

El Paso VA Psychology Internship Program

El Paso Veterans Affairs Healthcare System



2021-2022
Internship Training Year

MATCH Number: 240011
Applications Due: November 23, 2020

Kyle Erwin, Ph.D.
Acting Director of Training

VA El Paso Healthcare System
5001 North Piedras Street (116)
El Paso, TX 79930
(915) 564-6100

<http://www.elpaso.va.gov/>

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ACCREDITATION STATUS

The El Paso VA Psychology Internship Program at the El Paso VA Healthcare System (EPVAHCS) is a funded VA Internship site with (3) positions. This internship is Accredited, on Contingency by the Commission on Accreditation of the American Psychological Association.

Questions related to the program's accredited status should be directed to the Commission on Accreditation. Contact information is provided below.

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

STIPEND AND BENEFITS

The El Paso VA Psychology Internship Program is a one-year, full-time program that starts at the end of July. The current annual salary is \$26,166. Interns are eligible for 13 days of paid annual leave (you earn 4 hours every two-week pay period), 13 days of paid sick leave (you earn 4 hours every two-week pay period), paid time off for 10 Federal Holidays, and authorized absence for attendance at professional and scientific meetings (must be approved in advance by the Training Director). Interns who complete the program successfully will be certified for 2080 hours of supervised clinical activity. Three interns will be selected for the 2020-2021 training year. Consistent with VA policy, internship funding can be provided only to students who are U.S. citizens and are enrolled in APA-accredited doctoral programs in clinical or counseling psychology. In addition, we require that a prospective intern's university advisor or director of training verify readiness for internship on the Application for Psychology Internships (AAPI Online). Only 52-week full-time internships are available.

APPLICATION AND SELECTION PROCEDURES

Eligibility Requirements

Consistent with VA policy, internship funding can be provided only to students who are U.S. citizens and are enrolled in APA-accredited doctoral programs in clinical or counseling psychology. In addition, we require that a prospective intern's university advisor or director of training verify readiness for internship on the Application for Psychology Internships (AAPI Online). Interns are subject to fingerprinting and background checks. Selection decisions are contingent on passing these screens.

The minimum requirements for entry into our training program are as follows:

1. Applicants must be U.S. citizens.
2. At the time of application, applicants must be enrolled in an APA-accredited clinical or counseling psychology doctoral program.
3. Applicants must have completed a minimum of 450 hours of supervised practicum experience (intervention and assessment) by the time the application is submitted.
4. Applicants must have passed all comprehensive examinations required by their graduate program by the application deadline.
5. It is strongly preferred that applicants complete their dissertation proposal prior to the application deadline.

Application Process

We rely on the Association of Psychology Postdoctoral and Internship Centers' (APPIC) portal for all application materials. EPVAHCS does not ask for any other information besides what is requested by the APPIC Application for Psychology Internships (AAPI Online). The El Paso VA Psychology Internship Program is committed to providing access for all people with disabilities and will provide accommodations if we are notified before the interviews. Reasonable accommodation requests for the interview process are readily entertained and expedited by the training faculty.

EPVAHCS values diversity and believes that a broad variety of perspectives and experiences contribute to a more inclusive and productive work environment. EPVAHCS is committed to promoting ongoing education, skill-building, and participation in events that demonstrate support for cultural diversity. We strongly encourage applications to our internship program from diverse applicants.

Please contact **Kyle Erwin, Ph.D. Director of Training**, for questions or further information at **(915) 564-6100 ext. 5385** or by email at Kyle.Erwin@va.gov.

MATCH Program Code: 240011

Selection Procedures

Application materials are initially reviewed for completion, eligibility, quality of submitted materials, clinical and assessment experience, letters of recommendation, and goodness of fit with our program training goals. Applicants selected from this initial review will be invited for interviews. If an applicant is unable to attend the interviews in person, telephone interviews will be offered. Note that telephone interviews will not put an applicant at any disadvantage in the selection process.

Candidate Interviews

All personal interviews are conducted individually and by invitation only. Candidates will be informed by e-mail within 2 weeks of the application deadline whether or not they have been invited for a personal interview. We will offer four interview dates in January. Candidates coming on one of the interview dates will hear an overview of our program and then will meet with a number of the staff psychologists. Some time is left over at the end for candidates to meet with additional staff persons who are key to candidates' interests as well. We adhere strictly to the selection process guidelines established by the Association of Psychology Postdoctoral and Internship Centers (APPIC).

Match Process

We follow the match policies established by APPIC. Consistent with our program's philosophy of viewing the internship year as likely the last chance for more generalist clinical training before specialization at the postdoctoral level, we have one match number for all 3 positions. The only information that we may communicate to applicants prior to the February Match deadline is whether they are still under consideration for admission. Additional information regarding the match is available through the APPIC National Matching Program at <http://www.natmatch.com/psychint>.

