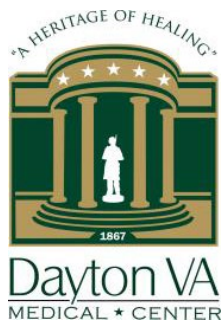


Psychology Postdoctoral Residency Program Emphasis in Primary Care Integration, Women's Health, and Behavioral Medicine

2021-2022



Dayton VA Medical Center
Psychology Postdoctoral Residency Program
Primary Care
4100 West Third Street
Dayton, Ohio 45428



Accreditation Status

The psychology postdoctoral residency program at the Dayton VA Medical Center is accredited by the American Psychological Association. Questions regarding the program's accreditation status may be addressed to: American Psychological Association, Office of Program Consultation and Accreditation, 750 First Street, NE, Washington, DC 20002-4242, phone: (202) 336-5979.

Application & Selection Procedures

To apply to the postdoctoral residency program, please submit the following materials using the APPIC website portal:

1. A cover letter that describes your personal training goals and how the postdoctoral residency program may meet those goals. In your letter, please describe educational, research, and clinical experiences relevant to the program and your career goals.
2. Curriculum Vitae
3. Two (2) letters of recommendation from faculty members and/or clinical supervisors familiar with your clinical and/or research work.
4. A letter or email from the graduate program Training Director specifying current dissertation status and the projected timeline for completing all requirements for the doctoral degree (if the degree has already been completed, please submit the certificate or similar official documentation).
5. A letter or email from the internship Training Director indicating good standing in the internship program and expected completion date (if the internship is already completed, please submit certificate or similar official documentation).
6. One (1) *official* graduate transcript from *each* graduate program attended.

Submission:

Please use the APPA CAS (APPIC Psychology Postdoctoral Application) online centralized application system to submit your application. Paper applications will NOT be accepted or reviewed. The APPA CAS can be accessed with the following link: <https://appicpostdoc.liaisoncas.com>

The deadline for all completed application materials is: **January 4, 2021.**

Please direct any questions to:

Kelly Obert - Director of Training
Psychology Postdoctoral Residency Program
Primary Care (11P)
Dayton VA Medical Center
4100 West Third Street
Dayton, OH 45428

Telephone: (937) 268-6511 x4082
Email: 552fellowship@va.gov

Selection and Interview Process: Written application materials will be reviewed upon receipt by relevant psychology training faculty. Top candidates will be invited for virtual interviews. Virtual interviews will take place in late January to mid February. Virtual interviews may take place via telephone or video conferencing system. In person tours of the grounds can be arranged as requested by the applicant. Candidates for interview will be selected based on several criteria, including meeting the requirements described below (see page 5 for Postdoctoral Residency Program Tables), clinical experiences, and applicant fit with the program. Communications regarding interview scheduling will be done through email.

Application due date: January 4, 2021

Interview timeframe: Late January - Mid February, by videoconference or telephone.

Official notification date: Uniform Notification Date, Monday, February 22, 2021

National VA Eligibility Requirements

www.psychologytraining.va.gov/eligibility.asp

The Department of Veterans Affairs (VA) adheres to all Equal Employment Opportunity and Affirmative Action policies. As a Veterans Health Administration (VHA) Health Professions Trainee (HPT), you will receive a Federal appointment, and the following requirements will apply prior to that appointment

1. **U.S. Citizenship.** HPTs who receive a direct stipend (pay) must be U.S. citizens. Trainees who are not VA paid (without compensation-WOC) who are not U.S. citizens may be appointed and must provide current immigrant, non-immigrant or exchange visitor documents.
2. **U.S. Social Security Number.** All VA appointees must have a U.S. social security number (SSN) prior to beginning the pre-employment, on-boarding process at the VA.
3. **Selective Service Registration.** Male applicants born after 12/31/1959 must have registered for the Selective Service by age 26 to be eligible for U.S. government employment, including selection as a paid or WOC VA trainee. For additional information about the Selective Service System, and to register or to check your registration status visit <https://www.sss.gov/>. Anyone who was required to register but did not register before the age of 26 will need to apply for a Status Information Letter (SIL) and request a waiver. Waivers are rare and requests will be reviewed on a case by case basis by the VA Office of Human Resources Management. This process can take up to six months for a verdict.
4. **Fingerprint Screening and Background Investigation.** All HPTs will be fingerprinted and undergo screenings and background investigations. Additional details about the required background checks can be found at the following website: <http://www.archives.gov/federal-register/codification/executive-order/10450.html>.
5. **Drug Testing.** Per Executive Order 12564, the VA strives to be a Drug-Free Workplace. HPTs are not drug-tested prior to appointment, however are subject to random drug testing throughout the entire VA appointment period. You will be asked to sign an acknowledgement form stating you are aware of this practice. See item 8 below.
6. **Affiliation Agreement.** To ensure shared responsibility between an academic program and the VA there must be a current and fully executed Academic Affiliation Agreement on file with the VHA Office of Academic Affiliations (OAA). The affiliation agreement delineates the duties of VA and the affiliated institution. Most APA-accredited doctoral programs have an agreement on file. More information about this document can be found at <https://www.va.gov/oaa/agreements.asp> (see section on psychology internships).

Post-degree programs typically will not have an affiliation agreement, as the HPT is no longer enrolled in an academic program and the program is VA sponsored.

7. **TQCVL.** To streamline on-boarding of HPTs, VHA Office of Academic Affiliations requires completion of a Trainee Qualifications and Credentials Verification Letter (TQCVL). An Educational Official at the Affiliate must complete and sign this letter. For post-graduate programs where an affiliate is not the program sponsor, this process must be completed by the VA Training Director. Your VA appointment cannot happen until the TQCVL is submitted and signed by senior leadership from the VA facility. For more information about this document, please visit <https://www.va.gov/OAA/TQCVL.asp>
 - a. **Health Requirements.** Among other things, the TQCVL confirms that you, the trainee, are fit to perform the essential functions (physical and mental) of the training program and immunized following current Center for Disease Control (CDC) guidelines and VHA policy. This protects you, other employees and patients while working in a healthcare facility. Required are annual tuberculosis screening, Hepatitis B vaccine as well as annual influenza vaccine. *Declinations are EXTREMELY rare.* If you decline the flu vaccine you will be required to wear a mask while in patient care areas of the VA.
 - b. **Primary source verification of all prior education and training** is certified via the TQCVL. Training and Program Directors will be contacting the appropriate institutions to ensure you have the appropriate qualifications and credentials as required by the admission criteria of the training program in which you are enrolled.
8. **Additional On-boarding Forms.** Additional pre-employment forms include the Application for Health Professions Trainees (VA 10-2850D) and the Declaration for Federal Employment (OF 306). These documents and others are available online for review at <https://www.va.gov/oaa/app-forms.asp>. Falsifying any answer on these required Federal documents will result in the inability to appoint or immediate dismissal from the training program.
9. **Proof of Identity per VA.** VA on-boarding requires presentation of two source documents (IDs). Documents must be unexpired and names on both documents must match. For more information visit: <https://www.oit.va.gov/programs/piv/media/docs/IDMatrix.pdf>

