Psychology Internship at Buffalo VA Medical Center
Psychology Internship Home Training Goals and Structure Rotations Faculty Buffalo & Western NY

Program Introduction

The Doctoral Psychology Internship Program at the VA Western New York Healthcare System (VAWNYHS) is accredited by the American Psychological Association. The program provides qualified doctoral candidates in Clinical and Counseling Psychology the opportunity to obtain a wide range of experiences with a variety of psychiatric, medical, and geriatric patients in both inpatient and outpatient settings. The intern gains experience in the activities conducted by practicing psychologists. The intern works as an integral part of the health care team with other professionals and their trainees. Internship graduates are well suited to practice in VA facilities as well as a wide range of health care settings. The majority of graduates of the VAWNYHS Doctoral Psychology Training Program have chosen to work in clinical settings. The skills that they have acquired during their internship year have proven to be highly transferable to a wide variety of professional practice settings including VA medical centers, non-VA hospitals, and other medical and psychiatric settings, as well as clinical research and academic settings. Many interns choose to take post-doctoral training positions in the year following internship and we have an excellent track record of placing interns into fellowships and jobs.

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Please note that we cannot offer clinical training to students in disciplines outside Psychology, but graduate students in doctoral programs of study in Clinical or Counseling Psychology may contact the Director of Training with inquiries regarding practicum training before their doctoral internship.

For further information on accreditation status, contact:

Commission on Accreditation*
c/o Office of Program Consultation and Accreditation
Education Directorate
American Psychological Association
750 First Street, NE
Washington, DC 20002-4242

202-336-5979
TDD: 202-336-6123
Fax: 202-336-5978
E-mail: apaaccred@apa.org ***
Eligibility Requirements for VA Psychology Internship Programs:

1. U.S. citizenship. VA is unable to consider applications from anyone who is not currently a U.S. citizen. Verification of citizenship is required following selection. All interns and fellows must complete a Certification of Citizenship in the United States prior to beginning VA training.

2. A male applicant born after 12/31/1959 must have registered for Selective Service by age 26 to be eligible for any U.S. government employment, including selection as a paid VA trainee. Male applicants must sign a pre-appointment Certification Statement for Selective Service Registration before they can be processed into a training program. Exceptions can be granted only by the US Office of Personnel Management; exceptions are very rarely granted.

3. Interns and fellows are subject to fingerprinting and background checks. Match result and selection decisions are contingent on passing these screens.

4. VA conducts drug screening exams on randomly selected personnel as well as new employees. Interns and Fellows 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.

5. Doctoral student in good standing at an APA, CPA, or PCSAS accredited graduate program in Clinical or Counseling psychology. Persons with a doctorate in another area of psychology who meet the APA criteria for respecialization training in Clinical or Counseling Psychology are also eligible.

6. Approved for internship status by graduate program training director.

VAWNYHS Psychology Internship Requirements:

1. A minimum of 1000 hours of supervised practicum experience is recommended by the start of the internship year, typically including at least 500 hours of direct patient contact. It is expected that applicants will have substantial prior supervised experience in assessment, (e.g., five MMPI2 reports, at least five comprehensive adult reports and satisfactory grounding in intellectual assessment), as well as individual and/or group psychotherapy. We are unable to guarantee extensive experience in administration and interpretation of psychological assessment instruments outside of our Geropsychology track.

2. A basic understanding of psychological test construction and a familiarity with the use of the DSM is also required. For Geropsychology track applicants, the ability to administer, score, and interpret results from customary assessment tools of the specialty are prerequisites for appointment as an intern.

3. Advanced progress on the dissertation is highly desirable.
**Application Requirements:**

1. The APPIC Application for Psychology Internship submitted online. Your application must be complete, including all supporting documents, by 11/15, for you to be considered as a candidate.
2. A current vita (uploaded to your APPIC application.)
3. Please include unambiguously in the cover letter uploaded to your APPIC application which internship track(s) you are applying to (Mental Health / Geropsychology / Health Psychology). It is permissible and sometimes advantageous to apply to multiple tracks. If you know what other rotations interest you at the time of application, it is valuable for you to also indicate these in your cover letter, though you will not be bound to these choices for internship.
4. Three letters of recommendation. Please do not include more than three letters. Those who know you well enough to discuss your strengths and weaknesses as a scholar-clinician should write these letters. At least one letter should be from a practicum supervisor (uploaded to your APPIC application.).
5. Official graduate transcripts (uploaded to your APPIC application.)
6. A letter from your Director of Clinical Training confirming your eligibility for internship. (Part 2 of the AAPI)
7. Please do not submit work samples as part of the application. Further, VA SF 171 is not required at the time of application.

All application materials should be received by November 15.

**Selection Process**

Applications are reviewed by internship supervisors for
- minimum expected practicum experience in assessment, intervention and supervision
- quality, depth and breadth of practicum training
- relevance of practicum experience to internship at our VA setting
- fit of developing applicant career goals with the VA’s missions
- quality of communication
- sophistication in clinical formulation, diversity awareness, developing clinical identity and scholar-clinician integration

We will be notifying candidates that they have been selected for interviews on or after December 15. Approximately 30 applicants are invited to interview annually from late December through January. Interviews are scheduled individually for each applicant with each of the Director of Training, two rotation
supervisors and one current intern. We prefer to interview candidates in person, but we have conducted mutually beneficial interviews by telephone conference calls.

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. We are committed to a selection process which encourages diversity among interns selected for our training program. If you have any difficulty with or questions about the application procedure, please call Donovan at (716) 862-7330 or email Sheila.Donovan@va.gov or Dr. Mercurio-Riley at (716) 862-8581 or email Denise.Mercurio-Riley@va.gov. ***

* Link will take you outside of the Department of Veterans Affairs Web site. VA does not endorse and is not responsible for the content of the linked web sites. The link will open in a new window.

*** Submitting requests through this e-mail link is not secure. If you wish to send a secure message, please use the VA National Inquiry Routing & Information System (IRIS)

Psychology Internship at Buffalo VA Medical Center

Training Philosophy, Goals and Internship Structure

The VAWNYHS Psychology Doctoral Internship is a highly intern-centered scholar-practitioner program that prepares students to function independently in a wide range of clinical settings, with fidelity to scientific literature and current clinical practice standards, within a supportive and individualized training structure that values scientific activity and encourages leadership in contribution to the health care system.

We prioritize interns’ training experience over their value as a labor resource. We value diversity in our staff and intern classes. Our supervisors provide a range of professional role models, from scientist-practitioner to specialist clinician, often including important leadership roles in the health care system. Similarly, we offer a broad range of in-depth and specialized professional experiences, with flexibility both to ensure strong core skills and to achieve advanced proficiency in areas of personal interest and experience. Intern developmental growth is supported through diverse, intensive clinical activities, strong, mentorship-style supervision and multi-faceted program elements that complement supervised direct patient care. Interns are regarded as junior colleagues in a professional culture that values metacompetence and lifelong professional growth and development.
**Internship Goals**

Our internship goals are to ensure that each intern possesses broad and solid global competencies for independent clinical practice in psychology, as assessed quarterly in each of the following domains:

1. Clinical assessment
2. Clinical intervention
3. Interdisciplinary consultation and collaboration
4. Integrated scholarship as a knowledge base for clinical practice
5. Professional conduct

In addition, our training program has a strong tradition of intern-centered values. Within a primary framework that ensures necessary global competencies for independent practice, our program identifies with a mentorship model of supervision that honors intern developmental needs and intern-identified training objectives within individualized training rotations. We encourage interns to select training experiences in concert with their preferred career objectives, and we hope to produce graduates who will grow to provide clinical, organizational and academic leadership in the health care system.

