



PSYCHOLOGY RESIDENCY TRAINING PROGRAM
GULF COAST VETERANS HEALTH CARE SYSTEM

Biloxi, Mississippi



TRAINING BROCHURE

For the

2008–2009 Training Year

TABLE OF CONTENTS

| TOPIC | PAGE |
|---|------|
| Mission Statement | 4 |
| Goal | 4 |
| Philosophy | 4 |
| Vision | 4 |
| Unique Experience | 5 |
| The Facility | 5 |
| Photographs of the GCVHCS | 6 |
| The Setting | 7 |
| Photographs of Gulf Coast Life | 8 |
| Overview of the Residency | 10 |
| Training Settings/Rotations | 10 |
| Clinical Health Psychology/Behavioral Medicine | 10 |
| Inpatient Psychology | 11 |
| Posttraumatic Stress Disorder Clinic | 11 |
| Psychosocial Residential Rehabilitation and Treatment Program (PRRTP) | 12 |
| - Substance Use Disorder Treatment Program | 12 |
| - Post-traumatic Stress Disorder PRRTP | 12 |
| Women's Mental Health Clinic | 12 |
| Geropsychology | 13 |
| Research | 13 |
| Administrative Rotation | 13 |
| Neuropsychology Rotation | 13 |
| Employee Wellness and Assistance Program | 14 |
| Mental Health Clinic | 14 |
| Other Training Activities | 15 |
| Psychology Triage Service | 15 |
| Neuropsychology Program | 15 |
| Thursday Seminars and Programs | 15 |
| Professional Issues Seminar | 16 |
| Psychopharmacology Seminar | 16 |
| Neuropsychology Seminar | 16 |
| Diagnostics and Psychopathology Seminar | 16 |
| Psychological Assessment Seminar | 17 |
| Special Topics in Psychology Seminar | 17 |
| Continuing Professional Education | 17 |
| Psychology Grand Rounds | 17 |
| Neuropathology Rounds | 18 |
| Supervision | 18 |
| Competency Evaluation | 18 |

Continued on next page.

TABLE OF CONTENTS (Continued)

| TOPIC | PAGE |
|--|------|
| Problems and Due Process Resolution | 19 |
| Resources | 19 |
| Research | 19 |
| Research Facility | 19 |
| Dissertation Support | 19 |
| Information Resources/Computerized Medical Record System | 20 |
| Additional Psychology Training Programs | 20 |
| Summer Traineeship/Internship | 20 |
| Externship (Clinical Practica) | 21 |
| Training Faculty | 22 |
| Dr. Nathaniel Abston, Jr. | 22 |
| Dr. Ronald W. Alexander | 22 |
| Dr. Scott A. Cardin | 23 |
| Dr. Jack Carney | 23 |
| Dr. Stephanie L. Dutton | 24 |
| Dr. Clinton W. Martin, Jr. | 24 |
| Dr. Benjamin Parker | 25 |
| Dr. Susan K Rhodes | 25 |
| Dr. Jefferson O. Rogers | 26 |
| Dr. Gustave F. P. Sison | 26 |
| Dr. Kelly D. Woods | 27 |
| Adjunct Faculty | 28 |
| Academic Programs Represented in the Residency | 29 |
| Past 10 Years | 29 |
| Prior to 10 Years | 31 |
| Application Information | 32 |
| Stipend and Benefits | 32 |
| Qualifications | 32 |
| Documentation | 32 |
| Interviews | 32 |
| American Psychological Association Accreditation | 33 |
| Association of Psychology Postdoctoral and Internship Centers Membership | 33 |
| Correspondence | 33 |
| In Memoriam: John C. Hanson, Ph.D. | 34 |

MISSION STATEMENT

Goal

The Psychology Residency Training Program at the Gulf Coast Veterans Health Care System (GCVHCS) prepares talented individuals for a broad range of careers as professional psychologists, but especially for working in VA and other medical settings.

Philosophy

The Psychology Residency Program embraces the philosophy that the pre-doctoral residency year represents a transition period for the emerging professional psychologist during which the Resident moves from the graduate student role to that of the autonomous professional. Training and supervision during the year should prepare the Resident to enter the field of professional psychology with those skills needed to function independently and with the confidence and professional self-awareness to make maximum use of the individual's talents. Therefore, our training goal is to develop generalists who can function in a broad range of professional settings using a wide variety of skills. Reciprocally, our training program stimulates and enriches the Training Faculty and enhances the quality of patient care.

Vision

The Residency Program emphasizes and develops a broad range of skills (i.e., personality, intellectual, neuropsychological, psychodiagnostic assessment, psychotherapy, scholarly inquiry, research competence, consultation) with diverse patient populations. However, the training year provides time to develop professionally and to set the stage for further post-doctoral specialization in the areas of primary care psychology, health psychology/behavioral medicine, neuropsychology, geropsychology, posttraumatic stress disorders, and women's mental health. To enhance the diversity of the training experience, the faculty encourages applications from individuals with a variety of competencies and interests. The program facilitates professional development of Residents by increasing their sensitivity to the cultural and individual diversity of the patients we serve and the professionals we work with. Significant attention is given to assisting the Resident develop professional and ethical behavior of a psychologist, enhancing personal adjustment compatible with the demands of being a psychologist, and functioning effectively with medical and allied health professionals. For Residents interested in careers that will involve teaching and supervision, opportunities are sometimes available to gain experience in supervision of lower level trainees.

Unique Experience

Even among VA internships, the Gulf Coast Veterans Health Care System provides a truly unique training experience for psychologists. Psychologists at this facility are full members of the medical staff, as opposed to being allied health affiliates. This grants psychologists an independence rarely seen inside or outside the VA system. While many facilities are organized within a "product line" or "system line" administrative structure in which psychology is subordinated under a mental health product line, the Psychology Service at the GCVHCS is fully independent and managed by a Chief Psychologist who answers directly to the Chief of Staff and System Director. Among health care systems and medical centers, there is great variability in the "penetration" or representation of psychological services across various domains of the system. In this setting, psychologists have remarkable levels of penetration within and across the system, with several psychologists playing either leadership (program directors) or key roles in critical GCVHCS programs within both traditional mental health and general health care. Psychologists and Residents serve in highly visible and essential roles at this facility and are widely considered to be "problem solvers," who are relied on by administrative and professional staff. After repeatedly hearing comments of this nature in multiple settings in our health care system, a recent APA accreditation site visitor described our training program as "one of the best kept secrets of the VA."