Additional information regarding eligibility requirements

- Trainees receive term employee appointments and must meet eligibility requirements for appointment as outlined in VA Handbook 5005 Staffing, Part II, Section B. Appointment Requirements and Determinations. https://www.va.gov/vapubs/viewPublication.asp?Pub_ID=646&FTYPE=2
- Selective Service website where the requirements, benefits and penalties of registering vs. not registering are outlined: <https://www.sss.gov/Registration/Why-Register/Benefits-and-Penalties>

Additional information specific suitability information from Title 5 (referenced in VHA Handbook 5005):

(b) Specific factors. In determining whether a person is suitable for Federal employment, only the following factors will be considered a basis for finding a person unsuitable and taking a suitability action:

- (1)** Misconduct or negligence in employment;
- (2)** Criminal or dishonest conduct;
- (3)** Material, intentional false statement, or deception or fraud in examination or appointment;
- (4)** Refusal to furnish testimony as required by § 5.4 of this chapter;
- (5)** Alcohol abuse, without evidence of substantial rehabilitation, of a nature and duration that suggests that the applicant or appointee would be prevented from performing the duties of the position in question, or would constitute a direct threat to the property or safety of the applicant or appointee or others;
- (6)** Illegal use of narcotics, drugs, or other controlled substances without evidence of substantial rehabilitation;
- (7)** Knowing and willful engagement in acts or activities designed to overthrow the U.S. Government by force; and
- (8)** Any statutory or regulatory bar which prevents the lawful employment of the person involved in the position in question.

(c) Additional considerations. OPM and agencies must consider any of the following additional considerations to the extent OPM or the relevant agency, in its sole discretion, deems any of them pertinent to the individual case:

- (1)** The nature of the position for which the person is applying or in which the person is employed;
- (2)** The nature and seriousness of the conduct;
- (3)** The circumstances surrounding the conduct;
- (4)** The recency of the conduct;
- (5)** The age of the person involved at the time of the conduct;
- (6)** Contributing societal conditions; and
- (7)** The absence or presence of rehabilitation or efforts toward rehabilitation.

Post-Doctoral Residency Admissions, Support, and Initial Placement Data

Post-doctoral Residency Program Tables

Date Program Tables are updated: AUGUST 2020

Post-doctoral Residency 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 must meet the following prerequisites to be considered for the program:

1. Have a doctoral degree in Clinical or Counseling Psychology from an accredited program or an accredited re-specialization training program in Clinical or Counseling Psychology.
2. Applicants must have completed an accredited internship program or have completed a VA-sponsored internship (including a new VA internship that is not yet accredited).
3. U.S. citizenship
4. Male applicants born after 12/31/1959 must have registered for the draft by age 26
5. Selected applicants are subject to fingerprinting, background checks, and urine drug screens. Selection decisions are contingent on passing these screens.

(For complete information about eligibility for VA appointment see National VA Requirements on page 3.)

Other Minimum Criteria:

Having training and/or clinical experiences in health or community psychology is preferred, but not required.

Financial and Other Benefit Support for Upcoming Training Year*

Annual Stipend/Salary for Full-time Residents	\$47,197	
Annual Stipend/Salary for Part-time Residents	N/A	
Program provides access to medical insurance for residents?	X Yes	NO
If access to medical insurance is provided:		
Trainee contribution to cost required?	X Yes	NO
Coverage of family member(s) available?	X Yes	NO
Coverage of legally married partner available?	X Yes	NO
Coverage of domestic partner available?	Yes	X NO
Hours of Annual Paid Personal Time Off (PTS and/or Vacation)	Yes - 4hrs accrued/2 week pay period (104 hours total)	
Hours of Annual Paid Sick Leave	Yes - 4hrs accrued/2 week pay period (104 hours total)	
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?	X Yes – to be determined on a case by case basis	NO
Other Benefits (please describe): Authorized Absence for professional development (e.g., professional presentation, EPPP); 10 annual federal holidays (paid); liability protection		

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

Initial Post-Residency Positions

(Provide an Aggregated Tally for the Preceding 3 Cohorts)

		2016-2020	
Total # of residents who were in the 3 cohorts		4	
Total # of residents who remain in training in the residency program		0	
	PD	EP	
Community mental health center	0	0	
Federally qualified health center	0	0	
Independent primary care facility/clinic	0	0	
University counseling center	0	0	
Veterans Affairs medical center	0	2	
Military health center	0	0	
Academic health center	0	1	
Other medical center or hospital	0	1	
Psychiatric hospital	0	0	
Academic university/department	0	0	
Community college or other teaching setting	0	0	
Independent research institution	0	0	
Correctional facility	0	0	
School district/system	0	0	
Independent practice setting	0	0	
Not currently employed	0	0	
Changed to another field	0	0	
Other	0	0	
Unknown	0	0	

*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 the primary position.

Psychology Setting

Training Setting

The Dayton VAMC is part of VISN10, which covers the entire state of Ohio and portions of Kentucky, Michigan, and Indiana. The medical center is located at the west edge of Dayton, in Southwestern Ohio. Much of the pastoral setting was preserved while establishing a modern, state of the art comprehensive medical facility. The current medical center complex consists of approximately 60 buildings on about 240 acres. The medical center is also responsible for four Community Based Outpatient Clinics (CBOCs) in Springfield, Ohio, Middletown, Ohio, Lima, Ohio, and Richmond, Indiana.

The Dayton VAMC is an active teaching hospital affiliated with the Boonshoft School of Medicine at Wright State University. It also has numerous other affiliation agreements with colleges, medical centers, medical schools, universities, and training programs throughout the area along with sharing agreements with other medical centers in the area and the Department of Defense.

The Psychology Training Program staff includes more than 30 psychologists of diverse geographic, ethnic, age, academic, and specialty backgrounds. Clinically, the psychologists serve in various areas of the Medical Center, and their activities encompass direct patient care services within Internal Medicine, Primary Care, Extended Care, Rehabilitation Services, and outpatient and inpatient Mental Health. Administratively, psychology does not exist as a separate entity, but rather psychologists work within and report to relevant service lines, primarily the Mental Health Service Line.

