus on specific aspects of their plan during a rotation, instead of trying to have a rotation meet all of their training needs and goals.

Weekly Schedule Planning

Generally, the weekly schedule will approximate the proportions in the following table. These percentages are general guidelines, and can vary based on the intern's training plan and unique demands of different rotations:

<table>
<thead>
<tr>
<th>Percent Total Time</th>
<th>Estimated Hours</th>
<th>Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>15-20%</td>
<td>6-8 Hours</td>
<td>Training Activities: didactics, meetings, seminars</td>
</tr>
<tr>
<td>30-40%</td>
<td>12-16 Hours</td>
<td>Core Rotation</td>
</tr>
<tr>
<td>40-50%</td>
<td>16-20 Hours</td>
<td>Elective Rotation</td>
</tr>
</tbody>
</table>

For example, an intern headed towards becoming primarily a therapist might choose to spend more than half their time in psychotherapy, but considerably less time doing assessment when they switch at mid-year. Percentages are flexible; schedules are maintained by the intern with input and collaboration from supervisors and TD. Interns are able to choose almost any combination of rotations, provided that they select a range of training experiences and that their schedules ascribe to our generalist training model. There are no mandatory elective rotations, though interns are encouraged to select training experiences in medical, psychiatric and addiction settings to remedy any gaps in their preparation. Interns wanting to specialize will have opportunities to tailor their training plan to enhance their applications for post-doctoral fellowships.

Interns will likely have to remind supervisors when they have a full day of training or an off-site didactic. Interns are encouraged to seek guidance from their supervisors regarding the management of clinical and training responsibilities. Additional assistance may be requested from Dr. Varra as the ombudsman, Dr. Swanson and Dr. Taravella.

Part of professional development is learning to multitask, balance responsibilities, consult with others regarding managing time and commitments, and negotiating solutions when there are problems or conflicts. One of the most significant skills learned on internship is how to estimate the time that various
Tasks may take when planning a weekly schedule template and also in planning a work day or week to identify what to prioritize and then use their time and energy effectively.

Meetings & Trainings

Training is a Priority. Please note in setting up your schedules that trainees in all of our programs are here for training and professional development. Service delivery is part of that training and development; however, didactics, training seminars, and any other educational activities take priority in your schedule, and this includes required meetings for the training program.

Part of prioritizing training includes setting up your schedule to account for travel time and the sometimes dynamic nature of the time involved in patient care so you are not chronically late or having to leave early from meetings. For example, scheduling a patient that will be seen in another building across campus at the exact time a meeting is scheduled to end, and then leaving a training meeting 10 minutes early so you are not late for a session is not appropriate. Creating your schedule is a professional development issue, and poorly constructing your schedule may reflect badly on you as professionals and can be interpreted as a lack of respect and consideration as well as disorganization by your patients, colleagues and leadership. At the same time, everyone is late occasionally because of circumstances and that is not a problem.

Overview of Required Meetings

Weekly Meetings
- Didactics Th 12:00-1:30
- TD Huddle Th 1:30-2:00
- Psychopharmacology Didactics Fri TBD

Monthly Meetings
- Individual Check-Ins with TD/ATD TBD
- Mental Health Grand Rounds 8:30-10:00 am 2nd Wed of the Month

Other Meetings/Trainings (All TBD)
- Mental Health Orientation for New Employees- September
- Evidence-Based Treatments Seminar
- Enhancing Professional Competencies Seminar
- Mid-Year Comprehensive Training Plan Review
- Psychology Internship Training Collaboration with Pharmacy Residents

Descriptions of Meetings

Didactics
A weekly seminar conducted by VA staff members and community professionals. The intern cohort will decide the topics, and two interns will be responsible for scheduling the speakers.

TD Huddle
Weekly brief meetings with the internship cohort and the TD/ATD to check-in and provide updates.
Psychology Internship Training Collaboration with Pharmacy Residents

In the spirit of interdisciplinary care, the psychology interns and clinical pharmacy residents conduct weekly didactics to round out each other’s knowledge of their specialties. These informal meetings feature a 45-minute discussion led by either a psychology intern or pharmacy resident on a topic salient to the clinician. The topics are decided by the group at the outset of the year and have included topics such as: antipsychotics (pharm.), CBT-I (psyc.), drug testing (pharm.), motivational interviewing (psyc.), mood stabilizers (pharm.), etc. These meetings are popular among the interns due to the collegial nature of the group, the exposure to the specialty services of different disciplines, development of interdisciplinary approaches to work in a medical center, and the delicious breakfasts that accompany the meetings.

Individual Check-Ins with Training Director & Associate Training Director

Interns will meet monthly (or more as needed) on an individual basis with the TD/ATD to discuss your progress, experiences, professional development, problems or concerns, review training logs and celebrate various successes.

Mental Health Grand Rounds

This is a monthly meeting that is mandatory for all staff. Grand Rounds are from 8:30-10:00 the second Wednesday of every month in either the Multipurpose Room (Bldg. 8) or the Theatre (Bldg. 9). Emails are sent out prior to the meetings regarding the specific location. During these meetings staff receive updates on changes in the organization, and then there is a 1-hour training on various topics salient to mental health such as motivation interviewing, the impact of altitude on suicide risk factors, etc.

Mental Health Orientation for New Employees

The Mental Health Orientation for New Employees is a full-day orientation to mental health services that is mandatory for all disciplines working in Mental Health. These sessions are usually held in September with the exact date TBD. Interns will learn about all of the Mental Health programs and meet many of the staff leadership affiliated with these programs.

Evidence-Based Treatments Seminar

Throughout the year, all interns can attend seminars on empirically based treatments, which currently include Acceptance and Commitment Therapy for Depression (ACT-D), Cognitive Processing Therapy (CPT), Dialectical Behavior Therapy (DBT), Motivational Interviewing for Relapse Prevention (MI), Seeking Safety, Social Skills Training (SST), and Wellness Recovery Action Plans (WRAPS). Interns will be notified of the dates and times for these trainings and must attend at least one, though many opt to attend more than one.

Enhancing Professional Competencies Seminar

The Geriatric Research, Education, and Clinical Center (GRECC) supports and promotes geriatric and gerontology education for allied health trainees. The purpose of these meetings is to increase the knowledge of health care professionals regarding concerns that affect our older adult Veteran
population. These seminars are offered every other month. Interns are welcome to attend all of these; however, all interns must attend at least 1 of these, and at least 1 intern needs to attend each seminar.

Mid-Year Comprehensive Training Plan Review

Interns will meet individually with the TD/ATD to review progress and update their training plan. Interns will receive a copy of the training plan review and progress report sent to their program’s director of clinical training.

Utah Psychology Training Collaboration

Interns and Post-Doctoral Fellows from the VASLCHCS, University of Utah Neuropsychiatric Institute (UNI), Primary Children’s Medical Center (PCMC), and Utah State Hospital (USH) usually attend. Last year we had one presentation on Changes in the EPPP, and another one on starting a private practice presented by one of our former interns who is now in full-time private practice in the local community. These trainings generally occur about once every 4 months.

ROTATIONS

Interns will complete two 6 month “CORE” rotations, one in psychotherapy and the other in assessment. Interns will also complete 4 “ELECTIVE” rotations, each lasting 4 months.

Psychotherapy Core Rotations

In keeping with the generalist emphasis, all interns will split their year with six-month Core Rotations in psychotherapy and psychological assessment. For the six-month Core Psychotherapy rotation, interns will identify the population or supervisor with whom they want to work. The experience of providing psychotherapy is mandatory; it’s a key skill for psychologists. However, the choice of which supervisor, hence population for treatment, is largely the intern’s.

Supervisors in each of these tracks have expertise in different populations and treatment approaches. As such, interns have the opportunity to guide selection of their supervisor based on their preferences, professional goals, and/or "gaps" in training. For example, if an intern is looking to learn about Cognitive Processing Therapy, he/she may want to choose a supervisor on the PTSD Clinical Team (PCT). If an intern seeks further treatment experience working with couples and families, he/she may decide to choose a supervisor in General Outpatient Mental Health. VA patients tend to be complex, psychiatrically and medically, with multiple comorbidities requiring an integrated approach to treatment. As an example, interns treating military trauma while on the PCT team may also be providing couples interventions and addressing insomnia. Conversely, in General Outpatient Mental Health, the intern might be focusing on depression and trauma from family-of-origin. All available supervisors describe what they offer, so interns may make informed decisions about who will best meet their training needs. The supervisor selection is done at the beginning of the training year, during rotation selection.

During their core therapy rotation, interns usually have a caseload of 5-10 Veterans for psychotherapy, depending on their training needs and goals. All interns will receive exposure to various Evidence Based
Psychotherapies (EBP) as offered by Veterans Affairs, regardless of which supervisor they elect. All interns will receive didactic training and exposure to EBP modalities that can include: Prolonged Exposure, Cognitive Processing Therapy, Acceptance and Commitment Therapy, Dialectical Behavior Therapy, Social Skills Training, and Wellness Recovery Action Plans. As an example, even if an intern opts for a DBT supervisor, they will also receive training in PE, CPT, ACT, etc.