Interns who successfully complete the internship will:

- Be broadly competent in psychological assessment, psychotherapy and clinical intervention
- Function comfortably and effectively in interdisciplinary health care settings
- Possess necessary skills and internal standards for professional ethical behavior, diversity awareness, communication and self-management of activities
- Accurately and creatively apply scholarly knowledge and scientific principles to the solution of clinical problems
- Possess foundations of metacompetence, the ability to monitor and improve one’s ongoing skill set to fit changing professional demands

Many of our interns go on to provide leadership in clinical, organizational and academic settings. Interns planning careers in specialty areas are generally able to meet all training requirements for competitive placement in post-doctoral training fellowships. Our internship values and supports research skills and activity, and many of our interns advance to careers as researchers.

To facilitate the attainment of these goals, we identify strengths and weaknesses in interns’ previous training and develop individualized training objectives, based on global clinical competencies and individual career goals. Training objectives established with supervisors at the start of each rotation are reviewed at mid-rotation. Progress with respect to global competencies for professional practice is re-evaluated quarterly. Performance within training rotations is reviewed at mid-rotation and formally evaluated at the end of each 6-month rotation. Core training rotations are supplemented by didactic
seminars, group supervision, a year-long intern project, diversity awareness seminars, medical center training activities and a relationship with a non-supervisory mentor to provide a multi-faceted and developmentally sensitive training experience. Strong supervisory relationships support autonomous professional activities and time management skills for independent practice, as well as sheltered opportunity to sort and integrate training experience with corrective feedback.

**Internship Structure**

We currently offer four internship positions, all emphasizing a strong scholar-practitioner skill base especially suited for psychologists working in large medical settings. Candidates must apply to one or more of our three internship tracks: the Mental Health track (comprising two of the four internship positions), the Geropsychology track (one position) or the Health Psychology track (one position). Interns may access any of our training rotations, regardless of the track to which they apply. The standard rotation structure is two concurrent half-time rotations for each half of the internship, totaling four for the year. Rotations specific to your track will generally be assigned during the first half of the year, to support intended post-doctoral fellowship and job applications. We will consider full-time, 6-month versions or half-time, full-year versions of some rotation assignments. Rotation assignments are based primarily on intern preference, though we also balance assignments to assure breadth of clinical experience, in accord with interns' identified professional development objectives.

Rotation assignments are made well before the start of internship, though we have historically been quite flexible in adjusting second half rotation assignments during the year in response to intern requests. Weekly intern schedules will vary depending on the two rotations to which interns are assigned, but Fridays generally bring interns together for seminars, Diversity Brown Bag and other lunchtime symposia, and group supervision.

**Mental Health Track**

The VAWNYHS internship offers a uniquely broad range of settings for interns to gain experience in treatment of acute and chronic mental health issues that centrally affect Veterans. Across rotations, interns can be trained in multiple evidence-based approaches for individual and group psychotherapies for PTSD, depression, substance use disorders, etc. Our clinical settings range from residential, outpatient and community-based programs. Recent intern classes have completed certification courses in VA-sponsored evidence-based therapies as part of internship. Our intention is to prepare interns to provide leadership in the design and delivery of clinical services to Veterans, and many of our graduates occupy leadership positions in the VA system nationally.
Sample Mental Health Track Rotation Assignments:

<table>
<thead>
<tr>
<th>July - January</th>
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<tbody>
<tr>
<td>Rotation 1: Behavioral Health Clinic</td>
<td>Rotation 3: Primary Care</td>
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<tr>
<td>Rotation 2: PTSD</td>
<td>Rotation 4: Psychosocial Rehab &amp; Recovery Center</td>
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**Geropsychology Track**

The Geropsychology Track is designed to offer a breadth of experiences related to geropsychology practice. Interns with a strong interest in geropsychology as a profession, experience with psychological testing and integrative report writing, and an interest in working with older adult, dementia and palliative care/hospice populations are encouraged to apply. The intern will be provided with a breadth of experiences related to geropsychology practice, and opportunities to work in consultation with a number of providers through an outpatient Geropsychology clinic, consult to an Advanced Illness/Palliative Care team, and function as an integral member of a multidisciplinary team that serves Veterans in the nursing home setting or Community Living Center (CLC). Opportunities will include work with Veterans with a range of mental health diagnoses including those related to mood disorders, cognitive decline, and severe mental illness, Veterans with complex medical problems, terminal illness, and Veterans with relatively short-term problems in need of rehabilitation and discharge planning. Presenting issues include depression, anxiety, dementia, grief and loss, end-of-life issues and planning, and behavioral management. Staff and family support, education, and counseling are also a large component of the intern's experiences in this track. The Geropsychology Track intern spends the first half of internship, July to January, in two concurrent half-time track rotations:

**Community Living Center (CLC), Batavia VA Medical Center.** The CLC rotation is tailored to meet specific intern training goals and the needs of the CLC. Opportunities include conducting psychological, cognitive, and capacity evaluations, individual and group psychotherapy, family support, behavioral assessment and treatment planning, and working as a member of the treatment team. Dr. Kim Curyto is the primary supervisor, and the intern will spend two days a week at the Batavia campus.

**Geropsychology, Buffalo VA Medical Center.** This assignment primarily involves the Geropsychology outpatient clinic, conducting outpatient geropsychological assessments and therapeutic interventions. The Geropsychology rotation also includes individual and family therapy in collaboration with the Advanced Illness/Palliative Care team in medical inpatient settings at the Buffalo VA site. Dr. Kathryn Moss is the primary supervisor for intern activities two days a week on this service.

The Geropsychology Track intern may request any other internship rotations for the second half of internship, January to July.
Sample Geropsychology Track Rotation Assignments:

<table>
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<tr>
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<tbody>
<tr>
<td>Rotation 1: Geropsychology</td>
<td>Rotation 3: Behavioral Health Clinic</td>
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<tr>
<td>Rotation 2: Community Living Center</td>
<td>Rotation 4: Primary Care</td>
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**Health Psychology Track**

The VAWNYHS offers a range of training involvements in primary and tertiary care environments with interdisciplinary medical teams. Health Psychology Track interns are supported in forming content expertise across a range of clinical concerns (medical and psychiatric) and in forming confidence and mastery in collaborating with physicians and allied health practitioners. Past VAWNYHS interns specializing in Health Psychology have gone on to a range of fellowship and staff positions in clinical health psychology, most within the VA system.

Sample Health Psychology Track Rotation Assignments:

<table>
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<tr>
<th>July - January</th>
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<tbody>
<tr>
<td>Rotation 1: Primary Care</td>
<td>Rotation 3: Substance Use Disorder</td>
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<tr>
<td>Rotation 2: Behavioral Medicine</td>
<td>Specialty Treatment Services</td>
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<td></td>
<td>Rotation 4: Center for Integrated Healthcare</td>
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**Supervision**

Interns’ relationships with our training faculty are the central strength of their training experience. Our internship program strictly meets and generally exceeds APA guidelines regarding volume and quality of supervision. Interns meet with individual rotation supervisors for a minimum of two hours per week. It is also expected that supervisors will spend an additional hour working with interns in case conferences, co-therapy, or informal conversations regarding patient care.

**Group Supervision**

Weekly group supervision (60 minutes) is co-facilitated by two training faculty. Group supervision is intended to be a flexible format, in which interns substantially determine objectives and content for group supervision, often including discussions of challenging clinical issues, systems or interpersonal issues, professional development, ethics, job-hunting, etc.

**Mentor**

Each intern selects a member of the Psychology staff to be a non-supervisory (non-evaluative) mentor for the training year. Past interns have consistently found relationships with these mentors to be valuable as
a) models and advisors for career development, b) confidential consultants in addressing developmental, interpersonal or systemic issues, and c) advocates, in rare instances, when needed.