The postdoctoral residency program is primarily located in the Primary Care Outpatient Clinic at the Dayton VA Medical Center. Within the Primary Care Outpatient clinic, psychologists function in the context of a co-located, collaborative Primary Care- Mental Health Integration team (PC-MHI). All PC-MHI psychologists are imbedded within their respective Primary Care "teamlets" that include a primary care provider (PCP), RN, LPN, and an MSA. Services include consultation, assessment, brief therapy, and staff education. Treatments offered are brief, evidence-based interventions, crisis/risk evaluation, and psychoeducational groups that are frequently CBT-informed.

Supervising psychologists are active with a variety of clinical functions and activities in support of medical center programs. These include the Psychiatric Consultation & Liaison team (serving inpatient medical units), Diabetes Self-Management Program, Health Promotion/Disease Prevention, Tobacco Cessation, and the MOVE Program. Other training experiences are based on availability including the Congestive Heart Failure Clinic, the Hematology/Oncology Clinic, and the Sleep Clinic. Supervising psychologists are also involved in provision of specialty type assessments, such as pre-surgical transplantation evaluations.

For more information on the Dayton VA Medical Center, please go to the web site:

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

COVID-19 Statement

The Dayton VA Psychology Training Program seeks to provide the highest quality Veteran care, training, and supervision possible. During this time of global pandemic, a variety of adjustments have been made to ensure continuity of clinical services as well as training experiences and supervision. The safety of our patients, staff, and trainees is a top priority. As such, a significant amount of clinical, supervision, and training experiences may be provided in a "virtual" format for the foreseeable future. Training will be provided with the provision of tele mental health to include both logistical and ethical/clinical considerations. Attention is being paid to ongoing changes in laws, directive, and guidance in the field. It is our expectation that both clinical services and training experiences may be modified over time to meet current needs as we navigate new ways of living in this COVID era.

We are monitoring information daily from sources which include:

VA's Office of Academic Affiliations (OAA)

VA's Office of Mental Health and Suicide Prevention (OMSHSP)

American Psychological Association

Association of Psychology Postdoctoral and Internship Centers (APPIC)

Association of State and Provincial Psychology Boards (ASPPB)

Training Model and Program Philosophy

The postdoctoral residency provides advanced generalist education and training with an emphasis on provision of services within primary care, behavioral health, and women's health. The training and services provided will occur within the frameworks of Patient Centered Medical Home, women's health, health psychology, and specialty medical clinics. The residents will develop expertise in complementary areas of Health Promotion and Disease Prevention, and specialty psychological assessments, such as pre-surgical transplantation evaluations. The residents will have an opportunity to develop and utilize consultation and behavioral health skills needed while providing mental health services in a primary care and inpatient medical settings.

The training provided is consistent with the Practitioner-Scholar model. The program will produce psychologists who understand and implement evidence-based interventions and use their skills to further contribute to our scientific understanding and literature in the field of psychology.

There will be an emphasis in our program on the clinical, consultation, and behavioral health skills needed to provide patient centered care as part of a multidisciplinary team. Multidisciplinary teams in PC-MHI include primary care physicians, nurse practitioners, pharmacists, psychiatrists, social workers, nurses, nutritionists/dieticians, and administrative staff. Our residents will have the opportunity to train with other students and developing professionals from varying disciplines including but not limited to: pharmacology students and nursing students of varying levels.

The Psychology Training Program recognizes and respects the varied interests, backgrounds, and professional goals residents bring to the postdoctoral residency program. Every effort is made to accommodate career aspirations and provide individualized training plans and opportunities for professional development, including interdisciplinary collaboration, membership in professional organizations, attendance at conferences, and pursuit of research interests, such that residents may further develop unique and specific interests.

Aim

The overarching aim of the postdoctoral residency is to produce license-ready, generalist psychologists with advanced competence in health service psychology, with an emphasis on providing services in a variety of interprofessional settings, including primary care, women's health, and medical settings.

Professional Wide Competencies

The postdoctoral residency program provides broad, generalist training opportunities reflecting the competencies of psychological practice. The profession wide competencies identified in APA's Standards of Accreditation (see also IR C-8 I) are evaluated across training experiences. The competencies are documented on formal competency evaluation forms.

A. Research

Demonstration of integration of science and practice. Respect for and application of scientifically derived knowledge.

- Displays scientific critical thinking
- Demonstrate advanced level knowledge of core science (i.e., scientific bases of behavior) and scientific foundations to practice, with a focus on evidence-based practice
- Demonstrate understanding of core literature relevant to specific work area/rotation. Independently incorporate discussion of literature within the context of supervision.
- Demonstrate the substantially independent ability to critically evaluate research or other scholarly activities (e.g., case conference, presentation, publications) at the local (including the host institution), regional, or national level.

B. Ethical and Legal Standards

Responds professionally in increasingly complex situations with a greater degree of independence across settings. Application of ethical concepts and awareness of legal issues regarding professional activities with individuals, groups, and organizations.

- Knowledgeable of and acts in accordance with the Ethical, Legal and Professional Standards and Guidelines.
- Recognition of ethical dilemmas as they arise and apply ethical decision-making processes to resolve the dilemmas; seeks feedback from appropriate professionals
- Conduct self in an ethical manner in all professional activities

C. Individual and Cultural Diversity

Conducts all professional activities with sensitivity to human diversity, including the ability to deliver high quality services to an increasingly diverse population. Demonstrate knowledge, awareness, sensitivity, and skills when working with diverse individuals and communities who embody a variety of cultural and personal background and characteristics.

- Demonstrates an understanding of how one's personal/cultural history, attitudes, and biases may affect how he/she understands and interacts with people different from oneself
- Demonstrates independent application of knowledge and approach in working effectively with the range of diverse individuals and groups

D. Professional Values, Attitudes, and Behaviors

Responds professionally in increasingly complex situations with a greater degree of independence across levels of training. Monitors and independently resolves situations that challenge professional values and integrity

- Conducts self and behaves in ways that reflect the values and attitudes of psychology, including integrity, deportment, professional identity, accountability, lifelong learning, and concern for the welfare of others.
- Independently attends to priorities and completes tasks in a timely manner. Attends scheduled meetings/appointments on time.
- Displays consolidation of professional identity as a psychologist; effectively conveys to others the roles/skill set that the psychologist brings to specific settings
- Accurately self-assesses competence in all competency domains; integrates self-assessment in practice; recognizes limits of knowledge/skills and acts to address them; has extended plan to enhance knowledge/skills
- Actively seek and demonstrate openness and responsiveness to feedback and supervision.
- Self-monitors issues related to self-care and promptly intervenes when disruptions occur; recognizes the importance of health professional self-care in medical settings

E. Communication and Interpersonal Skills

Responds professionally in increasingly complex situations with a greater degree of independence across levels of training. Demonstrates effective interpersonal skills and the ability to manage difficult communication well. Verbal communication is informative, clear, and appropriate to the audience

- Develops and maintains effective relationships with a wide range of individuals, including colleagues and staff within and outside the immediate workgroup and a wide variety of clients (both internal and external); Demonstrates understanding that patient care is the responsibility of a team of professionals, not a single clinician, and practices accordingly
- Produce and comprehend oral, nonverbal, and written communications that are informative and well-integrated; demonstrate a thorough grasp of professional language and concepts; uses language appropriate to the patient's and clinician's education and culture; uses visual aids to enhance a patient's and family's understanding of plan of care, intervention, etc.