Interns on the assessment core rotation may conduct one assessment per week and attend a weekly group supervision meeting where they staff their recent assessments with supervisors and other interns on the rotation. Typically, interns will conduct neuropsychological assessments, however, they may conduct other assessments such as to clarify a diagnosis.

Rotation Structure

The following are just two examples of what a possible internship year at the SLCVA might look like:

<table>
<thead>
<tr>
<th>Elective Rotation 1</th>
<th>Elective Rotation 2</th>
<th>Elective Rotation 3</th>
<th>Elective Rotation 4</th>
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<tbody>
<tr>
<td>TMH Hub</td>
<td>Inpatient Psych.</td>
<td>Medical Psychology</td>
<td>Addictions (SOAR)</td>
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<td>Core Rotation</td>
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<td>Assessment</td>
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<td>Mental Health</td>
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<th>Elective Rotation 1</th>
<th>Elective Rotation 2</th>
<th>Elective Rotation 3</th>
<th>Elective Rotation 4</th>
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<tr>
<td>Addictions</td>
<td>Medical Psychology</td>
<td>Inpatient Psych.</td>
<td>Vet Center</td>
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<td>(SARRTP-Track A)</td>
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<td>Core Rotation</td>
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<td>PTSD MST/CPT</td>
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<td>Geriatric Assessment with ABPP Neuropsychologist</td>
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Rotation Selection

Training plans will be used to guide goals on specific rotations as well as the selection of rotations. In an effort to optimize the breadth and depth of your total internship experience, we encourage you to seek out experiences with which you are not comfortable, to work with unfamiliar patient populations, and challenge yourself to add new skills to your clinical repertoire. Each supervisor may supervise differently, and they each have their own experiences and approaches to what they do. Rotation recommendations may also be based on a particular supervisor being able to assist an intern with a training goal.

Rotation selection will depend on availability, the needs of each intern, and the intern cohort’s varying training needs and interests. Interns will consult with the TD/ATD for assistance determining a recommended list of preferred rotations and their sequences keeping in mind several things:

- The need to remedy any gaps in training or competency.
- Encouraging further training in areas of strong interest or intended career path.
• Balancing the overall internship year across multiple areas of practice such as health psychology, addictions, psychotherapy and assessment.
• Practical parameters such as rotations that may have meetings or required functions on certain days.
• There is great value in trying something new. Many psychologists have found their ultimate career focus after trying something in an area that they initially thought they would not like but actually turned out to be their career path.

Interns seeking a specific sequence to their training, such as wanting a rotation in the first part of the year because they are applying for a Post-Doctoral Residency, will be accommodated as much as possible.

The cohort meets with supervisors during orientation to discuss the different rotations. Interns then meet individually with the TD & ATD to review their past experiences, develop an initial draft of their training plan and identify possible rotations. Interns will submit a list of their preferred rotations and possible sequences, and the TD & ATD will review this and present options for a year-long rotation schedule to the cohort that maximizes each intern getting their preferred rotations and sequence. The cohort reviews and approves this schedule making adjustments as needed over the course of the year.

Changing Rotations

Rotations selections and sequences are not written in stone. Approximately half-way through a rotation, interns will discuss during their individual check-in meetings possible changes. Interns that have identified a strong preference for certain rotations and/or sequences because of their training plans will have “dibs” on those rotations for the year and will not be expected to change them should another intern wish to change one of their rotations. Changes must be approved and confirmed no later than 1 month prior to the start of the next rotation unless there are extenuating circumstances such as a supervisor that becomes ill and cannot offer a rotation, or an intern is placed on probation or remediation and their training plan is changed accordingly.

The rotations offered can change at any time based on a number of factors such as changes in personnel, supervisor availability and leave, the overall appropriateness of a rotation, and the content and quality of the rotation experience. There is no guarantee that any certain rotation will be available at a given time. However, the TD/ADT work to maintain the stability of the available rotations and the on-going development of new rotations to maximize the available number of rotations so interns have multiple options during the initial selection process and in case of possible changes in rotations.

CORE ROTATION DESCRIPTIONS

General Outpatient Mental Health (BHIP)

**Supervisor(s):** Dr. Ed Varra or Dr. Tom Aikins

**Rotation Description:**
Behavioral Health Integrative Program (BHIP) Teams are the core of outpatient mental health services at VASLCHCS. These interdisciplinary teams (Teams 1, 2, and 3) operate from a Veteran-centered, recovery model of treatment. The teams consist of psychiatrists, advanced practice nurses, psychologists, social workers, RN case managers, and peer support specialists as well as liaisons from other teams such as
PTSD, Vocational Rehab, and the Homeless Program. The team provides comprehensive mental health treatment including assessment, psychotherapy, medication management, care coordination, case management, and referral to and coordination with other VA or community resources. Interns working with psychologists on these teams will have the opportunity to provide psychotherapy to Veterans with a full range of presenting mental health and psychosocial concerns, diagnostic complexity, and co-occurring medical conditions. Interns on rotation are an important part of the interdisciplinary team and have opportunities to provide consultation to and care coordination with staff of other specialties.

**Rotation Expectations:**
Interns can expect to carry a caseload of 8-10 Veterans for individual psychotherapy and may have opportunities to co-facilitate psychotherapy groups. They will attend weekly BHIP team staff meetings.

**Supervisor Comments:**
There are frequently opportunities for providing couples therapy on Dr. Aikins’ rotation.

**Mandatory Days/Times:**

| Team 2 Staff Meeting (Varra) | Thurs 9:30-10:30 | Weekly |
| Team 3 Staff Meeting (Aikins) | Mon 1:00-2:00 | Weekly |

**Rotation Location:**
Building 16

**Outpatient Mental Health Therapy (BHIP) with DBT Skills**

**Supervisor(s):** Dr. Kevin Laska

**Rotation Description:**
Interns have the opportunity to work as part of a dynamic, multidisciplinary outpatient mental health patient care team (BHIP Team 2), delivering psychotherapy to Veterans with an array of presenting concerns and diagnostic co-morbidity. This rotation provides interns a deep dive into psychotherapy practice and the research supporting our practice, with someone who has a strong background in this area. In addition, interns will have the opportunities to gain introductory experience in a DBT skills group, to participate in program development in measurement-based care (MBC), and to strengthen intervention skills with a supervisor well-versed in psychotherapy research.

**Rotation Expectations:**
Interns will carry a caseload of 8-10 Veterans for psychotherapy. They are expected to attend weekly team meetings.

**Supervisor Comments:**
I have a strong background in psychotherapy research, measurement-based care, and DBT.

**Mandatory Days/Times:**

| Team 2 Staff Meeting | Thurs 9:30-10:30 | Weekly |
Rotation Location:
Building 16

Veterans Integration to Academic Leadership (VITAL)

Supervisor: Dr. Aaron Ahern

Rotation Description:
In recognition of the fact that Veterans face unique challenges and obstacles in the university setting, the VITAL program was established to aid student Veterans on campus. The Veterans Integration to Academic Leadership initiative, or VITAL program, is committed to aiding student Veterans in adjusting to the academic setting, helping Veterans to overcome obstacles that might impede academic success, and supporting Veterans in completing their educational goals. The VITAL program is specifically focused on connecting Veterans to appropriate services on campus and within the VA system, providing education and training to faculty and staff about Veterans’ needs in the academic setting, participating in outreach to student Veterans and campus and community partners, and providing mental health treatment to Veterans on campus.

Rotation Expectations:
The VITAL rotation is a core therapy rotation which provides interns with a unique psychotherapy experience. Interns will provide therapeutic services to Veterans on college campuses. The rotation could be seen as a blend between outpatient mental health and the PTSD team. Interns often complete PTSD assessments and are able to learn and provide empirically-based treatments for PTSD such as Prolonged Exposure and Cognitive Processing Therapy. Interns also provide general mental health assessments and treatments. This often includes aiding Veterans in re-adjustment to civilian life and in transitioning into the academic environment.

Optional Opportunities:
- Provide services via telehealth
- Provide learning disability and ADHD testing
- Participate in training for faculty and staff regarding Veterans’ issues and working effectively with Veterans on campus
- Participate in program development, grant writing, and outcomes data collection and analysis
- Participate in training/supervision of VITAL peer mentors

Mandatory Days/Times:
Interns would need to be available to work at Weber State University on Wednesdays. VA vehicles are available.
Interns would need to be available to work at Salt Lake Community College for four hours on Fridays. VA vehicles are available.
If the intern prefers to provide treatment via telehealth, days and times can be much more flexible and the intern would not be required to travel to Weber State or Salt Lake Community College.

Rotation Location:
Wednesday at Weber State University
Friday at Salt Lake Community College
Outpatient Trauma & Addiction (SOAR)

**Supervisor:** Dr. Jonathan Codell

**Rotation Description:**
This is a 6-month outpatient psychotherapy rotation focusing on the unique challenges of treating Veterans with PTSD and co-occurring addictive behaviors. The rotation is housed within the Services for Outpatient Addiction Recovery (SOAR) clinic. Interns choosing to participate in this rotation will learn how to integrate Evidence-Based Treatments for PTSD and addiction. Specifically, interns will receive training and supervision in Prolonged Exposure (PE) and/or Cognitive Processing Therapy (CPT) integrated with relapse prevention, motivational interviewing, and group process approaches. It is important to note that this rotation is only offered once per year and is ideally paired with the formal CPT training often provided by the Evidence-Based Therapy Coordinator during the fall.

