Psychology Predoctoral Internship Training Program
John D. Dingell VA Medical Center
Psychology Section (11MH-PS)
4646 John R St.
Detroit, Michigan 48201
(313) 576-1000, extension 65908

http://www.detroit.va.gov/
http://www.detroit.va.gov/students/Psychology_Interns.asp

Accreditation Status
The predoctoral internship at the John D. Dingell VA Medical Center is accredited by the Commission on Accreditation of the American Psychological Association. Our most recent site visit was conducted in the summer of 2016, and the program was awarded accreditation through 2023.

Any questions on accreditation status of VA internships or postdoctoral fellowships may be addressed to the Commission on Accreditation (CoA):

Office of Program Consultation and Accreditation
American Psychological Association
750 1st Street, NE
Washington, D.C. 20002
Phone: 202-336-5979
Email: apaaccred@apa.org
http://www.apa.org/ed/accreditation

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Internship Admissions, Support, and Initial Placement Data

Selection Process

Internship Program Admissions

Date Program Tables were updated: September 16, 2019

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

The internship program at the John D. Dingell VA Medical Center is open to all qualified applicants regardless of race, gender, age, religion, or national origin. The training program is concerned with the multi-dimensional richness of all the identities that a person (client, intern, staff member) brings to the setting, including ethnicity, sexual preference, race, cultural attitudes, and individual personality within those factors. The aspirations of the training program staff are toward cultural competence without overlooking individuality. The Psychology Section staff and students are a diverse group of people. This cultural diversity is a synergistic source of strength, creativity, and liveliness. Students from diverse cultural backgrounds are strongly encouraged to apply.

Applications are evaluated by almost all of the Staff Psycholgists. Psychology Postdoctoral Residents may also rate applications and conduct interviews. Each set of application documents are rated by the reviewers in the following seven areas:

- **Academic Background:** Students who have achieved a relatively high grade point average are given greater consideration. The quality of the graduate program in terms of the number of required courses and breadth of course selection also influences ratings.

- **Academic Progress:** Preference is given to applicants who have made significant progress toward completing their doctoral dissertation. Applicants must have successfully proposed their dissertation by the application deadline, or a date near the deadline must be set (see above).

- **Psychological Assessment Experience:** There is no set minimum number of assessment hours or reports. Committee members give greater weight to applications containing documentation of adequate experience in administering, scoring, and interpreting a range of assessment instruments.

- **Psychotherapy Experience:** There is no set minimum number of intervention hours. Students who describe a wider range of psychotherapeutic interventions and a larger number of hours of supervised psychotherapy experience are given preference.

- **Letters of Recommendation:** The quality of endorsements submitted by faculty and supervisors influences ratings in this area.
- **Internship and Career Goals:** How well the applicant articulates his or her internship goals is also considered. Committee members look for some indication that the applicant has at least addressed career aspirations even if the student has not defined a specific future professional role.

- **Match of Interests to Internship:** Students whose interests and goals match the type of training the Internship offers receive a higher rating.

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

<table>
<thead>
<tr>
<th>Total Direct Contact Intervention Hours</th>
<th>No</th>
<th>Amount: n/a</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Direct Contact Assessment Hours</td>
<td>No</td>
<td>Amount: n/a</td>
</tr>
</tbody>
</table>

Our program has no minimum number of hours required of applicants. As a point of reference, the 2019-2020 internship class reported the following average hours on their applications:

Average Direct Contact Intervention Hours: 1017 (range: 560-1952 hours)
Average Direct Contact Assessment Hours: 341 (range: 125-789 hours)

**Describe any other required minimum criteria used to screen applicants:**

Applicants must meet the following prerequisites to be considered for our program:

1. Applicants must be doctoral students in good standing in an American Psychological Association (APA) or Canadian Psychological Association (CPA) accredited Clinical or Counseling Psychology program.

2. Applicants should be in at least the third or fourth year of their university program, have completed practicum training, and have the approval of their university director of training.

3. Applicants must be United States citizens. Verification of citizenship is required following selection. All interns must complete a Certification of Citizenship in the United States prior to beginning VA training.

4. The Federal Government requires that male applicants to VA positions who were born after 12/31/59 must sign a Pre-appointment Certification Statement for Selective Service Registration before they are employed. (Males for these purposes are those individuals born male on their birth certificate regardless of current gender.) For additional information about the Selective Service System, and to register or to check your registration status visit [https://www.sss.gov/](https://www.sss.gov/). Exceptions can be granted only by the US Office of Personnel Management; exceptions are very rarely granted. It is not necessary to submit this form with the application, but if you are selected for this internship and fit the above criteria, you will have to sign it.

5. Interns are subject to fingerprinting and background checks. Match result and selection decisions are contingent on passing these screens. Please see [http://www.archives.gov/federal-register/codification/executive-order/10450.html](http://www.archives.gov/federal-register/codification/executive-order/10450.html), for more information about background check criteria.
6. VA conducts drug screening exams on randomly selected personnel as well as new employees. Interns are not required to be tested prior to beginning work, but once on staff they are subject to random selection for testing as are other employees.

7. To comply with federal and VA rules and provide interns with liability protection, a current and valid Affiliation Agreement between VA and the sponsoring doctoral program must be on file before the intern can be appointed. Most APA-approved doctoral programs already have an agreement on file. More information is available at http://www.va.gov/oaa/agreements.asp (see section on psychology internships).

8. TQCVL. VHA Office of Academic Affiliations requires completion of a Trainee Qualifications and Credentials Verification Letter (TQCVL). An Educational Official at the incoming intern’s graduate program must complete and sign this letter. The VA appointment cannot happen until the TQCVL is submitted and signed by senior leadership from the VA facility. For more information about this document, please visit https://www.va.gov/OAA/TQCVL.asp

   a. Health Requirements. Among other things, the TQCVL confirms that the trainee is fit to perform the essential functions (physical and mental) of the training program and immunized following current Center for Disease Control (CDC) guidelines and VHA policy. This protects the trainee, other employees and patients while working in a healthcare facility. Required are annual tuberculosis screening, Hepatitis B vaccine as well as annual influenza vaccine. Declinations are EXTREMELY rare. If you decline the flu vaccine you may be required to wear a mask while in patient care areas of the VA.

   b. Primary source verification of all prior education and training is certified via the TQCVL. Training and Program Directors will be contacting the appropriate institutions to ensure that trainees have the appropriate qualifications and credentials as required by the admission criteria of the training program in which the trainee is enrolled.

Application Process

The internship is 2080 hours, full-time for one year. We anticipate funding for six Psychology Intern positions for the next training year.

The Psychology Training Program is a member of APPIC and follows all of its guidelines in selecting applicants; therefore, this internship site agrees to abide by the APPIC Policy that no person at this training facility will solicit, accept or use any ranking-related information from any intern applicant prior to the Rank Order List submission deadline.

The Program will be utilizing the APPIC sponsored Internship Matching Program.
Applicants may obtain and submit the Applicant Agreement form on the Matching Program website: https://natmatch.com/psychint/

Submit the following materials no later than November 3, 2019:
A completed APPIC Application for Psychology Internship. This online AAPI is produced by the Association of Psychology Postdoctoral and Internship Centers (APPIC) and is available from the APPIC website: http://www.appic.org/

<table>
<thead>
<tr>
<th>Match Number</th>
<th>Track</th>
<th>Positions Available</th>
</tr>
</thead>
<tbody>
<tr>
<td>136511</td>
<td>General Internship</td>
<td>2</td>
</tr>
<tr>
<td>136512</td>
<td>Neuropsychology</td>
<td>2</td>
</tr>
<tr>
<td>136513</td>
<td>Health Psychology</td>
<td>1</td>
</tr>
<tr>
<td>136514</td>
<td>Interprofessional Mental Health</td>
<td>1</td>
</tr>
</tbody>
</table>

Electronic correspondence may be submitted to the Training Director at: Eileen.Bent@va.gov

Other correspondence may be sent to:
Eileen Bent, Ph.D.
Director of Psychology Training
John D. Dingell VA Medical Center (11MH-PS)
4646 John R St.
Detroit, Michigan 48201

Interviews
The John D. Dingell VA Medical Center Psychology Internship Program will conduct interviews as part of the final selection process. Applicants selected for interviews will be notified by December 6, 2019. Tentative dates for interviews are December 18, 2019, and January 6 and January 17, 2020. In person interviews are preferred, but telephone interviews will be available on those dates if the invited applicant is unable to visit the facility.