F. Assessment

Conducts evidence-based assessment consistent with the scope of Health Service Psychology

- Selects and applies assessment methods that draw from the best available empirical literature and that reflect the science of measurement and psychometrics; collects relevant data using multiple sources and methods appropriate to the identified goals and questions of the assessment as well as relevant diversity characteristics of the service recipient; understands strengths and limitations of screening and assessment tools designed for specialty mental health services when adapted for primary care/medical settings
- Independently understands the strengths and limitations of diagnostic approaches and interpretation of results from multiple measures for diagnosis and treatment planning
- Utilizes case formulation and diagnosis for intervention planning in the context of stages of human development and diversity and treatment setting
- Independently and accurately conceptualizes the multiple dimensions of the case based on the results of assessment
- Independently applies knowledge of evidence-based practice, including empirical bases of assessment

G. Intervention

Demonstrates competence in evidence-based interventions consistent with the scope of Health Service Psychology

- Demonstrates the ability to establish and maintain effective relationships with the recipients of psychological services.
- Application of evidence-based intervention specific to the service delivery goals and treatment setting; Application of relevant research literature to clinical decision making
- Displays clinical skills with a wide variety of clients and uses good judgment even in unexpected or difficult situations
- Evaluate intervention effectiveness and adapt intervention goals and methods consistent with ongoing evaluation.
- Demonstrates ability to identify risk factors for suicide. Demonstrates knowledge of appropriate interventions and procedures for hospitalizing suicidal patients.

H. Supervision

Supervision and training in the professional knowledge base of enhancing and monitoring the professional functioning of others.

- Understands ethical, legal, and contextual issues of the supervisor role to include evaluation, power, responsibility/liability, and imperative
- Demonstrates knowledge of and effectively addresses limits of competency to supervise
- Actively participates in group supervision and didactic trainings; shares professional perspective and knowledge with others in a manner which is helpful and palatable to others
- Applies knowledge of supervision in direct or simulated practice with psychology trainees or other health professionals. Examples of direct or simulated practice examples of supervision include, but are not limited to, role-played supervision with others, and umbrella supervision with other trainees

I. Consultation and Interprofessional/Interdisciplinary Skills

Intentional collaboration of professionals in health service psychology with other individuals or groups to address a problem, seek or share knowledge, or promote effectiveness in professional activities

- Independently determines situations that require different role functions and shifts roles accordingly to meet referral needs; demonstrates understanding of various contexts of consultation (e.g., patient-centered; consultee-centered; primary care; inpatient medical setting)
- Demonstrate knowledge and respect for the roles and perspectives of other professions.
- Demonstrates beginning, basic knowledge of and ability to display the skills that support effective interdisciplinary team functioning

Program Structure

Residents will participate in a variety of clinical and consultation experiences during the training year. Core clinical activities will include brief individual and group therapy interventions, psychological assessment, and suicide risk assessments. Consultation activities will include curbside consultations with primary care staff and inpatient medical staff, participation in mental health and primary care meetings, and potential educational trainings for staff and psychology interns. Residents will participate in didactic and professional development activities, as well as a minimum of two (2) hours of weekly individual supervision.

Supervision

Supervision is competency and development based, with consideration that residents are mature learners who are expected to perform with increasing degrees of independence throughout the training year. The program encourages open and ongoing contact between supervisor and resident. Residents can expect to receive a minimum of two (2) hours of individual supervision per week and two (2) hours of weekly didactic series, including group supervision/case consultation and seminars. Additional supervision

meetings will be set up with relevant psychology faculty for more specialized supervision as appropriate. These additional supervision meetings will depend on the resident's areas of interest and the mutual agreement of the resident and the Co-Director of Training on areas the resident would like to focus on and gain additional skills. Methods of supervision will include direct observation, review of notes, and consultation with other mental health professionals interacting with the resident. Residents may have an opportunity to provide umbrella supervision to psychology interns. Residents will also provide formal didactic presentations to the Dayton VAMC throughout the year.

Due to COVID-19, the majority of supervision is delivered virtually, even when the supervisor and resident are in the same building. At this time, both residents and supervisors are reporting to the Dayton VAMC facility. Virtual supervision is accomplished through the use of video-conferencing mediums to conduct individual and group supervision as well as didactic trainings. Supervisors can complete live observation of a resident's clinical work using the VA telehealth system, VA Video Connect, or conference calls. In the case of disconnection, supervision is available using several alternative methods including telephone, Microsoft Teams, email, and face to face. Traditional, face to face supervision is available as warranted. Further, a supervising psychologist is always available in the building in which the resident is practicing. As new information emerges about COVID-19, the residency program will implement appropriate changes to Veteran, staff, and resident interactions, under the direction of medical center leadership, to ensure the safety of all involved.

Method and Frequency of Evaluation

Each resident is expected to develop and demonstrate certain functional and foundational competencies in clinical skills during the training year. The evaluation process is a yearlong ongoing activity that is done formally and informally through oral and written feedback in the context of direct observation of the resident's activities, during face to face supervision, through review of work samples, and through formal semiannual progress review of the various clinical and professional behaviors. The resident will complete a self-evaluation at the start of the training year and the supervisor(s) will provide a formal written evaluation of the competencies at the mid- and end-of-the-year points. Successful completion of the program requires the demonstration of these competencies. Satisfying competencies requires demonstration and observation of a level of knowledge and skill expected of a resident who is preparing to enter the practice of psychology as an independent professional.

In this time of transitions related to the global pandemic, reasonable adjustments may be made to residency requirements for successful completion if necessary. That stated, our emphasis on developing essential competencies will be our top priority as these will need to be met regardless of any other modifications during the residency year.

