Clinical Psychology Postdoctoral Fellowship
VA Pittsburgh Healthcare System
Director of Clinical Training
Behavioral Health Service Line (116A-U)
University Drive C
Pittsburgh PA 15240-1001
(412) 360-1290

Application Due Date: Friday, January 5, 2018

Accreditation Status
The postdoctoral fellowship in Clinical Psychology is accredited by the Commission on Accreditation of the American Psychological Association. Our next site visit will be scheduled for 2021.

We are extremely proud of our training programs and their accreditation by the American Psychological Association. Should you have any questions about fellowship accreditation standards or policies that cannot be answered to your satisfaction by this website or by the psychology staff, please contact:

Office of Program Consultation and Accreditation
American Psychological Association
750 1st Street, NE, Washington, DC 20002
Phone: (202) 336-5979 / E-mail: apaaccred@apa.org
Web: www.apa.org/ed/accreditation

VA Pittsburgh Healthcare System and Psychology Staff
The VAPHS is a 549-operating bed, joint commission accredited facility comprised of two divisions. The VAPHS has recently completed large construction projects at both divisions, resulting in new state-of-the-art, “green” buildings. The University Drive division, near the University of Pittsburgh, is the medical-surgical facility and includes numerous outpatient primary care and specialty medical clinics. The University Drive division is home to the new Consolidation Building, where the majority of the outpatient behavioral health clinics, three inpatient psychiatry units, and the Center for the Treatment of Addictive Disorders are located. The H. J. Heinz division, located near Aspinwall and Fox Chapel, includes the Community Living Center, Veteran Recovery Center (domiciliary), and Neurobehavioral Program. The new Ambulatory Care Building houses a primary care clinic, post-deployment clinic, and other clinical services to include dental and rehabilitation medicine. These two divisions are within 10 miles of each other and a shuttle operates between the divisions. In addition to these two sites, the VAPHS also includes five community-based outpatient clinics (CBOC’s) in our catchment area. The
VAPHS also includes a telemental health hub, in which behavioral health staff provide telemental health services to veterans enrolled in VA medical centers within our VISN and other VISN’s.

In FY2016, VAPHS provided care to 70,119 Veterans and conducted 718,953 outpatient visits. The VAPHS is increasing services via telehealth technology and conducted 7,955 telemental health visits in FY2016. Veterans span the cohorts from Persian Gulf (22.9% of Veterans served in FY2016) to WWII (5.5% of Veterans served in FY2016) with the vast majority of Veterans (46%) in the Vietnam era. The VAPHS provided care to 4,501 female Veterans in FY2016. Given the large catchment area of the VAPHS to include western Pennsylvania, eastern Ohio, and parts of West Virginia, our Veteran population includes a mix of urban and rural Veterans. Although the VAPHS served a primarily Caucasian Veteran population in FY2016 (85%), the diversity of our patient population also included Black or African American (10%), American Indian or Alaskan Native, Asian, and Native Hawaiian or other Pacific Islander Veterans. As part of the VAPHS commitment to diversity, we have been and continue to be identified as a LGBT healthcare leader for the past several years in the Human Rights Campaign’s Healthcare Equality Index. In FY2016, the VAPHS employed 3,755 employees, of whom 32% are Veterans.

All staff and services at the VAPHS are organized into “service lines.” The fellowship program is located within the Behavioral Health Service Line. Within the Behavioral Health Service Line, veterans are assigned to a Behavioral Health Interdisciplinary Program (BHIP) (identified by Greek letters). Staff members are assigned to specific teams/BHIP’s for continuity of care for veterans.

The VA Pittsburgh Healthcare System currently employs 47 full-time staff psychologists, many of whom are involved in the training program. Our psychology staff has been increasing over the past few years to meet the growing demand for behavioral health services in our increasing VA population. Our staff psychologists’ backgrounds, interests, and current activities are diverse. We have supervisors from a variety of graduate programs with varying lengths of tenure at the VAPHS. In addition to their clinical work, our staff psychologists hold many important leadership positions, such as team leaders and medical center committee chairpersons. Our staff members are committed to providing evidence-based treatment approaches to our veterans. Most supervisors have completed VA certification and have provider status in at least one evidence-based psychotherapy and some are VA trainers for evidence-based psychotherapies (refer to list of training staff for specific information). Fellows will have the opportunity to learn evidence-based approaches appropriate for their specific focus area. Our psychology training programs (practicum, doctoral internship, and postdoctoral fellowship) are part of our VA’s educational mission which includes many other training programs, such as medicine, social work, physical therapy, occupational therapy, chaplaincy, speech language pathology, and nursing. Our educational affiliation with the University of Pittsburgh allows trainees from many disciplines to participate in interdisciplinary training at our medical center. In addition to our VA psychology staff, the program also includes community psychologists who serve as seminar presenters and case conference participants to increase fellows’ exposure to psychology in the Pittsburgh area.

