Dear Prospective Intern,

The Training Committee at the Spokane VAMC Doctoral Psychology Internship is pleased that you are interested in our program. We hope that the enclosed materials will provide you with more information regarding the uniqueness of our program.

The Spokane VAMC Doctoral Psychology Internship provides interns with the opportunity to experience rural practice during the training year. Interns will be trained in at least two different evidence-based practices (Acceptance and Commitment Therapy, Prolonged Exposure, Cognitive Processing Therapy, Motivational Interviewing, Cognitive Behavioral Therapy for Insomnia, Interpersonal Therapy for Depression, Integrative Behavioral Couples Therapy) in the major general behavioral health rotation and minor rotations including the PTSD Clinical Team, Primary Care Mental Health Integration, Neuropsychology, the Community Living Center, the Inpatient Psychiatric Unit, and the Substance Abuse Treatment Program. There are opportunities to work with supervisors who are specialists in a variety of theoretical orientations including psychodynamic, cognitive behavioral, and client-centered, in addition to those trained in the above-mentioned EBPs.

Past interns have consistently provided feedback that they enjoyed the ability to work within so many different interdisciplinary teams. They valued the breadth of theoretical orientations to which they were exposed and felt relationships with supervisors were collegial and supportive. Our faculty are committed to providing excellent clinical training and supervision while facilitating professional growth in a collaborative, supportive environment.

In addition to the training opportunities, eastern Washington is a great place to live. Spokane offers an abundance of outdoor activities such as skiing, fishing, hiking, boating, rafting, and golfing. In addition, it is a bike-friendly community. Located just a few short hours from more major metropolitan areas (Seattle, Portland, Boise), Spokane boasts a quieter way of life with less traffic and less rain! Spokane offers a greater selection of amenities. It is the hub for a large surrounding area and boasts excellent medical facilities as well as first-rate dining, entertainment, and shopping.

We hope that you find the following pages informative and helpful as you begin the decision process of choosing an internship. We wish you all the best in your internship application process.

Sincerely,

The Training Committee
Local Information:

The Spokane VA Medical Center and its two associated Community Based Outpatient Clinics (CBOCs) have a large catchment area that includes urban, rural, and highly rural areas of eastern Washington, western Montana, and northern Idaho. More than 60% of the Veterans served at our hospitals reside in rural areas, including our surrounding CBOC communities of Wenatchee, WA and Coeur d'Alene, Idaho.

Spokane VAMC is part of the Veterans Integrated Service Network (VISN) 20, which also includes the Seattle VA and Portland VA Healthcare Systems. Spokane is the metropolitan center of the Inland Northwest region with a population of over 200,000. It is located on the Spokane River and is 110 miles south of the Canadian border, approximately 20 miles from the Washington-Idaho border, and 271 miles east of Seattle. It is identified as a "green" community with easy access to a vast array of outdoor recreational activities. The town motto, “Near Nature, Near Perfect,” speaks to a blend of accessible natural highlights with regional city-center resources. Spokane also offers shopping, dining, arts, sports, and theater. For more information, see https://www.visitspokane.com/ and https://greaterspokane.org/relocation-guide/.

Our internship provides the opportunity to receive high quality training in a geographic setting that we believe is breathtaking.

If you have any questions, we encourage you to contact us. We look forward to hearing from you.
Accreditation Status:
The Spokane VAMC Doctoral Psychology Internship was established in 2012 and became fully accredited by the American Psychological Association in 2015. The next APA site visit will occur in 2022. Questions related to the program’s accreditation status should be directed to the Commission on Accreditation:

Office of Program Consultation and Accreditation
American Psychological Association
750 1st Street, NE, Washington DC 2002
Phone: (202) 336-5979  E-mail: apaaccred@apa.org
Web: http://www.apa.org/ed/accreditation

Application & Selection Process:
VA policy requires internship funding to be provided only to students who are U.S. citizens and enrolled in APA-accredited clinical or counseling psychology doctoral programs. In addition, we require completion of the “Academic Program’s Verification of Internship Eligibility and Readiness” form to verify applicants’ readiness and recommendation for internship by their Clinical Training Director. To be considered for interview or ranking, applicants are required to have at least 600 hours of practicum experience, with a minimum of 500 hours of direct service. Applicants with training backgrounds in adult psychotherapy and clinical assessment and experience or interest in rural programming will be given preference. Additionally, we are committed to ensuring a range of diversity among our training classes with respect to veteran status. All things being equal, consideration is given to applicants representing elements of diversity including, but not limited to, age, disability, ethnicity, gender, gender identity, language, national origin, race, religion, culture, sexual orientation, social economic status, and military service.