Contacting the program
Applicants with specific questions may contact the Internship Training Director or rotation supervisors. The best method of contact is through email, though phone contact is also acceptable. The Psychology Training Director's telephone number is (313) 576-1000, extension 65908. Staff Psychologists’ email addresses may be found at the end of their bios, below. Please note that contact with staff or interns has the potential to impact how an applicant is rated.
## Support for Interns

### Financial and Other Benefit Support for Upcoming Training Year*

*Date Table Updated: September 16, 2019*

<table>
<thead>
<tr>
<th>Benefit</th>
<th>Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>Annual Stipend/Salary for Full-time Interns</td>
<td>$28,634</td>
</tr>
<tr>
<td>Annual Stipend/Salary for Half-time Interns</td>
<td>n/a</td>
</tr>
<tr>
<td>Program provides access to medical insurance for intern?</td>
<td>Yes</td>
</tr>
</tbody>
</table>

**If access to medical insurance is provided:**

<table>
<thead>
<tr>
<th>Benefit</th>
<th>Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>Trainee contribution to cost required?</td>
<td>Yes</td>
</tr>
<tr>
<td>Coverage of family member(s) available?</td>
<td>Yes</td>
</tr>
<tr>
<td>Coverage of legally married partner available?</td>
<td>Yes</td>
</tr>
<tr>
<td>Coverage of domestic partner available?</td>
<td>Yes</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Hours of Annual Paid Personal Time Off (PTO and/or Vacation)</th>
<th>13 days (4 hours accrued every 2 weeks)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hours of Annual Paid Sick Leave</td>
<td>13 days (4 hours accrued every 2 weeks)</td>
</tr>
</tbody>
</table>

| In the event of medical conditions and/or family needs that require extended leave, does the program allow reasonable unpaid leave to interns/residents in excess of personal time off and sick leave? | Yes | No* |

<table>
<thead>
<tr>
<th>Other Benefits (please describe):</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>• Up to 40 hours of Authorized Absence for educational activities</td>
<td></td>
</tr>
<tr>
<td>• Life Insurance</td>
<td></td>
</tr>
</tbody>
</table>

*Trainees are not eligible for FMLA, but in some circumstances, in consultation with the Office of Academic Affiliations and APA, a reasonable extended leave may be approved.

*Note. Programs are not required by the Commission on Accreditation to provide all benefits listed in this table.
## Initial Post-Internship Positions

(Aggregated Tally for the Preceding 3 Cohorts)

Date Table Updated: September 16, 2019

<table>
<thead>
<tr>
<th>Position</th>
<th>PD</th>
<th>EP</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total # of interns who were in the 3 cohorts</td>
<td>18</td>
<td></td>
</tr>
<tr>
<td>Total # of interns who did not seek employment because they returned to their doctoral program/are completing doctoral degree</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>Community mental health center</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>Federally qualified health center</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Independent primary care facility/clinic</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>University counseling center</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Veterans Affairs medical center</td>
<td>9</td>
<td>0</td>
</tr>
<tr>
<td>Military health center</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Academic health center</td>
<td>3</td>
<td>0</td>
</tr>
<tr>
<td>Other medical center or hospital</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>Psychiatric hospital</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Academic university/department</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>Community college or other teaching setting</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Independent research institution</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Correctional facility</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>School district/system</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Independent practice setting</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>Not currently employed</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Changed to another field</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Other</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Unknown</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

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

The Psychology Section is composed of 26 full-time and two part-time doctoral level psychologists. The Section is led by a Psychologist, who looks out for the unique needs of the profession, including the importance of training.

The Medical Center is conducive to psychology training from multiple perspectives. As a teaching hospital affiliated with Wayne State University Medical School, the Medical Center trains approximately 1200 health care students per year. Thus, upper level management values training. The Mental Health Service provides training across several disciplines in addition to Psychology, including medical students, psychiatry residents and fellows, and social work interns.

Psychologists serve on many committees in the Medical Center, often in leadership roles. Medical Center Committees on which Psychologists play an active role include:

- Preventive Ethics
- Ethics Consultation Subcommittee
- Professional Standards Board
- Mental Health Consumer Council
- Employee Assistance Program
- Patient Care Review Board
- Alternative Dispute Resolution
- Critical Incident Stress Management Team
- Suicide Prevention Review Board
- Mental Health Executive Committee
- Evidence Based Psychotherapy Coordinator
- Health Record Review Committee
- VA representative to the B-3 (Behavioral) Subcommittee of the Human Investigation Committee (IRB) at Wayne State

Some psychologists also serve as PI's for multi-site research studies and several Staff Psychologists hold appointments at Wayne State University. A Postdoctoral Residency in Clinical Psychology began in 2008. The postdoctoral residency is APA accredited, and five positions are expected in the 2020-21 training year. The residency has emphasis areas in addictions, interprofessional general mental health care, primary care-mental health integration/health promotion and disease prevention, and PTSD. Practicum students are sometimes trained here as well, but will not be present in the next training year.

Training Model and Program Philosophy

The training approach for the Psychology Predoctoral Training Program is based on a practitioner-scholar model. The Psychology Training Program is designed to contribute to the development of a clinical attitude, the desire to understand people in order to reduce human suffering. An emphasis is placed, therefore, on the development of reflective skills and the evaluation of research for informed practice. Reflection includes consideration of individual, cultural, and societal factors pertaining to both the provider and recipient of services. In addition to supervised clinical experiences, this objective is realized through a thorough didactic
program utilizing the Psychology Staff as well as consultants from nearby universities and from the professional community.

**Program Goals, Objectives, & Competencies**

The goal of the program is to present a series of learning experiences for interns that fosters their development as highly ethical professional psychologists who can function effectively in many different clinical environments with a primary emphasis on multidisciplinary urban medical centers. A secondary goal of the Program is to contribute to the Mission of the Medical Center in providing high quality psychological services to patients and their families.

The goal of generalist training is achieved through exposing students to 1) a variety of supervisors who represent a diverse set of backgrounds and theoretical orientations, 2) a large number of patients who are characterized by a diversity of mental disorders, ethnic backgrounds, levels of education, and socioeconomic status, and 3) different types of activity such as case presentations, multidisciplinary planning conferences, administrative meetings, and weekly didactics.

Students will also be aware of issues of human diversity in the practice of psychology and will possess essential knowledge of various models of supervision. The successful completion of optional training in a variety of areas (such as Neuropsychology, Health Psychology, PTSD, Geriatric Psychology, or Substance Abuse Treatment) will allow an intern to competently function at an entry level in one of those specialties.

We expect that trainees completing the internship will achieve a level of practice that allows them to enter into a period of supervision in preparation for state licensing. We expect their skills to be adequate to obtain competitive postdoctoral fellowships or employment as a Psychologist in a Department of Veterans Affairs facility; however, the training is aimed at developing skills that may also be transferable to other clinical settings. Over the course of the internship year, trainees are expected to attain competency in the following areas:

1. Intervention
2. Assessment
3. Emerging knowledge of/skills in supervision
4. Consultation and interprofessional/interdisciplinary skills
5. Individual differences and cultural diversity
6. Research and Integration of science and practice
7. Ethical and legal standards
8. Professional values, attitudes, and behaviors
9. Communication and interpersonal skills

**Program Structure**

The Psychology Section is committed to providing a high quality training experience within a 40 hour week. Interns are currently afforded an opportunity to acquire professional clinical skills in both inpatient and outpatient settings. Initially working under close supervision of experienced and skilled staff members, students are expected to work with increasing independence as they develop their individual competencies.
We offer separate match codes for the applicants interested in Interprofessional General Mental Health Care (one intern), Neuropsychology (two interns), Health Psychology (one intern), and the traditional, or General, Internship (two interns). Applicants are encouraged to seek to match in one or more training areas where they are qualified and wish to focus their internship training. Interns who match to the general internship may complete rotations in any of the rotations described below, with the exception of the Neuropsychology and Rehabilitation Neuropsychology rotations. Please note, however, that in any given training year, certain rotations may not be available. To the extent possible, applicants will be informed about any anticipated changes to rotations.

Efforts are made to tailor the internship experience to the individual intern’s needs and to allow specialized training experiences from the program’s available resources. Early in the student’s orientation period, an individualized statement of training goals is drafted which identifies work assignments, supervisors, and length of rotations. Each intern’s preferences for specific learning experiences are met to the extent allowed by available resources. The Psychology Training Program has in the past been quite successful at developing Learning Plans that meet most interns’ initial proposals for training goals. To ensure learning objectives are being met, interns’ Learning Plans are reviewed with the training director midway through internship. Interns may also request training plan changes at various points during the year.