Program Philosophy, Training Model, Program Goals, & Objectives
The mission of the VA Pittsburgh Healthcare System in training clinical psychology postdoctoral fellows is to provide supervised clinical and scholarly opportunities to selected postdoctoral students wishing to develop advanced skills in clinical psychology with a focus in Interdisciplinary Care, PTSD, and Substance
Use Disorders. The aim of our training program is to produce psychologists with advanced training in the science and practice of clinical psychology for careers in VA or other health service settings. Thus, the focus of training is on developing advanced competence rather than remediation and it is expected that fellows will possess good generalist skills in psychology at the start of the training year. During the postdoctoral year, fellows will gain increased knowledge through their supervised clinical and scholarly activities. Individual supervision sessions at minimum of two hours per week with staff psychologists will promote an integration of case conceptualization, clinical findings, testing results, and psychological interventions. The fellowship program will be truly interdisciplinary in that a portion of clinical activities will occur when working not only with psychologists, but also a variety of other healthcare professionals. Our training philosophy reflects the scholar-practitioner model in that fellows are expected to develop proficiency in both clinical work and scholarly thinking. Consistent with this model, fellows will become familiar with state-of-the-art, evidence-based practice and will integrate scholarly research into clinical practice. It is expected that, by the conclusion of the fellowship year, fellows will develop skills within the following core competency areas: Integration of science and practice; Individual and cultural diversity; Assessment; Intervention; Consultation and interprofessional/interdisciplinary skills; Professional values, attitudes and behaviors: Supervision skills.

Training Experiences and Program Structure

Training Rotations

Interprofessional Care Focus
During the 12-month training year, the fellow will function as an active member of the interdisciplinary treatment team in Primary Care at the H.J. Heinz division. The focus of the fellowship is on learning to deliver psychological services in a primary care medical setting and specifically within a Patient Aligned Care Team (PACT). Fellows will have an opportunity to work with veterans presenting from the Primary Care Clinic with a wide spectrum of psychological problems. The most frequent referrals are for mood and anxiety disorders, stress management, adjustment disorder (often related to medical conditions or chronic pain), and insomnia. Fellows will have ample opportunity to conduct initial diagnostic evaluations and to learn how to adapt traditional clinical and health psychology services to the primary care setting. Typical clinical activities include assessment and short-term individual therapy for clinical and health psychology problems; consultation and collaboration with other professionals within primary care, and triaging patients to appropriate specialty clinics. An emphasis will be placed on a collaborative approach with the fellow participating in joint consultative visits and serving as a consultant-liaison to PACT teams. The primary therapeutic approach for this rotation is cognitive-behavioral therapy (CBT). Training in motivational interviewing (MI) for health behavior change and in Acceptance and Commitment Therapy (ACT) is also available. The dominant mode of service delivery is individual therapy. The fellow will be required to co-develop treatment groups with other disciplines and trainees focusing on health promotion and self-management of disease.

In addition to the primary clinical assignment within PACT, the fellow will have the opportunity to select two 6-month electives for 1 day per week. Electives emphasize interprofessional collaboration and include: Home Based Primary Care, Community Living Center, Geriatric Evaluation and Management.
Clinic, Community Based Outpatient Clinics, OEF/OIF/OND clinic, Healthy Women’s Clinic, Telemental Health, and health psychology including pain rehabilitation program and organ transplant evaluations.

The primary supervisors for this focus area are: Drs. Jebediah Northern and Jody Tomko.

**PTSD Focus**
The PTSD fellow functions as an active member of the Combat Stress Recovery Clinic (CSRC). The CSRC is a specialized outpatient interdisciplinary team comprised of psychologists, psychiatrists, social workers, nurse practitioners, chaplains and support personnel. The primary function of the CSRC is to evaluate and treat veterans with combat-related distress, including PTSD, from all combat eras (WWII, Korea, Vietnam, Operation Desert Storm, Operation Iraqi Freedom/Enduring Freedom/Operation New Dawn).
The Fellow is fully involved in providing a wide range of outpatient services which include initial diagnostic evaluations, treatment planning, individual and group psychotherapy. Fellows will refine skills in empirically supported treatments for PTSD such as Prolonged Exposure (PE) and Cognitive Processing Therapy (CPT). Fellows will have the opportunity to become a VA recognized CPT provider following completion of the CPT regional training and 6 months of CPT consultation calls. In addition to EBPs for PTSD, fellows will deliver a wide range of evidenced-based interventions for complex presentations including dual diagnosis, substance use disorders, and comorbid personality disorders. The fellow may also have the opportunity to provide evidence-based psychotherapy for PTSD using Clinical Video Telehealth (CVT) technology, after receiving training in the CVT equipment and procedures. Fellows will facilitate the clinic’s Seeking Safety group, an inpatient coping skills group on a rotating basis, and have the opportunity to develop or facilitate other group offerings in the clinic. Additionally, the fellow will provide clinical supervision of a psychology intern. Fellow supervision of CSRC intern would include evidence-based therapy for PTSD (PE or CPT) and Seeking Safety. The fellow will regularly present in CSRC didactics including weekly PTSD Case Conference/PTSD Journal Club and CSRC interdisciplinary treatment meeting. The fellow will have one primary supervisor for six months and will shift supervision to another primary supervisor for the remaining six months. Primary supervisors are Drs. Kathleen DeNardi and Phillip Raab.