Application Process:
To apply, submit the following materials electronically through the online APPIC Application for Psychology Internships:

1. APPIC Application for Psychology Internship
2. Curriculum vita
3. Three letters of recommendation

Important Eligibility Requirements for All Internship 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 the draft 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 U.S. Office of Personnel Management; exceptions are very rarely granted.
3. Interns 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 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.

Internship applicants must also meet these criteria to be considered for any VA Psychology Internship Program:

1. Doctoral student in good standing at an APA-accredited graduate program in clinical or counseling psychology. Persons with a doctorate in another area of psychology who meet the APA criteria for re-specialization training in clinical or counseling psychology are also eligible.
2. Approved for internship status by graduate program training director.

**Match Number:**

221511

**Important Deadlines:**

Application Deadline: October 31, 2019
Interview Notification: November 8, 2019
Interviews: Monday, December 9, 2019 or Wednesday, December 11, 2019

In person interviews are strongly recommended, however, a video interview can be scheduled.

**Candidate Interviews and Selection:**

The Training Committee will review all applications based on the following criteria:

1. Applicant’s interest and experience as it relates to the VHA, facility, and training program mission.
2. Clinical competency.
3. Cultural humility and interest in rural populations.
4. Academic, research, and professional achievements.

Candidates selected for interview will be contacted by email to schedule an in-person interview. We have two dates when we conduct interviews on-site at the Spokane VAMC. The interview day lasts from 8:00am-2:00pm. Included in the day are formal interviews, as well as an opportunity for applicants to speak with current interns and get to know the faculty. The primary purpose of the interview is to assess the candidate's professional experiences, areas of training in which the candidate would like further development, and the match between the program and the candidate’s professional interests.

**Psychology Training:**

The Spokane VAMC Doctoral Psychology Internship offers four internship positions in eastern Washington. The internship is a 52-week, full-time program. Clinical experiences will emphasize diversity and will promote development of skills for serving in urban, rural, and highly rural settings. The program offers dynamic and extensive clinical experience with a major general behavioral health rotation in the Mental Health Clinic, and opportunities to develop minor rotations (1 day per week) in specialty clinics such as the PTSD Clinical Team (PCT), Neuropsychology, Community Living Center, Primary Care Mental Health Integration, Inpatient
Psychiatric Unit, and Substance Abuse Treatment Program. This internship program has 14 licensed psychologists representing a broad range of theoretical orientations and certification in Evidence-Based Psychotherapy (EBP), including Cognitive Processing Therapy (CPT), Acceptance and Commitment Therapy (ACT), Prolonged Exposure (PE), Cognitive Behavioral Therapy for Insomnia (CBT-I), Cognitive-Behavioral Therapy for Chronic Pain (CBT-CP), Interpersonal Therapy for Depression (IPT), Integrative Behavioral Couple Therapy (IBCT), and Motivational Interviewing (MI). Interns will be trained in EBPs by psychologists certified in these practices.

Training Model and Program Philosophy:

The mission of the Spokane Internship Program is to provide comprehensive generalist training in professional psychology based on the practitioner-scholar model. Our primary goal is to develop an intern's knowledge, skills, and abilities through direct, supervised patient care and integrated educational and scholarly opportunities that will prepare them for licensure, postdoctoral residencies, and entry-level VA positions, particularly those with a rural focus. While interns will spend the majority of their time in direct patient care, the intern's training goals are of primary importance and take precedence over workload demands. Our program's emphasis on the application of current scientific knowledge to professional delivery of services is reflected in the content of training experiences, which include training in evidence-based practices, exposure to varied treatment settings, application of clinical research, and participation in didactics offered through the VA and from outside experts. Our goal is to provide each intern with a broad range of training experiences in assessment, intervention, and consultation with a wide array of patients in medical and mental health settings.

Program Structure:

Interns will spend the first week of internship being oriented to the VA, the Behavioral Health Service lines, and to the Psychology Internship. Interns will meet with the Co-Training Directors and will be given a detailed overview of the program and a list of competencies required for successful completion of the internship. Each intern will also complete a self-assessment of their current interests, theoretical orientation, and experience in the field of psychology, which will help inform rotation choices and provide a baseline for gauging progress and growth over the year. Interns will have the opportunity to discuss possible minor rotation placements with each of the supervising psychologists. At the end of the week, interns will meet with the Co-Training Directors and make their respective placement choices.