**Intern Seminars**

Interns attend weekly 2-hour didactic seminars, whose broad content is carefully selected and revised annually based on intern feedback, developing program objectives and available expertise. View 2017-2018 Psychology Seminar Series. In addition, our training program values career-long continuing education. Psychology faculty and interns have the opportunity to attend a variety of teaching conferences, seminars and workshops, including hospital teaching rounds, presentations sponsored within the community by the SUNY Buffalo School of Medicine and affiliated medical centers, and VA-sponsored trainings. Interns may also apply to the Director of Training to use training hours to attend other workshops or seminars, either local or out of town.

**Diversity Awareness**

Our Training Committee sponsors an ongoing diversity awareness program, including training faculty and interns in designing and planning diversity awareness activities. Our monthly Diversity Awareness Brown Bag discussion series is required of interns and attended by core faculty, each semi-structured discussion centered on an advance topic.

**Internship Project**

All interns are required to complete and present a project during the course of their training year. The purpose of the project is to expand on rotation clinical activities to further integrate scientific perspective into clinical practice or to engage in program development and outcome assessment. Past projects have most frequently included collaboration with supervisors on research studies, program consultation, design of new clinical programs in response to specific systems objectives, and implementation of new clinical programs, such as therapy groups. Note that the project should be seen primarily as an opportunity for expanded learning experience on the internship and is not intended to be a great evaluative or time burden for interns.

**Research Opportunities**

Research participation is not required; however, research opportunities are readily available, and interns are welcome to participate in on-going research projects. Training faculty interests are included in staff descriptions. In addition, interns can complete their own projects during the course of the year. Applicants who are interested in pursuing research interests are encouraged to discuss this with the Director of Training.
Internship Funding and Benefits

The VHAWNYHS Doctoral Psychology Internship Program is funded by the Department of Veterans Affairs Office of Academic Affiliations via an annual earmarked allocation to the Medical Center. Stipends are provided to qualified students in APA accredited programs in clinical and counseling psychology, currently at $24,635 for the 2080 hour training year from July to July. Interns are able to participate in employee health insurance programs. There are several options for healthcare coverage and employees pay a portion of the cost via automatic deductions in each paycheck. The cost of coverage is dependent on the health insurance plan selected by the employee. Interns typically train during normal administrative hours (Monday through Friday, 8:00 a.m. to 4:30 p.m.), although some rotations may have opportunities for evening hours. Interns accrue sick time and vacation time at a rate of 4 hours each per biweekly pay period. Interns are not expected to train on site more than 40 hours weekly without express permission of the Director of Training. Training time is credited for attendance at professional conferences, research and employment interviews.

Psychology Internship at Buffalo VA Medical Center

Psychology Internship Home  Training Philosophy, Goals and Internship Structure  Rotations  Past Intern Information  Our Faculty  Buffalo & Western NY

Rotations

The following rotations are components of the Psychology Doctoral Internship at Buffalo VA Medical Center: Standard rotation schedule is half-time for 6 months in each half of the internship year; however, Geropsychology Track interns complete paired half-time rotations in Geropsychology and the Community Living Center, from July to January, and other rotations are sometimes offered in extended or full-time variations. Note that our roster of available rotations and supervisors often evolve from year to year. We provide current updates on all rotation options at interview, and you may contact the Director of Training at any time to confirm current rotation offerings.

- Behavioral Health Clinic
- Behavioral Medicine
- Center for Integrated Healthcare
- Community Living Center
- Geropsychology
- PTSD
- Primary Care
- Psychosocial Rehab & Recovery Center
Substance Use Disorder Specialty Treatment Services
Buffalo Vet Center

Behavioral Health Clinic

Dr. Brad Brown

Prerequisites: None

Settings, Tasks and Workload: This rotation offers the intern opportunity to work in a multidisciplinary, general mental health setting that provides outpatient mental health services for more than three thousand active patients in the Buffalo, NY and surrounding areas. Most patients are also linked to a primary care medical provider and assorted other medical care specialists. Patients have access to a wide array of psychological, medical, and other support services, so that the intern has the experience and responsibility of interacting within a healthcare system, seeking to address the need of the whole patient.

Each patient in the Behavioral Health Clinic is assigned to a primary mental health provider and may have numerous other providers within the Clinic or within the larger Behavioral Health Care Line. Interns have the opportunity to provide assessment and treatment to patients, for whom they may have primary responsibility for evaluation, treatment, and consultation. Some of the cases will undoubtedly serve as long-term cases for interns. Usually, intervention will be done on an outpatient basis, but may involve short-term consultation and treatment on inpatient units.

There are likely to be some unique opportunities for development of learning about Posttraumatic Stress Disorder (PTSD) and best practice interventions. In addition to more traditional psychiatric populations, the Clinic has a wide variety of Veterans with PTSD from Korea, Vietnam, Lebanon, the Persian Gulf, Afghanistan, and Iraq, not to mention men and women who have experienced trauma in their earlier lives.

Interns may be involved in psychological assessment and testing, individual therapy and group therapy, marital and family therapy and patient education activities. Cases are assigned to interns on the basis of their training value. The goal is that some of the cases will be long-term and provide learning opportunities for intense exploratory psychotherapy and the development of new or expanded skills. Ultimately interns have the flexibility to modify this rotation in a way that best meet their needs. Some interns have opted for a more in-depth training experience with relatively few cases and intensive supervision. Other interns have designed programs that include carrying a larger caseload and following a brief therapy model.
Didactic Opportunities: Monthly conferences are held for behavioral health staff. Interns are encouraged
to attend clinical workshops in Buffalo, NY or in surrounding communities that are congruent with their
clinical interests.

Structure of Supervision: Supervision is seen as playing a major role in interns' development as
professional psychologists. A minimum of two hours per week of individual supervision is scheduled,
along with many opportunities for informal supervisory/collegial contacts with the supervisor and
professionals from other disciplines. The goal of supervision is for the participants to enter a reciprocal
learning enterprise, with supervisor and supervisee interacting to provide the intern opportunities for new
depths of clinical understanding and for honing of skills in therapeutic intervention and practice.

**Behavioral Medicine**

Dr. Denise Mercurio-Riley

**Prerequisites:** Familiarity with medical settings, psychological pain management treatment modalities,
opioid adherence, multi-disciplinary teamwork, diagnostic interviewing, and principles of behavior change
are beneficial but not required. Translating from treating psychopathology to treating medical problems in
support of allied clinicians is often a challenging but rewarding shift for interns without strong prior
experience in behavioral medicine.

**Setting, Tasks, and Workload:** Primary settings include Primary Care and the Chronic Pain Clinic. Other
specialty clinics may be sources of referrals at times Consultation with medical providers regarding pain
management issues is the most common component of this rotation.

Primary Care- As part of the multidisciplinary Primary Care team, the intern will focus on working with
patients with chronic pain, including assessment and treatment planning. In line with the Integrated
Primary Care Model, the goal is to provide short-term, goal-oriented, individual, group, or family
interventions for management of chronic pain, adjustment to disability, opioid adherence, support for
medical interventions, and/or medical or psychiatric co-morbidities interacting with pain management.

**Chronic Pain Clinic** -- Immersion in an interactive, highly-developed interdisciplinary chronic pain team,
including extensive experience in pain treatment approaches and clinical issues (e.g., opioid abuse).
Intern activities include interview assessment and triage, problem-focused cognitive-behavioral
intervention, relaxation training, case management, consultation to medical providers and interpretation of
written psychosocial screening assessment data. The pain team offers interns unique opportunities to
observe medical examinations, acupuncture and other pain management procedures.
Pre-surgical evaluation -- of candidates for liver, kidney, heart-lung, stem cell/bone marrow transplantation as well as implanted spinal cord stimulators or intrathecal opioid pumps for chronic pain.