In addition to the above training experiences, the fellow can choose to participate in one or more elective areas of specialized training for a minimum of 6 months, which can be extended up to a maximum of 12 months, during the course of the training year. These include Military Sexual Trauma (MST) and Substance Use Disorders (SUD). The fellow can participate in one area of specialized training at a time. With the MST elective specialty area, the fellow will have the opportunity to evaluate and treat veterans who have experienced sexual trauma during their military service. Treatment for PTSD secondary to MST will primarily utilize Cognitive Processing Therapy (CPT). The primary supervisor for the MST training is Dr. Korchynsky. With the SUD elective specialty area, the fellow will have the opportunity to work with the Center for Treatment of Addictive Disorders (CTAD) evaluating and treating veterans with substance use disorders. Activities may include initial evaluations, treatment planning, case management, individual psychotherapy, and group psychotherapy. The primary supervisor for the SUD training is one of the psychologists in CTAD.

**Substance Use Disorders Focus**
During the 12-month training year, the fellow will function as an active member of the interdisciplinary treatment team in the Center for Treatment of Addictive Disorders (CTAD). The goal of the training year
is to develop mastery of assessing and treating a wide variety of substance use disorders with co-occurring psychiatric, medical and social concerns. Treatment modalities include individual and group psychotherapy as well as brief motivational interviewing sessions. Fellows are expected to carry a diverse individual caseload including patients with complex diagnostic profiles (e.g., co-occurring SUD and personality disorders). The fellow is expected to be flexible in their approach to psychotherapy including using evidence-based practices when appropriate. Fellows can expect to carry some longer-term patients over the course of the year which afford the opportunity to hone core therapeutic skills. The fellow can expect to gain exposure to motivational interviewing which is at the center of our philosophical approach to substance use disorders. The fellow will have the opportunity to train in multiple evidence-based practices including CBT-SUD, Acceptance and Commitment Therapy, Seeking Safety and Cognitive Processing Therapy. The fellow will provide core clinical services across each of the three clinical components within the CTAD, which include the Residential Rehabilitation Program, the Outpatient Recovery and Aftercare Clinic, and the Opioid Substitution Therapy Program. The fellow will complete diagnostic interviews, formulate treatment plans, conduct individual and group psychotherapy, and provide consultative and adjunct services to other Behavioral Health Teams and Medical Specialty Outpatient Clinics. Fellows may also provide case management services to veterans participating in the residential rehabilitation program. Fellows will be asked to develop at least one therapy group that conforms to best-practice principles and evidence-based techniques. The fellow will work with at least two primary clinical supervisors in CTAD during the training year in the above settings. Fellows will have one primary supervisor for six months and then switch to another primary supervisor for the final six months.

Supervisors include Drs. Leigh Gemmell, Melissa Johnson, and Anya Moon.

Supervision Responsibilities/Training
As part of their professional development as psychologists, all fellows will have the opportunity to provide supervision to psychology doctoral interns, under the supervision of a staff psychologist. Development of supervisory skills is often overlooked in clinical training, resulting in psychologists providing supervision without any formal training in or supervision of supervisory skills. Fellows will be required to provide one hour of supervision per week to an intern. In addition, fellows will be expected to attend the Supervisor Development Series, a program designed for the staff psychologists to discuss supervisory issues and refine supervisory skills, and receive supervision training during the Professional Development Seminar series. Furthermore, fellows will attend the monthly supervisor meetings and will serve on the Clinical Training Committee by attending quarterly meetings and assisting with the selection of interns and fellows.

Didactics
All fellows will participate in the 1-hour weekly Fellowship Seminar Series. This seminar series provides the opportunity for fellows to meet during the week and share experiences and knowledge of clinical psychology. The seminar series includes:

1. Monthly Journal Club: During this journal club also attended by the doctoral interns, two recent articles in psychology are reviewed each month with discussion emphasizing a critique of the science of the articles and integration of research into clinical practice (1st Wednesday of the month).
2. **Professional Development Seminar**: Dr. Pasquale facilitates this seminar which incorporates lecture, discussion, and reading on supervisory development, ethical issues, and professional growth (2nd Friday of the month).

3. **Fellowship Case Conference**: During this case conference, fellows rotate presenting a case with staff psychologists rotating as facilitators (3rd Friday of the month).

4. **Fellowship Seminar**: Psychology staff present lectures/discussions on a professional topic in clinical psychology (4th Friday of the month).