THE FACILITY

The Gulf Coast Veterans Health Care System is composed of four major divisions: the Biloxi, Mississippi Medical Center, the Mobile (AL) Outpatient Clinic, the Pensacola (FL) Outpatient Clinic and the Panama City (FL) Outpatient Clinic. (The Gulfport, MS Division was destroyed by Hurricane Katrina on September 29, 2005. A planned consolidation of Gulfport with Biloxi was hastened rather dramatically). Psychology Residents train at the Biloxi site. The Biloxi Medical Center is composed of administrative functions, medical and surgical in- and outpatient programs, Primary Care Medical teams, Emergency facility, extended care programs providing rehabilitative therapies and geriatric (Nursing Home) care, and various specialty clinics. Mental health care is now also located in Biloxi. There is an Inpatient Psychiatric Ward and treatment team and a Geropsychiatric Unit. Outpatient programs include a Mental Hygiene Clinic, Day Treatment Program, Post-Traumatic Stress Disorders Clinic, and Women's Mental Health Clinic. The Psychosocial Residential Rehabilitation Treatment Program is an intensive bed program for Substance Abuse and/or Posttraumatic Stress Disorders. The Mobile, Pensacola, and Panama City Outpatient Clinics provide community-based primary medical and mental health care to eligible southern Alabama and northwest Florida veterans with the Biloxi Division providing tertiary inpatient care as needed. All treatment (i.e., mental health, medical, or elder care) is formulated under the primary care model with patients assigned with single providers supported by specific health care teams.

PHOTOGRAPHS OF THE GCVHCS



Aerial View of the Biloxi Facility,
with the Gulf of Mexico at top of photo



Aerial View of the Gulfport Facility,
with the Gulf of Mexico at bottom of photo.
Largely destroyed by Hurricane Katrina.



Biloxi Clinics, Surgery, other Services



Outpatient Mental Health Clinic - Gulfport.
Destroyed by Hurricane Katrina.



Mobile, AL Outpatient Clinic



Pensacola, FL Outpatient Clinic

THE SETTING

The Gulf Coast area is a relaxed, cosmopolitan, beach resort setting. French and Spanish explorers settled the area in the late 1600's attempting to gain strategic and economic control of the mouth of the Mississippi River. The area has been home to Native Americans (the Biloxi Indians), French Acadians ("Cajuns"), African Americans, Slavic Fishermen, and more recently, Vietnamese Americans. Since the 1950's, the Gulf Coast has been home to numerous federal agencies and large industries including the National Space Technologies Laboratories, the National Oceanographic and Atmospheric Administration, Keesler Air Force Base (a major Air Force electronics, communication, and medical/surgical training facility, and home to the "Hurricane Hunters"), the home of the Naval Construction Battalion (Seabees), and the Pensacola Naval Flight Training Center (home of the Blue Angels precision flying team). The Mississippi Gulf Coast, affectionately know as the "Red Neck Riviera," is a major tourist destination and is home to several casinos with their related hotels, fine dining and entertainment facilities. As of September, 2006, 8 of the 16 casinos have reopened since Hurricane Katrina, but many will reopen in expanded editions, as repairs and new building is completed. Each year, the residents enjoy many Coast diversions including *Mardi Gras*, art and entertainment festivals, yacht and powerboat racing, and various fishing rodeos and seafood festivals. Some other noteworthy annual events include: "Cruisin' the Coast" hosting some 5000 antique and classic cars, "Smokin' the Sound" offshore powerboat races, and the Mississippi Deep Sea Fishing Rodeo. Fine cuisine and entertainment have always been a part of the Mississippi Gulf Coast tradition, as has the 26 miles of beach, and the bays, bayous and rivers with their associated water sports and recreation. The Gulf Coast Coliseum and Convention Center is host to professional hockey (the Mississippi Sea Wolves) and arena football (the Mississippi Fire Dogs), big name concert entertainment, boat and camper shows, arts and crafts exhibitions, and numerous conventions.



The climate includes mild winters, long and comfortable springs and falls, and hot, sticky summers. Pictured above are several varieties of azaleas in bloom in April.

PHOTOGRAPHS OF GULF COAST LIFE

Grayed-out pictures below were destroyed by Hurricane Katrina on 8/29/06.



PHOTOGRAPHS OF GULF COAST LIFE (Continued)

Grayed-out pictures below were destroyed by Hurricane Katrina on 8/29/06.



A good web site for more information about life on the Mississippi Gulf Coast is:
<http://gulfcoast.org>.

OVERVIEW OF THE RESIDENCY

The Residency is designed to provide a broad range of training experiences in the contemporary practice of psychology with some opportunity for subspecialty training. The program is designed so that Residents have interactions with and supervision by several of the training faculty. This provides for a broad range of experiences with professional psychologists who have diverse racial, gender, academic, theoretical, practice, and specialty backgrounds. Each Resident completes four, three-month rotations of approximately 3 $\frac{1}{2}$ days per week. One half day per week is devoted to long-term therapy and supervision or research activity and supervision. Each Resident selects a year-long mentor for supervising these areas. The remaining day, Wednesday, is devoted to training seminars, group supervision, or other meetings (monthly Staff Meeting, CE program, Grand Rounds presentations, Training Supervisors Meeting). Other training activities include conducting neuropsychological assessments, serving a term as Chief Resident, providing tiered supervision of lower level trainees (as available), and developing and implementing work stress/anger management programs for medical center employees. The Inpatient Psychiatry Rotation is currently the only required rotation but can be waved by the Director of Training if the resident has documented evidence of substantial prior experience and training. Three rotations are optional and, with approval of the supervisors involved and the Director of Training, the Resident may repeat a prior rotation. Split rotations are possible, again with the prior approval of the supervisors involved and the Director of Training. Individual supervision is provided weekly in both formal and informal settings, and comprehensive written evaluations by supervisors and residents are completed at the end of each rotation.

TRAINING SETTINGS/ROTATIONS

Clinical Health Psychology/Behavioral Medicine

The **Clinical Health Psychology/Behavioral Medicine** program emphasizes use of the biopsychosocial perspective in the prevention and treatment of health-related conditions. The mission of Health Psychology is to increase the physical and psychological well-being of individuals through health promotion programs, individual goal-oriented treatments, and group psychoeducational programs that teach self-management of chronic medical conditions; and to reduce overall reduce health care costs through application of these programs. We operate under the premise that learned ways of thinking and behaving can compromise health or promote wellness. During their rotation, residents are trained to respond to consultations and referrals from healthcare providers, to assess and treat a wide variety of medical conditions that are caused or affected by lifestyle factors. Medical conditions frequently treated at by health psychologists include: chronic pain, chronic obstructive pulmonary disease, cancer, tension and migraine headache, temporomandibular disorders, insomnia and other sleep disorders, diabetes, irritable bowel syndrome, obesity, preparation for painful

medical procedures, and compliance with difficult medical regimens. They may also offer disease management, primary prevention, and health promotion programs (e.g., tobacco cessation), as well as programs in population health management. Residents may work with interdisciplinary teams comprised of a variety of health-care professionals. Current programs of this type include the OEF/OIF Traumatic Brain Injury program, Pain Clinic, and the MOVE! weight management program.