General behavioral medicine consultation—Outpatient referrals from all hospital clinical services and programs. Referral concerns include anxiety and depression associated with medical conditions, problems in treatment adherence, adaptation to chronic illness, death and dying, coping with stressful medical procedures, psychophysiological and somatoform syndromes.

Behavioral medicine combines diverse foundation psychological clinical skills and concepts in resolving symptoms of or enhancing adaptation to medical problems. Our activity is patient centered, holistic, and often highly attentive to systemic issues. Co-morbid psychiatric problems (e.g., PTSD) are often a necessary focus of intervention in addressing behavioral medicine issues. Staff behavior and systemic issues are often important targets of intervention, and eventual comfort and competence in communicating with physicians and allied professionals is a priority. For interns with substantial prior relevant clinical experience, the Behavioral Medicine rotation is an opportunity to develop independent practice skills in medical consultation and liaison, sound expertise in one or more specific medical disease paradigms, and advanced understanding of chronic pain issues and treatment strategies, in particular.

Psychoeducational or psychotherapeutic groups may be developed based on both intern interest and patient need.

Didactic Opportunities: The majority of didactic training comes from 1:1 supervision time with Dr. Mercurio-Riley, and is supplemented by psychology seminars.

Research Opportunities: Research opportunities may be available and can be discussed with Dr. Mercurio-Riley.

Structure of Supervision: Formal supervision takes place in two one hour individual meetings per week. Additional time is available as needed.
Center for Integrated Healthcare

Dr. Gregory Beehler

Prerequisites: Prior experience in primary care is helpful but not mandatory. Willingness to participate in a broad array of activities at a VA Office of Mental Health Services Center of Excellence is required. Interns who are interested this rotation should be aware that it requires a significant level of self-direction.

Setting, Tasks, and Workload: The Center for Integrated Healthcare (CIH) is a national VA Mental Health Center of Excellence with a unique mission of research, education, and implementation devoted to improving the health of Veterans by advancing Primary Care-Mental Health Integration (PC-MHI). This rotation is primarily focused on program implementation, evaluation, and research. More information about the Center is available here: [www.mirecc.va.gov/cihsn2/](http://www.mirecc.va.gov/cihsn2/)

Tasks will include activities related to on-going CIH research projects, educational program development, program implementation, and/or evaluation in a supportive research environment that includes senior and junior investigators with shared interests in PC-MHI. Assignments and workload will be tailored to the intern’s previous level of experience and competency in research related activities. Duties will reflect the typical activities involved with clinical research and program evaluation conducted by VA researchers, including opportunities to engage in professional and scientific writing.

Didactics: Interns are expected to complete and discuss selected readings on integrated healthcare weekly and attend videoconference offerings on integrated care as available.

Research Opportunities: Dr. Beehler’s research focuses on PC-MHI, provider behavior, and chronic pain. His recent work has focused on the following topics: developing a measure of protocol adherence among integrated care providers, promoting measurement-based care, and developing a brief intervention for chronic pain. He welcomes intern collaboration on professional presentations and publications.

While under the supervision of Dr. Beehler, Interns are expected to collaborate on his projects, but may also choose to work with other CIH researchers in areas such as post-deployment health for part of their rotation experience, as available.

Structure of Supervision: Formal supervision is scheduled for one hour per week. Additional informal supervision is typical, and tailored to the needs of the intern.
Prerequisites: Interest in geropsychology, dementia, chronic and terminal illness, staff and family support is preferred.

Setting, Tasks, and Workload: The Community Living Center (CLC) is a nursing home program at the Batavia VAMC that provides comprehensive care for Veterans who are severely disabled and/or chronically ill. It consists of 3 lodges of 25-30 residents each. CLC manages the following:

- Residents with complex medical problems that require long-term care.
- Residents with a terminal illness.
- Residents with relatively short-term problems in need of rehabilitation and discharge planning into the community.
- Residents staying short term for caregiver respite.

The psychology intern in the CLC rotation will function as a member of a multidisciplinary team that serves Veterans in the nursing home. Most residents are elderly and chronically ill. Diagnoses vary, with a majority of Veterans presenting with some type of neurocognitive disorder/dementia and/or mood disorder. Presenting issues include depression, anxiety (including PTSD), severe mental illness, coping with pain, cognitive functioning and capacity questions, substance use disorders, personality disorders, grief and loss, end-of-life issues and planning, and challenging behaviors.

The intern is encouraged to tailor the experience to meet his or her objectives. The intern will provide psychotherapy to Veterans and their family members or caregiver. The focus of treatment is to provide behavioral/cognitive behavioral and problem-solving therapy and recommendations framed within the biopsychosocial model of care. The intern will co-facilitate one reminiscence group weekly with a group of Veterans with dementia. The intern will also conduct psychological intake evaluations with Veterans including the screening of cognition, mood and behavior symptoms, and determine an appropriate plan of care. The intern will have the opportunity to complete cognitive and capacity evaluations. The intern will attend multidisciplinary team meetings weekly, and discuss cognitive, mood, and behavioral functioning in the context of a holistic care planning process. Staff support, education, and behavior management planning are also key components of this rotation.

Didactic Opportunities: Interns on this rotation are encouraged to attend continuing education opportunities through facility medical rounds, Batavia geropsychology trainings, monthly CLC mental health provider teleconferences, and other trainings provided through the education department as
applicable. He or she will be expected to complete, discuss, and integrate into practice selected readings on a range of topics in geropsychology.

**Research Opportunities:** There are opportunities for research, which are to be compatible with the current research and clinical activities in the CLC, and will be tailored to meet the intern’s interests, objectives, and availability. Possible topics include the evaluation of appropriate screening tools in the nursing home population, and evaluating the impact of psychosocial, behavioral, and educational interventions implemented in the CLC such as STAR-VA, an interdisciplinary person-centered approach to managing challenging dementia-related behaviors in CLCs.

**Structure of Supervision:** Supervision will be provided on a scheduled and as needed basis, with formal individual supervision scheduled one and a half to two hours throughout the week, and additional supervision provided during weekly team meetings and individually on an as needed basis.

Supervisees have consistently found this rotation to provide a richly rewarding training experience. This is due to the variety of Veterans served, the range of clinical activities and opportunities, including experiences in group therapy and behavioral management, and the opportunity to work within a multidisciplinary team.

**Geropsychology**

Dr. Kathryn Moss

**Prerequisites:** Interest in working with older adult, rehabilitation, and palliative care/hospice populations; interest in working with partners, family members/caregivers, and staff; as well as some experience with psychological testing and integrative report writing.

**Setting, Tasks, and Workload:** Interns involved in the Geropsychology rotation will have the opportunity to work with older adults in both outpatient and medical inpatient settings. Outpatient work includes cognitive and decision-making capacity assessments referred from various providers throughout the medical center (intern expected to complete 1-2 every other week for a ½ time rotation). Interns regularly provide feedback regarding these cognitive evaluations to patients and referring providers, and develop a working knowledge of the services and resources that are available to assist those with cognitive impairment. Interns may also have the opportunity to provide outpatient psychotherapy for older Veterans as well as their caregivers and bereaved partners/family members.