In addition to the above fellowship seminar series, all fellows also attend the following:

1. **Supervisor Development Series**: This bimonthly seminar is attended by fellows and staff psychologists. A scholarly article regarding supervision of psychology trainees is chosen for discussion during each meeting.

2. **Evidence-Based Psychology Seminar Series**: The VA Healthcare System is committed to providing training to providers in evidence-based psychotherapies for various disorders. The content from several of these national training seminars has been released and modified for use by VA training programs. Our program offers a series of 6 monthly seminars at the beginning of the training year to provide an overview of theory and specific interventions for the following evidence-based psychotherapies: Cognitive Behavior Therapy for Depression, Cognitive Processing Therapy for PTSD, Prolonged Exposure for PTSD, Acceptance and Commitment Therapy, Social Skills Training, and Integrative Behavioral Couple Therapy. Fellows are required to attend at least one of these seminars of their choice.

3. **Diversity Seminars**: Fellows will attend various fellow-directed diversity seminars. Each fellow will select a diversity topic and present either a case example and/or scholarly literature to facilitate discussion.

In addition to the above seminars designed for all fellows, fellows will attend at least one additional hour of didactics within their emphasis area, as described:

**Interprofessional Care Focus**

1. **Primary Care/Behavioral Medicine Journal Club & Case Conference**: During this monthly journal club and case conference, fellows, interns, and staff psychologists rotate presenting an article and case presentation in the field of primary care psychology / behavioral medicine for review and discussion.

2. **PC-MHI Consultation Call**: The Primary Care – Mental Health Integration (PC-MHI) consultation call is a monthly discussion call led by VISN 4. This interprofessional call focuses upon discussion of primary care – mental health integration issues and related resources for clinicians. The fellow contacts Mr. William Cress to enroll in the PC-MHI consultation call.

3. **Interdisciplinary Team (IDT) Case Conference**: This case conference, held weekly on Friday mornings, is attended by members of the interdisciplinary primary care PACT and provides the fellow the opportunity to present and discuss cases with an interprofessional focus.
PTSD Focus

1. **PTSD Case Conference**: Weekly case conference attended by PTSD staff psychologists and interns focusing on differential diagnosis and assessment of combat-related PTSD.

2. **PTSD Journal Club**: Monthly journal club during which two scholarly articles related to PTSD are discussed with an emphasis on clinical application of the research.

3. **CPT and PE Consultation Conference**: Led by our local evidence-based psychotherapy coordinator, this conference meets monthly and is attended by interested staff and psychology trainees and provides group consultation on CPT and PE therapy cases.

4. **CPT Training**: Led by Dr. Korchynsky, regional VA trainer and consultant in CPT, a 3-day VA CPT training will be held in the fall at VAPHS. Following the training, the fellow will participate in a weekly consultation call for 6 months and will complete 2 cases using CPT to fulfill requirements to become a VA-recognized CPT provider.

Substance Use Disorders Focus

1. **Substance Use Disorder Seminar**: Monthly seminar series facilitated by the CTAD staff which may include presentations of recent SUD research, best practices in SUD treatment, case presentation, or journal club.

2. **SUD Case Conference**: This conference meets monthly and focuses on assessment and intervention of substance use disorders. The case conference is attended by psychology interns, psychology fellows, and psychology staff. Other members (psychiatry, nurses, social workers, etc.) from the CTAD team may also attend this case conference.

**Supervision and Evaluation**: The psychology postdoctoral fellowship supervisors are dedicated to providing quality supervision to fellows. All supervisory sessions are intended to offer meaningful feedback to the fellow in order to increase understanding of his/her clinical strengths and weaknesses and to facilitate professional growth. As aids in the supervisory process, digital recording, direct observation, and co-therapy may be used. While the primary focus of supervisory sessions is on the development of clinical skills, other issues such as administrative dynamics, professional ethics, and cultural issues are often addressed. Fellows receive a minimum of two hours of formal individual supervision weekly. Supervisors are also available on an as needed basis beyond the regularly scheduled times of supervision.

Progress towards the attainment of the training goals is determined by means of regularly scheduled evaluations. Feedback between fellows and supervisors is ongoing. Monthly evaluations are discussed informally with the fellow and at a monthly supervisors’ meeting chaired by the Director of Clinical Training. A mid-rotation evaluation occurs at the 3-month and 9-month time points with the supervisor reviewing the fellow’s progress thus far in terms of the specific skills defined within each core competency area. At the conclusion of each six-month rotation, a formal evaluation of the fellow’s progress is made. This evaluation is discussed with the fellow prior to submission to the Director of Clinical Training for inclusion in the fellow’s training record. In conjunction with the supervisor’s evaluation of the fellow, each fellow is asked to evaluate the supervisor. Fellows are encouraged to evaluate their own performance and that of the fellowship critically so that the evaluation process is not merely unidirectional.
Requirements for Completion
For fellows to remain in good standing in the program, fellows must achieve at least a majority of ratings of "3" in each competency area on the rotation evaluation form at mid-year, indicating that competency for each skill item is at the level beyond the start of the postdoctoral training year, but below that expected at the conclusion of the postdoctoral training year. In addition, fellows must not engage in any ethical violations to maintain good standing in the program.