The Psychology Section considers the internship to be primarily a learning experience; thus, training will be the main objective. Service to clients, while an important function, will not take precedence over fulfilling the provisions of an intern’s Learning Plan.

Five of the six interns undertake two major rotations at a given time. Throughout the year, approximately sixteen hours per week are spent in the Mental Health Clinic (MHC) and sixteen hours in another training rotation. After six months, interns remain in the MHC but also choose a new training rotation assignment under the supervision of another psychologist. Thus, each intern has the opportunity to work with at least three different primary supervisors during the course of a year.

One intern matched to the Interprofessional General Mental Health position will spend the entire year working in interprofessional teams in the MHC. This intern may elect to do most of their clinical training within the MHC, or may elect a rotation in another clinic that operates in an interprofessional team (such as the inpatient psychiatry unit, the Transitions partial hospital program, the Substance Use Disorders Clinic, and the Psychosocial Rehabilitation and Recovery Center).

Interns receive a minumum of four hours of supervision each week. All interns participate in a weekly group supervision session. In addition, at least one hour of supervision is provided by the psychologist supervising the MHC rotation, and at least one hour of individual supervision is provided by the psychologist supervising a non-MHC training rotation. In some rotations, supervision is also provided by Psychology Postdoctoral Residents (under the supervision of a staff psychologist) and social workers with expertise in the respective area. Digital and voice recordings of sessions often supplement the case report method of supervision.

Primary supervisors are fully licensed, doctoral level staff clinical psychologists. An important learning experience during the course of the training year is a series of case presentations in which each intern presents a discussion of an on-going treatment case or of a psychological assessment. Part of each of these case discussions is devoted to the consideration of issues of diversity as they affect the delivery of psychological services. The Psychology Section staff is
present during the case presentations. Students also make case presentations in multi-disciplinary treatment planning conferences that occur in the MHC and in most of the training program rotation assignments.

Our supervisors are early, mid-career, and senior psychologists, and have acquired a great deal of experience guiding the development of professional psychologists. Supervision of interns is considered an enjoyable and fulfilling experience by our staff.

When successfully completed, the training program will allow interns to competently perform psychological assessments; conduct psychotherapeutic interventions utilizing individual as well as group psychotherapy procedures; and provide consultation to practitioners from other disciplines as well as to clinical programs.

Interns are formally evaluated every three months, and formally evaluate their supervisors and the Training Program every three months. Intern alumni are also asked to evaluate the Training Program in the years following completion of internship. The Training Director is always open to receiving input that may improve an intern’s training experience.

In respect to educational opportunities, didactics average two hours per week and are drawn from areas of expertise within the Psychology Section staff and outside lecturers. Once per month, the Psychology Section holds a formal educational meeting during which staff and students present topics of professional interest. Also monthly, the staff, postdoctoral fellows and interns participate in a Psychology Section Cultural Diversity Journal Club. Interns may also elect to participate in a monthly interdisciplinary Ethics Consultation meeting. Interns in the Neuropsychology track observe brain cuttings at nearby Wayne State University each Wednesday. At times, the Neuropsychology staff may also provide additional case conferences and didactic seminars.

Opportunities exist in the nearby academic and professional community to attend lectures and colloquia. For example, Grand Rounds for Wayne State University’s Department of Psychiatry and Behavioral Neurosciences are held at the John D. Dingell VA Medical Center each week during the academic year.

Trainees may apply for Authorized Absence (AA) to attend educational events, professional conferences or conventions. Each intern may use up to 4 days of AA for VA interviews (postdoc or job), up to one day for dissertation defense, and up to five days total (hours would strictly be for approved educational events off station). For Authorized Absence to be granted, trainees must be in good standing with the Training Program and making good progress in meeting their respective requirements.
Training Rotations

**Mental Health Clinic**
All interns complete a year long, 16 hour per week training experience in the outpatient Mental Health Clinic (MHC). There they provide an average of five hours of individual psychotherapy per week. Short- and long-term psychotherapy cases are available in the Clinic. Interns also provide an average of one hour of group psychotherapy per week. Group therapies are held in the MHC and in other training rotations. An important aspect of the intern's Mental Health Clinic experience is performing intake interviews for new patients, and collaborating with MHC Home Teams. A wide variety of problems are presented including legal commitment, crisis intervention and brief assessments of feasibility for psychotherapy. Training focuses on developing those skills required for making sound clinical decisions, and working closely with an interprofessional team.

In addition to the yearlong Mental Health Clinic training experience, interns will also complete six month rotations (approximately 16 hrs/week) in two of the following areas:

**Neuropsychology**
Two interns each year will be matched for their interests in neuropsychology. In addition to spending half time in the MHC throughout the year, they will complete the following rotations:

**Neuropsychology**
An opportunity is offered to learn how to assess and evaluate the contribution of disturbed central nervous system functioning as well as mental health symptoms to behavior. The experiences on this rotation correspond to the guidelines for predoctoral neuropsychology training developed by Division 40 (Clinical Neuropsychology) of the American Psychological Association as well as the Houston Conference. Students will learn standardized neuropsychological assessment procedures, interpretation of test data and application of test results to determine appropriate treatment plans.

**Rehabilitation and Neuropsychology**
This rotation is directed at assessment of brain behavior relationships and subsequent rehabilitation therapy with veterans who have sustained brain injury. The experiences on this rotation correspond to the guidelines for predoctoral neuropsychology training developed by Division 40 (Clinical Neuropsychology) of the American Psychological Association. Students will be exposed to brief neuropsychological assessment of returning OEF/ OIF veterans directed primarily at mild traumatic brain injury and differential diagnosis of psychopathology. Administration of tests, interpretation of tests and application of assessment results to rehabilitation are goals of this rotation. Psychotherapy directed at rehabilitation and adaptation for those who have suffered a brain injury will be an important aspect of the application of neuropsychological assessment. Research opportunities will also be present through archival data developed in this service.

**Additional Neuropsychology Didactic Experiences**
Both interns in the Neuropsychology track participate in neuropsychology-specific learning opportunities throughout the year. In addition to attending the general program weekly didactics, the interns in the Neuropsychology track attend didactics at the nearby Rehabilitation Institute of Michigan. This didactic series focuses more specifically on topics relevant to...
neuropsychology and rehabilitation psychology. In addition, our Neuropsychology staff facilitates regular case conferences. Interns in the Neuropsychology track also observe weekly brain cuttings at nearby Wayne State University to enhance their knowledge of neuroanatomy. Between the clinical rotations, additional didactics and case conferences, the Neuropsychology ad Rehabilitation Neuropsychology rotations are approximately 20 hours/week.

**Health Psychology**
One intern will be matched for the Health Psychology emphasis. In addition to spending half time in the MHC, the intern will spend half time in the Health Psychology/Primary Care Mental Health Integration rotation, all year long:

**Health Psychology/Primary Care rotation**
This intern position emphasizes training in mental health, health psychology, and prevention-oriented services. The intern will spend one day per week in programs and clinics that may include weight management, tobacco use cessation, liver/Hepatitis C, transplant, sleep and bariatrics and one day per week in the Primary Care Mental Health Integration program. Core educational objectives include: 1) Provision of health psychology and integrated mental health assessment/intervention through participation in individual and group treatment; 2) Participation in the training/coaching of primary care staff and other hospital clinicians in evidence-based methodologies to effectively communicate with, motivate, coach, and support patient-centered care and health promotion and disease prevention; 3) Provision of evidence based care for behavioral health concerns to primary care patients in a collaborative framework within primary care teams. In addition to this rotation, the intern in this position will also spend approximately sixteen hours per week, all year long, in the MHC.

**Interprofessional General Mental Health Care**
Interprofessional General Mental Health Care (one intern, specifically matched to this position). This intern position will be focused on interprofessional training and mental health care in the outpatient Mental Health Clinic (MHC). The MHC treats a diverse population of veterans within a large urban setting. The intern will carry a caseload of veterans for individual therapy in the MHC, and will be a member of at least one interdisciplinary mental health treatment team consisting of at least one psychiatrist, psychologist, social work case manager, and representatives of other programs such as the homeless veterans program and chemical dependency. While the IGMH Intern will be based primarily within the MHC, there may be opportunities to spend a portion of the training year in other clinics (including the Substance Use Disorders clinic, psychiatric inpatient unit, Transitions program, and PRRC) providing clinical care and participating on another interdisciplinary treatment team. Within the context of interprofessional mental health teams and the MHC as a whole, the intern will learn ways to improve communication between mental health professionals and departments, work with multiple practical quality improvement projects, and receive and help develop didactics on management, leadership, and communication. While some experiences and projects will be provided by the program, the intern will also have opportunities to develop his or her own projects and learning experiences.