Medical inpatient work occurs via involvement in the Advanced Illness/Palliative Care Consultation Team (AI/PCCT). The AI/PCCT is a consult service for Veterans who have been diagnosed with an advanced and/or chronic progressive illness.
Veterans referred to the Al/PCCT have:

- Diagnosis of advanced cancer
- In a 6 month period, 2 or more admissions, 12 Emergency department visits or one admission to the Intensive Care Unit for Chronic Obstructive Pulmonary Disease or Congestive Heart Failure
- Progressive disease such as End Stage Renal Disease, Liver Disease, Cardiac Disease
- Debilitating illness such as Multiple Sclerosis, ALS, Dementia

The Al/PCCT program focuses on the management of physical, psychosocial, psychological and spiritual suffering and optimizing quality of life. The core Al/PCCT consists of a chaplain, nurse, physician, social worker and psychologist. Medical residents and palliative medicine fellows are closely involved with the team as well. The Al/PCCT is frequently consulted by other medical teams to assist with pain and symptom management, facilitate communication with medical providers and caregivers (e.g., establishing goals of care, decision-making assistance, care coordination), and provide emotional support to patients and caregivers. The majority of the clientele are older adults, although the Al/PCCT sees Veterans and caregivers of all ages.

Clinical work takes place on a CLC Hospice unit as well as on acute and general medical units. Available training opportunities include, but are not necessarily limited to, the following: individual psychotherapy, caregiver support and intervention, cognitive screening, decision-making capacity assessment, dementia-related behavior assessment and intervention, and staff training, support, and intervention. Interns frequently provide at least one staff educational program during the course of the rotation. Group therapy experience may also be available.

A key feature of the Al/PCCT training experience is interdisciplinary team participation and involvement. Interns are expected to consult and collaborate closely with an interdisciplinary team to address the psychological needs of patients and their caregivers. The team huddles daily to review new referrals as well as to discuss pertinent patient care issues. Interns are expected to participate in at least one of the team huddles per week. Interns may also participate in family meetings focusing on patient care. There are also monthly Palliative Care administrative meetings to address the broader needs of the Palliative Care service (e.g., program evaluation and management).

Didactic Opportunities: Many continuing education opportunities are offered via the department of Psychiatry and the division of Geriatric Medicine at the VA (e.g., Palliative Care journal club, Schwartz Rounds). There are also several interactive online didactic programs offered through various VA programs (e.g., VACO Geriatrics & Extended Care, Mental Health Services, Patient Care Services,
Geriatric Research Education and Clinical Center (GRECC), National Center for PTSD, etc. Offices) that interns frequently access. Less formal didactic experience takes the form of readings assigned by and discussed with the supervisor throughout the rotation.

**Research Opportunities:** Research is not typically emphasized on this rotation although research opportunities in the area of geriatrics are frequently available via the CLC rotation and VAWNY Center for Integrated Healthcare. Participation in research activities is supported and research-based practice is emphasized on the Geropsychology rotation.

**Structure of Supervision:** Formal supervision is scheduled for two hours per week. Regular informal supervision and consultation is also encouraged as needed.

**Post-Traumatic Stress Disorder Treatment Rotation - Batavia**

Drs. Caryn DiLandro and Veayla Williams

**Prerequisites:** None

**Settings, Tasks, and Workload:** The Jack H. Wisby, Jr. PTSD Treatment Center provides comprehensive treatment of Veterans diagnosed with war-zone related PTSD. The PTSD Center is located in our own building (Building 5) at the Batavia VA Medical Center. The quiet spacious grounds help veterans feel safe and enhance focus on recovery from trauma. The Batavia VA is a 30-45 minute commute from the Buffalo VA. Shuttle transportation is provided. This supportive setting helps individuals and families share how PTSD has affected them. The Treatment Program consists of a 30-bed residential unit (PRRTP), and outpatient care (PCT). The PRRTP is composed of short-term stabilization, evaluation, and crisis beds and a structured 26-day cohort intensive therapy program. Both residential and outpatient treatment consists of group, family, and individual therapy.

A typical set of clinical duties for an intern would include the following: Thorough psychological assessment including personality testing, diagnostic interviewing, review of records; an individual psychotherapy caseload of 1-2 outpatients and 2-3 residents; and co-facilitation of psychotherapy groups and psychoeducational modules. Opportunities for training in Exposure Therapy and observation of EMDR are included. In addition, focus on the elucidation of a psychologist's role in a multidisciplinary team, administrative and research endeavors are also integrated into the rotation. Of course, specific duties are determined by intern's interests, skills, and talents and the needs of the program. The PTSD Treatment Team is open to innovative ideas and the development of new specialized program components offered by our interns.
Didactic Opportunities: Regular attendance at in-house training and other PTSD-related workshops is encouraged. Interns are provided with a reading list and supervision includes review of literature and application to treatment population.

Research Opportunities: The PTSD Treatment Center is involved in ongoing research endeavors. There are opportunities for interns to initiate or join research projects. Current areas of interest include positive psychology conceptualizations and treatment intervention with this population.

Structure of Supervision: Supervision is provided on an ongoing and as needed basis. Formal supervision of therapy/evaluation case supervision is scheduled with the supervising psychologist for a minimum of one full hour per week with more supervision made available based on the needs of the intern. Interns will also participate in therapist case conferences, weekly treatment plan reviews, and daily review of psychotherapy group disposition.

**Primary Care**

Dr. Sheila Donovan

**Prerequisites:** Familiarity with medical settings and multi-disciplinary teamwork, diagnostic interviewing, and principles of behavior change are very helpful but not required.

**Setting, Tasks, and Workload:** Primary Care: As part of the multidisciplinary Primary Care Group, the intern will work with patients on a wide range of issues from coping with serious illnesses and losses to relaxation and stress management. Diagnostic interviewing and treatment recommendations are regularly requested. Integrated primary care skills include the ability to facilitate rapid, problem-focused, behaviorally oriented assessments and treatment plans, work in a non-traditional structure (i.e. 30’ sessions) with a focus on holistic health as the target for intervention. Primary care providers are considered primary “customers” in this model. Referrals include issues of traditional psychiatric concern (PTSD, anxiety, depression etc.) as well as behavioral medicine issues such as sleep and pain problems. Short-term, targeted counseling, motivational interviewing, and care management are frequent avenues of intervention. Consultation with medical providers on ways of improving adherence to medical recommendations and facilitating behavior change, as well as understanding behavior patterns will be included.

Women's Wellness Clinic: The Women's Wellness Clinic is a primary care clinic for female Veterans and spouses of Veterans. As in the other primary care settings, opportunities are available to interns to work individually with patients and to co-lead groups. Referrals include issues of PTSD, MST, depression, relationship issues, and behavioral medicine issues.

Finally, psychoeducational or psychotherapeutic groups are developed based on both intern interest and patient need. Group offerings have included Weight Management, Stress Management, Insomnia
Treatment, Depression Management, MST, and Bereavement. Additional topics are possible. Interns are expected to co-lead at least one group.

**Didactic Opportunities:** The majority of didactic training comes from 1:1 supervision time with Dr. Donovan, and is supplemented by psychology seminars.

**Research Opportunities:** Research is encouraged and can be discussed with Dr. Donovan.

**Structure of Supervision:** Formal supervision takes place in two half-hour individual meetings per week one one-hour group meeting per week with Dr. Donovan and post-doctoral fellows. Additional time is available as needed.

**Psychosocial Rehabilitation and Recovery Center (PRRC)**

Dr. Matthew Abrams

**Prerequisites:** None, however, previous experience working with individuals diagnosed with serious mental illness would be beneficial.

**Setting, Tasks, and Workload:** The PRRC is part of the Community/Day Programs branch of the Behavioral Healthcare Line. Other components of this division include the Mental Health Intensive Case Management Program (MHICM), the Health Care for Homeless Veterans Program, and Veteran’s Justice Outreach.

The PRRC treats Veterans who require greater psychological support than traditional outpatient contact can offer, but less than inpatient psychiatric treatment. Veterans can attend up to six days per week as needed. They typically are referred to the program to prevent inpatient psychiatric hospitalization or following an episode of inpatient psychiatric hospitalization. They also are often referred for adjunctive care if periodic therapy visits to the Behavioral Health Clinic are yielding insufficient results in their recovery.