To successfully complete the fellowship program, fellows must achieve the following requirements:

1. A fellow must complete the entire year of training (i.e., 2080 hours).
2. A fellow must be in “good standing” and removed from any probationary status.
3. By the conclusion of the training year, a fellow must achieve a rating of “4” for every competency skill in each competency domain on the final Evaluation of Fellow Performance, indicating that a fellow has demonstrated competency for this skill at the level expected at the conclusion of the postdoctoral training year.

Facility and Training Resources
All fellows are assigned an individual office with most offices located in the clinic where the fellow works. Offices are generally in close proximity to supervisors to promote informal supervision and consultation. Fellows are assigned a hospital pager. All fellows have a personal computer in their office with access to the computerized patient record system, e-mail, Internet, and Microsoft software. Fellows also have access to our computer lab for additional computer availability and full-time computer support technician. The fellows are also given access to the VA voice mail system. Psychological and neuropsychological testing equipment is available to fellows through our psychology technicians as well as part of the psychology package on the hospital computer system. To assist with development of psychotherapy and supervision skills, fellows have access to digital recorders. Medical libraries are located at both divisions and fellows have access to journals, interlibrary loans, and computer-based literature searches. Our medical librarians are extremely helpful in assisting staff and fellows to retrieve selected journal articles and books from other sources.

Fellows may park at both divisions without cost, and there is a parking garage located at the University Drive division where a valet service for high density parking is utilized. The VA medical center also operates a shuttle system that interns may utilize to travel between divisions for meetings and didactics.

The stipend for the training year is $43,172. Fellows can elect to participate in federal health insurance plans. Fellows earn annual leave (personal time off) and sick leave at the rate of 4 hours every two weeks. In addition to the annual leave and sick leave, we grant authorized absence to fellows for approved training activities and conferences, including sitting for the psychology licensure examination. Although there is no limit to the amount of authorized absence that a fellow may use, permission to take authorized absence will only be granted when a fellow is making satisfactory progress in meeting the requirements of his/her rotation.

Given research demonstrating the value of mentorship in professional development, fellows are required to identify a mentor from the psychology staff and meet with this mentor at least twice during
the training year. The selected mentor will not be in an evaluative role with the fellow and discussions within the mentorship relationship are considered confidential.

**Administrative Policies and Procedures**

During orientation to the VA Pittsburgh Healthcare System, fellows are provided a training manual that contains important policies and information for the fellowship program as well as for the medical center. Included in the training manual is our grievance and due process policy concerning identification and resolution of problems arising during the internship year. Copies of all evaluation forms are also included in the training manual. Copies of our evaluation forms and grievance policy are available to interested applicants upon request.

**Trainees**

Since the inception of our postdoctoral program in 2000, we have accepted fellows from clinical Ph.D. and Psy.D. programs and counseling Ph.D. programs. Fellows have completed internships in various VA medical centers, including our own, as well as other programs, such as state hospitals and psychiatry departments within university medical centers. The majority of our fellows have accepted staff psychologist positions at VA Medical Centers (including our own). Many of our fellows have enjoyed the transition to Pittsburgh and have remained in the Pittsburgh area, suggesting that Pittsburgh is a desirable city in which to reside!

During exit interviews with fellows over the past several years, fellows have consistently identified three strengths of our fellowship program. First, fellows have commented that both the breadth and depth of training experiences are a significant strength of our program. Although fellows focus their training in a specific focus area, fellows have commented that the breadth of training experiences in each focus area over the course of the year is significant. Fellows have also commented that the training has broadened their skills in clinical psychology beyond the focus area. Second, fellows have consistently described both the quality and quantity of supervision as strengths. Fellows have remarked that supervisors are always available for scheduled supervision in addition to informal consultation and emergency supervision. Our supervisors have been described as enthusiastic, dedicated, and invested in training and the professional growth of fellows. Finally, fellows have noted that the training they received in supervision significantly increased their supervision competency and is a noteworthy strength of this training program.

**Local Information**

Pittsburgh is located in southwestern Pennsylvania, where the Monongahela and Allegheny Rivers meet to form the Ohio River. Contrary to popular belief, Pittsburgh is no longer the industrial steel town of the 50's and 60's. In fact, Pittsburgh was rated the “Most Livable City” in the 2007 edition of the Places
Rated Almanac and again in 2010 by Forbes.com! More recently, in 2017 WalletHub compared 62 of the largest U.S. cities and Pittsburgh comes in at #3 of the best cities in which to live and CNBC named Pittsburgh the 2nd best city for millennials in 2017. The downtown area and riverfront have undergone massive renovation, and several vibrant sub-communities have emerged over the past decade. An exciting blend of old and new, Pittsburgh is a city of history, business, culture, research, medicine, sports, and recreation that pleasantly surprises newcomers!