Training Experiences

As previously stated, a variety of adjustments have been made to ensure continuity of clinical services as well as training experiences and supervision during this time of global pandemic. The safety of our Veterans, staff, and residents is a top priority. As such, a significant amount of clinical, supervision, and training experiences may be delivered in a "virtual" format for the foreseeable future. Attention is being paid to ongoing changes in laws, directives, and guidance within the field and needed adjustments are being made as appropriate. It is our expectation that both clinical services and training experiences may be modified over time to meet current needs as we navigate new ways of living in this COVID-era.

At this time, residents and most staff are working onsite. The majority of the experiences described below are available to residents in a virtual format. There are, however, clinical activities that may take place face to face. When face to face clinical services are necessary and clinically appropriate, residents will have access to required Personal Protective Equipment (PPE) as outlined by the medical center leadership. Residents are never expected or permitted to see a Veteran with active COVID-19 symptoms. While working on our inpatient units, residents will only see Veterans who tested negative for COVID-19 upon admission and remain symptom free. All precautions will be taken to ensure the safety of Veterans, staff, and residents.

Residents will have opportunities to develop and utilize consultation, assessment, diagnostic, and intervention skills while providing mental health and health psychology services in a primary care setting and inpatient and outpatient medical settings. The models for providing the bulk of these services encourage residents to provide services that are evidence-based, timely, strengths-based, and sensitive to the needs of the veteran. Specific training activities as well as their emphasis level are outlined below.

Primary Care-Mental Health Integration/Primary Care Outpatient Clinic – Major Area of Study

The residents will be members of the Prime Care-Mental Health Integration (PC-MHI) team, working in concert with and under the supervision of the PC-MHI psychologists and in collaboration with the other PC-MHI staff (i.e., psychiatrist, social worker, and RN BHL care manager). **This is a rotation which does require limited face to face work using required PPE and safety precautions related to COVID-19.** During this clinical experience, the resident will have opportunities to provide:

- Functional assessments
- Brief, evidence-based psychological interventions
- Consultation on pain and polytrauma conditions
- Psycho-educational classes
- Consultation to primary care providers, RNs, LPNs, social workers, pharmacists, and other support staff
- On-call and crisis management services
- Staff education
- Program Development
- Clinical Leadership activities

Women Health and Wellness Center (WHC) – Major Area of Study

The Women's Health and Wellness Center provides gender specific comprehensive primary care and behavioral health services for women veterans. **This is a rotation which does require limited face to face work using required PPE and safety precautions related to COVID-19.** The residents will have opportunities to provide:

- Functional assessments
- Brief, evidence-based psychological interventions
- Consultation on pain and polytrauma conditions
- Psycho-educational classes
- Consultation to primary care providers, RNs, LPNs, social workers, pharmacists, and other support staff
- On-call and crisis management services
- Staff education
- Program Development
- Clinical Leadership activities, including participation in quarterly Women Veterans Health Committee meetings

Consultation & Liaison (C&L) – Exposure Area of Study

The residents will spend one (1) day per week for a minimum of 6 months with the inpatient psychiatric Consultation & Liaison team. The residents will have the opportunity to serve in a consultation role for inpatient medical and surgical units throughout the medical center, including the Emergency Department. **This is a rotation which does require limited face to face work using required PPE and safety precautions related to COVID-19.** Within the C&L team, residents may have opportunities to provide:

- Assessment and diagnostic evaluations
- Formulation of recommendations
- Development of intervention strategy
- Facilitation of communication among staff, patients, and family members
- Pre-surgical transplantation evaluations
- On-call and crisis management services

Health Psychology – Exposure Area of Study

The residents will spend one (1) day per week for a minimum of 6 months with the Health Behavior Coordinator. Residents may have opportunities to provide:

MOVE! (weight management) classes
Self-management shared medical appointments within various specialty medical clinics (e.g., Congestive Heart Failure, Diabetes-Mellitus, Non-Alcoholic Fatty Liver Disease)
Tobacco Cessation
Tinnitus self-management group
Bariatric Assessments

Clinical Leadership/Activities – Exposure Area of Study

To assist residents in developing the foundational and functional competency areas, the residents must complete the following activities in conjunction with the supervisor(s) and/or the Co-Director of Training (adequate time will be allotted to accommodate these activities):

1. Program Development: Each resident will propose and execute one (1) of the following:
 - a. *A program to improve clinical functioning of patients or among patients and medical staff or*
 - b. *A project designed to improve patient or professional competence of PC-MHI staff, primary care staff, or other Dayton VAMC staff or*
 - c. *A program evaluation project designed to evaluate a component of an existing psychological or medical service offered through the residency program.*
2. Clinical Supervision: To assist in the development of the reflective practice self-awareness, supervision, ethical-legal standards-policies, and management-administration competencies, the resident will receive instruction in clinical supervision. In addition, the residents may also be provided opportunities to practice performing clinical supervision via umbrella supervision to psychology pre-doctoral interns or practicum level trainees. Residents are also encouraged to participate in Psychology Training Committee meetings.
3. Clinical leadership: The residents will be instructed in management procedures required for operating a clinical service within a primary care setting. Additional opportunities for administrative training may be developed depending on resident interest and availability.
4. Didactic Series: The residents are required to attend all scheduled didactic series, unless on Leave Status. As part of the didactic series, the residents are required to complete the following activities:
 - a. Diversity Case/Article Review
 - b. Educational Seminars
5. Grand Rounds: The residents are required to attend two (2) Grand Rounds per residency training year. Grand Rounds are offered by VA Medical Grand Rounds or Wright State Medical School's Psychiatry Department.
6. Caseload: The residents will maintain a caseload and clinical activity sufficient that a minimum of 10 client hours per week of face-to-face, direct service is provided
7. Specialty Assessments: The residents will complete a minimum of two (2) pre-surgical/transplantation evaluations (e.g., renal pre-transplantation, bariatric pre-surgical, spinal cord stimulator pre-surgical).
8. Specialty Clinic: The residents will participate in at least one (1) specialty medical clinic providing brief psychological intervention and/or psychoeducation. Residents currently participate

in the Diabetes Self-Management and Audiology clinics; however, there are additional clinics available, including but not limited to: Neurology, Hematology/Oncology, and Sleep Clinic.

Other didactic, training, and/or mentoring opportunities will be made available to the residents, including, workshops and seminars held at Wright Patterson Air Force Base, training workshops sponsored by the Dayton Area Psychological Association and the Center for Deployment Psychology, diversity brown bags, VA mental health service educational meetings, and other training/learning opportunities as available throughout the year. Some of the topics presented in the past among these opportunities have included: PTSD and Dementia; ACT; TBI; Sleep Disorders; Motivational Interviewing; Substance Abuse; Eating Disorders; and Borderline Personality Disorder.