Supervisors assist in selecting patients, making referrals, facilitating intern participation in multi-disciplinary case management meetings, and providing weekly individual and group supervision. Interns will obtain a minimum of four hours per week of supervision with at least two of those hours in direct face-to-face individual supervision. Interns' experiences and opportunities will follow a step-wise progression increasing in case complexity with a trajectory of increased clinical independence as their exposure, education, supervision, and ability demonstrates.

Interns will participate in a weekly Topics in Psychology Seminar, which is a two-hour didactic intended for professional development in a wide variety of areas related to mental health. Interns will also participate in other pertinent clinical and educational opportunities including guest lectures, case conferences, complex multi-disciplinary case management meetings, Behavioral Health Integration Program (BHIP) meetings, and psychology training committee meetings. Interns will present a minimum of two formal presentations to the BHS service, one of which is focused on demonstration of knowledge and integration of cutting-edge research in
the clinical assessment and/or treatment of an actual patient. The second presentation can be in an area of clinical interest, staff training, or program development.

Interns will participate in weekly group supervision meetings during which the interns can engage in collegial discussions. These weekly meetings are meant to provide the interns with time to collaborate and discuss internship issues, concerns, challenges, and successes. In addition, each intern will serve a three-month term as a psychology training committee representative. The training committee representatives communicate intern feedback to the training committee and provide input on programmatic changes.

Interns will be evaluated quarterly throughout the internship by their major and minor rotation supervisors. In addition, intern progress is continuously reviewed over the course of the internship by the intern’s clinical supervisors for completing major and minor rotations. Interns will receive direct feedback through supervision and with formal assessment of their progress quarterly. Formal evaluations include assessment of performance on both major and minor/elective rotations. Successful completion of the internship will indicate competence for continued work in professional psychology as well as the VHA system.

Interns will be asked to complete an evaluation of their internship experience, including supervision, rotations, and didactics. An exit interview will be scheduled with the interns and the Co-Training Directors. Interns will be asked to participate in an alumni program that will provide information to the internship about post-internship professional employment.

Training Experiences: Interns are required to complete a year-long major rotation in the general Behavioral Health Service located at the Spokane VAMC. Below is a list of all elective rotations that are currently available. Interns can select up to four placements for their minor rotations from the following list. Interns will be involved in up to two minor rotations at a time, with each minor rotation lasting 6 months. The specific program developed by an intern will require the approval of the Co-Training Directors.

Major Rotations:

Mental Health Clinic (MHC): Interns gain experience with an array of mental health disorders as a clinical team member in the outpatient MHC. This clinic serves urban and rurally-located veterans in the Spokane area as well as veterans from across the region referred for psychiatric treatment. Primary duties include clinical intakes, individual, and group therapy, assessment, interdisciplinary treatment team planning, patient feedback, and exposure to couple therapy if interested. Interns participate in weekly multidisciplinary team meetings presenting cases and conducting treatment planning. Interns receive training and supervision using evidence-based interventions with a broad range of psychological disorders and symptom severity, such as mood disorders, anxiety disorders, psychotic disorders, somatoform disorders, etc. Interns may gain experience working with Hispanic and Native American populations as well as veterans from the full range of ages and service eras. When appropriate, interns follow inpatient veterans into the outpatient setting and vice versa to provide continuity of care. Supervisors: Kenneth Cogswell, Ph.D., Julia Mackaronis, Ph.D., Jeffrey Schloemer, Psy.D.

Minor Rotations:

Neuropsychology Program: The Neuropsychology Program provides interns with neurocognitive assessment experience with patients who have a wide variety of medical and
psychiatric disorders such as neurodegenerative disorders, traumatic brain injury, cerebral vascular accident, epilepsy, movement disorders, somatoform disorders, psychosis, and complex medical conditions. The training objectives for interns in the neuropsychology rotation are to gain knowledge of brain-behavior relationships, establish a basic level of understanding of neuropsychological practice, reach an intermediate level of understanding in interpreting research approaches and findings, and become aware of the emotional consequences of neuropathology and appropriate types of intervention. Traditionally, successful trainees in this rotation have had some previous assessment experience outside of the classroom setting. Successful trainees are detail-oriented with excellent writing skills and demonstrate a strong interest in learning more about brain-behavior relationships. The training goals for this rotation will be informed by the trainee’s previous level of assessment experience. Trainees with extensive test administration experience will likely focus on test interpretation, case conceptualization, differential diagnosis, and refining their report-writing skills, while trainees who have had more limited test administration experience will likely focus on learning test administration, scoring, and basic interpretation. Interested trainees should be aware that completing this rotation will NOT provide them with the requisite training to practice as a neuropsychologist or to provide neuropsychological assessment services in their future careers. Additionally, this minor rotation does NOT meet Division 40/Houston Conference guidelines for predoctoral training in neuropsychology. Supervisors in this rotation have completed two-year neuropsychology postdoctoral fellowships and are ABPP-CN eligible. Supervisors: Melissa Swanson, Ph.D.; Ginny Kleman, Psy.D.