The largest metropolitan area in the Ohio Valley and Appalachia, Pittsburgh is a growing city. “The Steel City” has 446 bridges, creating a unique urban terrain within a beautiful natural valley. The city is home to numerous diverse cultural groups, and offers a variety of authentic world cuisines within our various districts. For lovers of the culinary arts, you will find a variety of coffee shops, bakeries, and restaurants. Rich in American history, Pittsburgh also has a growing art and cultural scene. It is the home of the Andy Warhol Museum, the Carnegie library system, and has numerous universities and colleges such as University of Pittsburgh, Carnegie Mellon, Duquesne, and Chatham, creating a constant influx of energy, creative thought, and activity. There are also a wide variety of entertainment opportunities, including events at PPG Paints Arena, local music venues, as well as Broadway shows in the downtown theatre district. The city is ideal for families, with a local zoo, aquarium, the Phipps Conservatory and Botanical Gardens, and the National Aviary. Sports enthusiasts will be welcomed into the loyal hometown community, supporting the Pirates, Steelers, and Penguins. With its unique location, Pittsburgh also offers easy accessibility to a variety of city and state parks, water sports, caving systems, and wildlife preserves, creating a multitude of activities for naturalists.

For more information about our exciting city and the diversity of “the ‘Burgh”, view these websites:

- www.visitpittsburgh.com
- www.pump.org
- www.coolpgh.pitt.edu
- www.vibrantpittsburgh.org

**Application & Selection Procedures**

Prior to the start of the fellowship, a candidate must have completed the following requirements:

1. Have received a doctorate from an APA or CPA accredited graduate program in Clinical, Counseling, or Combined Psychology or PCSAS accredited Clinical Science program. Persons with
a doctorate in another area of psychology who meet the APA or CPA criteria for respecialization training in Clinical, Counseling, or Combined Psychology are also eligible.

2. Have completed an internship program accredited by APA or CPA or have completed a VA-sponsored internship.

In addition, VA Eligibility Criteria also require:

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 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 US 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. Fellows are subject to fingerprinting and background checks prior to start of fellowship. A selected fellow must pass these checks in order to begin employment with the VA.

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

Applicants who have completed VA internships and who have an interest in a VA career are strongly encouraged to apply. Appropriate candidates will be familiar with general psychological assessment instruments and will have intervention skills commensurate with having completed an internship. Applicants with both clinical and research experience in the area of focus are highly desirable. We value applicants with the ability to engage in scholarly inquiry and critical analysis of the scholarly literature. Given our focus on providing evidence based treatment to our veterans, we value applicants who have training in evidence based treatment approaches. Further, given the diversity of the veterans receiving treatment through the VA Pittsburgh Healthcare System, we encourage applicants from graduate and internship programs with a multicultural focus and experience with ethnic, cultural, and social minority groups. Our fellowship program values cultural and individual diversity and strongly encourages qualified applicants from all backgrounds to apply. We adhere to all EEO guidelines. The United States government is a non-discriminatory, affirmative action employer. Federal law prohibits discrimination based on age, sex, race, creed, color, religion, handicap or national origin.

Applicants may apply to more than one program or focus area. The application process formally begins when an applicant submits the following materials:

1. Cover letter indicating to which to which focus area the applicant is applying (i.e., interprofessional care, PTSD, SUD), status on internship with expected completion date, and status of dissertation/doctoral project with anticipated completion date.

2. Official transcripts of all graduate work in psychology.


4. Three letters of recommendation with at least one from a primary clinical supervisor who can describe clinical work and skills in the emphasis area of interest.
5. Letter from the applicant’s dissertation chairperson verifying the applicant’s current status on his/her dissertation research. If an applicant’s dissertation is not completed at the time of application, this letter should also include the chairperson’s estimate of when the applicant’s dissertation will be completed.

6. Letter from the applicant’s internship director of clinical training verifying the applicant’s internship status and expected completion date.

7. A personal statement describing: history of applicant’s interest in Clinical psychology focus area, self-assessment of training needs with goals for fellowship, and statement of career goals (one-page limit).

All applications must be submitted via the APPA CAS [APPIC Psychology Postdoctoral Application] online centralized application system. No paper applications will be accepted or reviewed. The APPA CAS can be accessed via the following link: https://appicpostdoc.liaisoncas.com

The deadline for all completed application materials is January 5, 2018. Only applications completed by this deadline will be considered.

Applications will be reviewed by three independent reviewers of the Clinical Training Committee and rated on a 10-point scale. Applicants are then ranked by total score (0-30 total) and selected applicants will be invited for interviews with two psychology staff members involved in the training of fellows and one of the current fellows. Although on-site interviews are preferrable, VTEL (from other VA medical centers) or telephone interviews are acceptable with no adverse rating or rating bias. Points obtained during the interview process are added to the application score and offers are rendered per a rank order list created by total point score. Our program will abide by the APPIC postdoctoral selection guidelines. As such, we will extend offers on February 26, 2018 and candidates will be granted 24 hours to respond to the offer before the offer is extended to the next candidate. If a candidate receives an offer from another program earlier than 2/26/2018, we may extend an earlier offer if appropriate.