Requirements for Completion of Postdoctoral Residency

The performance and progress of residents will be evaluated using the Competency Evaluation form at the beginning of the year (resident self-evaluation) and supervisor evaluations at the mid-point and end of the training year. Throughout the training year, the resident will receive ongoing evaluation. If, at any point, the supervisor evaluates the resident to be performing at a substandard level, or if the resident scores lower than the minimum required scores in Competency Evaluation form, this will prompt a remediation plan to go into effect. This written remediation plan will be developed by the resident's primary supervisor with the resident's input. The plan will be tailored to meet the specific needs of the resident to enhance the area(s) of substandard performance and to support the resident in meeting the minimum required standards of the residency program. If the resident does not respond to the remediation (i.e., continues to perform at a substandard level), due process procedures will be implemented.

No partial credit is granted regarding the residency program; successful completion of the residency program is an all-or-none decision. Particularly during this time of rapid change related to the global pandemic, reasonable adjustments may be made to the residency requirements for successful completion if necessary. That stated, our emphasis on developing competencies will be our top priority as these will need to be met regardless of any other modifications during the training year.

To successfully complete the residency program, the resident must meet the following minimum requirements:

1. For the end of the training year evaluation period, obtain ratings of at least a minimum level of achievement 3 "Resident has achieved mastery appropriate for independent functioning" in all items for each Goal/Competency area.
2. Execution/completion of the Clinical Leadership/Activities in consultation with the primary supervisor and/or Co-Director of Training (see Training Experiences for further detail of these Clinical Leadership/Activities).
3. Not to have been found to have engaged in any significant ethical/legal transgression during the training year.

Facility and Training Resources

Each resident will have an assigned work space in the Primary Care Outpatient Clinic. Our medical center includes state-of-the-art computer equipment, with access to the hospital network and Windows-based software, including computerized patient record system (CPRS), VA Vista, and Office-based applications (Office 365). Internet and intranet LAN connectivity are provided. In the first two weeks, the resident will receive training and orientation on the various computer system and Dayton VA policies and procedures.

The Health Sciences Library provides access to many volumes of professional books and subscribes to over 300 professional journals. Immediate access to a wide variety of online electronic journals is available. Library staff members are experts at completing literature searches and can obtain copies of articles and borrow books from other institutions. Also, the library has an extensive collection of audio, video, and microfilm holdings. Due to COVID-19, the Health Sciences Library is closed. However, residents will have access to numerous online professional journals and other resources through the Dayton VA.

Administrative Policies and Procedures

Stipend: Residents receive a competitive stipend paid in 26 biweekly installments. VA postdoctoral residency stipends are locality adjusted to reflect different relative costs in different geographical areas. Currently, the stipend for the Dayton VAMC postdoctoral residency is \$47,197 for the one-year position.

Training year: The training year will be from mid-August 2021 to mid-August 2022. It is expected that residents will complete the entire training year.

Benefits: The postdoctoral residency appointments are for 2080 hours, which is full-time for a one-year period. VA residents are eligible for health insurance (for self, married spouse, and legal dependents) and for life insurance. As temporary employees, residents may not participate in VA retirement programs and may not have access to other benefits available to permanent VA staff members.

Liability Protection: When providing professional services at a VA healthcare facility, VA sponsored trainees acting within the scope of their educational programs are protected from personal liability under the Federal Employees Liability Reform and Tort Compensation Act 28, U.S.C.2679 (b)-(d).

Holidays and Leave: Residents receive 10 annual federal holidays. In addition, residents accrue 4 hours of sick leave and 4 hours of annual leave for each full two-week pay period. Resident use of annual leave must be approved in advance with clinical supervisor(s) and the Co-Director of Training.

Professional Development: Authorized absence (AA) may be given for attendance at educational and/or professional development activities outside the medical center, including conferences, workshops, licensure examinations, and professional meetings, and VA employment related interviews. AA for educational activities counts fully toward the 2080 hour residency. As with annual leave, authorized absence must be approved in advance with clinical supervisor(s) and the Co-Director of Training.

Due Process Statement: It is the practice of the Dayton VAMC postdoctoral residency program to attempt to address all problems and complaints at the lowest possible level, utilizing formal procedures only when standard supervisory approaches have proven unsuccessful in resolving an issue.

As no one set of procedures can be established to cover all potential problem scenarios, emphasis is placed on resolving issues (a) at the lowest possible level, (b) using the least formal means, and (c) in a manner that supports all parties involved. Some situations may require little if any input from the psychology training committee, some events may require formal action immediately, while some situations may involve long term informal monitoring. Professional judgments will be required. In all cases it is important to maintain the identity and integrity of the program.

Privacy policy: We do not collect personal information from potential applicants who visit our website.

Self-Disclosure: The Dayton VAMC postdoctoral residency program values self-reflection in professional training. Self-reflection is an integral component of being an effective, compassionate professional. While supervisors vary in the level of self-disclosure they encourage in supervision, some level of self-reflection and self-disclosure is part of the supervisory process. Applicants and residents are encouraged to discuss this issue with prospective supervisors.

As stated in the APA Ethics Code, a resident may be required to disclose personal information if it becomes necessary to evaluate or obtain assistance for the resident whose personal problems are preventing them from performing their training or professionally related activities in a competent manner or posing a threat to students or others.

Training Staff

Primary Care–Mental Health Integration Supervisors:

Miller, Lyndsey N.

MSCP, Psychopharmacology, 2015, College of Pharmacy University of Hawaii at Hilo
Psy.D. Clinical, 2010, Wright State University School of Professional Psychology
Primary Care-Mental Health Integration and Women's Health Clinic
At Dayton VA Medical Center since 2016
Licensed Psychologist, New Mexico
Professional Organizations: APA, GPA, APA Divisions 12, 18, 28, 38, & 55
Clinical Interests: Behavioral Medicine, Cultural Diversity, Differential Diagnosis, Assessment, Neuroscience
Research Interests: Health Psychology, Cultural Diversity
Theoretical Orientation: Cognitive-Behavioral, Interpersonal

Obert, Kelly S.

Psy.D. Clinical, 2017, Wright State University School of Professional Psychology
Co-Director of Training- Psychology Postdoctoral Residency
Primary Care Mental Health Integration and Women's Health Clinic
At Dayton VA Medical Center since 2017
Licensed Psychologist, State of Ohio
Professional Organizations: OPA, DAPA, Division 38
Clinical Interests: Behavioral Medicine, Women's Health
Research Interests: Health Psychology, Program Evaluation
Theoretical Orientation: Cognitive-Behavioral

Consultation & Liaison Supervisor:

Johnson, Jeremy T.