TRAINING SETTING

EPVAHCS is a Complexity Level 2 facility that provides outpatient behavioral and medical healthcare to Veterans in Southern New Mexico, El Paso, and surrounding cities. The El Paso VA includes four Community-Based Outpatient Clinics (CBOCs) located in Las Cruces, NM and El Paso, TX. It also includes a brand new behavioral health facility that we call the VA Wellness Center. The majority of training takes place at the VA Wellness Center. Our VA is situated on the Fort Bliss military base next door to William Beaumont Army Medical Center.

The city of El Paso is known as the "Sun City" and is located at the westernmost point of the state of Texas. It shares a border with Ciudad Juarez in Mexico, which is accessible by a bridge that links the two cities. El Paso enjoys 300 days of sunshine a year and boasts a low cost of living. Within the city limits is the Franklin Mountains State Park

with great options for recreation including taking a ride on the Wyler Aerial Tramway. Also within driving distance is the Hueco Tanks State Historic Site and the White Sands National Monument.

TRAINING MODEL AND PROGRAM PHILOSOPHY

The El Paso VA Psychology Internship Program is committed to close supervision and competency-based training in a collegial setting. Our philosophy is that all practicing psychologists should have a strong foundation in general clinical psychology and the ability to apply empirical data to clinical procedures and assessment. We adhere to a Scientist-Practitioner model of psychology.

The program follows a traditional one-to-one apprenticeship model in which the intern works closely with her or his supervisor. Primary areas of skills are in clinical assessment and intervention, consultation, scholarly inquiry, and awareness of and sensitivity to professional, ethical, legal, and diversity issues. Although our psychology staff provides a number of specialized services, we believe that training in clinical and counseling psychology at the doctoral level should be broadly based rather than narrowly focused.

Training Schedule and Rotations

The intern will be assigned to a full-time, major rotation in the General Mental Health clinic for the entire internship year. Interns will also participate in minor rotations that are 6 months in duration. Minor rotation options include Video and Telehealth, Special Exams Unit (Compensation and Pension evaluation), Suicide Prevention & Crisis Intervention, Home-Based Primary Care (HBPC), Substance Use Disorders (SUD), Trauma Related Disorders, Psychological Assessment, Transplant Program, Sleep Disorder Program and Mental Health Intensive Case Management (MHICM). Additionally, interns are required to learn at least one Evidence-Based Treatment (EBT) during the training year and will rank-order their EBT preferences at the start of internship. Interns will have the opportunity to discuss and develop their individual learning goals within each placement. **It is expected that each intern will spend a minimum of 10 hours face-to-face time with patients per week.**

PROGRAM GOALS AND OBJECTIVES

The overarching mission of the El Paso VA Psychology Internship Program is to train psychology students who will attain general entry level practice competencies and can function effectively as professional psychologists in a broad range of interprofessional settings. The primary goal of our doctoral program is to train interns to provide a full range of psychological services for a widely diverse patient population and to attain competency for entry-level, independent practice.

PROGRAM STRUCTURE

In each of the major and minor rotations, interns will have routine, on-site supervision by a licensed clinical psychologist. In the minor rotation for Video and Telehealth, one hour per week of supervision will be provided remotely via video conference by the licensed psychologist who supervises that rotation. Additional clinical consultation, as appropriate, will also be available from the disciplines of psychiatry, social work, and physicians from other departments. The major rotations will comprise approximately 22 hours per week and minor rotations approximately 10 hours per week, leaving 4 hours each for supervision and didactics. Clinical supervision will be comprised of 2 individual hours provided by the major rotation supervisor, 1 individual hour provided by the minor rotation supervisor and 1 hour of group supervision provided by the director of training or other psychology supervisors. Supervision methods will include live observation, record review, and video/audio-recording of sessions.

Each intern has four or five primary supervisors throughout the year who are each responsible for the training experiences on their specific rotations. Supervisors assist in selecting patients and making referrals. The degree of responsibility given the intern and the amount of structure provided depends on his or her level of prior experience and grasp of the rotation.

Interns will receive 2 formal evaluations from their rotation supervisors at the midpoint and end of the rotation for a total of 4 formal evaluations by the end of the training year. Ongoing informal evaluation and feedback will be provided throughout the rotations.