Another important component of this rotation involves the Mental Health/Primary Care Integration clinical initiative. Under this initiative, psychologists (as well as other MH disciplines) are co-locating within the Primary Care Clinics and providing "front line" psychological services. Effective practice in primary care requires new ways of looking at consultation and intervention, rather than simply "transporting" standard mental treatments to a new office with a different sign on the door. By placing psychologists directly into the primary care setting and adapting our practices to the primary care work environment (e.g., screening tools, briefer appointments/fewer follow-ups, psychoeducational groups), psychologists can more effectively assess and change the health of our patient population. As the "resident" experts, and using some basic "triage" principles, Primary Care psychologists optimize care by insuring appropriate services are delivered at the appropriate location. (i.e., patients with less severe issues or problems are handled within primary care level, while more severe cases receive specialty mental health referrals.) This is typically a very "eye-opening" experience for residents, as they learn to think and communicate with fellow healthcare providers and patients in a new and different way.

Inpatient Psychology

This Rotation is required of all Residents. (Exceptions made only for trainees with substantial prior inpatient experience): During the inpatient psychiatry rotation, the Resident will become a part of the interdisciplinary treatment team consisting of representatives from psychology, psychiatry, social work, nursing and allied health disciplines. The Resident is afforded an opportunity to assess and intervene with patients from diverse backgrounds, exhibiting florid presentations of a wide range of psychiatric disorders. The Resident will be involved with various activities including, but not limited to, intake interviewing, development of treatment plans, consultation, providing patient education, individual and group psychotherapy, and conducting diagnostic assessments.

Posttraumatic Stress Disorder Clinic

The PCT (Post-traumatic stress disorder Clinical Team) Clinic is designed to provide multidisciplinary outpatient services to veterans challenged by both acute and sustained traumatic stress. These services include broad-based assessment, treatment, and liaison activities with members of various service areas within the medical center. Psychological interventions offered by the clinic include group therapy, case management, and individual psychotherapy. Group treatments span a variety of group types that are focused on adaptive skills development, enhancement, and sustainability to manage traumatic stress, confront the symptoms of commonly co-occurring disorders, and improve overall quality of life. The resident on this rotation will have opportunities to

facilitate group treatments, conduct biopsychosocial assessments, perform individual psychotherapy, and engage in treatment planning.

Psychosocial Residential Rehabilitation and Treatment Program

The Gulf Coast Veterans Health Care System opened a 40 bed Psychosocial Residential Rehabilitation and Treatment Program (PRRTP) in 2006. A psychologist is the coordinator of this program, and an interdisciplinary team provides treatment, including psychology, social work, psychiatry, nursing, recreational therapy, chaplain services, and mental health technicians. The PRRTP provides residential treatment for veterans who are not acutely medically or psychiatrically ill and are capable of relatively independent functioning, but who need residential care to assist in dealing with chronic problems. The semi-structured environment provides dormitory-like shelter, meals, and a range of therapeutic interventions. The Resident who selects the PRRTP rotation participates in admission screening, psychological interview/assessments, consultation, treatment and discharge planning, program development, psycho-educational services, and psychotherapy. This intensive program provides services for two tracks of veterans, those seeking treatment for substance abuse and those with PTSD.

Substance Use Disorder Treatment Program (SUDTP): The SUDTP track services veterans with addictive disorders. This five week program offers individual and group therapy. Veterans participate in a variety of psychoeducational and process-oriented groups. The Resident who selects the PRRTP rotation will gain experience in working with substance abuse and veterans who have been dual diagnosed.

Post-traumatic Stress Disorder PRRTP: The PTSD track services veterans through a Cohort Model in which approximately 10-20 male and female veterans enter the program together and remain for 8 weeks. Their treatment consists of intensive psychoeducational and process-oriented groups focusing on military-related trauma.

Women's Mental Health Clinic

The Women's Mental Health Clinic is designed to meet the special assessment and treatment needs of women veterans and is open to both male and female Residents. A psychologist is the coordinator of this clinic. Nearly all women receiving outpatient mental health care are assigned to the Women's Mental Health Clinic. Services to women veterans are provided through both individual and group counseling as well as medication management. Groups that target gender-related mental health problems are offered, as well as depression management, sexual trauma recovery, and assertiveness training. Residents who select this rotation participate in these services and are encouraged to design new groups that might meet the needs of women veterans. Interested Residents are encouraged to develop and conduct research related to women's issues.

Geropsychology

Residents who select the Geropsychology rotation work primarily in the geriatric units of Extended Care performing psychological and neuropsychological assessments and interventions. The Resident works in conjunction with geriatricians, often attempting to upgrade patient functioning so that they can return to a home-based environment. Opportunities are available to work with the Hospice Program, Home Health Care, the Geriatric Outpatient Clinic, Rehabilitation Program, the Dementia Unit, and families. Supervised training in the special problems of the elderly is provided.

Research

All Residents are encouraged to engage in Research. A half-day per week may be used for this purpose and the Resident selects a faculty research mentor for the year to sponsor and supervise their projects and assist in getting proposals approved by the Research and Development Committee and Institutional Review Board. This component is optional and the Resident may decide to use this half day for long term therapy should they prefer (see Overview of Residency above and Long Term Therapy below). The goal of this program is to provide an intensive experience in conducting research in a clinical setting. Residents may assist mentors with ongoing research and/or pursue independent research projects under the supervision of their mentor. Several past Residents have gathered data for use in their dissertation in conjunction with this training experience (though we cannot guarantee its availability for this purpose).

Administrative Rotation

Residents may elect the Administrative Rotation upon approval of the Director of Training and the Chief of Psychology. Residents will observe and participate in administration of Mental Health functions in collaboration with the Chief of Psychology. Training goals include exposing the Resident to methods of administering a mental health program and interdisciplinary interface from an administrative perspective. Prior Residents who have participated in this rotation have been assigned special projects including grant preparation, conducting special investigations, and developing new programs. This rotation is typically part-time and must be coordinated with another supervisor willing to provide a part-time rotation placement.