Questions regarding the application process can be directed to Dr. Bernadette Pasquale at Bernadette.Pasquale@va.gov.

Postdoctoral Residency Admissions, Support, and Initial Placement Data

Date Program Tables are updated: 10/16/2017

Postdoctoral Program Admissions

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 resident selection and practicum and academic preparation requirements:

Applicants who have completed VA internships and who have an interest in a VA career are strongly encouraged to apply. Appropriate candidates will be familiar with general psychological assessment instruments and will have intervention skills commensurate with having completed an internship. Applicants with both clinical and research experience in the area of focus are highly desirable. We value applicants with the ability to engage in scholarly inquiry and critical analysis of the scholarly literature. Given our focus on providing evidence based treatment to our veterans, we value applicants who have
training in evidence based treatment approaches. Further, given the diversity of the veterans receiving treatment through the VA Pittsburgh Healthcare System, we encourage applicants from graduate and internship programs with a multicultural focus and experience with ethnic, cultural, and social minority groups. Our fellowship program values cultural and individual diversity and strongly encourages qualified applicants from all backgrounds to apply. We adhere to all EEO guidelines. The United States government is a non-discriminatory, affirmative action employer. Federal law prohibits discrimination based on age, sex, race, creed, color, religion, handicap or national origin.

Describe any other required minimum criteria used to screen applicants:

In addition, VA Eligibility Criteria also require:

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 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 US 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. Fellows are subject to fingerprinting and background checks prior to start of fellowship. A selected fellow must pass these checks in order to begin employment with the VA.
4. VA conducts drug screening exams on randomly selected personnel as well as new employees. 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.

Financial and Other Benefit Support for Upcoming Training Year

- Annual Stipend/Salary for Full-Time Residents ............................................. $43,172
- Annual Stipend/Salary for Half-Time Residents ................................................ N/A
- Program Provides access to medical insurance for resident? ......................... YES
- 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) ................. 13 days
- Hours of Annual Paid Sick Leave ................................................................. 13 days
- 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):
  - Maternity/Paternity leave is also available through use of sick leave, annual leave, and then Leave Without Pay (LWOP), with any LWOP hours to be made up at the end of the training year.
In addition to the annual leave and sick leave, residents may be granted authorized absence for conferences and approved training activities, such as sitting for the licensure exam.

Initial Post-Residency Positions
(Provide an Aggregated Tally for the Preceding 3 Cohorts)

2013-2016
- Total # of residents who were in the 3 cohorts .............................................. 9
- Total # of residents who remain in the residency program ............................ 0

<table>
<thead>
<tr>
<th>Setting</th>
<th>PD</th>
<th>EP</th>
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<tr>
<td>Community mental health center</td>
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<tr>
<td>Federally qualified health center</td>
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<tr>
<td>Independent primary care facility/clinic</td>
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<tr>
<td>University counseling center</td>
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<tr>
<td>Veterans Affairs medical center</td>
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<tr>
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<tr>
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</tbody>
</table>

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

Psychologist Training Supervisors

Kathleen A. DeNardi, Ph.D. is a clinical psychologist at the VA Pittsburgh Healthcare System in the Combat Stress Recovery Clinic. She earned her doctorate in clinical psychology at Miami University in 2008 after completing her clinical internship at the VA Western New York Healthcare System. Dr. DeNardi specializes in the assessment and treatment of veterans diagnosed with both PTSD and comorbid substance use disorders and serves as a supervisor for the fellow in the PTSD emphasis. Her clinical and research interests have focused on PTSD, Substance Use Disorders, combat stress, sexual trauma and interpersonal violence. Dr. DeNardi has completed VA training and consultation in
Leigh Gemmell, Ph.D. is a clinical psychologist in the Center for Treatment of Addictive Disorders (CTAD). She earned her doctorate in clinical psychology at the University of Maryland, Baltimore County in 2007 after completing her internship at VA Pittsburgh Healthcare System (VAPHS). She participated in a fellowship program in health services research at VAPHS’s Center for Health Equity Research and Promotion (CHERP), and a fellowship program in psycho-oncology and transplant medicine at the Starzl Transplantation Institute at the University of Pittsburgh Medical Center. Dr. Gemmell’s clinical and research interests include health psychology, Motivational Interviewing, substance use disorders, self-management of chronic conditions, and pain management. Dr. Gemmell is a supervisor for the fellow in the Substance Use Disorder emphasis. Dr. Gemmell has completed VA training and consultation in the Evidence-Based Practice of Cognitive Behavioral Therapy for Depression, and she has provider status.