**General Internship**
Two interns each year will be matched for our traditional internship track. In addition to spending half time in the MHC throughout the year, they will complete two of the following rotations. Of note, interns matched for the general internship will not have access to the Neuropsychology or Rehabilitation Neuropsychology rotations.
**Primary Care-Mental Health Integration (PC-MHI)**

PC-MHI is designed to help manage depression, anxiety, alcohol, and other behavioral health needs of primary care patients. Patients are first evaluated in the PC-MHI clinic using a brief, structured interview. The PC-MHI clinic also offers the option of structured follow-up assessments and serves as a platform to specific disease management modules for depression, anxiety and alcohol based on cognitive-behavioral therapy and motivational interviewing. PC-MHI addresses the importance of evidenced-based practice and outcome research by quantifying the degree of impairment and co-morbid psychiatric disorders, by tracking patient progress throughout disease management, and by collecting outcome data to be used for program evaluation purposes. Interns will have the opportunity to perform brief individual and group psychotherapy, conduct initial “core assessments” and more in-depth psychological testing and evaluation when appropriate, actively participate in treatment planning conferences, and potentially develop and run a group aimed at health-related behavior change. In some training years, it is possible that this rotation may only be available to the intern in the health psychology track.

**Psychiatric Inpatient Unit**

On the Psychiatric Inpatient Unit, students will be able to perform brief individual and group psychotherapy and participate in planning conferences. The focus of the Unit is on high-intensity, short-term inpatient treatment for conditions such as acute psychosis, depression with suicidal ideation or mania. The ward also deals with issues of acute medical detoxification, legal commitment, and acute geropsychiatry. Students will be expected to contribute to the interdisciplinary treatment team by providing clinical observations and offering opinions regarding assessment and therapeutic intervention from a psychological perspective.

**Geriatric Psychology**

The geriatric psychology rotation offers training in the provision of psychological services in geriatrics as part of a multidisciplinary team. Interns will provide psychological services in the Community Living Centers which include the hospice inpatient unit, the palliative care service, rehabilitation unit, short-stay units and the long-term care units. Services include rapid evaluation, psychotherapy, ongoing clinical management and staff education. Students will attend interdisciplinary team meetings and will have the opportunity to work with a wide variety of health care professionals. Of note, at the time this brochure was published, the psychologist position who supervises this rotation was vacant. Although it is anticipated that the position will be filled prior to the beginning of the 2020-21 training year, this rotation cannot be guaranteed.

**HUD/VASH Psychotherapy Outpatient Clinic**

Trainees who choose this rotation have the opportunity to conduct individual and group psychotherapy with Veterans who are considered vulnerable based on the extent to which identified issues related to a history of homelessness and lack of mental health services have negatively affected their functioning. The HUD/VASH Psychotherapy Outpatient Clinic is structured to meet the needs of this population who first require supportive housing services, and then are provided with mental health services to address co-morbid and/or tri-morbid issues that could include severe and persistent mental illness, chronic medical conditions, and substance use/dependence. Trainees will participate in multidisciplinary planning meetings, as well as manage a clinical case load including individual and group therapy (with supervision) with Veterans that present with obvious impairments in functioning that require a high level of interventions. This rotation would be appropriate for a trainee who is interested in working with a complex population whose conditions have been poorly managed or not managed at all; have little to no insight in regard to the severity of their situation and/or the underlying dynamics of
their vulnerabilities and mental health; and have poorly managed their physical health and/or substance abuse issues.

**PTSD Clinic**
The PTSD program provides time-limited, evidence based therapy services for veterans who are struggling with Posttraumatic Stress Disorder from their military experiences. Interns have the opportunity to participate in a range of clinical opportunities working closely with other team members. Opportunities include training in formal evaluation of PTSD, in particular use of the Clinician Administered PTSD Scale for DSM-5 (CAPS-5) as well as provision of both individual and group psychotherapy. Therapy provided through the program is expected to include use of some evidence based treatments for PTSD. Interns working within the PTSD Clinical Team would also participate in weekly clinical, educational and training meetings for consultation and support.

**Psychosocial Rehabilitation and Recovery Center (PRRC)**
The Psychosocial Rehabilitation and Recovery Center (PRRC) offers recovery-oriented, outpatient mental health services focused on helping Veterans with serious mental illness live personally fulfilling lives. The PRRC team partners with Veterans and assists them in reaching their self-chosen goals by providing support, education, and treatment opportunities meant to foster empowerment, instill hope, validate strengths, teach life skills, and facilitate community integration. Students will have the opportunity conduct initial assessments and assist with treatment planning as part of an interdisciplinary team, along with providing individual and group therapy.

**Substance Use Disorders (SUD)**
The SUD program offers a range of services that vary in intensity and structure depending on the needs of the veteran. Trainees may be involved in the Intensive Outpatient Program (IOP) and/or the Outpatient Substance Use Disorders program. The IOP is designed as an empirically-based addiction treatment program. The program operates in a multidisciplinary format with groups three days a week and individual treatment once a week. The staff includes two psychologists, a psychiatrist, addiction therapists, a part-time occupational therapist, social workers, a part-time chaplain, and a clerk. Interns will provide individual treatment with patients in addition to participating in the IOP groups. Interns may also become familiar with the use of psychiatric medications used for the reduction of craving, as an adjunct to the behavioral interventions they will be providing. Interns may also receive training in the Outpatient SUD program, which offers a less intensive range of primarily group programming for veterans with less severe substance use disorders. Trainees gain experience providing individual and group treatment to patients who present with diverse substance-based addictions, ethnic backgrounds, levels of education, and socioeconomic status.

**Transitions Program (formerly known as the Partial Hospital Program)**
Interns in this rotation have the opportunity to conduct individual and group psychotherapy with Veterans who would more typically be considered for inpatient psychiatric hospitalization. The Transitions Program is structured to meet the needs of a group of patients who require services that are intermediate to full inpatient and more intensive than the traditional outpatient mental health treatment. A variety of psychotherapy groups per week are available to choose from for group experience. Interns also perform individual assessments and participate in multidisciplinary planning meetings. Patients attend this four-week program Monday through Friday from approximately 9:00 a.m. until 3:00 p.m.
**Other requirements:**

**Assessment:** Over the course of the year, interns (with the exception of interns in the neuropsychology track) will complete psychodiagnostic assessments as part of their Mental Health Clinic Rotation. Assessment referrals often come from other mental health providers who are seeking diagnostic clarification and treatment planning. In the Mental Health Clinic, all interns also conduct mental health intake evaluations (i.e., diagnostic and psychosocial interviews) for six months. The primary purpose of these evaluations is to generate an initial diagnostic formulation and make treatment recommendations. Depending on clinical rotations, many interns also conduct formal assessment in other clinics.

**Program Evaluation:** Interns spend approximately three hours per week for a minimum of three months completing program evaluation under the supervision of a licensed psychologist. Interns are rated on their competency in program evaluation at the end of the three month period, which usually occurs in the third quarter of the training year.

**Research:** If their schedules permit, interns may elect up to four hours per week to devote to completing their dissertations, to conducting a research project of their design, or to participate in an on-going project coordinated by a Psychology Section staff member. All such activities must be conducted on-site, in the medical center.

**Case and Educational Presentations.** Interns present one educational and one psychotherapy or assessment case as part of the monthly Psychology Section Case Conference. Staff and interns who are present at the Conference anonymously evaluate the intern's presentation for its strengths and weaknesses. The Training Director then provides feedback on the evaluations to the intern who presented the case.

**Requirements for Completion**

Competency ratings are based on the student's daily clinical work and professional behavior. Interns’ competency at the end of training should be at a level of practice that prepares them to enter into a period of supervision required for state licensure. Specifically, interns must attain competency in the areas of intervention, assessment, emerging knowledge of/skills in supervision, consultation and interprofessional/interdisciplinary skills, individual differences and cultural diversity, research and Integration of science and practice, ethical and legal standards, professional values, attitudes, and behaviors, and communication and interpersonal skills.