Neuropsychology Rotation

Residents may elect this optional rotation upon approval of the Director of Training. This is a part-time, three-month experience at a nearby medical center (our affiliation agreement does not allow identifying the medical center in this brochure). The Resident assists in conducting neuropsychological assessments in a tertiary care teaching hospital that provides services to patients from the local population as well as patients referred from other states. The ages of

these patients are variable, but they tend to be somewhat younger and better educated than clientele of many neuropsychological services. Referral questions include differentiating normal aging and early dementia, cognitive functioning after moderate-to-severe head injury or after a significant illness affecting the central nervous system, and patients with cognitive complaints reportedly affecting their work performance.

Employee Wellness and Assistance Program

Psychology Service has been at the forefront in providing psychological assistance for employees of the Health Care System. The goal of this program is to help employees deal with stressors in their work setting or away from work which interfere with their ability to perform their work satisfactorily. This can range from dealing with major stressors such as the aftermath of hurricane devastation to marital difficulties to interpersonal conflicts on the job. This program is not a true rotation experience, but residents are called upon to conduct or help conduct stress and anger management workshops as a component of the Administrative Rotation.

Mental Health Clinic

The Mental Health Clinic (MHC) is multidisciplinary and includes psychology, psychiatry, physician assistants, nursing and social work staff. It is an open clinic and accepts consults from all services. The clinic provides a wide range of services associated with a general mental health outpatient clinic. Residents are involved in all aspects of the MHC and provide intake assessment, treatment planning, individual and group therapy, consultation and full participation in staff activities.



OTHER TRAINING ACTIVITIES

Psychology Triage Service

Psychology Triage is a component of the Primary Care Rotation. Residents provide psychological triage evaluations and crisis intervention to patients in the hospital emergency room. Virtually all patients admitted to inpatient psychiatry are processed through the Emergency Room of the Biloxi Center. Psychologists and Residents manage the Psychology Triage Service, which provides initial assessment for all patients presenting with mental health problems. After evaluating patients, the Resident determines the most appropriate intervention and/or resource for the individual patient's needs, which may range from emergency psychiatric hospitalization, to outpatient mental health care, to substance abuse treatment, to community lodging. We believe that the Psychology Triage Service is a unique contribution of psychology at this medical center and affords Residents superior training in rapidly assessing and determining appropriate dispositions for patients typically presenting on a crisis basis. This service is highly valued by the medical and allied health staff, and has led to a level of respect for our Residents which we believe is unique in comparison with other residency/internship programs. Appropriateness of admissions is monitored with extensive feedback provided to Residents through the weekly Diagnostics and Triage Seminar.

THIS PROGRAM IS NOT CURRENTLY AVAILABLE AS DESCRIBED ABOVE, THOUGH SOME OF THESE EXPERIENCES MAY BE AVAILABLE IN THE PRIMARY CARE ROTATION.

Neuropsychology Program

The Neuropsychology Program provides services to the Biloxi Center and the Mobile and Pensacola Outpatient Clinics. Consultation requests are received from a wide range of sources: neurology, medicine, primary care, psychiatry, extended care, and even employee health. After learning to properly administer the assessment tools, Residents are assigned up to eight full neuropsychological assessments per year. This training experience is supported through the weekly Neuropsychology Seminar (see below) and individual and group supervision.

THURSDAY SEMINARS AND PROGRAMS

Thursdays are set aside as a training and staff consultation day for both Residents and Faculty. Throughout the residency year a variety of training/supervisory meetings are held. All experiences are provided on a weekly basis unless otherwise indicated.

(Continued on next page)

Professional Issues Seminar

The Professional Issues Seminar meets on the second and fourth Wednesdays of each month. The coordinator of this didactic program or guest experts discusses topics such as ethics, professional relationships, counseling on future employment, the relationship of psychologists to other professions, multicultural issues, coping with the stresses of a career in psychology, scholarly inquiry and ways to maintain awareness of contemporary research, methods of conducting research in a clinical setting, the licensing process and preparing for the Examination for the Professional Practice of Psychology (EPPP), professional issues relating to a career in psychology, the importance of professional organizations, issues in serving as a supervisor, ways to begin and maintain a private practice, and topics of interest identified by Residents.

Psychopharmacology Seminar

The Psychopharmacology Seminar meets weekly for approximately 4-6 weeks. One of our adjunct faculty members, a psychiatrist, provides a basic overview of kinetics, dynamics, side effects, risks, and clinical application of psychotropic medications. This program is part of the Special Topics Seminar Series (see below).

Neuropsychology Seminar

The Neuropsychology Seminar meets weekly for the entire year. Our staff neuropsychologist provides training in the use of standardized tests to evaluate neuropsychological status. The Halstead-Reitan Neuropsychological Battery, Wechsler Adult Intelligence Scale - III, Wechsler Memory Scale - III, Minnesota Multiphasic Personality Inventory and other measures are used to assess neurocognitive functioning. A variety of neuropathological conditions are reviewed and neuropsychological assessment results of different conditions are illustrated with patient data. As the year progresses, Residents process data from individually assigned neuropsychological cases, write consultation reports, and give feedback and make recommendations to patients and their families. The seminar and related practica are designed to approximate the level of work of a full-time, two-month rotation.

Diagnostics and Psychopathology Seminar

The Diagnostics and Psychopathology Seminar is designed to assist Residents become more proficient in relating psychopathological signs and symptoms to diagnostic criteria. In addition to a thorough review of the DSM-IV diagnostic nomenclature, specific case examples are used to illustrate the diagnostic picture. This seminar also provides an opportunity to discuss and process unusual and problematic cases that present in various settings that residents may rotate through during the training year.

Psychological Assessment Seminar

The Psychological Assessment Seminar meets weekly for the entire year. The goal of the assessment seminar is to help the resident acquire the skills necessary to select, administer, score and interpret a battery of diagnostic psychological tests. In addition to training in the use of objective and projective assessment instruments, the resident will learn to conduct, and document the results of, a mental status examination. Relevant concepts will be richly illustrated through the use of case history materials gathered from past and present medical center patients. The seminar also includes instruction in the preparation of the psychological testing report, a review of current literature related to assessment, and a discussion of ethical considerations. Residents are encouraged to bring test data to the seminar for discussion.

Special Topics in Psychology Seminar

The Special Topics in Psychology Seminar meets weekly. The coordinator of this seminar arranges for didactic presentations by training faculty and adjunct faculty consisting of VA and community experts on a variety of topics. Examples of these topics include caring for veterans, advanced trauma therapies, diversity issues, death and dying, disaster mental health, and psychopharmacology. Special interest topics have included, but are not limited to, assessing lethality, competency assessment, sleep and sleep disorders, biofeedback, hypnosis, HIV pre- and posttest counseling, infection control in a medical center setting, physical problems that masquerade as psychiatric disturbances, etc. In addition, Residents may present treatment cases, as well as contemporary treatment methods and special techniques with which they are familiar.