Melissa Johnson, Ph.D. is a staff psychologist at the Center for Treatment of Addictive Disorders. Dr. Johnson earned her doctorate in clinical psychology from the University of Minnesota in 2011. She completed her internship at VA Maryland Healthcare System in Baltimore and continued her training as a post-doctoral fellow at the Baltimore MIRECC. Dr. Johnson is a supervisor for the fellow on the Substance Use Disorders rotation. Her clinical interests are serious mental illness and substance use, Acceptance and Commitment Therapy, Cognitive Behavioral Therapy and Motivational Interviewing.

Roksana Korchynsky, Ph.D. is a staff psychologist and Military Sexual Trauma program coordinator at VA Pittsburgh Healthcare System. She is also the MST point of contact for VISN 4, which encompasses 10 VA medical centers. Additionally, Dr. Korchynsky is the Evidence-Based Psychotherapies Coordinator for VAPHS and is a VA-recognized Cognitive Processing Therapy provider. Dr. Korchynsky earned her doctorate in clinical psychology from Bowling Green State University in 2000. She completed her internship at VA Pittsburgh Healthcare System in 2000. Dr. Korchynsky specializes in the assessment and treatment of post-traumatic stress disorder secondary to sexual trauma in both male and female veterans and is the supervisor for the MST elective for the fellow in the PTSD emphasis. Her clinical and research interests have focused on stress-related health issues in women and trauma. She is a VA-recognized provider for: Cognitive Processing Therapy (CPT), Cognitive Behavioral Therapy (CBT), Acceptance and Commitment Therapy (ACT). Regional CPT Trainer & Consultant

Anya Moon, Ph.D. is a staff psychologist at the VA Pittsburgh Healthcare System Center for Treatment of Addictive Disorders. Dr. Moon earned her doctorate in counseling psychology in 2008 from Virginia Commonwealth University. She completed her internship at the Bureau of Prisons Federal Medical Center, Devens in 2008, and she completed a health psychology fellowship with the VA Connecticut Healthcare System in 2009. Her primary clinical and research interests include mindfulness-based therapies, Acceptance and Commitment Therapy, and compulsive sexual behaviors. She is a supervisor for the fellow in the Substance Use Disorder emphasis. Dr. Moon has completed VA training and consultation in Cognitive Processing Therapy for PTSD and has provider status.

Jebediah Northern, Ph.D., is a staff psychologist in the Primary Care clinic at H.J. Heinz Division of VA Pittsburgh Healthcare System. He earned his doctorate in clinical psychology from Bowling Green State University in 2010, completing the Health Psychology Track. Dr. Northern completed his clinical
internship as well as his fellowship in clinical psychology with an emphasis in geropsychology at the VA Pittsburgh Healthcare System in 2010 and 2011, respectively. Dr. Northern’s primary clinical and research interests are in health psychology, ACT, CBT, insomnia, Motivational Interviewing, and geropsychology. He is also trained in the delivery of services via Clinical Video Telehealth (CVT). Dr. Northern is one of the primary supervisors for the interprofessional care emphasis.

**Bernadette M. Pasquale, Ph.D.** is a staff geropsychologist at the VA Pittsburgh Healthcare System and is the Director of Clinical Training for the internship and fellowship programs. Dr. Pasquale earned her doctorate in clinical psychology from Ohio University in 1995. She completed her internship at the Miami VA Medical Center in 1994 and completed a geropsychology fellowship at the Cleveland VA Medical Center in 1996. Dr. Pasquale has clinical responsibilities in the Ex-Prisoner of War Program and GEM/GDSC clinics. Dr. Pasquale has also completed VA training and consultation in Cognitive Behavioral Therapy for Depression and has provider status.

**Phillip (Drew) Raab, Ph.D., ABPP** is a staff psychologist in the Combat Stress Recovery Clinic. He earned his doctorate degree from the University of Hawai’i at Manoa in 2015 and is Board Certified in Behavioral and Cognitive Psychology. He completed his internship at VA Ann Arbor Healthcare System/University of Michigan and clinical psychology fellowship with focus in PTSD at the VA Pittsburgh Healthcare System. Dr. Raab has completed VA training and consultation in Cognitive Processing Therapy and Prolonged Exposure for PTSD and has provider status. He is one of the supervisors for the PTSD focus.

**Jody Tomko, Ph.D.,** is a staff psychologist in the Primary Care clinic at H.J. Heinz Division of VA Pittsburgh Healthcare System. She earned her doctorate in clinical psychology from Western Michigan University in 2008. Dr. Tomko completed her clinical internship at VA Western New York Healthcare System in 2008. Dr. Tomko’s primary clinical and research interests are in cognitive-behavioral therapy, Motivational Interviewing, geropsychology, health behavior change, and cultural diversity. She is also trained in the delivery of Clinical Video Telehealth (CVT). Dr. Tomko is one of the primary supervisors for the interprofessional care emphasis.