**Rotation Expectations:**
Interns will likely work with five to six individual Veterans and are expected to complete individual PE or CPT with at least two Veterans during the course of the rotation. Interns will also provide care coordination for these Veterans during this same period. While not a requirement, given the added clinical complexity of Veterans seen on this rotation, prior training in PE and/or CPT is a plus.

Interns will also be expected to co-facilitate the Recovery from Trauma & Addiction group each week. This group is held from 5:00-6:00pm on Tuesdays. Interns are not expected to work extra hours to attend this group but instead are encouraged to flex their schedule to allow for attendance (e.g., starting later one morning each week or leaving early one afternoon). The group is designed to provide an added layer of support for Veterans with addiction who are concurrently engaging in EBTs for PTSD. For interns with an interest in additional group experience, opportunities will be available to co-facilitate the Mindful Recovery group as well as the Forgiveness in Recovery group. While these groups are not exclusive to Veterans with PTSD, they are unique interventions for the hospital and often include Veterans with co-occurring PTSD and addiction.

Interns on this rotation will also complete at least one SUD psychosocial intake per week. Completion includes a chart-review, 90-minute interview focused on the Veteran’s history of addictive behaviors and associated MH concerns, case conceptualization, and timely report write-up. Interns will provide a brief case presentation per intake to the SOAR team each week. Supervision and guidance will be provided for each intake, report, and presentation.

**Supervisor Comments:**
I look forward to learning more about what you hope to get out of the rotation and how best to develop a set of experiences to match these goals. Veterans engaging in trauma and addiction programming are a challenging group to work with, yet frequently they demonstrate tremendous courage and willingness to stare down the traumas of the past and move in the direction of recovery. Through weekly 1-hour face to face supervision, review of audio recordings of individual sessions, co-facilitation of groups, and on the fly consultation, I hope to create a rotation that further develops your interest and growth in this important clinical area.

**Mandatory Days/Times:**
- Recovery from Trauma & Addiction group (Tuesdays 5:00-6:00pm)
• SUD Psychosocial Intake (either Tuesdays 1:30–3:00pm or Thursdays 12:30–2:00pm)
• SOAR Team Meeting (Fridays 9:00-10:00am)
• Trauma & Addiction Case Consultation Lunch (Fridays 12:00-12:30pm)
• 1hr of individual supervision (TBD)

Rotation Location:
SOAR Clinic, Building 3

Residential SUD-PTSD Dual Diagnosis (SARRTP Track B)

Supervisor(s): Dr. Jacek Brewczynski

Rotation Description:
VASLCHACS has a 15-bed Substance Abuse Residential Rehabilitation Treatment Program (SARRTP). SARRTP offers rotation experiences in both traditional substance abuse (Track A, 3-month elective rotation) and a specific track for comorbid Post-traumatic Stress Disorder (PTSD) and Substance Use Disorders (SUD) (Track B, 6-month Core Psychotherapy rotation).

SARRTP Track B with Dr. Brewczynski is a 6-month, core psychotherapy rotation that focuses on providing EBTS for SUD and PTSD. There are several EBTS that are being offered on SARRTP that the interns may also choose to learn about on rotation including Motivational Enhancement Therapy (MET) and Interpersonal Therapy for Depression (IPT-D). While the focus of the rotation is on learning about and conducting Prolonged Exposure (PE) Therapy for PTSD, training and supervision in Cognitive Processing Therapy (CPT) for PTSD is also provided should the Veteran choose this intervention while at SARRTP.

Finally, interns are provided basic training in Measurement Based Care (MBC) at SARRTP, including training in the Behavioral Health Lab (BHL) software to collect data.

Rotation Expectations:
Typically, interns learn how to conduct PE for dual-dx patients on SARRTP and are required to complete 2 cases of EBT for PTSD while on a rotation. Also, interns co-facilitate the Track B Process Group.

Interns have been offered an opportunity to learn about and conduct PTSD Intake Assessments for the SARRTP residents as part of this rotation. Typically, interns conduct between 1-2 such assessments. Also, there are opportunities for a neuropsychological assessment evaluations based on need.

Mandatory Days/Times:

<table>
<thead>
<tr>
<th>Activity</th>
<th>Day(s)</th>
<th>Time</th>
<th>Frequency</th>
<th>Description</th>
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<tbody>
<tr>
<td>Staff Meeting</td>
<td>Tue</td>
<td>14:00-15:00</td>
<td>Weekly</td>
<td>Programmatic Issues</td>
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<tr>
<td>Morning Rounds</td>
<td>Mon-Fri</td>
<td>9:00-10:00</td>
<td>Daily</td>
<td>Clinical Issues at SARRTP</td>
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<tr>
<td>Supervision</td>
<td>Thu</td>
<td>8:00-9:00</td>
<td>Weekly</td>
<td>Individual Supervision</td>
</tr>
<tr>
<td>Track B Group</td>
<td>Thu</td>
<td>9:30-10:30</td>
<td>Weekly</td>
<td>Dual-dx Process Group</td>
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</table>

Optional Activities, Days/Times:

<table>
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<tr>
<th>Activity</th>
<th>Day(s)</th>
<th>Time</th>
<th>Frequency</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rec Outing</td>
<td>Tue</td>
<td>12:30-16:30</td>
<td>Weekly</td>
<td>Participate in rec activities</td>
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<tr>
<td>Process Group</td>
<td>Varies</td>
<td>4 x week</td>
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</table>
**Rotation Location:**
Building 3

**Posttraumatic Stress Disorder Clinical Team (PCT)**

**Supervisor(s):** Dr. Cicely Taravella

**Rotation Description:**
The aim of this 6-month core psychotherapy rotation is to develop proficiency in evidence-based treatment of PTSD, including Prolonged Exposure (PE) therapy and/or Cognitive Processing Therapy (CPT). Interns have the opportunity to work as part of a large, caring, and enthusiastic PTSD Clinical Team (PCT), founded over two decades ago, with an ongoing mission to facilitate Veterans’ recovery from military-related PTSD. The PCT serves Veterans of all service eras, ages, and type of trauma exposure while in the military (e.g., combat, MST, accidents, natural disasters, etc.). In addition to individual therapy, interns will have opportunities to hone their skills in PTSD assessment. There may be groups with which interns are able to assist, and there may be opportunities for learning/using Acceptance and Commitment Therapy when the primary presenting concern for the Veteran is re-adjustment.

**Rotation Expectations:**
Interns will complete one PTSD assessment per week (a clinical interview; useful in acquiring new cases), and they will carry a caseload of 4-5 therapy cases for PE and/or CPT.

**Supervisor Comments:**
I am a VA-certified provider of PE and CPT, and I’ve had extensive experience utilizing PE therapy with particularly complex and severe presentations of PTSD. If you haven’t had prior experience with either PE or CPT, it’s recommended that you pick one of the therapies to learn and practice in depth on rotation. If you do have prior experience in PE or CPT, this would make it easier to learn/hone skills in both modalities on rotation if you’d like. If you know you’d like to learn CPT, it’s helpful to participate in the CPT rollout training offered at the beginning of internship year.

**Mandatory Activities, Days/Times:**
- PTSD Intakes: Tuesdays 11-1 Weekly

**Optional Activities, Days/Times:**
- Staff Meetings: Weds 9-10 Weekly
- CPT rollout training: September 3 days + consultation
- PTSD Clinical Team meeting: September

**Rotation Location:**
Building 16

**Military Sexual Trauma/PTSD and Warrior Renew**

**Supervisor(s):** Dr. Alison Conway & Dr. Harrison Weinstein
**Rotation Description:**
This rotation includes treatment experiences in the Warrior Renew Program and on the PTSD Clinical Team (PCT). The Warrior Renew Program is an intensive outpatient program for female Veterans who have experienced Military Sexual Trauma (MST).

**Rotation Expectations:**
Interns will co-facilitate the Warrior Renew Program, an intensive outpatient therapy group for female MST survivors, provide individual supportive therapy to women in the program, and provide individual Cognitive Processing Therapy for PTSD to Veterans in the PTSD Clinic. Interns will also become proficient in PTSD assessment and will complete weekly PTSD intakes.

**Mandatory Activities, Days/Times:**
- **Warrior Renew group**: Mon 10-12 Weekly
- **Warrior Renew group**: Weds 10-1 Weekly
- **PTSD Intakes**: Tuesdays 11-1 Weekly
- **CPT rollout training**: September 3 days + consultation

**Optional Activities, Days/Times:**
- **Staff Meetings**: Weds 9-10 Weekly
- **PTSD Clinical Team meeting**: Weekly

Warrior Renew Program: Equine-Assisted Learning at the National Ability Center in Park City, UT; Outreach events (e.g., Sexual Assault Awareness Month events in April)

Opportunities exist to vary CPT treatment schedules (daily intensive treatment) on the PCT. Research opportunities exist may be available for those with interest.