The PRRC adheres to a recovery-based model and each Veteran works in conjunction with their recovery coordinator to establish an individualized recovery plan. Recovery plans are focused within eight dimensions of wellness: emotional, financial, social, spiritual, physical, occupational, intellectual, and environmental. Traditional modalities of therapy (individual and group therapy) are used in combination with Veteran empowerment and healing activities (peer led groups, anti-stigma activities, community integration, etc.). Various group therapy programs are offered throughout the day (e.g., CBT, PTSD Support Group, MBSR, Wellness Recovery Action Plan Group, DBT, Social Skills, etc.). About 150 Veterans are enrolled in the program with approximately 35-45 attending each weekday. Diagnoses cover the full range of DSM 5 disorders, including a large subset of the following diagnoses: MDD, Bipolar...
Disorder, Schizophrenia, Schizoaffective disorder, and OCD. Also, between a third to a half of the Veterans attending have comorbid polysubstance abuse disorders.

The PRRC is located two miles from the Medical Center and is readily accessible by public transportation. It is in a modern, pleasantly designed, large one-story building with good facilities for Veteran activities, and staff and intern office areas.

An initial "needs assessment" is conducted with the intern to target potential areas for clinical professional growth while in this rotation. A typical set of intern clinical duties would include the following: completing weekly initial consults and comprehensive psychosocial assessments, serving as the recovery coordinator for appointed Veterans, providing weekly individual therapy, and co-leadership (then possibly primary leadership) of a psychotherapy group. As the intern’s talents, interests, and program needs emerge, he or she can develop a specialized treatment group of their own design.

Trainees from social work, nursing, and psychiatry also rotate through the setting.

Didactic Opportunities: PRRC staff in-service programs are open to interns. Attendance at the psychology intern seminar series and intern supervision group at the medical center is required.

Research Opportunities: The site has served staff and students alike in their research interest areas. Examples of completed research include the clinical efficacy of quality improvement activity, quality of life and well-being in the seriously mentally ill, and employee wellness initiatives.

Structure of Supervision: Supervision is usually provided at least 2 hours per week. One full hour is set aside weekly for individual supervision. In addition to individual supervision, interns may receive triadic supervision (along with the psychology practicum student) and supervision through their attendance in one of the multi-disciplinary staff meetings.

Supervisees have consistently found this rotation to provide a richly rewarding training experience. This is due to the variety of patients served, the multitude of therapeutic activities and opportunities, the positive nature of the recovery model, and the prevailing positive and cooperative therapeutic atmosphere.

**Substance Use Disorder Specialty Treatment Services**

**Dr. Deborah Stringer**

**Prerequisites:** Familiarity with substance use disorder and/or PTSD treatment is desirable but not required.
Settings, Tasks, and Workload: The Substance Use Disorder Rotation offers a variety of clinical experiences including: Outpatient Clinic; 28-day, 18 bed co-ed Substance Abuse Residential Rehabilitation Treatment Program (SARRTP); Impaired Driver Program; Justice-Involved Veterans, Smoking Cessation Program; and Buprenorphine Clinic. Interns gain exposure to all program aspects and may focus their training in one or more areas, based on clinical interests. Veterans present with a range of substance use issues and comorbid issues (e.g. PTSD, MDD, Bipolar Disorder). Specific duties are determined by the intern's interests, skills, and talents and the needs of the program.

Training opportunities include:

- Intake Assessment, including Impaired Driver Assessments
- Individual Therapy
- Group Psychotherapy co-facilitation: residential groups- Mindfulness, Seeking Safety; Outpatient groups- SUD-PTSD, CBT; opportunity to develop a new group dependent on intern skills/interests. Interns also sample groups led by other staff in order to maximize their clinical experience.
- Training in Evidence Based Treatments for SUD and/or PTSD based on intern interests e.g. Seeking Safety for SUD/PTSD, Cognitive Processing Therapy for PTSD
- Participation in Veterans Court process
- Participation in Buprenorphine Clinic Program
- Consultation: referrals from inpatient psychiatric unit and medical units
- Outpatient and residential team meetings
- Understanding of the psychologist role in a multidisciplinary team

Didactic Opportunities: Attendance at in-house trainings and other SUD-related workshops is encouraged. Individual supervision provides the majority of didactic experience. Team meetings and psychology seminars serve as supplemental learning experiences.

Research Opportunities: Opportunities for clinical research are possible, dependent on intern skill and interest.

Structure of Supervision: Supervision will be provided on an ongoing and as needed basis, with regularly scheduled individual meeting times throughout the week as well as during weekly team meetings. Minimally, the intern will meet with Dr. Stringer individually for one and a half hours each week for a half-time rotation, with additional supervision provided in a team setting and individually on an as needed basis.
Buffalo Vet Center

Dr. Lauretta Lascu

Prerequisites: Familiarity with working with Veterans and trauma treatment is desirable but not required.

Settings, Tasks, and Workload: Vet Centers are community based and part of the U.S. Department of Veterans Affairs. The goal of the Vet Center program is to provide a broad range of counseling, outreach, and referral services to eligible Veterans in order to help them make a satisfying post-war readjustment to civilian life. The Vet Center Program was established by Congress in 1979 out of the recognition that a significant number of Vietnam era vets were still experiencing readjustment problems. Over the years Congress extended the eligibility to Veterans who served in other war zones, those who experienced Military Sexual Trauma (MST), and to provide bereavement counseling services to families of service members/Reserves/National Guard who died while on active duty.

Training opportunities include:

- Intake and Military History Assessment
- Individual Therapy with Veterans with a range of mental health issues including readjustment, PTSD, anxiety, depression, substance use
- Family Therapy with significant others and families of Veterans (including children at times)
- Couples Therapy with Veterans and their partners
- Group Psychotherapy co-facilitation; opportunity to develop a new group dependent on intern skills/interests
- Interns may also sample groups led by other staff in order to maximize their clinical experience
- Training in Evidence Based Treatments for PTSD and substance use disorder based on intern interests e.g. Cognitive Processing Therapy for PTSD; exposure to EMDR Therapy for trauma-related issues; Motivational Interviewing for substance use disorder; Seeking Safety for PTSD and substance use disorder
- Participation in Veterans Outreach Events
- Outpatient team meetings depending on schedule
- Understanding of the psychologist role in a multidisciplinary team
- Specific duties are determined by the intern's interests, skills, and talents and the needs of the program

Didactic Opportunities: Attendance at in-house trainings as available. Individual supervision provides the majority of didactic experience. Team meetings and psychology seminars serve as supplemental learning experiences.
Research Opportunities: Opportunities for clinical research are possible, dependent on intern skill and interest, and program needs.

Structure of Supervision: Supervision will be provided on an ongoing and as needed basis, with regularly scheduled individual meeting times throughout the week. Minimally, the intern will meet with Dr. Lascu individually for one and a half hours each week for a half-time rotation.