**Substance Abuse Treatment Program (SATP):** The SATP rotation will focus on providing psychological services to veterans with substance abuse and co-occurring disorders in an intensive outpatient setting. The rotation includes opportunities for individual and group psychotherapy utilizing evidence based practices. Interns are part of an interdisciplinary team and have the opportunity to participate in treatment meetings as well as provide consultation to other team members. Supervisor: Sarah Oslund, Ph.D.

**PTSD Clinical Team (PCT):** Interns on the PCT rotation work with veterans diagnosed with PTSD of all service eras in a specialized PTSD outpatient clinic. Interns work with rural, highly rural, and urban veterans with a wide variety of clinical presentations and traumatic experiences, particularly combat and military sexual trauma. Primary duties include assessment with attention to differential diagnosis, treatment planning, individual therapy, and group therapy. Interns may participate in weekly multidisciplinary team meetings presenting cases, reviewing recent literature, and conducting treatment planning. Interns receive training and supervision in evidence-based psychotherapy for PTSD, with emphasis on Prolonged Exposure. Interns on the PCT rotation also have opportunities to facilitate and co-facilitate psychotherapy groups and provide psychotherapy to veterans with PTSD and co-occurring Substance Use Disorders. Supervisors: Brandy Henson, Ph.D., Eric Krueger, Ph.D., and Patrick Metoyer, Ph.D.

**Primary Care Mental Health Integration (PCMI):** This rotation provides interns with the opportunity to experience how psychologists function when embedded directly in a primary care setting. The short-term, problem-focused approach that defines this area will be taught, as well as how to work closely with physicians, nurses, and other associated professionals to provide quick access to veterans in need of health-related interventions. Short-term interventions focusing on depression/stress management, adherence to medical advice, coping with health-related anxiety, and evidence based treatment for insomnia are taught. In addition, motivational interviewing techniques focused on helping patients change unhealthy behaviors are emphasized. Supervisors: Macey Wolfe, Ph.D., and Connie Raybuck, Ph.D.
Community Living Center (CLC), Geriatric/Hospice/Palliative Care Rotation: The Mann-Grandstaff VAMC offers short-term residential care, inpatient rehabilitation services, and hospice care in a 38-bed facility. Veterans receiving rehabilitation care tend to be middle-aged or older, and frequently have complex, co-morbid medical, psychiatric, substance abuse, and psychosocial problems. The CLC rotation provides an intern with experience working on an interdisciplinary team of providers from medicine, nursing, social work, pharmacy, dietary services, physical therapy, occupational therapy, recreation therapy, chaplaincy, and speech/language pathology. These providers work together to treat veterans with critical and/or chronic illness. Veterans served by the CLC are medically complex and need intensive interdisciplinary management due to the complexity and/or severity of their health problems, pain management and/or end-of-life. Addressing the psychological components of quality of life considering chronic illness and/or end-of-life is the focus. Due to the nature of chronic illness, interns learns to be organized and flexible with scheduling so as to best provide veteran-centered care. The psychologist’s and intern’s roles include: (1) assessing the mental health and cognitive needs of Veterans, using clinical interview and brief psychological screens or assessments; (2) brief treatment planning and education; (3) provision of brief and long-term individual, couples, and family psychotherapy; (4) consultation with medical team; and (5) participation in interdisciplinary team care planning. Interns have the opportunity to participate in all of these components of care. Interns have the option of starting a group related to chronic illness or other health related topic. Supervisor: Darrelle M. Volwiler, Ph.D.

Acute Psychiatric Unit: The APU rotation provides opportunities to provide brief interventions to Veterans using both individual and group formats. Interns may conduct psychological evaluations depending on patient need to help inform post-discharge planning. Interns also have opportunities to conduct suicide risk assessments and safety plans. Finally, interns on this rotation have ample opportunity to work and consult with the inpatient interdisciplinary team that includes psychiatrists, a psychiatric nurse practitioners, a social worker, psychiatric nurses, pharmacists, peer support specialists, and students from various other disciplines. Supervisor: Emily Crawford, Psy.D.