**Rotation Location:**
Building 16

**Whole Health/Mindfulness Center**

**Supervisor(s):** Dr. Brandon Yabko

**Rotation Description:**
The Mindfulness Center is an important component of the VHASLC Whole Health Flagship Site initiative. The Center aims to provide and to support front-line staff who are providing mindfulness-based interventions (MBIs) throughout the facility, to expand the availability of MBIs for Veterans and staff, to conduct research regarding the effectiveness of new and existing MBIs, and to train staff to provide MBIs.

**Rotation Expectations:**
We offer a 6-month core psychotherapy rotation and a 3-month elective rotation. Interns will learn about, practice, and lead mindfulness interventions. There are many mindfulness and compassion groups from which interns can choose to meet their training needs. This rotation is primarily group-
based, but for those who choose the 6-month rotation, there will be the opportunity to work individually with Veterans utilizing mindfulness, compassion, and ACT principles. In addition to Dr. Yabko, interns will have the opportunity to work with the clinical dietician and/or an LCSW to co-lead groups they may be teaching (e.g., MB-EAT, Intro classes, SARRTP group).

**Supervisor Comments:**
Interns can definitely participate in program evaluation and research if interested and if approved by the Psychology Training Director. They will have the opportunity to join us on a mindfulness retreat for Veterans. This retreat will be at Snowbird ski resort, and we are working collaboratively with a community partner (Wasatch Adaptive Sports) to provide this to Veterans for free. Interns may also have the opportunity to provide in-services and other trainings to staff throughout the hospital in the area of mindfulness (e.g., overview, resiliency training, incorporating mindfulness into different clinics). Additionally, if interested in teaching, there may be opportunities to provide a didactic series to psychiatry residents.

**Mandatory Days/Times:**
Mindfulness-Based Cognitive Therapy (MBCT) Group: Mondays, 1:00pm-3:30pm
Mindfulness Maintenance Group: Mondays, 11:00am-12:00pm
SARRTP Mindfulness and Stretch Group, Mondays, 9:30am-10:30am

**Optional Activities:**
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<tr>
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<td>Weekly</td>
<td>TBD</td>
<td>Mindful Self-Compassion</td>
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<td>Weekly</td>
<td>TBD</td>
<td>Foundations of Mindfulness</td>
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<tr>
<td>Wednesday</td>
<td>Weekly</td>
<td>TBD</td>
<td>Mindful Movement/Gentle Yoga</td>
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<td>TBD</td>
<td>Weekly</td>
<td>TBD</td>
<td>Mindfulness-Based Stress Reduction</td>
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<tr>
<td>Wednesdays</td>
<td>Weekly</td>
<td>TBD</td>
<td>Mindfulness-Based Eating Awareness Training (MB-EAT)</td>
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**Rotation Location:**
Buildings 1 and 16

**Assessment Core Rotations**
Psychological assessment is a cornerstone of our profession. In line with this belief, the six-month assessment rotation focuses on building skills across all aspects of the assessment process. Often, interns arrive having had assessment experience that may be characterized as psychometrician level: they can administer the tests or batteries, but have little experience giving families difficult feedback, or conducting a thorough chart review, selecting measures, synthesizing comprehensive reports, etc. We understand that trainees will arrive with a range of experiences in assessment. Please rest assured that we understand this and accept a wide range of intern abilities and experience in regards to psychological assessment. As a general minimum we expect that interns will have had graduate coursework in objective assessment and will have written three integrated assessment batteries. Beyond that, we willingly provide hands-on training. Interns with considerable experience are given latitude in the number of evaluations and issues regarding patient complexity. Also, they have more access to high-stakes evaluations (e.g., dorsal column stimulator, solid organ transplantation, etc.).

**Neuropsychological Assessment**

**Supervisor(s):** Dr. Patrick Miller or Dr. Janet Madsen or Dr. John Hecker.
**Rotation Description:**
Assessments are frequently requested by VASLCHCS providers to assist with diagnostic questions and patient management issues. Common referral issues include questions about medical decision-making capacity, dementia vs. depression, cognitive disorders due to traumatic brain injury or other medical conditions. Interns will be trained in the administration, scoring, norming, and interpretation of various instruments. After an initial training period, which varies depending on the level of assessment experience within an intern cohort, interns generally conduct weekly psychological assessments using a variety of common instruments and differential diagnosis of neuropsychiatric conditions (e.g., multiple sclerosis, anoxia, and stroke).

All interns receive extensive didactic training in the administration, scoring, and interpretation of psychological instruments. Interns will also receive weekly individual supervision with an experienced psychologist. Supervision focuses on each aspect of the evaluation process, including referral information, presenting complaints, background history, interview and observations, testing and normative data, differential diagnosis, and recommended interventions. In addition to the individual supervision, interns also participate in weekly group supervision. Interns present their cases and provide feedback to each other in the process. In addition to traditional assessment cases, interns will conduct high-stakes evaluations such as transplant evaluations. The Psychology Service is also responsible for conducting the mental health assessments of spinal cord stimulator candidates.

**Rotation Expectations:**
- Interns conduct weekly neuropsychological assessments using a variety of common instruments and including differential diagnosis of neuropsychiatric conditions (e.g., multiple sclerosis, anoxia, and stroke).
- On weeks in which interns do not have cases to present, they will present on a topic related to neuropsychological assessment, neurocognitive disorders, or related topics.
- Geriatric Assessment mini-rotation (see below).

**Mandatory Days/Times:**
Group supervision: Thursdays, 10:30am-12:00pm
Plan for around 4-5 hours per week for testing and approximately 4 hours per week to write reports.

**Rotation Location:**
Buildings 3 and 16

*Geriatric Assessment*

**Supervisor(s):** Bret Hicken, PhD and Psychology Fellow

VASLCHCS holds that interns need a full range of experience in providing assessment. In addition to the comprehensive neuropsychological batteries, interns will also have the experience of providing briefer assessments and recommendations (consultation) in a medical setting. This is conducted in the Geropsychology Assessment Clinic.

**Rotation Description:**
This is a two month mini-rotation experience that occurs during the core Neuropsychological Assessment Rotation.
In this interdisciplinary primary care setting, interns will: 1) triage new patients for referral into geriatric clinics, and 2) provide consultation to providers on a one-time basis. These clinics are staffed by a geriatrician and geriatric fellows, pharmacist, speech pathologist, social work intern, medical intern, and psychology intern. This is a unique opportunity for developing interdisciplinary skills, since each patient is seen by every member of the team for a brief evaluation. The team then meets to review findings and to develop recommendations. Each core assessment intern will rotate through this additional component for two months of the internship year. Although VASLCHCS intern work-weeks are typically 40-45 hours, during this period, interns can expect to increase at least to 45-55 hours during this two-month session. The Training Director will make every effort to schedule this component when competing demands are fewest (e.g., not during dissertation defense or opposite heavy or inflexible rotations).

**Rotation Expectations:**
Responsibilities for this rotation include:
- Conducting neuropsychological evaluations (full medical record review, intake, test administration and interpretation, report writing, and feedback to the patient and family)
- Attendance at weekly supervision meetings
- Attendance at weekly group supervision case reviews
- Providing recommendations to consulting medical providers
- Providing just-in-time consultation in the weekly Geriatric Assessment Clinic

**Mandatory Days/Times:**
Tuesdays, 12:00pm-4:30pm

**Rotation Location:** TBD

**Geriatric Neuropsychology, Cognitive Disorders Clinic**

**Supervisor(s):** Dr. Sara Weisenbach, ABPP-CN

**Rotation Description:**
Interns wishing to pursue a career in neuropsychology, geropsychology, or rehabilitation psychology may opt to do their assessment rotation with our ABPP neuropsychologist. Interns with prior experience in those areas are given preference for this rotation. The Geriatric Neuropsychology Rotation consists of comprehensive neuropsychological evaluation of patients referred from the VA Cognitive Disorders Clinic, through the GERI-PACT program. Referrals may occasionally also come from general Geriatrics Primary Care Clinics.

The Cognitive Disorders Clinic is a new interdisciplinary team consisting of an attending neurologist, an attending neuropsychologist, and Nursing, as well as trainees from rotating mental health and medical disciplines (e.g., psychology practicum students/intern/fellow, psychiatry intern/resident/fellow, medical student, pharmacy resident, physician’s assistant resident, neurology resident, etc.). This team provides consultation services to geriatric patients within an outpatient setting who are experiencing early cognitive changes. Presenting problems can include age-related cognitive loss, mild cognitive impairment, movement disorder, dementia of various etiologies, stroke, medical conditions causing cognitive impairment, and psychiatric and emotional factors influencing function and behavior. Patients are typically seen by the attending neurologist, who then refers them for neuropsychological evaluation.
and other services (e.g., neuroimaging, bloodwork, etc.), when necessary. When all other visits have been completed, patients return to see the attending neurologist (and others involved as part of the care team). Neuropsychological feedback is typically given at this time, either by the neurologist or by the neuropsychologist/neuropsychology trainees. The neurologist will make a final diagnosis (when possible), and create a treatment plan that the patient’s primary care provider can implement as part of their overall continuing medical care.