Continuing Professional Education Series

The Continuing Education Program Series meets as arranged, though often on the first Wednesday of the month. The Gulf Coast Veterans Health Care System is the only agency on the Gulf Coast, and the first agency in the state, certified by the Mississippi Board of Psychology to provide continuing education for the relicensure of psychologists. Residents are expected to attend. Training includes lectures by members of the Training Faculty, community experts, guest lecturers, and occasionally by APA-approved CE video presentations and satellite teleconferences.

Psychology Grand Rounds

Psychology Grand Rounds programs are held monthly. Residents, on a rotating basis, present one to two cases over the course of the year that illustrate a particular diagnostic or therapeutic problem. Faculty, Residents and other students attend and participate. Residents must present assessment case material, review contemporary literature for the disorder, and lead discussion concerning the diagnosis and treatment of the individual patient. Attention is given to the diversity of individual

differences in patients and populations presented. Toward the end of the year, with permission of the Director of Training, a Resident may elect to present their current VA research or dissertation project.

Neuropathology Rounds

Neuropathology Rounds are held as specimens are available and can be arranged. Presented by the staff pathologist with assistance of the neuropsychologist, Residents and other students participate in neurological autopsies. Both healthy and diseased brains are examined. Occasionally, these cases have had prior neuropsychological or neurological assessments prior to death. Thus, neuropsychological data can be compared /related to postmortem neuroanatomical findings. Pathological findings/diagnoses of postmortem studies have included Pick's disease, Alzheimer's dementia, cerebrovascular accident, multi-infarct dementia, and lung cancer with metastatic brain involvement.

SUPERVISION

Supervision is as an integral part of the training program and is designed to foster education, professional competence, personal and professional growth, ethical responsibility, and personal integrity. At the beginning of the residency year, the Director of Training reviews the goals of supervision, process of supervision and characteristics of good supervisors and supervisees. Outlines of this information are provided for each Resident to reference from time to time over the training year. Supervisors are licensed psychologists who share their knowledge and expertise, model technique and professional behavior, and encourage residents to develop their skills using a variety of assessment/diagnostic, intervention, treatment team consultation, and research methods. Residents are expected to apply critical thinking and contemporary, empirically-based skills to professional, legal, and ethical issues related to the practice of psychology. Residents can expect to receive a minimum of two hours of individual, and one to two hours of group supervision per week.

COMPETENCY EVALUATION

Specific rotation/activity goals and objectives are communicated to Residents in writing at the onset of each rotation/activity. Faculty supervisors meet monthly to discuss the progress of Residents toward meeting these goals and objectives. At mid-rotation, supervisors and Residents are prompted to exchange feedback on the rotation experience and goals/objectives are reviewed. At the end of each rotation, Residents and their primary supervisors complete formal, written competency evaluations that are forwarded to the Director of Training. The information in these evaluations is used by the DOT to provide ongoing feedback to Residents, supervisors, and academic training directors. Typically, evaluation letters are sent to the Residents' academic programs at

midyear and at the completion of the Residency. Successful completion of relevant rotations, seminars and general activity objectives constitute exit criteria for completion of the program.

PROBLEMS AND DUE PROCESS RESOLUTION

Normally, problematic behavior or less than satisfactory performance is resolved by the Resident and the major rotation supervisor. In rare instances, formal remediation is necessary. We have a written Due Process document which details policies and procedures that are implemented in these cases. These procedures for handling grievances are specific and detailed and are designed to protect the rights of the student, the supervisor and the training program. You may obtain a copy of this document by sending an e-mail request to Dr. Rogers at jefferson.rogers@va.gov.

RESOURCES

Research

Training faculty may have research interests and ongoing externally and internally funded research programs. The Chief of Psychology is also the Coordinator of Research and Development and a strong advocate for and supporter of research. Psychologists are members of the region's Institutional Review Board and the Research and Development Committee. Residents are encouraged to participate in ongoing projects or to develop research projects of their own. Of particular interest are psychotherapy and other outcome studies.

Research Facility

The Gulf Coast Veterans Health Care System is accredited as a research facility by the National Committee for Quality Assurance and supports the Behavioral Medicine and Applied Psychology Laboratory and Research Center located at the Biloxi Division. This facility has excellent hardware including a Grass Polygraph with computer interface and laboratory microcomputer with statistical, optical scanning data entry, and graphic software. The research lab has PC-based statistical software available for use.

Dissertation Support

Although Residents will be very busy with their residency work, the training faculty encourages Residents to organize their time so that progress continues on the dissertation. While support in completing the dissertation is available on a limited basis, it is presumed that Residents have

proposed their projects, collected data, and are in the final stages of analysis and write-up when they begin their residency year. Some dissertation topics, however, require samples that can only be obtained in settings like our health care system. In the past, some Residents have utilized our VA population to collect dissertation data. Our goal for Residents is that they complete their dissertations during the residency year so that licensure and postdoctoral employment can be obtained.

Information Resources/Computerized Medical Record System

The Department of Veterans Affairs has been a national leader in the development of the computerized medical record, currently the most sophisticated system in the world, and the Gulf Coast Veterans Health Care System uses this paperless medical record. Residents will utilize the Computerized Patient Records System (CPRS) for chart review of progress notes, consults, radiological reports, health care summaries, discharge summaries, and pharmaceutical information. All employees and Residents have accounts on the health care system computer network (VISTA - a VA internal intranet system), general Internet access, and an Internet address. All psychology stations (including Resident offices) have computers. The vast majority of health care system communications are made via the computer. Psychology Service led the way in moving the Gulf Coast Veterans Health Care System into the computerized medical record. Internet access allows for instant literature searching for an enormous variety of psychology and medical topics. The Information Management Service-Information Center staff supports the clinical, educational, and research activities of the health care system by providing knowledge-based resources in electronic and printed format. There is a core collection of traditional text resources (book titles, subscriptions, and audiovisual materials and equipment), and an extensive collection of electronic resources available on the Electronic Library webpage. Interlibrary Loan service is available to acquire resources not available locally. Additionally, assisted computerized literature searches are available. Information Center staff also supports satellite teleconference training, using national and international experts and allowing for live interactions.

ADDITIONAL PSYCHOLOGY TRAINING PROGRAMS

Psychology Service supports several levels of training for students of psychology. This provides Residents the opportunity to gain experience in mentoring and supervising lower level trainees in a tiered supervision format. Participation in these programs cannot be guaranteed, as students are placed in these programs on an as-needed basis by the university training programs.