**Clinical Performance.** Interns are formally evaluated by their supervisor in each rotation at the end of every quarter. The evaluation used contains a description of the student's clinical and training activities for the period, a narrative covering strengths, weaknesses and any changes, as well as supervisor ratings of the intern's performance in relevant areas of professional functioning. A four-point rating scale is used to evaluate the student on each item:
1. Competency in this area is at a level **below expected** for interns at the beginning of training. Intern requires close supervision in completing this activity, up to and potentially including direct observation. Supervision includes giving intern explicit instruction and monitoring the intern’s application of competence.

2. Competency in this area is at the **beginner** level expected at the start of internship training, but not at the level of independent performance. Intern requires modest supervision. Supervision includes review of written and oral summaries of work product.

3. Intern demonstrates an **advanced beginner** level of competency, typical for interns midway through their training year. Intern can function with minimal or periodic supervision. Performance is acceptable, but further growth is desirable.

4. Intern demonstrates an **intermediate** level of competency, which is defined as the level expected at the conclusion of internship training. Intermediate competency is seen as competency at the level expected for an entry-level clinical psychologist (such as a postdoctoral fellow/those at the GS-12 level in the VA system), but not yet at the level expected of a fully licensed, independent practitioner. Supervision includes review of written and oral summaries of work product.

5. Intern demonstrates an **advanced** level of competency, notably beyond what is typically observed by interns at the conclusion of their training year. Competency in this area is at the level expected of a fully licensed, independent clinical psychologist. Intern requires minimal supervision, as intern could perform this activity independently.

U - Unsatisfactory. Intern is performing at a level that requires remediation.

NR = Not Rated—Not applicable or not sufficient evidence.

It is assumed that all interns’ performances will be rated at least at level “2” for the first quarter of the year. As the year progresses a student’s performance is expected to improve to level “4” by the end of the training year. Supervisors meet with each student at the end of each evaluation period to discuss competency ratings.

**Facility and Training Resources**

Currently, the six psychology interns share a bullpen office located in the MHC. It is expected that the Psychology Interns will have their own desks with a lockable file cabinet, and computer. Computers house the electronic medical record, high-speed internet, Microsoft Office, and a connection to many valuable resources typically found in medical libraries. An abundance of on-line, satellite, and classroom training relevant to psychology is offered, including Wayne State University’s Psychiatry Grand Rounds, which are held weekly in our Auditorium.

The Psychology Section staff and interns rely upon administrative assistants from the Mental Health Service. A Mental Health Service "Ad Pac" is available for assistance with computer-related needs.

Mental health professionals from the community and within the Medical Center present on their areas of expertise during weekly two hour didactics. Topics include VA evidence-based
psychotherapy protocols, motivational interviewing, clinical supervision, and multicultural issues in mental health treatment, and more.

Administrative Policies and Procedures

Annual, Sick, and Authorized Leave: Annual Leave is to be used for vacations and periods of personal and/or emergency situations. Trainees earn four hours of annual leave in each biweekly period; thus 13 days are earned in the 12-month fellowship. Sick Leave is to be used when a trainee is unable to work due to sickness, injury, or medical or dental appointments. Trainees accrue four hours of sick leave for each full bi-weekly pay period. Trainees may apply for up to five days of Authorized Absence to attend educational events and professional conferences or conventions.

Intern Dissatisfaction with Supervisor and/or Rotation and/or Due Process Procedure. All parties must attempt to resolve problems at an informal level of action first. Thus, for example, if an intern is dissatisfied with a particular supervisor or rotation, he or she is encouraged to discuss the issue with the supervisor initially, unless the intern believes that to do so would not be in the intern’s best interest. If this is the case, the intern is encouraged to seek advice from the Training Director. If the intern seeks advice, the Training Director will subsequently consult with both the intern and supervisor before offering any proposal of a solution to the problems addressed. If the Training Director believes that a change of rotation or a change of supervisor within a rotation is warranted, she will consult with the Psychology Training Committee before this action is proposed. The Training Director will provide written notice to the intern of any changes in rotations or supervisors within seven calendar days of the last meeting between the Training Director and the involved supervisors. If the intern is not satisfied with the proposed solution, the intern may present a grievance in writing under the Formal Grievance Procedure. A copy of the Formal Grievance procedure is included in the Trainee Orientation Manual, and is also available from the Training Director upon request.

Privacy Policy: We will collect no personal information about you when you visit our website.

Self-Disclosure: We do not require intern fellows to disclose personal information to their clinical supervisors except in cases where personal issues may be adversely affecting a fellow’s performance and such information is necessary to address these difficulties.

Drug Screening: VA conducts drug screening exams on randomly selected personnel as well as new employees. Interns are not required to be tested prior to beginning work, but once on staff they are subject to random selection for testing as are other employees.

Local Information
The metropolitan Detroit area is a cosmopolitan community that is home to an extremely diverse population with social, cultural, and academic activities reflective of that diversity. Many people are pleasantly surprised to learn that the area is home to a large professional community, many colleges and universities, varied entertainment venues, extensive cultural resources, and a great number of outstanding restaurants. The metropolitan area offers activities for people from a wide range of ethnic, religious and sexual orientations.
The Downtown Detroit business district has undergone a multi-billion dollar redevelopment. Two new state of the art stadiums, one for major league baseball's Tigers (Comerica Park) and the other for the National Football League's Lions (Ford Field), sit in the midst of a world-class entertainment district. The Detroit Symphony Orchestra performs regularly in the elegant Orchestra Hall not far from The Detroit Opera House.

The Detroit River is a major commercial shipping channel and provides a scenic background for many summer ethnic festivals, the International Freedom Festival (which annually draws over a million people to one of the largest fireworks displays in the world), and Belle Isle, a public park with over 20 miles of walkways, golf course, and a zoo.

Within a one block of the VA Medical Center is the world-renowned Detroit Institute of Arts (DIA), the sixth largest fine arts museum in the United States. Also within short walking distance from the VA Medical Center are the Museum of African American History and the Detroit Science Center, which houses an IMAX theater and Digital Planetarium Dome.

Detroit is one of the busiest international border crossing points in the United States due to its proximity and easy access to Canada via the Ambassador Bridge and Windsor Tunnel. Opportunities for skiing, camping, boating and other outdoor activities are within hours of the city in central Michigan and Ontario, Canada. The VA Medical Center is conveniently located near several major expressways allowing interns easy access to residential areas in the city and surrounding suburbs.

Psychology Staff

Michelle Buda Abela is the Chief of the Psychology Service and Deputy ACOS of Mental Health Services. She has served as the Director of the Outpatient Mental Health Clinic and Coordinator for the Psychosocial Rehabilitation and Recovery Center (PRRC). Dr. Abela previously worked as the PTSD/Substance Use Disorder specialist in the PTSD clinic. Dr. Abela earned her Ph.D. in clinical psychology from the University of Detroit Mercy in 2006, after completing her pre-doctoral internship at Wayne State University. She also obtained her Ph.D. in developmental psychology from Wayne State University in 2000. Her developmental research focused on pregnancy drinking as part of the former Fetal Alcohol Research Center at Wayne State University. Dr. Abela has worked in the Wayne County Juvenile Court and Jail Systems, along with victims of crime at Detroit Receiving Hospital. She also coordinated outpatient research for the Services for Treatment of Early Psychosis (STEP) program at Wayne State University. Her clinical interests are focused on chronic and severe mental illness. (Michelle.Aabela@va.gov)

Bradley N. Axelrod is a clinical neuropsychologist who obtained his Ph.D. in Clinical Psychology from Wayne State University in 1989 and completed internship in neuropsychology at Ann Arbor VAMC. Dr. Axelrod is currently an Adjunct Associate Professor in the Departments of Neurology and Psychology at Wayne State University, and a member of the Adjunct Faculty in the Departments of Psychology at the University of Detroit Mercy and Utah State University. He has served leadership roles in the Society of Clinical Neuropsychology, National Academy of Neuropsychology, and Association for Internship Training in Clinical Neuropsychology. Dr. Axelrod conducts research in the psychometric study of psychological
and neuropsychological assessment measures. He is the author of one book, 15 book chapters, 160 articles, and more than 200 research presentations. (Bradley.Axelrod@va.gov)