Requirements for Completion: Before and during orientation week, interns’ prior training experiences will be reviewed to identify areas of strengths and weaknesses to facilitate the development of a training program that best meets the specific training needs of each intern. In keeping with our generalist philosophy, interns are encouraged to address those areas in which they have had limited experience (e.g., working with severe mental illness or substance abuse, cognitive assessment with the use of neuropsychological instruments or personality testing, development in theoretical orientation).

*It is expected that upon completion of the program all interns will demonstrate competence in the following nine general domains:*

1. Psychological Interventions
2. Psychological Assessment
3. Ethical/Legal Standards
4. Individual and Cultural Diversity
5. Professional Values, Attitudes, and Behaviors
6. Communication and Interpersonal Skills
7. Supervision
8. Consultation and Interprofessional/Interdisciplinary Skills
9. Research
At the beginning of the training year, each intern will receive a copy of the standardized performance evaluation that will be used throughout the course of the internship year. The evaluation details specific competency elements within each of the domains listed above. A minimum level for each competency is expected. Each intern will receive details of expectations at the beginning of internship. Informal feedback is provided throughout the year, as well as formal quarterly evaluations with all supervisors.

Selection of minor rotations is based on the individual's interest as well as training needs. At the beginning of the internship year, each intern meets with the Co-Training Directors to develop a plan for training which includes selection of minor rotations. After the completion of the first six months, progress and needs are again evaluated and appropriate adjustments are made to major rotation supervisors and minor rotation selections for the second six months. The Co-Training Directors work directly with the interns to determine what will best meet the trainee’s needs.

In summary, the Co-Training Directors remain in close contact throughout the internship year and meet formally with the interns on a quarterly basis to discuss their progress, provide meaningful feedback, and develop training and supervision which will promote each intern’s ability to master the nine domains of competence. Toward this goal, both Co-Training Directors participate in weekly group supervision sessions with all four interns.

**Facilities and Training Resources:** Interns will be provided with office space and computers necessary for patient care and administrative responsibilities. The Behavioral Health Service at the Spokane VAMC moved into a state-of-the-art, 16,000-square-foot outpatient Mental Health Building on VA campus grounds in May, 2012, and each intern has their own office. Most Spokane psychologists are currently housed in this building, along with many other behavior health outpatient staff. Interns will have full access to the VA Medical Library services and VA resources for clinical work and research. We also have a comprehensive Psychology and Neuropsychology Assessment Lab, which includes a wide variety of assessment instruments, scoring programs, and statistical software.

**Administrative Policies and Procedures:**

**Salary and benefits:** The internship year begins August 3, 2020. The internship is full-time, certifying 2080 hours of supervised experiences for internship completion. Interns earn thirteen days of annual leave and thirteen days of sick leave during the course of internship. In addition, they receive federal holidays off. Interns are allowed up to five days of authorized leave to attend educational conferences, job interviews, or dissertation meetings (this time does count toward the 2080 supervised hours). Internship stipend will be calculated biweekly based on an annual stipend amount of $26,166. Interns are provided opportunities to obtain subsidized health insurance. The Authorized Leave policy is consistent with other VA Psychology training programs.

**Due Process:** All trainees are afforded the right to due process in matters of problematic behavior and grievances. Interns will receive a copy of the due process document, and it will be reviewed during orientation. A copy of our due process policy is also available on request.

**Privacy Policy:** We collect no personal information from you when you visit our website.
Self-Disclosure: We do not require interns to disclose personal information to their clinical supervisors except in cases where personal issues may be adversely affecting an intern's performance and such information is necessary to address these difficulties.

Training Staff

Not pictured: Eric Krueger, Ph.D., Macey Wolfe, Ph.D.

Ken Cogswell, Ph.D., Co-Training Director, Mental Health Clinic (MHC) Staff Psychologist: Dr. Cogswell obtained his Ph.D. from the University of Montana in 1988, and completed his internship at Connecticut Valley Hospital. He spent the first four years of his career working at Kern County Mental Health in Bakersfield, CA, then took a position with the VA at a new Community-Based Outpatient Clinic in the same area. After seven years, he transferred to the Spokane VAMC, and for the first 18 months his primary duties consisted of completing Compensation and Pension exams. Following this, he became a psychologist in the Mental Health Clinic, where his job entailed a variety of responsibilities, including individual and group therapy, completing annual evaluations of VA police officers, running the Employee Assistance Program, serving as the Chair of the Pain Committee, and mentoring psychologists new to VA. He became the Co-Training Director of the new Psychology Internship Program in 2011 while continuing to provide individual therapy to veterans. Dr. Cogswell has completed VA-sponsored training in both PE and ACT, and works mostly from the latter perspective with his clients.