Summer Traineeship/Internship

Two or three students may be selected for the Summer Internship. They are either terminal master's students or doctoral students from Clinical or Counseling Psychology programs in the Southeast. The internship is a 500-600 hour requirement for graduation and certification. These

students do not currently receive a stipend, but may be able to obtain room and board. Residents provide additional mentoring and supervision beyond that of the Intern's primary Faculty supervisor(s).

Externship (Clinical Practica)

Students from nearby universities spend one or two days per week under the supervision of Faculty who have volunteered to assist in meeting their practicum needs. Their placement is for the duration of the academic semester. Occasionally, a student will train for more than one semester. Externs receive no stipend, but are awarded a letter grade as determined by their local supervisor. Residents may be called upon to assist in the professional development and supervision of these Externs.



View of Fort Massachusetts on Ship Island, some 12 miles south of the Mississippi Gulf Coast.

TRAINING FACULTY

Name: Nathaniel Abston, Jr., Ph.D.
Title(s): Mobile Outpatient Clinic Psychologist
School: University of Southern Mississippi, 1984
Internship: Biloxi VA Medical Center, 1983
License: Licensed Psychologist in Mississippi, 1984-present
Licensed Psychologist in Alabama, 1998-present



Duties: Dr. Abston is assigned to the VA Outpatient Clinic in Mobile, Alabama where he works in the Mental Health Clinic and consults with the Primary Care Medical Clinic.

Professional: Dr. Abston's professional interests include Health psychology, Minority issues in psychology, Post-Traumatic Stress Disorder, and Substance Abuse. His theoretical orientation is eclectic with a cognitive-behavioral emphasis. Dr. Abston is a Lecturer in Psychology at the University of South Alabama in Mobile and a member of the Alabama Psychological Association.

Personal: His personal interests include fishing and listening to blues and jazz music.

Name: Ronald W. Alexander, Ph.D.
Titles(s): Clinical Health Psychologist
School: University of Alabama, Birmingham, 1997
Internship: Wilford Hall Medical Center, Lackland AFB, San Antonio, TX
Post-doctoral Fellowship: Clinical Health Psychology, Wilford Hall Medical Center, Lackland AFB, San Antonio, TX
License: Licensed Psychologist in the State of Kansas, 1999-present



Duties: Dr. Alexander is responsible for providing a full spectrum of health psychology/ behavioral medicine services within the medical center. He is currently involved the Health Psychology/Behavioral Medicine Clinic, MH Integrated Primary Care, Pain Clinic, MOVE! Program and the Traumatic Brain Injury/Polytrauma screening program.

Professional: Dr. Alexander's theoretical orientation is primarily cognitive/behavioral with an emphasis on comprehensive biopsychosocial assessment and treatment. He is an avid supporter of the integration of mental health professionals into primary care clinics, with strong emphasis on the behavioral health consultant (BHC) model of care. He has special interest in the proper referral, and comprehensive assessment and treatment of veteran's returning from the current conflicts in

Afghanistan and Iraq. Other clinical and research interests include sleep and sleep disorders, as well as the impact of behavioral medicine interventions on improvement of patients' quality of life and the overall reduction of health care costs. He currently coordinates the Professional Issues seminar. He is in the process of obtaining ABPP certification in Clinical Health Psychology.

Name: Scott A. Cardin, Ph.D.

Titles(s): Outpatient Mental Health Psychologist

School: Texas A&M University

Internship: U. Houston Counseling and Psychological Service

Post-doctoral Fellowship:
Michael E. DeBakey VAMC, Houston, Texas

License: In process

Duties: Mental Health Clinic; Co-coordinator of Diagnostics and Psychopathology and Assessment Seminars.

Professional: Dr. Cardin's primary clinical interests include psychotherapy process, supervision/training and language factors. His theoretical orientation is eclectic with an emphasis on psychodynamic therapy. He recently completed a two-year Postdoctoral Fellowship in Advanced Psychology with an emphasis in research. His research efforts have centered on using language analyses to inform treatment of veterans suffering from PTSD. More specifically, a recent funded project examined identification of linguistic markers of change.

Personal: Dr. Cardin enjoys reading, creative writing, recreational sports (such as golf and Frisbee golf), and exploring the Gulf Coast with his girlfriend.



Name: Jack C. Carney, Ph.D.

Title(s) Home Based Primary Care

School: Tennessee State University, 2005

Internship: James H. Quillen VA Medical Center, 2004-2005

License: January 2006, Alabama, #1374

Duties: Dr. Carney is responsible for providing psychological services for veterans enrolled in the Home Based Primary Clinic. These services include: helping caregivers cope with the care of veterans with chronic disease and nearing end-of-life; individual and family therapy; assessment of cognitive disorders; decisional capacity (health care and financial); case management; and participating as a member of the HBPC interdisciplinary treatment team. In addition to these services, he supervises residents on the HBPC rotation as well as lectures on the Personality Assessment Inventory (PAI) and Millon Clinical Multiaxial Inventory-III (MCMI-III).



Professional: Dr. Carney's professional interests include personality assessment, acceptance and commitment therapy, end-of-life care, traumatic stress, and health psychology. His theoretical orientation is object relations with interpersonal and cognitive-behavioral interventions.

Personal: Favorite avocations include swimming with his one-year-old son, Jacob, attending local plays, boogie boarding at Perdido Key, finding new sushi restaurants, and going walking with his wife.

Name: **Stephanie L. Dutton, Psy.D.**

Titles(s): PTSD Psychologist

School: Regent University, Virginia

Internship: Gulf Coast Veterans Health Care System

License: In process



Duties: Posttraumatic Stress Disorder Programs;
Coordinator of the Special Topics in Psychology Seminar.

Professional: Dr. Dutton's professional interests include Posttraumatic Stress Disorder, Health Psychology and Spiritual/Religious issues in psychology. Her theoretical orientation is eclectic with a cognitive-behavioral and interpersonal emphasis. Dr. Dutton is a member of APA.

Personal: Dr. Dutton's personal interests include spending time with friends, traveling, camping, and enjoying music and movies.

Name: **Clinton W. Martin, Jr., Ph.D.**

Title: Staff Psychologist

School: University of Southern Mississippi, 1978

Internship: Topeka VA Medical Center, 1977

License: Licensed Psychologist in Mississippi, 1982-present



Duties: Dr. Martin is responsible for the provision of a full range of psychological services to an inpatient psychiatry interdisciplinary team. He coordinates the Assessment Seminar within the Psychology Residency program. He is a member of the G. V. (Sonny) Montgomery VA Medical Center Institutional Review Board (IRB).

Professional: Dr. Martin's professional interests include personality assessment, training and supervision, and research. His orientation is psychodynamic.

Personal: His personal interests include computers, photography, tinkering with a variety of mechanical objects and historical research.