Psychology Internship at Buffalo VA Medical Center

Past Admissions, Placement and Support Information

Internship Program Admissions

Date Program Tables are updated: 8/2017

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

Describe any other required minimum criteria used to screen applicants:

1. U.S. citizenship. VA is unable to consider applications from anyone who is not currently a U.S. citizen. Verification of citizenship is required following selection. All interns and fellows must complete a Certification of Citizenship in the United States prior to beginning VA training.
2. A male applicant born after 12/31/1959 must have registered for Selective Service by age 26 to be eligible for any U.S. government employment, including selection as a paid VA trainee. Male applicants must sign a pre-appointment Certification Statement for Selective Service Registration before they can be processed into a training program. Exceptions can be granted only by the US Office of Personnel Management; exceptions are very rarely granted.
3. Interns and fellows are subject to fingerprinting and background checks. Match result and selection decisions are contingent on passing these screens.
4. VA conducts drug screening exams on randomly selected personnel as well as new employees. Interns and Fellows 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.
5. Doctoral student in good standing at an APA, CPA, or PCSAS accredited graduate program in Clinical or Counseling psychology. Persons with a doctorate in another area of psychology who meet the APA criteria for respecialization training in Clinical or Counseling Psychology are also eligible.
6. Approved for internship status by graduate program training director.
### Financial and Other Benefit Support for Upcoming Training Year*

<table>
<thead>
<tr>
<th>Benefit Description</th>
<th>Amount</th>
</tr>
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<tbody>
<tr>
<td>Annual Stipend/Salary for Full-time Interns</td>
<td>$24,635</td>
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<tr>
<td>Annual Stipend/Salary for Half-time Interns</td>
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<tr>
<td>Program provides access to medical insurance for intern?</td>
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<td><strong>If access to medical insurance is provided:</strong></td>
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<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>
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<td>Coverage of legally married partner available?</td>
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</tr>
<tr>
<td>Coverage of domestic partner available?</td>
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</tr>
<tr>
<td>Hours of Annual Paid Personal Time Off (PTO and/or Vacation)</td>
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</tr>
<tr>
<td>Hours of Annual Paid Sick Leave</td>
<td>104</td>
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<tr>
<td>In the event of medical conditions and/or family needs that require</td>
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<tr>
<td>extended leave, does the program allow reasonable unpaid leave to interns/residents</td>
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<tr>
<td>in excess of personal time off and sick leave?</td>
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<tr>
<td>Other Benefits (please describe): Health, vision and dental insurance are available at government rates; weekly didactics; 3 days of authorized absence for dissertation.</td>
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</table>

*Note. Programs are not required by the Commission on Accreditation to provide all benefits listed in this table*

### Initial Post-Internship Positions

<table>
<thead>
<tr>
<th>Position</th>
<th>2013-2016</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total # of interns who were in the 3 cohorts</td>
<td>13</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>2</td>
</tr>
<tr>
<td>PD</td>
<td>EP</td>
</tr>
<tr>
<td>Community mental health center</td>
<td>1</td>
</tr>
<tr>
<td>Federally qualified health center</td>
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</tr>
<tr>
<td>Independent primary care facility/clinic</td>
<td></td>
</tr>
<tr>
<td>University counseling center</td>
<td></td>
</tr>
<tr>
<td>Veterans Affairs medical center</td>
<td>4</td>
</tr>
<tr>
<td>Military health center</td>
<td></td>
</tr>
<tr>
<td>Academic health center</td>
<td></td>
</tr>
<tr>
<td>Other medical center or hospital</td>
<td>2</td>
</tr>
<tr>
<td>Psychiatric hospital</td>
<td></td>
</tr>
<tr>
<td>Academic university/department</td>
<td>1</td>
</tr>
<tr>
<td>Community college or other teaching setting</td>
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</tr>
<tr>
<td>Independent research institution</td>
<td></td>
</tr>
<tr>
<td>Correctional facility</td>
<td></td>
</tr>
<tr>
<td>School district/system</td>
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<tr>
<td>Independent practice setting</td>
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</tr>
<tr>
<td>Not currently employed</td>
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<tr>
<td>Changed to another field</td>
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<tr>
<td>Other</td>
<td></td>
</tr>
<tr>
<td>Unknown</td>
<td></td>
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</tbody>
</table>

*Note: “PD” = Post-doctoral residency position; “EP” = Employed Position*
Psychology Internship at Buffalo VA Medical Center

Psychology Internship Home  Training Philosophy, Goals and Internship Structure  Rotations  Past Intern Information  Our Faculty  Buffalo & Western NY

Psychology Training Staff

Matthew Abrams, Ph.D.
- Theoretical orientation: Integrative with concentration in acceptance/mindfulness-based and interpersonal approaches.
- Professional Interests: Recovery-oriented care. The use of mindfulness in both individual and group psychotherapy.
- Rotation: Psychosocial Rehabilitation and Recovery Center

Gregory P. Beehler, Ph.D., M.A.
- Theoretical orientation: Integrative: Cognitive-behavioral, Interpersonal, and Postmodern
- Professional interests: Behavioral medicine; implementation and evaluation of Integrated Primary Care; psychosocial oncology; chronic pain; program evaluation.
- Rotation: Center for Integrated Healthcare

Brad Brown, Psy.D.
- Clinical Psychology, Forest Institute, 2009; M.S. Counseling, Missouri State University, 2005.
- Theoretical Orientation: Client-centered, Interpersonal
- Professional Interests: Forensics, Couples, DBT Group
- Rotation: Behavioral Health Clinic

Kim Curyto, Ph.D.
- Theoretical Orientation: Cognitive-Behavioral, Bio Psychosocial, Person-Centered.
- Professional interests: Assessment and treatment of challenging behavior symptoms of dementia, evidence-based psychosocial and behavioral interventions including STAR-VA, interdisciplinary implementation of interventions, clinical and research program development.
Caryn DiLandro, Ph.D.

- Theoretical Orientation: Cognitive Behavioral Therapy
- Professional Interests: Treatment of PTSD, including evidence based treatments for PTSD, training and consultation for Cognitive Processing Therapy (CPT) VA dissemination, psychosocial rehabilitation and recovery focused services for Veterans struggling with PTSD
- Rotation: PTSD Residential Rehabilitation Treatment Programs (Men's and Women's)

Sheila Donovan, Ph.D., Co-Director of Training

- Theoretical orientation: Behavioral, cognitive, interpersonal and client-centered.
- Professional Interests: Assessment and counseling of individuals with dementia, developmental disabilities and mental illness; behavioral approaches with individuals and families.
- Rotation: Primary Care Clinic

Lauretta Lascu, Ph.D.

- Theoretical orientation: Cognitive-behavioral and humanistic/existential.
- Professional Interests: trauma/PTSD assessment and treatment; Substance Use Disorder(SUD) assessment and treatment; comorbidity of PTSD and SUD; impact of trauma on couples and families.
- Rotation: Buffalo Vet Center

Denise Mercurio-Riley, Ph.D., Co-Director of Training

- Theoretical orientation: Cognitive-behavioral, Interpersonal, and Client-Centered
- Professional interests: Psychosocial adjustment to chronic health conditions; pain management; acceptance of disability; caregiver adjustment; teaching and supervision.
- Rotation: Primary Care Pain Management
Kathryn Moss, Ph.D.

- Theoretical Orientation: Integrative, with a focus on cognitive-behavioral, interpersonal, and client-centered approaches.
- Professional Interests: Intervention, assessment, & consultation in long-term care and palliative care settings; cognitive and decision-making capacity assessment; geropsychology training; assessment and treatment of geriatric depression.
- Rotation: Geropsychology

Deborah Stringer, Ph.D.

- Clinical Psychology, University of Iowa, 2012; BA, University of Chicago, 2004
- Theoretical Orientation: Acceptance and Commitment Therapy
- Professional Interests: Substance use disorder treatment, personality assessment, neuropsychological assessment
- Rotation: Substance Use Disorders Treatment

Veayla Williams

- Theoretical Orientation: Integrative with concentration in Existential and Cognitive Behavioral Therapy
- Professional Interests: Treatment of PTSD, trauma-focused art therapy, and issues surrounding social inequity
- Rotation: PTSD Residential Rehabilitation Treatment Programs (Men's and Women's)

Psychology Internship at Buffalo VA Medical Center

Psychology Internship Home  Training Philosophy, Goals and Internship Structure  Rotations  Past Intern Information  Our Faculty  Buffalo & Western NY

Buffalo and Western New York

**General:** The population of the Buffalo Metropolitan area is approximately 1.3 million people, with well over 250,000 of those residing in the City of Buffalo*.