Ph.D. Clinical Psychology, 2012, Sam Houston State University
Acting Program Manager, Consultation and Liaison Team
At Dayton VA Medical Center since 2014
Licensed Psychologist, State of Alabama
Clinical Interests: Differential diagnosis, cognitive assessment, neurocognitive disorders, forensic psychology, risk management
Theoretical Orientation: Cognitive-Behavioral, Interpersonal

Health Psychology Supervisor:

Verdaguer, Ramon

Ph.D. Clinical, 1990, Loyola University of Chicago
ABPP 2004, Clinical Health Psychology
Health Behavior Coordinator
At Dayton VA Medical Center since 1996
Licensed Psychologist, State of Ohio and Illinois (inactive)
Professional Organizations: Div. 38, APA.
Research Interests: Positive psychology
Clinical Interests: Wellness and health promotion, pre-surgical psychological evaluations

Other Primary Care-Behavioral Mental Health Integration (non-supervisory):

Martin, Lisa

BSN, RN
Behavioral Health Laboratory (BHL) RN Care Manager
At Dayton VA Medical Center since 2014

Loranzan, Jeri L.

MSW, Clinical 2012, Health Specialization and Child and Family Concentration, Loyola University Chicago
Primary Care-Mental Health Integration and Behavioral Health Laboratory (BHL) SW Care Manager
At Dayton VA Medical Center since 2013
Licensed Independent Social Worker w/ Supervision Designation State of Ohio; Licensed Master Social Worker Clinical, State of Michigan; Licensed Practical Nurse State of Michigan
Professional Organizations: NASW, AVASW
Clinical Interests: Chronic Pain, Complementary and Alternative Treatments for Mental Health Conditions
Research Interests: Subsyndromal Depression and Anxiety, Treatment of Chronic Pain in an Integrated Setting, Building Resiliency
Theoretical Orientation: Cognitive-Behavioral, Interpersonal

Lusignolo, Tina

M.D., 2000, The Ohio State University College of Medicine
Staff Psychiatrist
Primary Care Mental Health Integration
At Dayton VA Medical Center since 2016
Clinical Interests: Psychosomatic Medicine, Psychodynamic Psychotherapy, Forensic Psychiatry

Psychology Training Committee:

Allredge, Jessica

Ph.D. Clinical Psychology, 2016, University of Virginia
Staff Psychologist, Mental Health Clinic
At Dayton VA Medical Center since 2019
Licensed Psychologist, State of Ohio and State of Indiana
Clinical Interests: Anxiety and related disorders, trauma-related disorder, cognition, evidence-based practice
Theoretical Orientation: Cognitive-Behavioral
Professional Memberships: ABCT, APS, APA

Allen, Jacqueline

Psy.D. Clinical 2009, Wright State University of Professional Psychology
Staff Psychologist, Trauma Recovery Center and Substance Use Disorder
At Dayton VA Medical Center since 2018
Licensed Psychologist, State of Ohio
Professional Organization: DAPA, EMDRIA
Clinical Interests: PTSD, Substance Use Disorder, Group Therapy, Personality Disorders with primary interest in Anti-Social Personality Disorder
Theoretical Orientation: Cognitive-Behavioral

Baum, David

Psy.D. Clinical, 20016, Xavier University
Staff Psychologist, Substance Use Disorder Services, DBT
At Dayton VA Medical Center since 2017

Licensed Psychologist, State of Ohio
Licensed Independent Chemical Dependency Counselor, State of Ohio
Professional Organizations: OPA, APA
Research Interests: Substance Use Disorders, Trauma-Related Disorders
Professional Interests: DBT, Program Development, SUD and Trauma-Related Disorders
Theoretical Orientation: Behavioral, Cognitive-Behavioral

Bischoff, Andrea M.

Psy.D. Clinical, 2008, Wright State University School of Professional Psychology
Program Director, MHR RTP and Special Emphasis Programs
At Dayton VA Medical Center since 2012
Licensed Psychologist, State of Ohio
Professional Organizations: DAPA, Division 36
Clinical Interests: Primary Care Integration, Behavioral Medicine, Women's Health
Theoretical Orientation: Cognitive-Behavioral

Bizimana, Albine

Psy.D., Clinical Psychology, 2019, Wright State University School of Professional Psychology
Staff Psychologist, Trauma Recovery Center
At Dayton VA Medical Center since 2019
Theoretical Orientation: Cognitive-Behavioral

Chaffins, Belinda

Psy.D., Clinical, 2003, Wright State University School of Professional Psychology
Clinical Psychologist in Mental Health Clinic
At Dayton VA Medical Center since 2010
Licensed Psychologist, State of Ohio
Clinical Interests: Sexual Health, Couples, Health and Wellness, Alzheimer's
Theoretical Orientation: Cognitive-Behavioral and Humanistic

DeMarchis, Massimo

Psy.D. Clinical Psychology, 1987, Wright State University School of Professional Psychology
At Dayton VA since November 2009
Licensed Psychologist, State of Ohio (1988)
Licensed Independent Chemical Dependency Counselor (LICDC)
APA Certificate of Proficiency in the treatment of Substance Use Disorders
Resident, American Board of Sleep Medicine
Clinical Interests: General mental health, forensic psychology, addictions, sleep disorders
Theoretical orientation: Cognitive-Behavioral and ACT

Diehl, Jane A.

Ph.D., Clinical, 1984, University of Toledo
Staff Psychologist, Substance Abuse Treatment Program
At Dayton VA Medical Center since July 2009
Licensed Psychologist, State of Ohio
Professional Organizations: Dayton Area Psychological Association, Ohio Psychological Association, American Psychological Association, APA divisions 29, 39, and 42, founding member Caring Connections (association of Dayton women private practice psychologists), International Society for the Psychological Treatment of the Schizophrenias and Other Psychoses
Clinical and Research Interests: Psychotherapy of schizophrenia and related disorders; other psychoses; dissociative disorders; borderline and other personality disorders; trauma, PTSD; adult children of physical, sexual, and emotional abuse and addictions
Theoretical Orientations: Psychodynamic, Interpersonal, Cognitive, Eclectic

Drake, David

Ph.D., Clinical, 1992, University of North Texas
Staff Psychologist, Mental Health Clinic
At Dayton VA Medical Center since 2010
Licensed Psychologist, State of Ohio and Kentucky
Professional Organizations: APA
Clinical Interests: Treatment of depression and anxiety disorders
Theoretical orientation: Psychodynamic

Farr, Kenneth L.

Ph.D., Clinical Psychology
Staff Psychologist, Compensation and Pension
At Dayton VA Medical Center since 2016
Clinical Interests: PTSD
Theoretical Orientation: Cognitive-behavioral, Psychodynamic

Feiner, Adam J.