TRAINING EXPERIENCES

MAJOR ROTATION:

General Mental Health (GMH)- Behavioral Health Interdisciplinary Program (BHIP)

The General Mental Health (GMH) clinic provides a range of outpatient mental health services to Veterans and their families including medication management, psychological assessment, individual and group therapy, family and couples' therapy, and Evidence-Based Therapies (EBTs). All GMH staff are divided into smaller interdisciplinary teams (i.e., BHIPs) and use a team-based approach to facilitate patient care. GMH also provides curriculum-based programming similar to an intensive outpatient treatment model that includes 3 treatment tracks: General, Trauma, and Life Skills. Interns in

GMH will serve as a member of one of the BHIP team and will work closely with other disciplines to develop and implement treatment plans. As a BHIP team member, interns will also learn how to provide consultation. Interns will gain extensive experience with a broad range of assessments and interventions, and will be exposed to Veterans with psychiatric disorders across the full diagnostic spectrum. Interns will also have the opportunity to tailor aspects of their training in GMH according to their areas of interest. For example, they will have the opportunity to receive training in health-based interventions, trauma assessment and treatment, or group psychotherapy including intensive interpersonal group psychotherapy. Interns will participate in psychological assessments and EBTs in GMH. Interns will be assigned a total of 2 primary supervisors for the GMH rotation for a duration of 6 months each in order to provide a varied range of supervisory experiences and professional development opportunities.

MINOR ROTATIONS

Trauma Related Disorders
Video and Telehealth
Home Based Primary Care (HBPC)
Psychological Assessment
Suicide Prevention and Crisis Intervention
Special Exams Unit- Compensation & Pension (C&P)
Substance Use Disorders (SUD)
Transplant Psychology (when available)
Sleep Disorders

REQUIREMENTS FOR COMPLETION

At the start of internship, interns will be assessed to determine baseline 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, a training plan will be developed in collaboration with each intern that will address areas of weakness or gaps in experience.

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

1. Professionalism
2. Interpersonal Effectiveness
3. Research/Application of Science
4. Cultural Competence
5. Professional Ethics
6. Assessment & Patient Feedback
7. Intervention & Treatment Planning
8. Consultation
9. Supervision

At the beginning of the training year, interns will receive a detailed description of the competency elements including benchmarks and behavioral anchor points. At the completion of each training rotation, the intern is rated on all competency elements that apply to that rotation. In addition to these formal competency ratings, a narrative summary of the intern's performance over the evaluation period is provided with information about the intern's progress, strengths, and areas for growth.

All VA psychology internships are exactly 52-week experiences. To successfully complete the program, each intern needs the combination of supervised professional experience, any educational leave (authorized absence), accrued sick and annual (vacation) leave to total 2080 hours. In the event of extended sickness, time off for pregnancy and child care or other exigencies, the intern may have to be placed on leave without pay (LWOP) status, thereby delaying his or her finishing the internship with the cohort class and necessitating the continuation of training into the subsequent training year.

Summary of Requirements for Completion

- Minimum of 200 hours of clinical supervision
- Minimum of 500 hours of direct patient care (10 hours per week)
- 4 formal case presentations (2 assessment cases, 2 psychotherapy cases)
- 6 psychological assessment reports (minimum of 2 must be integrated to include at least one cognitive assessment and one objective personality assessment)
- Achieve competency in at least one Evidence-Based Therapy (must successfully reach competency and completion of the selected EBT protocol with a minimum of 2 patients)
- Attend at least 90% of all didactic trainings
- Achieve High Intermediate ratings on 100% of competency elements on final intern evaluations.
- Complete evaluations on didactic trainings and supervision requirements.

FACILITY AND TRAINING RESOURCES

Interns are provided with a work space and secure networked computers necessary for patient care and administrative responsibilities. They have access to the VA online databases such as PsychInfo and PubMed as well as VA Intranet and Internet resources for clinical work. Interns will also have access to a wide range of psychological assessments.

ADMINISTRATIVE POLICIES AND PROCEDURES

The VA El Paso Healthcare System's policy on Authorized Leave is consistent with the national standard. You are welcome to discuss this with the Director of Training.

Privacy policy: We collect no personal information from you when you visit our web site.

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.

Due Process: All trainees are afforded the right to due process in matters of problematic behavior and grievances. Due process procedures and policies are reviewed during orientation and are described below.

DUE PROCESS & REMEDIATION POLICY

This policy provides doctoral interns and training faculty a definition of problematic performance, a listing of sanctions and an explicit discussion of due process.

Definition of Problematic Performance: Problematic performance is said to be present when supervisors perceive that an intern's competence, behavior, professional values, professional relationships, or other characteristics significantly disrupt the quality of his or her clinical services; his or her relationship with peers, supervisors, or other staff; or his or her ability to comply with appropriate standards of professional behavior.