**Rotation Expectations:**

Psychology trainees, along with the supervising attending psychologist, have several responsibilities, including:

- Conducting neuropsychological evaluations (including record review, interview, test administration and interpretation, report writing, and occasionally, feedback to the patient, family, and/or provider)
- Attendance at weekly supervision meetings
- Attendance at monthly neuropsychology seminar/case conferences (typically held in the evening on University of Utah Main Campus, Psychology)
- Teaching other rotating trainees (and learning from them)
- Providing recommendations to consulting medical providers
- Rotating once weekly in the Cognitive Disorders Clinic in Neurology

**Supervisor Comments:**

You may be working with more junior (graduate-level practicum students) or more senior trainees on cases. The extent to which a trainee is involved in given parts of the evaluation will depend upon prior experience with neuropsychological assessment, clinic needs, and career/training goals. The clinical interview may be conducted jointly with Dr. Weisenbach. Neuropsychological testing and scoring will typically be performed by the intern, but may be performed by a practicum student, so that interns have the experience of working using a “technician model.” Lastly, the supervisor on this rotation, Dr. Sara Weisenbach, ABPP-CN, is a board certified clinical neuropsychologist.

**Mandatory Days/Times:**

Clinic: Mondays 8:00am-4:30pm  
Neurology Clinic: Fridays 12:30pm-4:30pm  
Neuropsych Case Conference: Friday 3:30pm-5:00pm (monthly at UNI)

**Rotation Location:**

Building 3
ELECTIVE ROTATION DESCRIPTIONS

Home Based Primary Care Program

Supervisor(s): Dr. Lauren Greenberg

Rotation Description:
The Home Based Primary Care (HBPC) Program is an interdisciplinary outpatient service that provides comprehensive, interdisciplinary primary care in the homes of Veterans with complex medical, social, and behavioral conditions for whom routine clinic-based care is ineffective.

Rotation Expectations:
Responsibilities of the intern on this team include:
- Screening, assessment, diagnosis, and treatment of Axis I conditions
- Assessing and providing treatments for subclinical symptoms of dysphoria and anxiety, bereavement, adjustment difficulties, and excessive drug use
- Providing services to caregivers of Veterans served by HBPC
- Performing capacity assessments when there are questions about a patient’s ability to make medical decisions, perform other specific functions, or live independently
- Represent psychology during interdisciplinary team meetings

Mandatory Days/Times:
Team meetings: Wednesdays, 8:30am-10:30am

Rotation Location:
Building 9; on the road for patient visits

Whole Health Mindfulness Center

Supervisor(s): Dr. Brandon Yabko

Rotation Description:
The Mindfulness Center is an important component of the VHASLC Whole Health Flagship Site initiative. The Center aims to provide and to support front-line staff who are providing mindfulness-based interventions (MBIs) throughout the facility, to expand the availability of MBIs for Veterans and staff, to conduct research regarding the effectiveness of new and existing MBIs, and to train staff to provide MBIs.

Rotation Expectations:
We offer a 6-month core psychotherapy rotation and a 3-month elective rotation. Interns will learn about, practice, and lead mindfulness interventions. There are many mindfulness and compassion groups from which interns can choose to meet their training needs. This rotation is primarily group-based, but for those who choose the 6-month rotation, there will be the opportunity to work individually with Veterans utilizing mindfulness, compassion, and ACT principles. In addition to Dr. Yabko, interns will have the opportunity to work with the clinical dietician and/or an LCSW to co-lead groups they may be teaching (e.g., MB-EAT, Intro classes, SARRTP group).
Supervisor Comments:
Interns can definitely participate in program evaluation and research if interested and if approved by the Psychology Training Director. They will have the opportunity to join us on a mindfulness retreat for Veterans. This retreat will be at Snowbird ski resort, and we are working collaboratively with a community partner (Wasatch Adaptive Sports) to provide this to Veterans for free. Interns may also have the opportunity to provide in-services and other trainings to staff throughout the hospital in the area of mindfulness (e.g., overview, resiliency training, incorporating mindfulness into different clinics). Additionally, if interested in teaching, there may be opportunities to provide a didactic series to psychiatry residents.

Mandatory Days/Times:
Mindfulness-Based Cognitive Therapy (MBCT) Group: Mondays, 1:00pm-3:30pm
Mindfulness Maintenance Group: Mondays, 11:00am-12:00pm
SARRTP Mindfulness and Stretch Group, Mondays, 9:30am-10:30am

Optional Activities:
<table>
<thead>
<tr>
<th>Group</th>
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<tr>
<td>Group</td>
<td>TBD</td>
<td>Weekly</td>
<td>Foundations of Mindfulness</td>
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<td>Group</td>
<td>Wednesday</td>
<td>Weekly</td>
<td>Mindful Movement/Gentle Yoga</td>
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<td>Group</td>
<td>TBD</td>
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<td>Mindfulness-Based Stress Reduction</td>
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<td>Group</td>
<td>Wednesdays</td>
<td>Weekly</td>
<td>Mindfulness-Based Eating Awareness Training (MB-EAT)</td>
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Rotation Location:
Building 1 and Building 16

Medical Psychology

Supervisor(s): Dr. Amber Martinson

Rotation Description:
Interns can expect to provide inpatient medical consultation and to provide pain treatment through primary care. The rotation will consist of a combination of the following experiences:

Inpatient Mental Health Consult/Liaison Team (MH Consult)
The Mental Health Consult Team is an interdisciplinary team consisting of Psychology, Psychiatry, and trainees from several other rotating mental health and medical disciplines. This team provides mental health services to patients within inpatient medical settings, including Acute Medicine, Surgery, Neurology, Telemetry, Dialysis, and Intensive Care Units by utilizing a consultation/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.

Primary Care Pain Management
Interns will have an opportunity to co-lead a 6-week CBT for chronic pain group for patients with noncancer pain in primary care. In addition, interns may also participate in co-facilitating the Pain Education & Opioid Monitoring Program (PC-POP) shared medical appointments, which emphasize a Whole Health approach to pain management. Research opportunities re: program evaluation are available upon request.
Rotation Expectations:

For MH/Consult

- Participation in patient-centered rounds
- Conducting diagnostic evaluations
- Administration of neuropsychological screenings
- Providing brief psychotherapy
- Conducting transplant evaluations

For Primary Care Pain Management

- Co-facilitate CBT for Chronic Pain group
- Co-facilitate PC-POP class

Mandatory Days/Times:

Patient Rounds: At least 3 days per week (not Fridays), 8:00am-12:00pm
CBT for Chronic Pain Group: Wednesdays, 3:00pm-4:00pm

Rotation Location:

Building 14, Ground Level

Substance Abuse

VASLCHCS Addiction Treatment Services (ATS) has recently undergone significant change in terms of structure, facilities, and staff re-organization. Interns are offered a number of training opportunities in both the outpatient and the residential treatment arms of ATS, including: providing assessment and treatment planning, individual psychotherapy, and discharge planning. Interns also provide relapse prevention-based psychoeducational groups, administer psychological and neuropsychological assessments in response to consultation requests, and co-facilitate groups with other substance abuse staff. There are both inpatient and outpatient treatment settings for interns to select from. ATS elective rotations include both Services for Outpatient Addiction Recovery (SOAR) and the Substance Abuse Residential Rehabilitation Treatment Program (SARRTP).

Services for Outpatient Addiction Recovery (SOAR)

Supervisor(s): Dr. Heather Pierson or Dr. Spencer Richards or Dr. Caitlin MacKay

Rotation Description:
Services for Outpatient Addiction Recovery (SOAR) usually provides the first contact for Veterans with Addiction Treatment Services (ATS) by providing an intake assessment and helping with placement in ATS. SOAR also provides the Intensive Outpatient Programs (IOP), General Outpatient Programs, and the Prime for Life DUI Course. SOAR services include many group treatment options, individual counseling, case management, and psychiatric care. Interns on rotation have opportunities to be involved in intake assessments, treatment planning and care coordination, and group and individual therapy. An addictions and behavioral medicine emphasis with opportunities to develop assessment and intervention skills for substance use disorders (SUDs) in medically complex patients is available with Dr. Richards.
Rotation Expectations:

- Providing group psychotherapy is a core experience of this rotation. Interns will be involved in a 3-week Intensive Outpatient Program (IOP), which includes 9, one-hour groups each week.
- Intakes: psychosocial assessment and diagnostic evaluation
- Integration on an interdisciplinary team (psychiatrist, psychologist, social workers, RN case manager, addiction therapist, pharmacist)
- Individual brief therapy depending on interest, goals, experience, and Veterans’ needs
- Administrative exposure: there are many opportunities to gain exposure to the many factors that influence implementing changes, including facilitating team dynamics, team building, navigating a complex system to fit new structures within existing structures, etc.

Mandatory Days/Times:
SOAR patient placement meeting: Tuesdays 3pm-3:30pm
SOAR patient placement meeting: Thursdays 2pm-2:30pm
SOAR interdisciplinary team meeting: Fridays 9am-10am

Rotation Location:
Building 3

Substance Abuse Residential Rehabilitation Treatment Program (SARRTP Track A)

Supervisor(s): Dr. Heather Black (Track A), Dr. Taylor Plumb (Track A)

Rotation Description:
SARRTP offers rotation experiences in both traditional substance abuse (Track A, 3-month elective rotation) and a specific track for comorbid Post-traumatic Stress Disorder (PTSD) and Substance Use Disorders (SUD) (Track B, 6-month Core Psychotherapy rotation).