Staff Psychologist, Substance Abuse Treatment Program
At Dayton VA Medical Center since 2016

Garmon, Yolanda T.

Psy.D., Clinical, 2003, Wright State University
Staff Psychologist, Psychosocial Rehabilitation and Recovery Center
At Dayton VA Medical Center since 2009
Licensed Psychologist, State of Ohio
Clinical Interests: women's issues; domestic violence issues; substance abuse; family/couple therapy; group therapy; geriatric issues
Theoretical Orientation: cognitive-behavioral

Gootzeit, Joshua

Ph.D. Clinical Psychology, 2014, University of Iowa
Staff Psychologist, Trauma Recovery Center
At Dayton VA Medical Center since 2015
Licensed Psychologist, State of Ohio
Clinical Interests: Assessment and treatment of PTSD, EBPs for PTSD, behaviorism, acceptance-based treatments
Theoretical Orientation: Cognitive-Behavioral

Jackson, Monica

Ph.D., Clinical, 1993, University of Cincinnati
Staff Psychologist, Coordinator of Mental Health Residential and Recovery Program
At Dayton VA Medical Center since 2009
Professional Organizations: Ohio Psychological Association
Licensed Psychologist, State of Ohio
Clinical Interests: Chronic mental illness, substance dependence, women's issues, cultural issues, trauma
Theoretical Orientation: Cognitive-Behavioral, Psychodynamic

Lenhoff, Karen

Ph.D. Clinical Psychology
Evidence Based Program Coordinator/Program Developer
Lead Psychologist
At Dayton VA Medical Center since 2014
Clinical Interests: psychological trauma, PTSD, healthy psychology, substance abuse, Evidence-Based Psychotherapy Coordinator, program development and evaluation, measurement-based care.

Perry, Patricia A.

Psy. D. Clinical, 1996, Wright State University, Dayton, Ohio.

Staff Psychologist, Community Living Center

At Dayton VA Medical Center since 2008

Licensed Psychologist, State of Ohio (Indiana – inactive)

Professional Organizations: APA

Clinical Interests: Psychodiagnosis, psychopharmacology, resident adjustment to long term care and family caregiver stress, sexual abuse survivor treatment, termination issues in therapy, the development of the therapist over time, managing compassion fatigue, and interdisciplinary collaboration

Research Interests: Evaluating the effective use of supervision, determining competence / proficiency in interviewing, and meeting the needs of an aging population in long-term care settings

Theoretical Orientation: Interpersonal or dynamic case conceptualization with eclectic and integrative interventions

Rankins, J. LeBron

Ph.D. Clinical Psychology, Kent State University

Clinical Psychologist with Home Based Primary Care

At Dayton VA Medical Center since 2013

Licensed Psychologist, State of New York

Clinical Interests: Suicide prevention, men's issues, depression and anxiety

Theoretical Orientation: Cognitive-Behavioral and Client Centered

Rodgers, Rahema

Psy.D. Clinical Psychology, 2006, Wright State University School of Professional Psychology

ABPP 2013, Clinical Psychology

Clinical Psychologist, Family Services Program

At Dayton VA Medical Center since 2010

Licensed Psychologist State of Ohio

Professional Organizations: Dayton Area Psychological Association

Research Interests: Multicultural & Family Issues

Clinical Interests: Marriage and Family, Assessment

Theoretical Orientation: Cognitive-Behavioral

Rodzinka, Kristin J.P.

Ph.D. Clinical, 2005, University of Arkansas

ABPP 2013, Clinical Psychology

Co-Director of Training, Psychology Doctoral Internship

PTSD Programs Manager

At Dayton VA Medical Center since 2007

Licensed Psychologist, State of Ohio (Indiana – inactive)

Professional Organizations: APA, DAPA, AVAPL, VAPTC

Research Interests: Sexual Trauma; PTSD

Clinical Interests: treatment for anxiety, depression, personality disorders, and serious mental illness; group psychotherapy; family therapy; supervision

Theoretical Orientation: Mindfulness Based Cognitive-Behavioral

Schwendener, Mary J.

PhD. Counseling Psych. 1995, Southern Illinois University – Carbondale

ABPP, 2019, Counseling Psychology

MDiv 2015, Earlham School of Religion

Staff Psychologist, Home Based Primary Care

At Dayton VA Medical Center since 2012

HSPP Licensed Psychologist, State of Indiana

Licensed Clinical Addictions Counselor, State of Indiana

Professional Organizations: American Psychological Association (APA), Indiana Psychological Association (IPA), Dayton Psychology Association (DPA)

Clinical Interests: general psychotherapy, women's issues, trauma, addictions, dual diagnosis, personality disorders, adult children of dysfunctional families, mindfulness

Theoretical Orientations: Mindfulness/Acceptance based treatment, interpersonal, psychodynamic, cognitive behavioral, and systems

Toliver, Janine

PsyD, Clinical Psychology, 2017, Wright State University School of Professional Psychology

Staff Psychologist – Substance Use Disorder Clinic

At Dayton VA Medical Center since 2018

Licensed Psychologist, State of Ohio

Professional Organizations: APA

Clinical Interests: Substance Use Disorders, Insomnia, PTSD, & Grief and Loss, Health Psychology

Research Interests: Multicultural Issues, Substance Use Disorders, Mindfulness Based Practices, Health and Wellness, Disability

Theoretical Orientation: Cognitive-Behavioral

Wilson, Joshua

Ph.D., Counseling Psychology, University of Oklahoma

Staff Psychologist, Mental Health Clinic

At Dayton VA Medical Center since 2020

Licensed Psychologist, State of Ohio and State of Wyoming

Professional Organizations: NRHSP

Clinical Interests: PTSD, Group Therapy, Personality Disorders

Theoretical Orientation: Cognitive-Behavioral

Local Information

Information about Dayton, OH can be obtained from these websites:

General Information: www.daytonohio.gov/

Park System (hiking, biking, kayaking, etc.): www.metroparks.org

Local Events: www.daytonlocal.com

Ohio Festivals: www.ohiofestivals.net/dayton-festivals

Performing Arts: www.daytonlive.org

Art Museum: www.daytonartinstitute.org

Minor League Baseball: www.milb.com/dayton

Second Street Market: www.metroparks.org/places-to-go/2nd-street-market

Downtown District: www.oregondistrict.org

Local Artists: www.frontstreet.art

Science Museum: www.boonshoftmuseum.org

Air Force Museum: www.nationalmuseum.af.mil

Yellow Springs: www.yellowspringsohio.org