Behaviors reach a problematic level when they include one or more of the following characteristics:

- * The intern does not acknowledge, understand, or address the problem
- * The problem is not merely a deficit in skills, which could be rectified by further instruction and training
- * The intern's behavior does not improve as a function of feedback, remediation, effort, and/or time
- * The professional services provided by the intern are negatively affected
- * The problem affects more than one area of professional functioning
- * The problem requires a disproportionate amount of attention from training supervisors

Some examples of problematic behaviors include:

- * Engaging in dual role relationships
- * Violating patient confidentiality
- * Failure to respect appropriate boundaries
- * Failure to meet minimum threshold criteria on competency evaluations within specified timeframes
- * Failure to identify and report patients' high risk behaviors

- * Failure to complete written work in accordance with supervisor and/or program guidelines
- * Treating patients, peers, and/or supervisors in a disrespectful or unprofessional manner
- * Plagiarizing the work of others or giving one's work to others to complete
- * Repeated tardiness
- * Unauthorized absences

NOTE: this list is not exhaustive. Problematic behaviors also include behaviors discouraged or prohibited by APA's Ethical Guidelines and VA policies and procedures. It is a matter of professional judgment as to when such behaviors are serious enough to constitute "problematic performance."

Procedures for Responding to Problematic Performance: When it is identified that an intern's skills, professionalism, or personal functioning are problematic, supervisors are expected to notify the intern immediately of these concerns. Supervisors should present these concerns to the intern using the Intern Evaluation Form, even if the problematic performance occurs outside of a formal evaluation period. Supervisors are also expected to immediately notify the Director of Training (DoT) of the problematic intern performance. The DoT, with input from other relevant supervisory staff, then initiates the following procedures:

1. The negative evaluation(s) will be reviewed by the DoT and other supervisor(s) involved and a determination made as to what action needs to be taken to address the problems identified.
2. After reviewing all available information, the DoT and involved supervisor(s) may adopt one or more of the following steps, or take other appropriate action:
 - a. The DoT may elect to take no further action.
 - b. The DoT may direct the supervisor(s) to provide additional constructive feedback and supervisory methods for addressing the identified problem areas. This process may also assist supervisor(s) in addressing support needed for a documented condition protected under ADA that does not interfere with the trainee becoming a psychologist. If such efforts are not successful, the issue will be revisited by the DoT and referral to Training Committee may be initiated.
 - c. The intern's graduate program Director of Training may also be consulted on the matter, depending on the seriousness of the issue(s).
 - d. Remedial recommendations based on the Intern Evaluation Form elements may be made, or referral to the Training Committee will be made and a probationary Performance Improvement Plan may be put into place.

3. Where the DoT determines that *remedial* action is required, the identified problematic performance of behavior must be systematically addressed. Possible remedial steps include (but are not limited to) the following:
 - a. Increased supervision, either with the same or other supervisors.
 - b. Change in the format, emphasis, and/or focus of supervision.
 - c. Change in rotation or other training experiences.
 - d. Additional modeling of desired behaviors by a supervisor, e.g.s., demonstrating a skill in a session, assessment, group, etc.
 - e. Recommendations of a leave of absence. HR will be informed to assist the intern in procedures.

4. Alternatively, depending upon the seriousness of the problematic performance, the DoT will involve the Training Committee and may place the intern on *probation* with a formal Performance Improvement Plan (PIP) which specifies that the committee, through the supervisors and DoT, will actively and systematically monitor for a specific length of time, the degree to which the trainee addresses, changes, and/or otherwise improves the problem performance or behaviors. If it is determined that a formal Performance Improvement Plan must be implemented, then the DoT will initiate involvement of Human Resources. The Performance Improvement Plan is a written statement to the trainee that includes the following items:
 - a. A description of the problematic performance behavior.
 - b. Specific behavioral recommendations for rectifying the problems. E.g., adhering to documentation timeframes, providing session recordings to supervisor, enacting a particular skill such as making clear suicide risk assessments, etc.
 - c. Weekly review of progress between intern and intern supervisor; Bi-weekly review of progress by supervisor and DoT; Monthly review of progress by Training Committee. During weekly reviews, intern supervisor provides data and feedback to intern about status of progress. Review meetings with the intern are documented by the supervisor and documentation is submitted to the DoT on a weekly basis.
 - d. Specific timeframe by which the behavioral changes and adherence to recommendations must be met to be removed from probation.
 - e. Competency domains in which the intern's performance is satisfactory. Areas of satisfactory performance must be maintained while the intern works to correct the identified problematic performance behavior(s).

- f. Procedures to assess at each review period whether the problem has been appropriately rectified.

The intern's graduate program Director of Training will be advised that the intern has been placed on probation and a copy of the PIP will be sent to the graduate program Director of Training for any additional input he or she might have. In addition, the EPVAHCS Chief of MH Service, EPVAHCS Chief of Education, the VA Office of Academic Affiliations, and VA Regional Counsel will be alerted that a formal PIP has been issued.

5. Following the delivery of a formal PIP, the DoT will meet with the trainee to review the required remedial steps. The trainee may elect to accept the conditions or may grieve the Training Committee's decision following the intern grievance policy. In either case, DoT will inform the intern's graduation school Director of Clinical Training to indicate the nature of the problematic performance and the steps taken by the Training Committee. Once the Training Committee has issued an acknowledgement notice of the PIP, the intern's status will be reviewed using the timelines listed on the PIP.