**Winnetha Benn-Burton** is the Recovery Supervisory Psychologist. In her role as the Local Recovery Coordinator, she oversees programs that will be re-located to the newly developed Recovery Center that is slated to open in late 2016. Dr. Benn-Burton has been in the VA system over 22 years and primarily worked in psychosocial rehabilitation as one of the coordinators for the Compensated Work Therapy Program, and Local Recovery Coordinator at the Ann Arbor VA. Also she worked as a generalist providing services on the inpatient psychiatric service and as the Primary Care Integration Psychologist. Dr. Benn-Burton earned her Ph.D. in clinical psychology from Wayne State University, after completing her pre-doctoral internship at Henry Ford Hospital. Throughout her career she has provided individual and group psychotherapy, psychological assessments, supervision to pre doctoral interns and post-doctoral fellows in psychology, consultation to and participation on many hospital committees and serves as a surveyor of psychology internship programs for the American Psychological Association. Her interests and career focus has been working with persons with serious mental illness, psychotherapy, psychodynamic treatment, and program development. (Winnetha.Benn-Burton2@va.gov)

**Eileen Bent** is Director of Internship Training, staff psychologist in the Mental Health Clinic, and Chair of the facility’s Preventive Ethics Committee. Dr. Bent earned her Ph.D. in Clinical Psychology from the University of Massachusetts Amherst. She completed her internship in clinical psychology at Baylor College of Medicine and her postdoctoral fellowship at the University of Missouri. Dr. Bent provides individual and group psychotherapy in the Mental Health Clinic and is also a member of the MHC’s Dialectical Behavior Treatment (DBT) team. Her clinical interests include relationship and family functioning as well as anxiety and mood problems. (Eileen.Bent@va.gov)

**Eric BeShears** earned his Ph.D. in Clinical Psychology from Wayne State University in 2005. At the John D. Dingell VA Medical center, he is a staff psychologist serving the Post Traumatic Stress Disorder Clinical Team, Chemical Dependency Program, and Mental Health Clinic. In this capacity, he provides assessment, as well as individual and group therapy services to veterans that are dually diagnosed with Substance Abuse Disorders and PTSD. His areas of interest include Motivational Interviewing, Cognitive Behavioral Therapy, and co-morbid diagnoses. (Eric.BeShears@va.gov)

**Allison Collins** is a staff psychologist, Psychology Training Director for the Postdoctoral Fellowship, and the Health Behavior Coordinator for the Detroit VA Medical Center. As Health Behavior Coordinator, she is involved in weight management and tobacco use cessation programming, staff education and training, and ongoing health promotion and disease prevention program development and evaluation. She earned her Ph.D. in clinical psychology, with an emphasis in health psychology, from Bowling Green State University. She completed her pre-doctoral internship at the Boston Consortium in Clinical Psychology at the VA Boston Healthcare System. She also completed her postdoctoral training at the VA Boston Healthcare System and remained there for several years as a staff health psychologist with the Medical Psychology Service and later as the MOVE! weight management Program Coordinator with the Primary Care Service. Her primary research and clinical interests are in the areas of weight
management, physical activity, diabetes, telehealth and health promotion more generally.  (Allison.Collins2@va.gov)

**Cydney Domsic** is a staff psychologist within the BHIP teams in the mental health clinic of the Detroit VA Medical Center. Dr. Domsic earned her PsyD in clinical psychology from the University of Denver. She completed her internship at the Richard L. Roudebush VA Medical Center in Indianapolis and was the interprofessional post doctoral fellow at the Detroit VA Medical Center. Dr. Domsic has also worked at the Lansing CBOC through the Battle Creek VA Medical Center. She has been certified in The VA protocol for Cognitive Processing Therapy (CPT) and has received outside training in Prolonged Exposure. Dr. Domsic practices with an integrative model and utilizes psychodynamic, ACT and other behavioral modalities. Her research interest is the impact of nutrition on mental health, while her clinical interests are in the areas of PTSD, emotional dysregulation, anger management, and exploring the impact of childhood relationships on current relational patterns. (Cydney.Domsic@va.gov)

**Shantee Foster** earned her Ph.D. in Clinical Psychology from the University of North Carolina at Greensboro. She completed her pre-doctoral internship at University of Akron, Ohio and served as a postdoctoral fellow for two years at the Medical University of South Carolina. Before joining the VA Medical Center, she worked at Wayne State University in the Counseling and Psychological Center. Dr. Foster is currently the staff psychologist with the Home-Based Primary Care program. Her areas of interest include cognitive-behavioral therapy, managing anxiety/depression, and adjustment. (Shantee.Foster@va.gov)

**LaMaurice H. Gardner** obtained his Psy.D. from Wright State University in 1988. He provides services to the Domiciliary Rehabilitation and Recovery Treatment Program as well as the Mental Health Clinic at the VA Medical Center. Dr. Gardner is a Police Psychologist recognized by several local and international law enforcement organizations. He serves as a hostage/crisis negotiator and provides critical incident stress debriefing to local, state, and federal officers. His supervisory interests include group and individual psychotherapy; psychological assessment; and consultation to multidisciplinary treatment teams. (Lamaurice.Gardner@va.gov)

**Stacia Gessner** is a staff psychologist in the PTSD treatment team clinic and is also a supervisor for the Assessment clinic in the Outpatient Mental Health Clinic. Dr. Gessner earned her doctorate in clinical psychology at the University of Missouri – Kansas City. She completed her pre-doctoral internship at the Eastern Kansas Veterans Administration Medical Center. She subsequently completed her post-doctoral training specializing in PTSD here at the John J. Dingell Veterans Administration Medical Center. Prior to joining the staff at JJDVAMC, she worked briefly with the State of Michigan at the Center for Forensic Psychiatry training to be a forensic evaluator. Her interests include emotion regulation, trauma, and psychophysiology. (Stacia.gessner@va.gov)

**Leena Hadied** is a staff psychologist with the Primary Care-Mental Health Integration Clinic at the Detroit VA Medical Center. Dr. Hadied earned her Ph.D. in clinical psychology from the University of Detroit Mercy. She completed her pre-doctoral internship at the Detroit VA Medical Center and specialized in patient-centered care. She subsequently completed her postdoctoral training at the Detroit VA Medical Center in health psychology, specializing in Primary Care-
Mental Health Integration and Health Promotion Disease Prevention. Prior to joining the Detroit VA Medical Center as a staff psychologist, Dr. Hadied worked as a staff psychologist at the Center for Forensic Psychiatry. Her clinical interests are in the areas of health psychology, adjustment to chronic illness, and forensic psychology. (Leena.Hadied@va.gov)

_Morgan Hurst_ is the Director of Integrated Care Services for Mental Health. These services are the health psychology programs which include: PCMHI, sleep clinic, pain clinic, health promotion disease prevention, geriatric psychology, home based primary care, and HUD-VASH. She has served as the Coordinator of the Primary Care-Mental Health Integration Clinic and is currently the Ethics Consultation Coordinator at the Detroit VA Medical Center. Dr. Hurst earned her Ph.D. in counseling psychology from Texas A&M University. She completed her pre-doctoral internship at the Institute for Human Adjustment at the University of Michigan. She subsequently completed her postdoctoral training at Henry Ford Hospital in health psychology specializing in psychosocial assessment of cancer and transplant patients. Prior to joining the Detroit VA Medical Center, Dr. Hurst worked as a staff health psychologist with the Medical Psychology Service at the Orlando VA Medical Center. Her clinical interests are in the areas of adjustment to chronic illness and women's health. (Morgan.Hurst@va.gov)

_Jean L. Kanitz_ is a staff clinical psychologist at the Detroit VA Medical Center for the HUD/VASH Department. She provides individual and group therapy to Veterans in their outpatient clinic, in addition to providing consultation to the HUD/VASH Teams. Dr. Kanitz earned her Masters’ and Ph.D. degrees in Clinical Psychology from the University of Detroit Mercy. She completed her pre-doctoral internship at the University of Michigan’s Institute for Human Adjustment. She completed a Psychoanalytic Psychotherapy Fellowship at the Michigan Psychoanalytic Institute. She subsequently completed her postdoctoral training in forensic psychology at the Center for Forensic Psychiatry (CFP), and is certified by the State of Michigan as a Consulting Forensic Examiner. Prior to joining the Detroit VA Medical Center, Dr. Kanitz worked as a Clinical and Forensic Psychologist at the CFP for 8 years, as well as was a member of a group practice. Her clinical interests are in the areas of treating individuals with mental illness, psychodynamic trauma-informed mental health treatment, and forensic psychology. Dr. Kanitz is the Mental Health Co-Chairperson of the Employee Threat Assessment Team (ETAT), and serves on the Workplace Violence Committee. (Jean.Kanitz@va.gov)