**Location:** The City of Buffalo is bounded on the west by Lake Erie and the Niagara River. The 36 mile long Niagara River, located between Lake Erie and Lake Ontario, is the source of Niagara Falls, one of the great scenic wonders of the world. Additionally, the greater Buffalo area has a varied terrain, ranging from flat to mountainous. Our beautiful Southern Tier and Niagara Regions are hilly with spaces for hiking and camping. There is a great variety in living styles available, from modern urban flats in walkable
neighborhoods to lake shore homes to rural farms. For those living in the City or inner suburbs, the average commute time is approximately 20 minutes each way. For those in the outer suburbs or rural areas, the commute is typically no more than 40 minutes. It is worth noting that Buffalo is centrally located, i.e. within a day's drive of many large urban centers (including New York City, Boston, Philadelphia, Chicago). Toronto is just one and one-half hours away, so bring your passport to visit our Canadian neighbors to the north, whether you walk, drive, or bike across one of the international bridges! And, there is easy access to the Buffalo Niagara International Airport for those travelling from further destinations.

**Weather:** Buffalo is fortunate in having four distinct seasons. Our summer temperatures range from 75-85, with few days over 90 degrees. Refreshing breezes drift from Lake Erie over fine harbors and beaches along both the American and Canadian shore, convenient for summer sports like boating, fishing and swimming. Autumn is quite long and colorful due to the changing foliage. In winter, Buffalo does get snow, mainly in the "snow belt" south of the city where major ski resorts are located for skiing, snowboarding and snow tubing. City Residents are often found cross-country skiing in Delaware Park or ice skating in the curious downtown rinks. As the Chamber of Commerce says, "we don't sit around all season watching it fall. We ski it downhill, we ski it cross-country, we snowshoe it, we backpack in it, etc." Buffalo residents consider that the seasonal changes are an invigorating part of the variety of life Buffalo offers.

**Housing:** In a recent nationwide survey of 18 urban areas, Buffalo was the 4th least expensive in housing costs. There is a wide variety of apartments available at reasonable rents. Because the DVA Medical Center is across the street from the SUNY at Buffalo* (UB) campus, student apartments are available within walking range of the Medical Center. For those with a car, there are many apartment complexes within a 5 mile radius of the Medical Center.

**Education:** The DVA Medical Center is located directly across the street from the South Campus of SUNY at Buffalo. SUNY at Buffalo has approximately 25,000 students on its three campuses, the North Campus being located in Amherst, NY is approximately 3 miles away, and the Downtown Campus is 6 miles away. Noteworthy for prospective interns is that there are two APA-approved training programs at UB: the Clinical Psychology track of the Department of Psychology and the Counseling Psychology track of the Department of Counseling and Educational Psychology. A shuttle bus system transports students and faculty between the North and South campuses. In addition to SUNYAB, there are six other four-year colleges on the Western New York area representing a wide range of private and public educational opportunities.

**Health Sciences:** In the metropolitan area there are approximately 25 general or specialized hospitals. Included in these facilities are two State psychiatric facilities, the Buffalo Psychiatric Center and the West Seneca Developmental Center. The Buffalo Niagara Medical Campus includes Buffalo General Hospital,
the University at Buffalo’s Center for Bioinformatics, Roswell Park Cancer Institute*, and several other programs, in a single clinical, research and academic complex. Women's and Children's Hospital provides pediatric and maternity care. The state-funded Research Institute on Addictions conducts a wide range of basic and applied research on addictions. As the DVA Medical Center is a teaching hospital, there are regular seminars and symposia presented by other disciplines (palliative care, oncology, medicine, neurology, primary care) which are available for interested interns.

**Leisure:** There are facilities for both spectator and participant sports in Western New York. For spectator sports, the Buffalo Bills* play at Ralph Wilson Stadium. The Buffalo Sabres* provide exciting hockey entertainment at the SBC Arena. The AAA league baseball team, the Bisons*, is located in Coca Cola Field, a beautiful, nationally-recognized stadium in the heart of downtown Buffalo. Division I and II sports are played at several area colleges.

Participant sports are many and varied. Because of the location, there are many facilities for water sports, including fishing and boating. There are also many facilities for winter sports. For instance, there are 20 ski areas within 90 miles of Buffalo, 12 of which are only 45 minutes from downtown. Facilities for racquet sports are also in good supply. There are 84 outdoor tennis courts scattered throughout the City of Buffalo. There are also a number of clubs available for indoor tennis, squash, racquetball, aerobics, and even dodgeball!

Locals and frequent visitors to Buffalo perhaps best regard the area as offering a wide repertoire of good and affordable restaurants as well as music venues. In fact, Buffalo is known as a haven for both foodies and music lovers, including venues such as the Colored Musicians Club, the Music is Art Festival, Porch Fest, and a host of other activities. In recent years, the city has hosted a popular series of weekly free or inexpensive concerts (ranging from rock, country, hip-hop and folk) throughout the summer at Canalside. Buffalo’s eateries range from food trucks (with Food Truck Tuesdays in Larkin Square) to high end restaurants, offering a variety of choices for a variety of budgets.

**Parks:** When urban quality of life is evaluated, Buffalo is always highly rated for its park system. Designed by Fredrick Law Olmsted, the designer of New York’s Central Park, the city park system embraces over 3,000 acres of park land, stretching from the South end of the City with South Park and Cazenovia Park, through Delaware Park and Forest lawn Cemetery, to the east with Martin Luther King Junior Park and Northwest to Riverside Park, to name a few.. The park system contains numerous facilities such as swimming pools, golf courses, baseball diamonds, etc. Another 2,000 acres of parks, adjacent to Niagara Falls, offer spectacular views of the river and the Falls. Other state parks near Buffalo offer facilities for hiking and camping. The largest of these is Allegany State Park, whose 65,000 acres offer 100 miles of hiking trails. Letchworth State Park and the Allegany National Forest are also easily accessible from Buffalo. If gardening is of interest to you, Buffalo has the largest free garden tour in the United States with the Buffalo Garden Walk, which has international acclaim.
Cultural Activities: Buffalo offers fine facilities for art, music and theater. The Albright-Knox Art Gallery* enjoys a world-wide reputation for its permanent collection of contemporary painting and sculpture, and often as a site for touring exhibitions from New York or Washington. The Buffalo Philharmonic Orchestra* features symphony concerts and pop concerts from October to May at Kleinhans Music Hall, which is architecturally famed for its acoustical qualities. The orchestra also plays summer concerts in a variety of settings, including local parks. Theater is well represented at various facilities throughout Western New York. One spectacular theater is Shea's* Buffalo, located in the heart of Buffalo's Theater District. The 3,000-seat facility has been painstakingly restored to its original elegance as designed by Tiffany in 1926. There are several repertory theaters in the area and independent theater groups offering entertainment throughout the theater season if you are interested in more intimate settings. Additionally, the local colleges and Universities offer a host of plays and concerts throughout the year. Many visitors are drawn to Buffalo's architectural heritage, including several prized municipal buildings and homes built by Frank Lloyd Wright. The turn of the century Roycroft arts and crafts movement, centered at a campus in nearby East Aurora, is also a regional attraction. Buffalo also currently hosts several annual arts and cultural festivals, including the Allentown Arts Festival, Taste of Buffalo, Greek Festival, Italian Festival, and the Chicken Wing Festival.

Applicants invited to interview will be provided a list of nearby moderately priced hotels that have been recommended by previous applicants and visiting colleagues.