Failure to Correct Problematic Performance: When the defined remediation recommendations do not rectify the problematic performance within the defined time frame, or when the trainee seems unable or unwilling to alter his or her behavior, the Training Committee may need to take further formal action. If an intern on probation has not improved sufficiently to rectify the problems under the conditions stipulated by the PIP, the Training Committee will conduct a formal review and then inform the intern in writing that the conditions for removing the intern from probation have not been met. The Training Committee may then elect to take any of the following steps, or other appropriate action:

1. Extend the Performance Improvement Plan for a specified period of time.
2. Inform the intern that the Training Committee is recommending that he or she be terminated from the internship program. The EPVAHCS Chief of MH Service, EPVAHCS Chief of Staff for Education, the VA Office of Academic Affiliations, and VA Regional Counsel will be informed of the Training Committee recommendation that the intern be terminated immediately. HR will be consulted to ensure proper procedure within VA policy for terminating an intern. The intern's graduate program Director of Clinical Training will be informed that the intern will not successfully complete the internship program. The Training Committee may specify to the graduate program those settings in which the former intern can and cannot function adequately. In case of termination, the intern is expected to complete all pending documentation on patients as well as any pending administrative tasks before out-processing.
3. When the Training Committee determines that the intern is not suited for a career in professional psychology, the committee may recommend a career shift for the intern,

and withhold endorsement for professional practice should the trainee later seek licensing in any jurisdiction.

4. Except when the Training Committee determines that the intern is not suited for a career in professional psychology, the intern does get credit for all training hours completed.

Appeal Process: An intern may appeal the decision of the Training Committee by submitting a detailed response to the recommendations of the Training Committee to the internship Training Director. A review panel, comprising 3 VA psychology faculty members, will be appointed by the Director of Training with the restriction that no one involved in the original action shall be on the panel. This panel will convene within 2 weeks of receipt of the intern's written response document. Legal representation from VA Regional Counsel shall be available to the panel concerning due process issues and the EPVAHCS Chief of MH Service, EPVAHCS Chief of Education, the VA Office of Academic Affiliations will also be informed and available for consultation. The DoT shall present the position of the Training Committee and the intern, together with any counsel he or she may choose, shall present the appeal. The Training Committee shall abide by the panel's judgment if it recommends a change to the intern's PIP or continuation of training (in the event that the Training Committee has recommended that intern be removed from the program). Final decisions will be presented in writing to the intern by the DoT or by a member of the panel if the DoT is the person of concern in the intern's appeal.

All of the above steps will be appropriately documented and implemented in ways that are consistent with due process, including opportunities for trainees to initiate grievance proceedings to challenge Training Committee decisions.

GRIEVANCE PROCEDURES

Due process ensures that decisions about interns are not arbitrary or personally biased. All interns are given guidance for expressing concerns about any aspect of the internship (see below) and staff have clear steps for approaching interns about problems they may be having in the internship (see Due Process Policy). Intern supervisors are expected to be receptive to intern complaints. We encourage communication about concerns early and often with the intern, supervisor(s), and academic programs in dialogue.

- I. **Informal Mediation**: The discussion of concerns begins in supervision, between intern and supervisor, and may expand to include the Director of Training as part of the consultative process. We view this as part of a mentoring process,

professional development, and making use of supervision to improve professional practice. This is not included in the intern's file.

- a. Intern brings concern to their supervisor whenever identified and as part of the expected process for addressing professional complaints or concerns.
 - i. Supervisor and intern may agree to recommended changes to the learning environment or behaviors to resolve the concern.
- b. Intern brings concern to the Director of Training if the matter has not found satisfactory resolution with the primary supervisor on a rotation, or if the intern feels in any way unsafe to directly address a matter with the rotation supervisor, s/he may present a concern to the Director of Training (DoT).

II. **Formal Grievances**: If resolution of a concern is not reached by informal mediation and/or if the matter to be addressed is more significant than informal mediation is designed to resolve, the DoT will determine if formal procedures are required (see Due Process Policy).

- a. Written Responses—Intern will submit written grievance to DoT. Intern grievances may include challenging a performance rating, disagree with a remediation plan or Performance Improvement Plan, establish a complaint against clinical faculty or other staff, or challenging a program policy or procedure.
 - i. Formal grievances by interns will begin with notification to the DoT in writing. If the grievance is against the DoT, the intern can file the grievance with the Chief of Behavioral Health Service. The written grievance will include the following:
 1. The grievance and the date the incident(s) occurred
 2. Suggestion of ways to resolve the problem
 3. Information regarding any previous meetings to attempt to resolve the problem
 - ii. A response to the intern's grievance will be made within 5 business days by the Director of Training or Chief of Behavioral Health Service. The response will include written recommendations for resolving the issue(s).
- b. Review Panel—If the intern wishes to appeal written recommendations the matter will go to a final Review Committee comprised of the internship training committee and Chief of Behavioral Health Service.
 - i. Interns may present their grievance directly to the Review Panel. The intern may invite a staff member of his/her choice to provide advocacy and emotional support.
 - ii. The body to hear the formal grievance will be assembled as soon as possible and in all cases within three weeks from the presentation of the formal grievance. If the grievance is against the Director of Training or another individual normally assigned to this