_Jennifer LaBuda_ is a clinical neuropsychologist who works in the polytrauma and neuropsychology outpatient clinics. Her professional focus has been in neuropsychology and rehabilitation psychology, with a special emphasis in geriatrics, traumatic brain injury, and pain management. She is a master trainer for evidence based intervention for chronic pain. She completed her doctorate in clinical psychology from the University of Detroit Mercy, internship in neuropsychology/behavioral medicine at the Ann Arbor VAMC, and post-doctoral ABCN neuropsychology residency at the Rehabilitation Institute of Michigan. She previously held an academic/teaching appointment in Europe (UMUC), and is presently a clinical assistant professor in the department of PM&R, Wayne State University Medical School. Her research interests include the ecological validity of neuropsychological instrumentation, anger management, and behavioral management. (Jennifer.LaBuda@va.gov)
**Mirela Militaru** is a staff psychologist at the Detroit VA Medical Center in the Mental Health Clinic. She earned her doctorate in clinical psychology, with a concentration in psychoanalytical psychology from the Illinois School of Professional Psychology. Dr. Militaru has been in the VA system since her pre-doctoral internship, which she had completed at the Veterans Affairs Medical Center Hampton, VA. She subsequently completed her postdoctoral training at the Central Texas Veteran’s Health Care System while providing services to veterans and active duty soldiers, including combat PTSD, Military Sexual Trauma (MST) and Substance Use Disorder (SUD). Prior to joining the Detroit VAMC, Dr. Militaru worked as a clinical psychologist at the South Bend Community Based Outpatient Clinic (CBOC) where she started to implement Evidence Based Psychotherapy (EBP) as determined by the veteran’s clinical needs. She has been formally trained in the VA EBPs that include Cognitive Processing Therapy (CPT), Cognitive Behavioral Therapy for Depression (CBT D) and Integrative Behavioral Couples Therapy (IBCT). She had completed a Fellowship in Psychoanalysis at the Chicago Center for Psychoanalysis and was awarded the Early Career Psychologist Credentialing Scholarship through the National Register of Health Service Psychologists (HSP). Dr. Militaru has been part of several multidisciplinary treatment teams, provided consultation and participated at various hospital committees. Her clinical interests are in the areas of trauma and dual diagnosis, relational psychotherapy and integrated mental health care. ([Mirela.Militaru@va.gov](mailto:Mirela.Militaru@va.gov)).

**Eric F.D. Miller** is a staff psychologist in the Mental Health Clinic and is the Behavioral Health Interdisciplinary Program Team Coordinator. Additionally, he oversees the trainees in the Interprofessional Mental Health training tracks. He received his doctorate from Eastern Michigan University in 2013, completed his internship at the Michigan State University Counseling Center, and his Interprofessional Mental Health Postdoctoral fellowship at the John D. Dingell VAMC. In his previous career, Dr. Miller was the director of martial arts studios whose curricula were informed by developmental, behavioral, and sports psychology research and incorporated mindfulness meditation. In his career as a psychologist, his research has been focused on the Mindfulness- and Acceptance-based Therapies, and clinically he specializes in Acceptance and Commitment Therapy.

**Lynn Neely** is the Director of the Outpatient Mental Health Clinic, and is also a staff psychologist for Long-Term Care and Hospice/Palliative Medicine in Geriatrics. She earned her Ph.D. in Clinical Psychology from Wayne State University in 2004. She completed a residency at the Dayton VA Medical Center in Dayton, Ohio and a post-doctoral fellowship in Health Psychology at Wayne State University. Clinical interests include geriatric assessment and treatment, adjustment to chronic illness, and end of life. ([Lynn.Neely@va.gov](mailto:Lynn.Neely@va.gov)).

**Michael Regenold** is the staff psychologist in the Transitions Program (partial hospitalization program). In this capacity, he provides assessment and individual and group psychotherapy services. Groups include: wellness and recovery, recovery action planning, and CBT groups. Additionally, Dr. Regenold offers consultation to the Vet Center staff. Dr. Regenold obtained his Psy.D. in 2005 from the APA-accredited program in clinical psychology at University of Denver in Denver, CO. Prior to working at the John D. Dingell VA Medical Center, Dr. Regenold worked as Counseling Psychologist at the Togus VA in Augusta, ME and on the Battle Creek VAMC psychiatric inpatient units. His primary theoretical approach is cognitive-behavioral therapy. ([Michael.Regenold@va.gov](mailto:Michael.Regenold@va.gov)).
James M. Riggio earned his Ph.D. in Clinical Psychology from the University of Detroit in 1988. Dr. Riggio provides both individual and group psychotherapy and supervises Psychology Interns and other trainees in mental health services. He has taught courses in Psychology at Oakland Community College and the University of Detroit-Mercy, and participates as an Instructor for Psychiatry Residents at the medical center who are affiliated with the Department of Psychiatry & Behavioral Neurosciences (WSU). His current position at the John D. Dingell VA Medical Center is senior staff psychologist and he functions as one of the Behavioral Health Interdisciplinary Program (BHIP) Team Leaders in the Outpatient Mental Health Clinic. His areas of special interest include brief psychodynamic psychotherapy, trauma-related reactions, and addictions. (James.Riggio@va.gov)

Sara Rizzo is the Director of Postdoctoral Training. She earned her PhD in clinical psychology from the University of Detroit Mercy. Currently she provides treatment in Primary Care-Mental Health Integration at the John D. Dingell VA Medical Center. In the past, she coordinated and provided care in the Intensive Outpatient Program for substance use disorders. She has been formally trained in the VA EBP’s Problem Solving Therapy, Motivational Enhancement Therapy, Cognitive Behavioral Therapy for Insomnia, Cognitive Behavioral Therapy for Chronic Pain, and was trained as a national consultant for MI/MET trainees. She is a professional member of the American Diabetes Association and is a certified mental health provider for persons with diabetes. Additional duties while employed at the VA have included serving as a VA representative on the Wayne State University School of Medicine’s Behavioral Health Institutional Review Board committee. (Sara.Rizzo@va.gov)

Dyani Saxby is the Pain Psychologist at the Detroit VA Medical Center. Dr. Saxby earned her Ph.D. in clinical psychology from the University of Cincinnati. She finished her pre-doctoral internship at Wayne State’s Department of Psychiatry and Behavioral Medicine, and her postdoctoral fellowship at Marquette University. Prior to joining the Detroit VA, Dr. Saxby worked as an Emergency Department Consult psychologist at the Milwaukee VA Medical Center and at Aurora St. Luke’s and Sinai Medical Center’s Physical Rehabilitation program. She served as Assistant Professor at the Medical College of Wisconsin from 2015 – 2017. Her clinical interests are in alternative pain management, insomnia and sleep apnea. Her research has focused on the impacts of fatigue on simulated driving performance. (Dyani.saxby@va.gov)

Michelle L. Sharp obtained her Ph.D. in Clinical Psychology at Southern Illinois University – Carbondale in 1997. She completed a two year postdoctoral fellowship in Clinical Neuropsychology at the University of Michigan Health System in Ann Arbor in 1999. In the past, she has taught courses as lecturer at the University of Michigan as well as an adjunct faculty member at Maryville University in Missouri. Past clinical experience includes work in a state psychiatric facility as well as rural Community Mental Health. Dr. Sharp currently serves as coordinator of the Post-Traumatic Stress Disorder Clinical Team and Associate Training Director in the Psychology Section. (Michelle.Sharp@va.gov)

Ian Sherwood is a staff psychologist in the Primary Care-Mental Health Integration clinic at the Detroit VA Medical Center. Dr. Sherwood earned a Ph.D. in clinical psychology with a concentration in health psychology from the University of Alabama. He completed his pre-doctoral internship and a postdoctoral residency specializing in Primary Care-Mental Health
Integration and Health Psychology/Health Promotion Disease Prevention at the Detroit VA Medical Center. Dr. Sherwood’s areas of interest include health psychology, sleep disorders, cognitive behavioral therapy for insomnia, multidisciplinary treatment approaches, and program evaluation. (Ian.Sherwood@va.gov)

Jessica Spies is a Psychology Technician at the John D. Dingell VA Medical Center and performs psychometric testing for neuropsychological evaluations. She received her M.S. in Clinical Health Psychology from the University of Michigan-Dearborn in 2007 and L.L.P. through the State of Michigan in 2009. She was as an Addiction Therapist in the Intensive Outpatient Program at the JDDVAMC from 2008-2015, where she specialized in group and individual therapy for substance use disorders. Prior to joining the JDDVAMC, Ms. Spies worked as a technician in clinical research for the Neurology Department at Wayne State University’s School of Medicine from 2005-2008. (Jessica.Spies@va.gov)