Sarah Oslund, Ph.D., Co-Training Director, Psychologist/SATP Program Manager: Dr. Oslund obtained her Ph.D. from the University of Texas Southwestern Medical Center at Dallas in 2009. She completed her internship through UT Southwestern, with half of her internship
spent working at the Victim Intervention Program at Parkland Hospital providing psychotherapy to survivors of trauma and the other half completing psychoeducational and psychological evaluations for children and adults at the Shelton School in Dallas. Since that time Dr. Oslund has worked extensively with pain management, interdisciplinary care, personality assessment, and trauma. Most recently her focus has shifted more toward the treatment of trauma and personality disorders. Her other professional interest is in training. Dr. Oslund has been with the VA since 2013 serving as team lead for the Walla Walla Outpatient Mental Health and PTSD Coordinator until December 2017 when she joined the Spokane team as the Substance Abuse Treatment Program Manager. Dr. Oslund approaches patients from a psychodynamic perspective while maintaining a focus on evidence-based interventions and behavioral change.

Emily Crawford, Psy.D., APU Psychologist/Programming Coordinator: Dr. Crawford earned her Psy.D. in Clinical Psychology from Pacific University’s School of Professional Psychology in 2011. She completed her internship and post-doc at La Frontera Arizona community mental health agency, working in both residential substance abuse treatment and outpatient clinics in Tucson. She then moved to Spokane, where she taught in the undergraduate psychology department at Gonzaga University and worked in a private practice doing individual and family therapy as well as some pre-surgical pain and bariatric assessments. She began working for the Spokane VA in June 2017 in the inpatient psychiatric unit facilitating psychotherapy groups, individual therapy, and occasional assessments. A minor rotation on the unit was recently developed, and includes opportunities for organizational dynamics of a residential setting, and brief interventions.

Brandy R. Henson, Ph.D., Lead/Supervisory Psychologist, PTSD Clinical Team (PCT) Psychologist: Dr. Henson received her Ph.D. in Clinical Psychology from Washington State University in 2007. She completed her doctoral internship at the VA Northern California Healthcare System. Subsequently, Dr. Henson was hired by the Loma Linda VAMC in 2007 as a staff psychologist for the PTSD Clinical Team (PCT) and later served as the team leader for the PCT until transferring to the Spokane VAMC in 2012. As the Lead Psychologist in Spokane, Dr. Henson provides clinical oversight of all psychological and psychotherapeutic services within the Behavioral Health Service. She also serves as the program manager and clinician on the PCT team. Dr. Henson has been active in the VHA National Center for PTSD Mentoring Program since 2008 and currently serves as a PTSD Mentor for VISN 20. Her clinical and administrative interests include PTSD, evidence-based practices, sleep/insomnia, program development, program evaluation, and professional development of VA psychologists. Dr. Henson is the Spokane VAMC Evidenced-Based Psychotherapy Coordinator.

Ginny Kleman, Psy.D., Neuropsychologist: Dr. Kleman earned her Psy.D. from Pacific University School of Professional Psychology in Forest Grove, Oregon in 2012. She completed her predoctoral internship at the VA Illiana Health Care System in Danville, Illinois and completed her two-year postdoctoral fellowship in neuropsychology at the University of Kansas School of Medicine-Wichita. Following completion of her fellowship, she worked as a neuropsychologist at the Nebraska Medical Center in Omaha, Nebraska, with an emphasis on epilepsy pre-surgical evaluations, Wada testing, and liver transplant evaluations. Eager to live closer to her extended family, she and her family moved back to the Northwest and she began working at the Spokane VAMC in September, 2016. Dr. Kleman practices as a neuropsychologist and sees patients on an outpatient basis with a variety of medical, neurological, and psychiatric conditions. She also sees patients in the TBI clinic in conjunction with a physiatrist. In addition to supervising psychology interns, Dr. Kleman supervises psychiatry residents during their neurology rotation at the VA and practicum students from Washington State University.
**Eric Krueger, Ph.D., PCT Staff Psychologist:** Dr. Krueger earned his Ph.D. from the University of Wyoming in 2008, including internship at Valley Mental Health in Salt Lake City. He began his career at Peak Wellness Center in Cheyenne, Wyoming. There he was a dual diagnosis therapist, conducting group and individual therapy, including Intensive Outpatient Treatment. Dr. Krueger joined the VA as the PTSD/SUD Psychologist at the Spokane VAMC, and later transferred to the PCT. His practice includes both individual and group psychotherapy approaches for PTSD. Dr. Krueger focuses his practice on the treatment of PTSD with evidence-based treatments, such as PE and CPT. Additionally, he is the facilitator for the (PTSD) Symptom Management, Couples PTSD Education, and DADS & MOMS Veteran Parenting Enrichment Groups. Dr. Krueger has also done community outreach to several local mental health provider conferences, the Veteran’s Court, and Eastern Washington University. He is interested in the biological basis of PTSD as well as the impact of PTSD on children and families. Dr. Krueger has completed VA training in Prolonged Exposure, Cognitive Processing Therapy, and Motivational Interviewing. He also serves as the VA Behavioral Health Liaison to the Veteran’s Outreach Center.