- body, that individual is not involved in the body's deliberation and may only attend to provide testimony, as indicated.
- iii. The Review Panel may involve the Director of Clinical Training from the intern's academic program.
 - iv. Any formal grievance and its resolution will be documented and copies forwarded to the Director of Clinical Training from the intern's academic program.
 - v. Recommendations by the Review Committee will constitute a final decision by the internship training program to address and resolve the intern's concern(s).

TRAINING STAFF

AUGUSTUS, Andreana T.

Present VA Position: Staff Psychologist, General Mental Health and SMI

Area of Specialization: Forensic Psychology

Degree: Ph.D., University of Denver, 2013

E-mail address: Andreana.Augustus@va.gov

Licensure: Texas

Theoretical Orientation: Cognitive-Behavioral

Clinical/Research Interests: Forensic Psychology, Competency to Stand Trial Evaluations, Competency Restoration Procedures, Malingering Evaluations, Violence Risk/Threat Assessment, Acute Psychiatric Treatment

EBTs Supervised: N/A

Intern Training Rotation: General Mental Health; Assessment

Brief Bio: Dr. Augustus is a Staff Psychologist in the General Mental Health program specializing in the assessment, diagnosis, and treatment of Severe Persisting Mental Illness (SPMI). She is also a Texas Licensed Forensic Examiner. Before joining El Paso VA, Dr. Augustus was Chief Psychologist at North Texas State Hospital's (NTSH) acute adult psychiatric/forensic admission unit. The unit served patients committed on Emergency Detention Order, Temporary Commitment, and pursuant to Texas Code of Criminal Procedure 46B – Incompetency to Stand Trial. Prior to that, Dr. Augustus also served as Chief Psychologist at NTSH's extended care unit. Dr. Augustus completed her post-doctoral fellowship at NTSH in clinical & forensic psychology, and doctoral internship at Northeastern Oklahoma Psychology Internship Program (NOPIP) – Laureate Psychiatric Clinic & Hospital in acute inpatient psychology.

BLUM, Carol S.

Present VA Position: Staff Psychologist, GMH Telemental Health

Area of Specialization: Clinical Psychology

Degree: Ph.D., University of Montana, 1991

E-mail address: Carol.Blum@va.gov

Licensure: Montana, Hawaii, New Mexico

Theoretical Orientation: Integrative, Client-Centered, Interpersonal, Cognitive-Behavioral

Clinical/Research Interests: Attachment orientation, mindfulness practices and their effects on psychological well-being, Trauma/PTSD

EBTs Supervised: N/A

Intern Training Rotation: Telemental Health

Brief Bio: Dr. Blum is a staff psychologist with the General Mental Health team via Clinical Video Telehealth (CVT) services. She is one of two psychologists who supervise the Telehealth minor rotation. Dr. Blum completed her doctoral internship at Primary Children's Medical Center in Salt Lake City. She worked for several years at a community mental health center in western Montana, specializing in therapy with children, adolescents and families before starting a private practice. In her private practice she did extensive work with domestic violence, sexual abuse of children, sexual assault and other forms of trauma, worked with depression, anxiety, attachment

disorder and marital discord. She also did both forensic and custody evaluations and testified as an expert witness. Her private practice in rural Montana and on the Big Island of Hawaii included a wide variety of psychological services offered to clientele across the life span. She also provided clinical supervision to graduate students in practicum as well as graduate psychologists seeking licensure. She began working for the El Paso VA in the summer of 2017. Dr. Blum engages in psychotherapy with a client-centered eclectic approach, bringing cognitive-behavioral, EMDR, mindfulness, interpersonal, and/or attachment orientations that are individually tailored to client needs.

Candelario, Emilia A.