SARRTP is a 15-bed residential substance use disorder treatment program. Treatment focuses on assisting veterans with stabilization and early recovery from severe substance use disorders. Treatment is also provided for co-occurring mental health conditions. Of note, SARRTP has 8 beds designated for treatment of co-occurring substance use disorder and PTSD using evidence based therapies.

SARRTP provides comprehensive care via a multidisciplinary team. Services include psychiatric treatment, individual and group psychotherapy, therapeutic recreation, and 24/7 nursing care. The treatment team consists of the medical director who is board certified in addiction medicine, psychiatry residents, psychologists, social workers, nurses, psychology technicians, a pharmacist, and a therapeutic recreation specialist.

SARRTP is a dynamic environment that presents unique learning opportunities. Residential treatment involves daily clinical opportunities related to maintaining a functional therapeutic milieu consisting of Veterans with very different skills and clinical presentations. This environment affords the intern opportunities to develop experience in addressing complex interpersonal dynamics and in the use of the therapeutic milieu as a forum for promoting psychosocial recovery. Interns will function as an integral part of the interdisciplinary treatment team. Evidence-based practices are used on SARRTP.
Rotation Expectations:

- Develop a caseload of two individual psychotherapy clients throughout the rotation. This will include case management activities.
- Co-facilitate 1-2 substance use disorder recovery groups per week (e.g., relapse prevention).
- Co-facilitate one process psychotherapy group per week.
- Maintain timely, high quality documentation.
- Attend approximately three team meetings per week.
- Other activities may be developed, such as adding a new psychoeducational group or participating in program evaluation. Additional activities can be negotiated with supervisor and treatment team.

Mandatory Days/Times:
Staff Meetings: Tuesdays, 2:00pm-3:00pm
Rounds/Multidisciplinary Team Meeting: Daily, 9:00am-10:00am (attend at least three times per week)

Rotation Location:
Building 3

Inpatient Psychiatry Unit (IPU)

Supervisor(s): Dr. Richard Weaver, Dr. Jo Merrill

Rotation Description:
This 30-bed Inpatient Psychiatry program delivers crisis-oriented services to patients with a wide range of presenting problems. The patient population represents all adult age groups and a variety of diagnoses. Interns are assigned to one of four multidisciplinary treatment teams, each of which develops treatment plans in cooperation with the patients. Common activities for the intern include: individual therapy, comprehensive psychological assessment, and process and psychoeducational groups.

IPU has a strong commitment to training. Students from each of the MH disciplines (Psychiatry, Psychology, Social Work, and Nursing) rotate through the unit. Unless interns have considerable inpatient psychiatry experience, we encourage interns to consider this rotation as the supervised experience is something few interns have had in practicum setting.

Rotation Expectations:
Psychology interns play an active role on the unit and have considerable freedom in choosing diagnostic and treatment activities that fit their interests.

Some options include:

- Administration and interpretation of a range of assessment instruments, including personality, objective, and neuropsychological screening instruments
- Individual psychotherapy
- Yalom-based group therapy, DBT skills training groups, Insomnia group, rec therapy
- Interdisciplinary Team consultation
- In-service training programs from other discipline.
- Observation of psychiatric procedures such as electroconvulsive therapy (ECT)
Mandatory Days/Times:
Community Meetings: Daily, 8:30am-8:50am
Team Rounds: Daily, 9:00am-10:00am
Process Groups: Daily, 1:00pm-2:00pm (Thursdays 1:30-2:30pm)

Rotation Location:
Building 3

National Telemental Health Hub

Supervisor(s): Dr. Alethea Varra, Dr. Jennifer Mathews

Rotation Description:
The National Telemental Health Hub is a national program that provides comprehensive mental health services to Veterans in the Continental Region of the United States. We serve 12 different VA Medical Centers, over 60 Community Based Outpatient Clinics, and cover 13 states. The Hub employs 9 clinical psychologists with a range of expertise including PTSD, Health Psych, Gero Psych, and Neuropsych assessment. Interns will receive training in telehealth including the modality and how to adapt one’s practice to provide care over video technology. Interns will provide individual therapy and assessment but may have some opportunities to participate in group treatments or in comprehensive personality, transplant, or neuropsych assessments. Some exposure to national policy and operation around telehealth is also available.

Rotation Expectations:
Develop proficiency using the telehealth modality
Provide individual therapy and assessment to diverse Veterans often from geographically isolated and/or underserved areas of the country

Mandatory Days/Times:
Clinical availability: required on Tuesday afternoons
Staff meeting: Wednesdays, 10:00am-11:00am

Rotation Location:
Building 550

PTSD Intensive

This a potentially available elective rotation if there is a strong interest.

Supervisor(s): Dr. Harrison Weinstein

Rotation Description:
As part of the PTSD Clinical Team (PCT), interns on this rotation will learn to conduct short-term (e.g., daily for 3 weeks) manualized psychotherapy for Veterans with military service-related PTSD. Interns will have the opportunity to provide individual Cognitive Processing Therapy to these Veterans. Research possibilities exist on this application of modified evidence-based psychotherapy. Interns also have the option to conduct intake assessments in the PTSD open intake clinic.
Rotation Expectations:
Interns are expected to carry a caseload of 2-3 patients that they see on a daily basis for 3 weeks and are expected to actively participate in weekly supervision.

Supervisor Comments:
This rotation is available as a 3- or 6-month rotation. In order to participate in this rotation, interns must complete the CPT rollout training offered at the beginning of the internship year. This rotation is only offered in the second half of the year.

Mandatory Days/Times:
CPT rollout training, September, 3 days for training, plus consultation
At least two, 1 hour-long blocks of time for seeing patients each day (preferably the same times each day)
PTSD Team Meeting: Wednesdays, 9:00am-10:00am (preferable not required)
PTSD Open Intake Clinic: Tuesdays, 11:00am-1:00pm (optional)

Rotation location:
Building 16
TRAINING STAFF BIOS & FUN FACTS

Below is a brief biography for each of our supervisory psychologists. We have tried to provide a sense of our staff without veering too closely to a match.com ad—you be the judge. Further, we encourage you to contact staff members only if you have a specific question for them. Out of respect for our staff psychologists’ time, please direct all general inquiries to Dr. Swanson.

Dennis “Aaron” Ahern, PhD

Rotation Supervised: Elective Rotation: VITAL (Veterans Integration to Academic Leadership) Training

Graduate Training Program(s): PhD, Combined Clinical, Counseling, and School Psychology, Utah State University

Internship: University of Utah Neuropsychiatric Institute

Areas of Interest & Expertise: Student veterans, Educational benefits, Evidence-based Treatments for PTSD (Prolonged Exposure and EMDR); Cross cultural clinical work (specifically with Latino populations), Program development, Treatment outcome research.

Fun Facts: Being a dad to two young children takes up most of my free time, but when I get the time I enjoy listening to music, dancing, playing soccer and basketball, and running.

Email: dennis.ahern@va.gov

Thomas R. Aikins, PhD

Rotation Supervised: Core in Outpatient Psychotherapy – General Mental Health (BHIP)

Graduate Training Program(s): PhD, Counseling/Clinical Psychology – University of Utah

Internship: VA Salt Lake City Health Care System

Areas of Interest & Expertise: Affective Disorders, PTSD, Chronic Pain, Former Prisoners of War, and Couples Communication/Marital Therapy

Fun Facts: Psychology does not define me. I am a full-time grandfather to nine budding personalities. I am an avid cyclist, mostly in the warmer months. I am also likely to introduce myself as a landscape artist (oils), since this is also an Elective love of mine [we all know that reaction we get when we introduce ourselves as “Psychologist”]. I have my own studio, website, and galleries where my work can be seen and hopefully sold. I have been fortunate to paint in multiple
foreign countries and the "travel bug" could easily overwhelm my bank account.

Email  thomas.aikins@va.gov

James Asbrand, PhD

Rotation Supervised  Core in Outpatient Psychotherapy – MST Program/PTSD Clinic
Graduate Training Program(s)  PhD, Counseling Psychology – University of Utah
Internship  Brigham Young University Counseling Center
Areas of Interest & Expertise  PTSD, Military Sexual Trauma, Diversity Issues, Spirituality, Mindfulness, and ACT.
Fun Facts  Outside work, I enjoy working out, taking advantage of the natural beauty of Utah, traveling, binge watching Netflix series, spending time with my wife and 2 young daughters, and good beer (not necessarily in that order!). Before becoming a psychologist I earned a black sash in kung-fu and taught classes to adults and children.

Email  James.Asbrand@va.gov

Heather Black, Psy.D.

Rotation Supervised  SARRTP
Graduate Training Program(s)  Psy.D., Clinical Psychology – Azusa Pacific University
Internship  VA Salt Lake City Health Care System
Areas of Interest & Expertise  Co-morbid diagnoses of SUD & PTSD, Crisis Interventions, Suicide Prevention, Acceptance and Commitment Therapy, Forgiveness, and DBT. I love working in the group setting and am passionate about integrating families into treatment.
Fun Facts  My life before psychology included working in reality television for MTV and traveling around the world as a photojournalist in conflict regions. Now, I spend my free time with my two sons and husband snowboarding, camping, fishing, and helping him run his food truck company. I came here for internship and never left...this place has a way of doing that to you, so apply at your own risk!