**Julia Mackaronis, Ph.D., MHC Staff Psychologist:** Dr. Mackaronis received her Ph.D. in clinical psychology from the University of Utah in 2014. She completed the Southwest Consortium Doctoral Psychology Internship in Albuquerque, NM, working at the New Mexico VA Health Care System and First Nations Community HealthSource, and a postdoctoral fellowship in couple and family care at the VA Puget Sound Health Care System – Seattle Division. Since joining the Spokane VA in October, 2016, Dr. Mackaronis provides individual therapy in MHC, and facilitates a 5-week couples communication skills group and a group for transgender veterans. She has completed VA training in ACT-D, CPT, and IBCT, and anticipates completing training in Cognitive-Behavioral Conjoint Therapy for PTSD by the start of the 2020 internship year. Dr. Mackaronis’ theoretical orientation is acceptance-based third wave cognitive-behavioral therapies (e.g., ACT, IBCT), and she also specializes in sexuality-focused psychotherapy. She is currently working on two quality improvement projects related to the couples skills group described above and measurement-based care.

**Patrick Metoyer, Ph.D., PTSD/SUD Specialist, PCT Psychologist:** Dr. Metoyer received his Ph.D. in Clinical Psychology from Washington State University in 2014 and completed his doctoral internship at the Southern Arizona VA Health Care System in Tucson, AZ. Dr. Metoyer joined the staff at the Spokane VAMC in 2014, and provides treatment as part of the PTSD Clinical Team (PCT). Dr. Metoyer’s clinical interests include treatment of co-morbid PTSD and substance use disorders utilizing evidence-based treatments. Dr. Metoyer completed his Prolonged Exposure training and provider certification through the Center to the Treatment and Study of Anxiety (CTSA) at University of Pennsylvania. Additionally, Dr. Metoyer co-facilitates the mindfulness-based therapy group.

**Connie Raybuck, Ph.D., PCMHI Psychologist:** Dr. Raybuck earned her Ph.D. in Clinical and Community Psychology from the University of South Carolina in 1990. She completed her internship at Medical College of Georgia, working in the Augusta VA as well as both inpatient and outpatient individual and family therapy and pediatric medical consultation. After teaching in a graduate clinical psychology program at Eastern Washington University and facilitating the school psychology program there, she worked as a private practice psychologist, treating children, adolescents, families, couples and adults with mild to severe or chronic mental illnesses. Her primary interests are cognitive behavioral psychology and behavioral health and wellness in the PCMHI setting here at Spokane VAMC.
Jeffrey Schloemer, Psy.D., MHC Staff Psychologist: Dr. Schloemer earned a doctoral degree in clinical psychology from George Fox University, completing an internship with the Spokane/Walla Walla joint VA internship and a partial post-doctoral fellowship with the Boise VA in Rural Psychology before assuming a staff position with the Mann-Grandstaff (Spokane) VAMC in 2017. Dr. Schloemer is licensed in the State of Washington. He is trained in cognitive and psychological assessments and approaches therapy from evidenced-based practices including psychodynamic therapy and cognitive behavioral perspectives with an emphasis in trauma, relationships and family-of-origin issues.

Melissa Swanson, Ph.D., Neuropsychologist: Dr. Swanson earned her Ph.D. from Pacific Graduate School of Psychology (now known as Palo Alto University) in the Bay Area in 2009. Concurrent with graduate school, she worked for DVBIC (Defense and Veteran Brain Injury Center) and received training at the Palo Alto VA in Polytrauma (residential program, rehabilitation, and outpatient). She completed her internship training in the neuropsychology track at the Central Arkansas VA in Little Rock and completed her postdoctoral fellowship in neuropsychology at the University of Toledo Medical Center. Following fellowship, she was a neuropsychologist at the Las Vegas VA for nearly two years. In search of a better climate and access to the outdoors, she joined the Spokane VA staff in October 2013 as a neuropsychologist. She especially enjoys working with older adults and other clinical interests include neurological disorders and complex medical conditions.