Present VA Position: Acting Chief of Mental Health Services

Area of Specialization: Clinical Psychology- Trauma; Substance Use Disorders

Degree: Ph.D., University of California, Santa Barbara, 2009

E-mail address: Emilia.Candelario@va.gov

Licensure: California

Board Certification: ABPP- Clinical

Theoretical Orientation: Interpersonal; Cognitive-Behavioral

Clinical/Research Interests: Trauma/PTSD; Multicultural Competence in Counseling; Training & Competency in Clinical Supervision

EBTs Supervised:

- Prolonged Exposure (PE) Therapy
- Motivational Interviewing (MI)
- Motivational Enhancement Therapy (MET)

Intern Training Rotation: General Mental Health

Brief Bio: Dr. Candelario is the Acting Chief of the Mental Health Services department. She developed and headed the Psychology Training Program at El Paso VA HCS as the Director of Training since its start from 2016-2020, until she assumed the new Acting Chief of Mental Health Services role in September 2020. She specializes in the treatment of trauma and substance use disorders. Dr. Candelario served as a VA National Consultant and Trainer for MI/MET from 2014-2019. Prior to her current position with the El Paso VA Healthcare System, she served as a primary supervisor for postdoctoral fellows, doctoral interns, and practicum students at the VA North Texas Medical Center. She also held a faculty appointment at UT Southwestern Medical Center as an Assistant Professor of Psychiatry and was actively involved in the training of medical students and psychiatry residents.

CRUISE, JAMES “CHRIS”

Present VA Position: Home Based Primary Care Psychologist – Las Cruces NM Team

Area of Specialization: Clinical Psychology

Degree: Ph.D., University of Wyoming, 1996

E-mail address: James.Cruise@va.gov

Licensure: New Mexico

Theoretical Orientation: Cognitive-Behavioral and Interpersonal

Clinical/Research Interests: Community-based Mental Health Care in rural and underserved areas, Integrated Behavioral Health Services

Intern Training Rotation: Home Based Primary Care

Brief Bio: Dr. Cruise has a 30-year history of providing community mental health services in rural and underserved areas of Tennessee, Wyoming, West Virginia, North Carolina, and New Mexico. He is currently a Psychologist with the Home Based Primary Care Team in Las Cruces NM with the El Paso VA Health Care Center. Prior to this position, he was a staff psychologist with the Special Exams Unit and IDES program through the El Paso VA. Prior to working for the El Paso VA, he was a psychologist for 11 years with the Eastern Band of Cherokee Indians; initiating the development of the first Infant Mental Health Court Team serving a reservation, and developing pediatric integrated behavioral health teams in school-based and pediatric clinics. He supervised a juvenile justice mental health program covering the seven western counties of North Carolina and the Cherokee Indian Reservation.

ERWIN, Kyle M.

Present VA Position: Staff Psychologist, GMH and Acting Director of Training

Area of Specialization: Counseling Psychology- Trauma; Substance Use Disorders

Degree: Ph.D., Texas Woman's University, 2015

E-mail address: Kyle.Erwin@va.gov

Licensure: New Mexico

Theoretical Orientation: Experiential; Interpersonal; Cognitive-Behavioral

Clinical/Research Interests: Psychotherapy Expertise; LGBTQ Issues; Positive Psychology; Couples Psychotherapy

EBTs Supervised:

- Prolonged Exposure (PE) Therapy
- Cognitive Processing Therapy (CPT)
- Interpersonal Therapy for Depression (IPT-D)
- Motivational Interviewing (MI)

Intern Training Rotation: General Mental Health

Brief Bio: Dr. Erwin is a Staff Psychologist for the General Mental Health team at the El Paso VA. He is also currently serving as the Acting Director of Training for the Psychology Training program at El Paso VA HCS. He specializes in the treatment of trauma, substance use disorders, couples, and LGBTQ Issues. Prior to his current position with the El Paso VA Healthcare System, he served as a supervisor for third year psychiatric residents, doctoral interns, and practicum students at Lexington and Albuquerque VA. He also held a faculty appointment at Texas Woman's University where he taught cultural competency to undergraduate social work majors.

MENZIES, Mark

Present VA Position: Supervisory Psychologist, GMH

Area of Specialization: Clinical Psychology

Degree: Psy.D., James Madison University, 2013

E-mail address: Mark.Menzies28@va.gov

Licensure: New Mexico

Theoretical Orientation: Interpersonal; Cognitive-Behavioral

Clinical/Research Interests: Trauma recovery, personality development, anxiety and depression, integrative psychotherapy, provider self-care, spirituality and religious issues.

EBTs Supervised:

- Cognitive-Processing Therapy for PTSD (CPT)
- Acceptance and Commitment Therapy (ACT)

Intern Training Rotation: General Mental Health & Telemental Health

Brief Bio: Dr. Menzies works as a supervisory clinical psychologist providing individual, group and couple's therapy for a range of conditions. Dr. Menzies serves as the Local EBP Coordinator, a role that supports education and use of evidence-based psychotherapy in the VA. He completed his internship with the Cincinnati VAMC, helping veterans with homeless, substance abuse and trauma issues. Prior to his work with veterans, Dr. Menzies worked with children, teens and families in the child welfare system. He has experience working with individuals across the lifespan, and is trained in dynamically informed and cognitive-behavioral approaches to therapy.

NESBIT-VELTRI, Donna A.