Emanuel vanBolden earned his Ph.D. in Clinical Psychology from Wayne State University in 2007. At the John D. Dingell VA Medical center, he is a staff psychologist working with the PRRC (Psychosocial Rehabilitation and Recovery Center). In this capacity, he provides individual and group therapy services to veterans that are classified as SMI (Severely Mentally Ill). Prior to joining the VA, Dr. vanBolden worked with the 3rd Circuit Court of Michigan conducting court-ordered psychological evaluations of adults and juveniles, and providing expert testimony. Dr. vanBolden’s areas of interest include Cognitive Behavioral Therapy, Motivational Interviewing and forensic psychology. (Emanuel.Vanbolden@va.gov)

Ann Usitalo is the staff psychologist on the Inpatient Mental Health unit at the Detroit VA Medical Center. She earned her Ph.D. in clinical and health psychology at the University of Florida and completed a pre-doctoral internship at the VA Medical Center in Gainesville, Florida and a post-doctoral fellowship at Nemours Children’s Clinic in Jacksonville. She also completed a M.P.H. at the University of North Florida with a focus on Health Behavior and Health Education. Prior to joining the Detroit VA in 2015, Dr. Usitalo was an assistant professor at the University of Florida Center for HIV/AIDS Research, Education and Service. Clinical and research interests include adjustment to chronic illness, physical and mental comorbidity, stigmatization, and promoting resilience. (ann.usitalo@va.gov)

Dunia Zebari is a staff psychologist in the MHC. She obtained her Ph.D. in clinical psychology from the University of Detroit Mercy and completed a three year NIH research fellowship at the University of Michigan Medical School, Department of Physical Medicine and Rehabilitation. She has also worked in private practice. She currently provides individual and group psychotherapy in the Mental Health Clinic. Groups include Stress Management, Anger Management, and a group employing cognitive-behavioral skills for mood improvement. (Dunia.Zebari@va.gov)
Former Trainees, in the year immediately following internship

2018-2019:
- Dr. A: Postdoctoral Resident at the Pittsburgh VA
- Dr. B: Postdoctoral Resident in a private practice group
- Dr. C: Postdoctoral Resident at the John D. Dingell VA Medical Center
- Dr. D: Postdoctoral Fellow research fellow in geriatric neuropsychiatry research at Columbia University
- Dr. E: Director of Program Development and Research at Central City Integrated Health (Detroit)
- Dr. F: Postdoctoral Fellow in Neuropsych and Rehabilitation Psych at the Rehabilitation Institute of MI

2017-2018:
- Dr. A: Postdoctoral Resident at the John D. Dingell VA Medical Center
- Dr. B: Postdoctoral Resident in a private practice group
- Dr. C: Postdoctoral Resident in Neuropsych and Rehabilitation Psych at the Rehabilitation Institute of MI
- Dr. D: Postdoctoral Resident at the Palo Alto VA Medical Center
- Dr. E: Postdoctoral Resident at the Atlanta VA Medical Center
- Dr. F: Postdoctoral Resident in Neuropsych and Rehabilitation Psych at the Rehabilitation Institute of MI

2016-2017
- Dr. A: Postdoctoral Resident in Neuropsychology at Florida Hospital
- Dr. B: Postdoctoral Resident at the John D. Dingell VA Medical Center
- Dr. C: Postdoctoral Resident in Liver and infectious Disease at the Washington DC VA Medical Center
- Dr. D: Postdoctoral Resident at the San Francisco VA Medical Center
- Dr. E: Psychologist in Private Practice
- Dr. F: Postdoctoral Resident at the John D. Dingell VA Medical Center

2015-2016
- Dr. A: Postdoctoral Resident at Emory University
- Dr. B: Postdoctoral Resident in Neuropsychology at Henry Ford Health System
- Dr. C: Staff Psychologist at Jesse Brown VA Medical Center
- Dr. D: Postdoctoral Resident in Health Psychology at Henry Ford Health System
- Dr. E: Postdoctoral Resident in Neuropsychology at TIRR Memorial Hermann/ Baylor College of Medicine
- Dr. F: Postdoctoral Resident at Michigan State University/FAME Consortium for Advanced Psychological Training

2014-2015
- Ms. A: Completing dissertation and teaching
- Dr. B: Postdoctoral Resident in Neuropsychology at the Milwaukee VA
- Dr. C: Postdoctoral Resident at Consortium for Advanced Psychological Training
- Dr. D: Postdoctoral Resident in Neuropsychology at Nebraska Medicine
- Dr. E: Postdoctoral Resident at the National Center for Organizational Development
- Dr. F: Postdoctoral Resident in HIV and Liver Disease at at the John D. Dingell VA

2013-2014
- Dr. A: Postdoctoral Resident in clinical psychology at the Univ. of Michigan Institute for Human Adjustment
- Dr. B: Postdoctoral Resident in Primary Care Mental Health Integration at the Albuquerque VA
- Mr. C: Completing dissertation and working in the field
- Dr. D: Working in an Integrative Rehabilitation Medicine practice group
- Dr. E: Postdoctoral Resident in Neuropsychology at the Institute of Living/Hartford Hospital in Connecticut
- Dr. F: Postdoctoral Resident in Neuropsych and Rehabilitation Psych at the Rehabilitation Institute of MI

2012-2013
- Dr. A: Postdoctoral Resident in clinical psychology (health emphasis) at this VAMC
- Dr. B: Postdoctoral Resident in Forensic Psychology
- Dr. C: Postdoctoral Resident in Neuropsychology at the Miami VAMC
- Dr. D: Postdoctoral Resident in Neuropsychology at the Rehabilitation Institute of Michigan
2011-2012
Dr. A: Postdoctoral Resident in Health Psychology Residentship at White River Junction VAMC
Dr. B: Postdoctoral Resident at a pediatric rehabilitation hospital in Ohio
Dr. C: Obtained Psychologist- Doc Educ Ltd License, and Career change, pursuing medical school
Dr. D: Postdoctoral Resident in chronic pain at the Cleveland Clinic

2010-2011
Dr. A: Completed a 2 yr fellowship in Health Psychology Fellowship at Hurley Hospital in Flint, Michigan
Dr. B: Working at an adolescent mental health treatment facility
Dr. C: Completed a 2 yr fellowship in Neuropsychology at the Rehabilitation Institute of Michigan

2009-2010
Dr. A: Completed a 2 year Postdoctoral Fellowship in Neuropsychology at the Ann Arbor, MI VAMC
Dr. B: Completed a 2 year Postdoctoral Fellowship and now employed as a Neuropsychologist at the Rehabilitation Institute of Michigan
Dr. C: Completed a 2 year Postdoctoral Fellow at Brown University

2008-2009
Dr. A: Completed a 2 year Postdoctoral Fellow at the National Center for Occupational Development
Dr. B: Completed a Postdoctoral Fellowship in PTSD. Now a Staff Psycholgist at Pittsburgh, PA VAMC
Dr. C: Completed Postdoctoral Fellow in PTSD at the Ann Arbor, MI VAMC. Now teaching, working in a counseling clinic, and establishing a private practice

2007-2008
Dr. A: Completed a postdoctoral Fellowship in Neuropsychology and now works a neuropsychologist at the Battle Creek, MI VAMC
Dr. B: Completed a postdoctoral Fellowship in Neuropsychology and now works as a neuropsychologist in Rancho Los Amigos National Rehab Center
Dr. C: Psychologist in Metro Detroit

2006-2007
Dr. A: Completed a postdoctoral Fellowship in Neuropsychology and now works as a neuropsychologist at the Honolulu VAMC
Dr. B: Group home supervisor
Dr. C: Completed a postdoctoral Fellowship in Neuropsychology and now a neuropsychologist in Michigan's "thumb" region

2005-2006
Dr. A: Completed a Neuropsychology postdoctoral fellow at University of Toledo.
Dr. B: Completed a Health Psychology Fellowship at Hurley Hospital in Flint, Michigan
Dr. C: Staff Psychologist at Memorial Medical Center in Springfield, Illinois

2004 – 2005
Dr. A: Completed a Postdoctoral Fellowship, Childrens Hospital, Detroit.
Dr. B: Completed a Postdoctoral Fellowship in Neuropsychology, Milwaukee Medical Center (his own grant awarded funding)
Dr. C: Completed a Postdoctoral Fellowship in stress and immunity at Ohio State University.