Name: Benjamin Parker, Ph.D.

Title(s): PTSD Psychologist
School: West Virginia University, 2007
Internship: Gulf Coast Veterans Health Care System, 2007
License: Pending



Duties: Dr. Parker is responsible for providing psychological services for the PTSD Outpatient Clinic. These services include: performing biopsychosocial assessments; conducting psychoeducational and process groups for veterans seeking treatment for PTSD; providing individual therapy for veterans seeking treatment for PTSD and the related sequelae of mental disorders, e.g., depression, generalized anxiety, panic; engaging in case management activities; and participating in liaison services with members of the multidisciplinary PCT treatment team and providers from various service areas in the hospital.

Professional: Dr. Parker's professional interests include traumatic stress, behavioral medicine, prevention strategies, and positive psychology, especially in the area of forgiveness. His theoretical orientation is behavioral.

Personal: Dr. Parker's personal interests include music, movies, and enjoying time with family and friends.

Name: Susan K. Rhodes, Ph.D.

Title(s): Primary Care Psychology, Mobile Clinic
School: Oklahoma State University, 1993
Internship: Medical University of South Carolina/VAMC Consortium, 1992-1993



Post-doctoral Fellowship:
Medical University of South Carolina, Weight Management Center

License: Licensed Psychologist in Alabama, 1998-Present
Duties: Dr. Rhodes serves as the Primary Care Psychologist at the Mobile Outpatient Clinic, consulting with other disciplines for the Health Psychology/Behavioral Medicine needs of veterans in the ambulatory care arena.

Professional: Dr. Rhodes' professional interests include teaching. She is an adjunct faculty member at the University of South Alabama where she teaches course in General Psychology and Lifespan Development. Her interests include the treatment and prevention of obesity. Her theoretical orientation is primarily behavioral and cognitive-behavioral and her approach to therapy is evidence-based.

Personal: Dr. Rhodes enjoys running with and training her three dogs. She is the mother of three grown sons and looks forward to spending time with them and her grandchildren whenever possible.

Name: **Jefferson O. Rogers, Psy.D.**

Title(s): Director of Training, Geropsychologist;
Chairperson, Ethics Committee

School: Florida Institute of Technology, 1992

Internship: Washington, DC VAMC 1991-1992

Postdoctoral Fellowship:
Geropsychology, Little Rock VAMC, 1993

License: Licensed Psychologist in Mississippi, 1995-present

Duties: Dr. Rogers supervises students on the Geropsychology rotation and lectures on geropsychology. Clinical duties include providing psychological services to Nursing Home Care Units, Home Based Primary Care patients, the Dementia Unit, the Intermediate Medical Care unit, and Hospice patients. He additionally serves as Chairperson of the Ethics Committee of the Gulf Coast Veterans Health Care System and provides Tobacco Cessation treatment.

Professional: Dr. Rogers' professional interests include Geropsychology, neuropsychology, assessment of decisional capacity, and ethics. His theoretical orientation is eclectic/pragmatic with a cognitive-behavioral emphasis.

Personal: Favorite avocations include writing and performing music at local haunts, cooking, dining, projects around the house, and indulging his dog & wife. He admits to watching TV, often while reading, with an inclination toward cinema and documentaries.



Name: **Gustave F.P. Sison, Ph.D.**

Title(s): Chief, Psychology Service; Coordinator of
Research and Development; Administration,
Research and Long Term Therapy Supervisor

School: University of Southern Mississippi, 1982

Internship: Albany Medical Center/VA Medical Consortium,
Albany, New York, 1981-82

License: Licensed Psychologist in Mississippi, 1986-Present

Duties: Dr. Sison is Chief Clinical Psychologist and Employee Assistance Program Coordinator at the Gulf Coast Veterans Health Care System, where he also coordinates all medical, surgical, and mental health research activities.



Professional: Dr. Sison is a practicing clinical psychologist with over 20 years experience as a clinician, researcher, and behavioral health/change consultant. In addition to heading a consulting firm that specializes in organizational behavioral change, management consulting, stress/conflict management, and outcomes measurement, he teaches a doctoral course in health psychology, and is

the author of 18 professional publications in the behavioral sciences.

Personal: Dr. Sison's personal interests include canoeing, kayaking, numismatics, and history.

Name: Kelly D. Woods, Ph.D.

Title(s): Assistant Chief, Psychology Service
Program Manager, Psychosocial Rehabilitation
Chairperson, Disruptive Behavior Committee

School: University of Southern Mississippi, 1998

Internship: Gulf Coast Veterans Health Care System, 1996-97

License: Licensed Psychologist in Mississippi, 1999-Present



Duties: As the Assistant Chief, Dr. Woods monitors the day-to-day operations and administrative functions of Psychology Service. He track employee workload, training activities and has clinical oversight in working with the Staff Psychologists. As Program Manager for the PSR, he oversees program operations and activities of vocational staff who work with our veteran population. His duties as Disruptive Behavior Committee Chair allows him to work closely with the VA Police Service in monitoring workplace disruptions and/or incidents of violence in an effort to make the workplace safe for both employees and veterans.

Professional: Dr. Woods' professional interests include teaching such courses as Abnormal Psychology, Industrial/Organizational Psychology and Development as an adjunct faculty member of the University of Southern Mississippi-Gulf Park. His theoretical orientation is eclectic, and his approach to therapy is interpersonal.

Personal: Dr. Woods enjoys being a family man and spending as much time as possible with his wife of twelve years and their three children. In October of 2003 Dr. Woods completed a ten-month mobilization at Fort Benning, Georgia in support of Operation Noble Eagle. He is a member of Omega Psi Phi Fraternity, Incorporated and is also a Cub Scout Leader with a local Boy Scout troop.