Email  heather.black1@va.gov
Jacek Brewczynski, PhD

Rotation Supervised Psychotherapy Core Track B-SARRTP

Graduate Training Program(s) PhD, Clinical Psychology – University of Detroit

Internship Tampa VAMC; Postdoctoral fellowship: PTSD & Polytrauma, VASLCHCS

Areas of Interest & Expertise Psychological interventions for veterans with co-morbid diagnoses of SUD & PTSD; psychological & neuropsychological assessment, including personality assessment; transpersonal interventions, such as mindfulness & meditation-based.

Fun Facts I own a keyboard, a set of martial arts weapons, and a subscription to Netflix.

Email jacek.brewczynski@va.gov

Jonathan Codell, PhD

Rotation Supervised Psychotherapy Core rotation in Trauma & Addictions – Services for Outpatient

Graduate Training Program(s) PhD, Counseling Psychology – University of Utah, Salt Lake City

Internship VA Salt Lake City Health Care System; Postdoctoral fellowship: PTSD/SUD-New Mexico VA Health Care

Areas of Interest & Expertise Cognitive Processing Therapy, Prolonged Exposure, Mindfulness-Based Relapse Prevention, Acceptance and Commitment Therapy, forgiveness and recovery, and cross-cultural mental health interventions and outcomes. I also have a strong interest in the integration of longitudinal data analysis in program development and evaluation initiatives.

Fun Facts I completed my undergraduate in Vienna Austria, was a Peace Corps Volunteer in Uzbekistan, and landed in Utah for love of the desert and mountains. When not working, I balance my time between trying to respond to the existential questions posed to me by my two young children and mountain biking, snowboarding, or exploring the many dirt roads of Utah.

Email Jonathan.Codell@va.gov
**Alison Conway, PsyD**

**Rotation Supervised**  Military Sexual Trauma/PTSD and Warrior Renew

**Graduate Training Program**  PsyD, Clinical Psychology – Pepperdine University

**Internship**  VA Loma Linda Healthcare System

**Postdoctoral Fellowship**  PTSD and Polytrauma, VA Salt Lake City Health Care System

**Areas of Interest & Expertise**  Military Sexual Trauma, PTSD and Complex Trauma, Evidence-Based Treatments for PTSD (Cognitive Processing Therapy and Prolonged Exposure), Moral Injury, Acceptance and Commitment Therapy, and Equine Therapy/Equine-Assisted Learning. I love group therapy, especially with MST survivors.

**Fun Facts**  Since moving to Utah, I’ve learned to love hiking and tolerate winter. In my free time, I like to hunt for mid-century modern furniture at random antique stores and flea markets, read, and bake (and eat!) sweets. I’m really good at Jeopardy and make an excellent trivia teammate. My future goals include taking cake decorating classes and floating in the Great Salt Lake.

**Email**  Alison.Conway@va.gov

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**Lauren Greenberg, Psy.D.**

**Rotation Supervised**  Home Based Primary Care

**Graduate Training Program**  Psy.D., Clinical Psychology, Baylor University

**Internship**  VA Salt Lake City Health Care System

**Postdoctoral Fellowship**  VA Salt Lake City Health Care System, Integrated Primary Care Health Psychology- Geropsychology Track

**Areas of Interest & Expertise**  Geropsychology, dementia evaluation and management, neuropsychological assessment, caregiver intervention, insomnia, trauma reactions in later life

**Fun Facts**  I enjoy hiking, getting 10,000 steps per day, traveling, playing golf (poorly), hanging out with my miniature Australian shepherd, and trying new restaurants/tracking down my favorite food trucks

**Email**  Lauren.greenberg2@va.gov
**John Hecker, Psy.D.**

Rotation Supervised  Neuropsychological Assessment

Graduate Training Program  Psy.D., Clinical Psychology – Regent University

Internship  Erie Psychological Consortium, Erie, PA

Postdoctoral Fellowship  Northshore Neurosciences - Clinical Neuropsychology

Areas of Interest & Expertise  Understanding brain-behavior relationships through neuropsychological and psychological assessment; evaluating neurocognitive disorders in adults and geriatrics including dementia, traumatic brain injury, stroke, seizure; competency evaluation; malingering/effort testing.

Fun Facts  In addition to spending time with my family, I enjoy the outdoors, going to the movies, continental philosophy, ancient alien theory, and Florentine cannoli.

Email  John.Hecker@VA.gov

**Bret Hicken, PhD**

Rotation Supervised  Core Rotation – the Geriatric Assessment Clinic for six of eight interns

Graduate Training Program  PhD, Clinical Psychology – Univ. of Alabama at Birmingham

Internship  VA Salt Lake City Health Care System

Postdoctoral Fellowship  Geriatrics Research, Education, and Clinical Center, VA Salt Lake City Health Care System

Areas of Interest & Expertise  Geropsychology, capacity evaluation, dementia assessment & treatment, rural health, caregiver support, program development/evaluation.

Fun Facts  My hobbies include gardening, cycling, urban chicken husbandry, reading prescription inserts, and coming up with interesting things to say for my Fun Facts. I own a white dog. Once I rode a camel.

Email  bret.hicken@va.gov

**Kevin Laska, PhD**

Rotation Supervised  Core in Outpatient Psychotherapy – General Mental Health
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<thead>
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<th>Graduate Training Program</th>
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<td>Bedford VA Medical Center</td>
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**Postdoctoral Fellowship**

**Areas of Interest & Expertise** 
Psychotherapy research, common factors of psychotherapy, measurement based care, supervision

**Fun Facts** 
I was involved at Boston Improv before moving out to Salt Lake City. Yes!...and my colleagues say I have a strange obsession with strength training and kettlebells. I may or may not be known for demonstrating to co-workers how to do a kettlebell swing in-between sessions.

**Email**  
Kevin.Laska2@va.gov

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**Janet G. Madsen, PhD**

**Rotation Supervised** 
Core Rotation in Psychological Assessment

**Graduate Training Program** 
PhD, University of Utah

**Internship** 
VA Salt Lake City Health Care System

**Areas of Interest & Expertise** 
Neuropsychological Assessment, Evaluation for Spinal cord stimulator implant, Cognitive Disorders, TBI, Polytrauma.

**Fun Facts** 
I have a large family of adult children and 20 grandchildren (so far). I love to garden in the summer and enjoy caring for my cats. I love baroque music and the local culture.

**Email**  
janet.madsen@va.gov

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**Amber Martinson, PhD**

**Rotation Supervised** 
Medical Psychology

**Graduate Training Program** 
PhD, Clinical Psychology, University of Maine

**Internship** 
VA Salt Lake City Health Care System

**Postdoctoral Fellowship** 
VA Salt Lake City Health Care System, Integrated Primary Care Health Psychology

**Areas of Interest & Expertise** 
Biological correlates of trauma/stress, chronic pain, coping with life-limiting illness, neurocognitive disorders. I adhere to a biopsychosocial approach within a cognitive-behavioral framework.
Fun Facts  I enjoy skiing, hiking, running, visiting Maine, and spending time with my family. Guilty pleasures include watching celebrity gossip shows (e.g., TMZ), eating chocolate, and avoiding vegetables.

Email  Amber.Martinson@va.gov

Jennifer Mathews, PhD

Rotation Supervised  National Telemental Health Hub

Graduate Training Program  PhD, Clinical Psychology (with an emphasis in neuropsychology) – Washington University in St. Louis

Internship  Clinical Neuropsychology – VA Connecticut Healthcare System, West Haven, CT

Postdoctoral Fellowship  Clinical Neuropsychology – Washington University in St. Louis School of Medicine (Departments of Psychiatry and Neurology)

Areas of Interest & Expertise  Adult Neuropsychology, SMI, neuroimaging, neuropsychological differentiation between neurologic and psychiatric disorders, and telehealth.

Fun Facts  I have two young boys, the oldest of whom dreams of winning the Olympics in figure skating. His dream requires much parental supervision and carpooling, so I guess I have a strong interest in figure skating (despite being unable to skate myself 😛). My other active hobbies include listening to audio books while at the ice rink, volunteering at the ice rink, and chasing after a 5-year-old younger son while at the ice rink (you get the picture...)! 

Email  Jennifer.Mathews22@va.gov

Jo Merrill, PhD

Rotation Supervised  Elective in Inpatient Psychiatry (IPU)

Graduate Training Program  PhD, Counseling Psychology – University of Utah

Internship  VA Salt Lake City Health Care System

Areas of Interest & Expertise  Inpatient psychiatry; working with a broad spectrum of acute and chronically mentally ill patients; PTSD; insomnia and nightmare management; LGBTQ veterans
Fun Facts
I love Utah and can’t seem to move away for long. I left graduate school in history for graduate school in psychology, as I preferred to work with the living. I’m trying to figure out the whole parenthood thing and in the meantime miss my dogs and books.