Darrell Volwiler, Ph.D., Local Recovery Coordinator (LRC), Community Living Center (CLC) Psychologist: Dr. Volwiler obtained her Ph.D. from Washington State University and completed an Internship at the VA Palo Alto Health Care System in Behavioral Medicine. Following internship year, she completed two years of a postdoctoral fellowship through a combined Stanford/VA Palo Alto Health Care System program, as a team member for the REACH study for caregivers of family members with dementia. Dr. Volwiler moved to Spokane, WA in 1999 and started an independent practice specializing in geropsychology, working primarily with older adults with chronic medical conditions. In addition, she completed pre-surgical psychological evaluations for patients undergoing deep brain stimulation surgery. Dr. Volwiler’s community involvement included volunteering her time as a presenter and support group leader for the Alzheimer’s Association and the Parkinson’s Resource Center. After fifteen years of practice in 2014, she accepted a position at the GMVAMC (Spokane) in the Mental Health Clinic and the Community Living Center. She is now the LRC, which includes supervising the Peer Support Program and continues to work in the CLC. Her approach to therapy is veteran-centered and recovery oriented with an emphasis on MI and CBT.

Macey Wolfe, Ph.D., PCMHI Staff Psychologist: Dr. Wolfe received her Ph.D. in Clinical Psychology in 2017 from Loma Linda University. She completed her doctoral internship at Southwest Consortium Doctoral Psychology Internship in Albuquerque, NM where she trained at the New Mexico VA Health Care System and the University of New Mexico Hospital. Dr. Wolfe went on to complete her post-doctoral training in integrated behavioral health in primary care and women’s health clinics at Confluence Health in Wenatchee and Cashmere, WA. She joined the Spokane VAMC in May 2019 in the Primary Care Mental Health Integration department. Her clinical interests include women’s and perinatal mental health, Mindfulness Based Stress Reduction, Cognitive Behavioral Therapy for insomnia and chronic pain, and whole health wellness.
**INTERNERSHIP PROGRAM TABLES**

**Internship Program Admissions**

**Date Program Tables are updated:** 08/31/2018

<table>
<thead>
<tr>
<th>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:</th>
</tr>
</thead>
<tbody>
<tr>
<td>To be considered for interview or ranking, applicants are required to have at least 1,000 hours of practicum experience, with a minimum of 500 hours of direct service. Applicants with training backgrounds in adult psychotherapy and clinical assessment and experience or interest in rural programming will be given preference.</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Describe any other required minimum criteria used to screen applicants:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Internship applicants must meet all these criteria to be considered: 1) Doctoral student in good standing at an APA-accredited graduate program in Clinical or Counseling Psychology 2) Approved for internship status by graduate program training director.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Financial and Other Benefit Support for Upcoming Training Year*</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Annual Stipend/Salary for Full-time Interns</strong></td>
</tr>
<tr>
<td><strong>Annual Stipend/Salary for Half-time Interns</strong></td>
</tr>
<tr>
<td><strong>Program provides access to medical insurance for intern?</strong></td>
</tr>
</tbody>
</table>

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

| Trainee contribution to cost required? | Yes |
| Coverage of family member(s) available? | Yes |
| Coverage of legally married partner available? | Yes |
| Coverage of domestic partner available? | No |
| **Hours of Annual Paid Personal Time Off (PTO and/or Vacation)** | 104 |
| **Hours of Annual Paid Sick Leave** | 104 |

| 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 |

**Other Benefits (please describe):** Interns can elect to receive dental and vision insurance coverage; trainees contribute to the cost of this coverage. In addition to PTO and sick time, trainees receive 10 paid federal holidays.
**Initial Post-Internship Positions**
(Provide an Aggregated Tally for the Preceding 3 Cohorts)

<table>
<thead>
<tr>
<th>Setting</th>
<th>PD</th>
<th>EP</th>
</tr>
</thead>
<tbody>
<tr>
<td>Community mental health center</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>Federally qualified health center</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Independent primary care facility/clinic</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>University counseling center</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Veterans Affairs medical center</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>Military health center</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Academic health center</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>Other medical center or hospital</td>
<td>3</td>
<td>1</td>
</tr>
<tr>
<td>Psychiatric hospital</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Academic university/department</td>
<td>1</td>
<td>1</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>1</td>
<td>3</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: Programs are not required by the Commission on Accreditation to provide all benefits listed in this table.\n
*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.