Present VA Position: Supervisory Psychologist, Special Exams Unit

Area of Specialization: Clinical Psychology

Degree: Ph.D., Fairleigh Dickinson University, 1990

E-mail address: Donna.Nesbit-Veltri@va.gov

Licensure: Arizona, New York (inactive)

Theoretical Orientation: Cognitive-Behavioral

Clinical/Research Interests: Police and criminal psychology, forensic psychology, threat assessment, workplace violence prevention

EBTs Supervised: N/A

Intern Training Rotation: Special Exams Unit (C&P Evaluation)

Brief Bio: Dr. Nesbit-Veltri, Ph.D. is the Supervisory Psychologist for the Special Exams Unit. She supervises psychologists in providing a wide range of disability evaluations, including evaluations of veterans and active duty military for claimed conditions of PTSD, mental disorders, and military sexual trauma. She carries her own caseload of disability evaluations as well as performing occupational evaluations. She has extensive experience in the assessment of suicide risk and crisis intervention, as well as threat assessment, and worked in correctional settings for 20 years prior to employment with the VA healthcare system. She is an Adjunct Instructor for the Department of Psychology at the University of Texas-El Paso.

SANK, Victoria E.

Present VA Position: Staff Psychologist, GMH Telemental Health; EBP Coordinator

Area of Specialization: Clinical Psychology

Degree: Psy.D., Florida Institute of Technology, 2015

E-mail address: Victoria.Sank@va.gov

Licensure: New Mexico

Theoretical Orientation: Cognitive-Behavioral; Behavioral

Clinical/Research Interests: Integrated Behavioral Health Care/Health Psychology and the impact of chronic medical illness on psychological well-being; Trauma/PTSD

EBTs Supervised:

- Interpersonal Psychotherapy for Depression (IPT-D)

Intern Training Rotation: General Mental Health; Telemental Health minor

Brief Bio: Dr. Sank is a staff psychologist with the General Mental Health team via in person and Clinical Video Telehealth (CVT) services. She supervises the Telehealth minor rotation. Dr. Sank completed her doctoral internship at the Oklahoma Health Consortium, gaining advanced training with the physical and psychological needs of individuals with diabetes and endocrine disorders. She has gained extensive training in integrated behavioral health care, providing clinical services to individuals across the lifespan in various health care settings (primary care, specialty medical clinics, and inpatient medical facilities). Dr. Sank engages in psychotherapy with a patient-centered/whole-person care approach emphasizing the promotion of self-management as a key goal in therapy.

USHER, Kimberly

Present VA Position: Staff Psychologist, Special Exams Unit, Organ Transplant, Compensation & Pension

Area of Specialization: Clinical Psychology

Degree: Ph.D., Purdue University, 2010

E-mail address: Kimberly.Usher@va.gov

Licensure: New Mexico

Theoretical Orientation: Biopsychosocial, Cognitive Behavioral, Integrative, Client-Centered

Clinical/Research Interests: Clinical: Trauma, Integrated Behavioral health, Acute and Chronic illness, Health promotion and motivation, cognition and medication

Research: Psychological correlates of chronic illness; Organ degeneration and mental health; collaborative treatment and care models, community MH

EBTs Supervised: N/A

Intern Training Rotation: Transplant Psychology

Brief Bio: Dr. Usher is a Psychologist with the Home-Based Primary Care team. Dr. Usher completed her doctoral internship at Devereux Institute for Clinical Training and Research where she trained specifically in trauma and community MH and worked with family services and managed care in the Philadelphia area. She then worked for some years with the US Marine Corps in Quantico, VA as a base-wide deployment and family MH specialist. With the Corps, she specialized in MH pre- and post-deployment trainings and assessments, community education, bereavement support, special-ops debriefing, suicide prevention and management, and school-based interventions for military children. She also worked on projects pertaining to military reintegration and Combat Operational Stress with the Wounded Warrior Project, National Intrepid Center of Excellence (NICOE), the United States Public Health Service Commissioned Corps and Navy BUMED. In addition to an avid interest in health behavior, chronic illness, and integrated care models, Dr. Usher is a nationally certified trauma professional and has worked with adult and child victims of physical and sexual trauma. In her non-VA time, she provides community MH crisis and planning consultation for El Paso school and city agencies. She also works with the El Paso County Office of Emergency Management and local FEMA agencies on MH crisis planning.

Additional Training Staff

Cortes, Erasto, MD and McElroy, Melissa, FNP (Sleep Disorder Rotation)

TRAINEES

Graduate programs of our past and current trainees:

2020-2021

New Mexico State University

University of North Dakota

2019-2020

No Trainees

2018-2019

New Mexico State University

Fielding Graduate University

Graduate programs of our past trainees:

2017-2018

Biola University

Fielding Graduate University

LOCAL INFORMATION

<http://www.elpasotexas.gov/>

<http://mcad.elpasotexas.gov/>

<http://www.utep.edu/artsandculture/>