Email tiffany.merrill@va.gov

Patrick J. Miller, PhD

Rotation Supervised Core in Psychological Assessment

Graduate Training Program PhD, Clinical Psychology – Washington State University

Internship VA Salt Lake City Health Care System

Areas of Interest & Expertise Geropsychology, Cognitive Disorders, Neuropsychology, Ethics in Health Care, Administration of Mental Health Programs and Interdisciplinary Teams.

Fun Facts Dr. Miller is the Chief of Psychology

Email patrick.miller@va.gov

Heather Pierson, PhD

Rotation Supervised Elective in Services for Outpatient Addiction Recovery (SOAR)

Graduate Training Program PhD, Clinical Psychology – University of Nevada, Reno

Internship VA Puget Sound Health Care System, Seattle

Postdoctoral Fellowship Palo Alto VA HCS, Substance use disorders/Homelessness

Areas of Interest & Expertise Motivational Interviewing, Acceptance and Commitment Therapy, Mindfulness-Based Relapse Prevention, CBT Relapse Prevention, Co-occurring SUD and MH treatment, team development, program development.

Fun Facts I love these mountains. They’re great for hiking, kayaking, biking, camping, and looking for moose (which I’ve found about 40% of the time). My other loves include my young son and husband, both of whom provide endless entertainment with their questions and ideas; my dogs; flock of chickens; and cooking with home grown produce.

Email Heather.Pierson@va.gov
**Taylor Plumb, Psy.D.**

Rotation Supervised: SARPTP

Graduate Training Program: Psy.D., Clinical Psychology – California School of Professional Psychology – San Francisco

Internship: VA Salt Lake City Health Care System

Postdoctoral Fellowship: VA Salt Lake City Health Care System, PTSD & Polytrauma

Areas of Interest & Expertise: Substance Use Disorders, PTSD, Trauma Related Sleep Disturbances, TBI and Polytrauma, Neuropsychology, OEF & OIF Readjustment, Evidenced-Based Therapies for PTSD

Fun Facts: TBD

Email: taylor.plumb@va.gov

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**Spencer Richards, PhD**

Rotation Supervised: Elective Addiction and Behavioral Medicine – Services for Outpatient Addiction Recovery (SOAR)

Graduate Training Program: PhD, Combined Clinical/Counseling/School Psychology – Utah State University

Internship: Missouri Health Sciences Psychology Consortium

Postdoctoral Fellowship: VA Salt Lake City Health Care System, Integrated Primary Care Health Psychology (most of it!)

Areas of Interest & Expertise: Behavioral medicine and medical psychology, interdisciplinary intervention and training, biopsychosocial treatment of addictive disorders, Acceptance and Commitment Therapy.

Fun Facts: I am a proud owner of two extraordinarily stubborn and absurdly adorable geriatric basset hounds and we can often be found meandering slowly around Liberty Park. I grew up as an “outside kid” in the Pacific Northwest so I spend as much time as is humanly possible playing in the mountains, deserts, canyons, and rivers of Utah. I love to explore new places, foods, and adventures – especially when combined.

Email: Spencer.Richards@va.gov
**Leland “Ben” Swanson, PhD**

Rotation Supervised: Elective in Diversity Advocacy (in development)

Graduate Training Program(s): University of Utah Counseling Psychology

Internship: American Lakes VA

Areas of Interest & Expertise: Training, Clinical Supervision, Motivational Interviewing, Positive Psychology, and Program Development

Fun Facts: Avid video game and computer enthusiast going back to the Atari 2600 and the Texas Instruments TI-99/4A home computer that used a tape recorder and audio cassette attached to the system to download programs into its vast 256 byte memory. I’m really looking forward to having my own holodeck one day.

Email: Leland.Swanson@va.gov

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**Cicely Taravella, PhD**

Rotation Supervised: Core in Outpatient Psychotherapy – PTSD Clinical Team

Graduate Training Program: PhD, Clinical Psychology – University of North Texas

Internship: VA North Texas Health Care System, Dallas

Postdoctoral Fellowship: VA Salt Lake City Health Care System, PTSD & Polytrauma

Areas of Interest & Expertise: Evidence-based psychotherapies for PTSD (PE and CPT), trauma-related guilt, moral injury, secondary traumatic stress/compassion fatigue, Acceptance and Commitment Therapy, third wave behaviorism, training/supervision

Fun Facts: I grew up in the south, but Utah has my heart. In addition to other humans, I believe in camping, hiking, coffee, mountains, and wool socks. My Patronus is a hedgehog.

Email: Cicely.Taravella2@va.gov

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**Alethea Varra, PhD**

Rotation Supervised: National Telementalhealth Hub

Graduate Training Program: PhD, Clinical Psychology – University of Nevada, Reno
Edward M. Varra, PhD

Rotation Supervised Core in Outpatient Psychotherapy – General Mental Health (BHIP)
Graduate Training Program PhD, Clinical Psychology – Saint Louis University
Internship Albany Psychology Internship Consortium
Postdoctoral Fellowship Traumatic Stress Institute/ Center for Adult and Adolescent Psychotherapy
Areas of Interest & Expertise PTSD, Mindfulness-based psychotherapy, clinical supervision and professional development.
Fun Facts Being relatively new to Utah, I am enjoying exploring the area. My time has been spent cooking, hiking, running, and attempting to learn to ski.
Email edward.varra@va.gov

Joseph Wanzek, PhD

Rotation Supervised Elective in Telemental Health (in development)
Graduate Training Program Utah State University Combined Psychology (PhD)
Internship Minnesota State University Clinical Psychology (MA)
Postdoctoral Fellowship  VA Salt Lake City Health Care System
Areas of Interest & Expertise  Telemental Health, Acceptance & Commitment Therapy (ACT), Health Psychology, Chronic Pain, PTSD, and Bariatrics.
Fun Facts  Bungy jumped off the Bloukrans Bridge in South Africa. Played soccer in Italy. Often get mistaken for Ryan Reynolds. Eat a mean tapatio Dorito. Lead Tele-Awesome Team wall-squats. But, maybe most impressively, have not yet been fired as T-ball coach by my 4 yr. old.
Email  joseph.wanzek@va.gov

Richard A. Weaver, PhD
Rotation Supervised  Elective in Inpatient Psychiatry Unit
Graduate Training Program  PhD, Clinical Psychology – Brigham Young University
Internship  Timpanogos Community Mental Health Center
Areas of Interest & Expertise  Inpatient psychiatry; working with a broad-spectrum of acute and chronically mentally ill patients; computer applications; psycho-educational approaches.
Fun Facts  Dr. Weaver has been practicing psychology since 1971.
Email  richard.weaver@va.gov

Harrison Weinstein, PhD
Rotation Supervised  MST/CPT, Intensive PTSD
Graduate Training Program  PhD, Clinical Psychology – Palo Alto University
Internship  Southern Arizona VA Health Care System
Postdoctoral Fellowship  VA Salt Lake City Health Care System, PTSD & Polytrauma
Areas of Interest & Expertise  PTSD, TBI and Polytrauma, evidenced based therapies for PTSD, tele-mental health, response bias and effort.
Fun Facts  Outdoor enthusiast – I spend all of my free time skiing (Utah best in world), canyoneering (Utah best in world), and scuba diving (Utah not best in world, but happy just blowing bubbles). I love to travel, and am perpetually hoarding leave for next adventure – I currently have my sights set on Chuuk Lagoon.
Sara Weisenbach, PhD, ABPP-CN

Rotation Supervised  Core in Psychological Assessment - Geriatric Neuropsychology
Graduate Training Program  PhD, Counseling Psychology- Colorado State University
Internship  Dayton VA Medical Center
Postdoctoral Fellowships  University of Michigan (Neuropsychology), Geriatrics Research, Education, and Clinical Center, VA Ann Arbor Healthcare System (Advanced Geriatrics)
Areas of Interest & Expertise  geriatric mood disorders, dementia, neuroimaging, neuropsychology
Fun Facts  I have many varied interests, including skiing, yoga, traveling, photography, and hanging out with my two dogs. I recently bought a motorcycle, and look forward to some interesting rides through the canyons (always wearing a helmet, of course ;-).

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Brandon A. Yabko, PhD

Rotation Supervised  Elective - Integrative Health/Holistic Medicine; Core - Outpatient Psychotherapy (Mindfulness, Pain, ACT)
Graduate Training Program  PhD, Counseling– Arizona State University
Internship  Southern Arizona VA Health Care System
Postdoctoral Fellowship  VA Salt Lake City Health Care System
Areas of Interest & Expertise  PTSD, Affective Disorders, Anxiety Disorders, Chronic Pain, Third-Wave interventions, EMDR, Yoga therapy, Posttraumatic Growth. I am a Rogerian/interpersonal therapist who utilizes the wonderful opportunities for intervention within the context of the therapeutic relationship. However, my theoretical orientation drives the process of therapy while utilizing Evidenced Based Therapies (EBTs), such as PE, CPT, EMDR, ACT, and mindfulness.
Fun Facts  I am very passionate and enthusiastic about my work with Veterans and at the same time I work hard in maintaining a strong work-life balance that helps me be present in all areas of my life. I enjoy snowboarding, mountain biking, CrossFit, hiking...pretty much anything outdoors...hanging out with my wife and our two
wonderful dogs, brewing beer, making/eating sushi, and maintaining a personal yoga/mindfulness practice.

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