ADJUNCT FACULTY

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|---------------------------------------|--|
| Moses Adedeji, M.D. | Neuroanatomy-Neuropathology Case Conferences |
| Kevin Blakley, Psy.D. | Neuropsychological Assessment |
| Marvett Burns, M.L.S. | Library and Information Resources |
| William L. Clayton, M.D. | Psychopharmacology |
| Richard H. Crosby, CADC | Primary Care Substance Abuse Issues |
| Elizabeth Curry, Ph.D. | Gay and Lesbian Issues in Therapy |
| Arthur J. Dawson, M.Div. | Spiritual Issues in Working with Patients |
| Bruce Dennings, Ph.D. | Business of Practice, Impaired Psychologist |
| Dorothy Dickson-Rischel, Ph.D. | Coping with Grief, Death and Dying |
| Fr. Joseph A. Diletusso | Spiritual Issues of Trauma Survivors |
| Patrick Evans, Ph.D. | Private Practice, Working with Couples |
| Stephen L. Farrow, M.D. | Interdisciplinary Treatment for Hypertension |
| Bill Gasparrini, Ph.D., ABPP | Children's Neuropsychology, Licensing and Ethical Issues |
| Chester D. Gaston, Jr., Ph.D | Neuropsychology, Supervision Issues, Licensing |
| Tanya Griego, LCSW | The Vet Center |
| Sarah Herring, LMSW | Social Work in Conjunction with Psychology |
| Nowal Jamhour, Ph.D. | Assessment and Treatment of Sleep Disorders |
| Beth Koch, Ph.D. | Business of Practice |

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| Jamie C. Landry, Ph.D. | Developmental Disabilities |
| Ruth McPherson, Ph.D. | Child and Adolescent Issues |
| Linda Reynolds, R.N. | HIV Counseling and Infection Control |
| Linda Rogers, R.N. | Hospice Care |
| William F. Seith, M.D. | Physical Neurological Examination, EEG |
| Sheree Starr, Ph.D. | Dialectical Behavior Therapy |
| Julie Teater, Psy.D. | Bariatric Surgery Evaluations, Police Evaluations, Private Practice |
| Daniel Vujnovich, Ph.D. | Neuropsychology in Disability Determination, Business of Practice |
| Francine Wolpe, M.D. | Single Positron Emission Computed Tomography (SPECT imaging), HIV Issues |

ACADEMIC PROGRAMS REPRESENTED IN THE RESIDENCY

Past 10 Years: University, Program, Degree

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| 2007-2008 | University of Alabama-Clinical Ph.D. Auburn University-Clinical Ph.D. Georgia School of Professional Psychology-Clinical Psy.D. Jackson State University-Clinical Ph.D. Marshall University-Clinical Psy.D. University of Southern Mississippi-Counseling Ph.D. |
| 2006-2007 | Argosy University, Hawaii-Clinical Psy.D. Jackson State University-Clinical Ph.D. Louisiana Tech University-Counseling Ph.D. University of North Dakota-Counseling Ph.D. University of Southern Mississippi-Clinical Ph.D. West Virginia University-Clinical Ph.D. |

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| 2005-2006 | Central Michigan University-Clinical Ph.D. Louisiana State University-Clinical Ph.D. Regent University (Virginia)-Clinical Psy.D. Southern Illinois University-Counseling Ph.D. University of Southern Mississippi-Counseling Ph.D. |
| 2004-2005 | Nova Southeastern University-Clinical Ph.D. University of Central Florida-Clinical, Ph.D. Jackson State University-Clinical Ph.D. Auburn University-Counseling Ph.D. Biola University-Rosemead School of Psychology-Clinical Ph.D. |
| 2003-2004 | Auburn University-Clinical Ph.D. Carlos Albizu University-Clinical Psy.D. Forrest Institute of Professional Psychology-Clinical Psy.D. Louisiana State University-Clinical Ph.D. University of South Carolina-Clinical Ph.D. University of Southern Mississippi-Clinical Ph.D. |
| 2002-2003 | Argosy University, Atlanta-Clinical Psy.D. California School of Professional Psychology-San Diego-Clinical Ph.D. Florida State University-Counseling Ph.D. George Fox University-Clinical Ph.D. (2) University of Southern Mississippi-Clinical Ph.D. |
| 2001-2002 | American School of Professional Psychology-Virginia-Clinical Psy.D. Biola University-Rosemeade School of Psychology-Clinical Psy.D. Florida Institute of Technology-Clinical Psy.D. (2) University of Southern Mississippi-Clinical Ph.D. University of Southern Mississippi-Counseling Ph.D. |
| 2000-2001 | Florida Institute of Psychology-Clinical Psy.D. Georgia School of Professional Psychology-Clinical Psy.D. Nova Southeastern University-Clinical Psy.D. Texas Woman's University-Counseling Ph.D. Western Michigan University-Clinical Ph.D. |
| 1999-2000 | Chicago School of Professional Psychology-Clinical Psy.D. University of Alabama-Birmingham-Clinical Ph.D. University of Georgia-Counseling Ph.D. University of Mississippi-Clinical Ph.D. (2) |
| 1998-1999 | University of Albany, State University of New York-Clinical Ph.D. University of Houston-Clinical Ph.D. Illinois School of Professional Psychology-Clinical Psy.D. Oklahoma State University-Counseling Ph.D. |

University of Southern Mississippi-Clinical Ph.D.

Academic Programs Prior to Above

University of Alabama
University of Arkansas
Auburn University
Ball State University
Baylor University
California School of Professional Psychology, Fresno
California School of Professional Psychology, San Diego
University of Colorado
University of Florida
Florida Institute of Technology
Florida State University
Georgia School of Professional Psychology, Atlanta
Georgia State University
University of Georgia
University of Houston
Illinois Institute of Technology
Louisiana State University
University of Massachusetts-Amherst
University of Memphis
Memphis State University
North Texas State University
Nova University
Oklahoma State University
University of Mississippi
University of South Florida
Southern Illinois University
Spalding University
University of Southern Mississippi
University of Tennessee
University of Texas
Texas A&M University
West Virginia University
Vanderbilt University
Virginia Polytechnic Institute and State University

APPLICATION INFORMATION

Stipend and Benefits

The Residency stipend is \$22,898 per annum. There are ten federal holidays. Twenty-six days of leave are accrued during the year. Residents are eligible for optional Government Life and Health Insurance benefits.

Qualifications

Applicants for the Residency Program must be degree candidates in APA-accredited doctoral programs in clinical or counseling psychology who have fulfilled departmental requirements for residency/internship as certified by their university training director. Only US citizens are eligible to receive stipend support. A physical exam certifying good health is required of applicants who are selected for the Residency Program at the Gulf Coast Veterans Health Care System. A security background check is also required.

Documentation

Applications must be received no later than December 1 and must include:

1. A current vita.
2. Official Transcripts of all graduate work.
3. APPIC Application for Psychology Internship (AAPI), including the verification of internship eligibility and readiness from your university training director.
4. A cover letter indicating the particular interests you have in our program (i.e., rotations you would be interested in), your long-term professional goals, and why you think you would be a good fit at our site.
5. Letters of recommendation from at least four (4) persons who are familiar with your academic and applied performance in psychology. Two of these letters should be from individuals familiar with your academic work and two from individuals familiar with your applied work (e.g., practicum placements).

Interviews

Interviews are given in person on an invitation-only basis and are required for those who are seriously interested in our program. Interviews will be scheduled beginning approximately December 15 (or approximately 2 weeks after the deadline for receipt of application materials). Telephone interviews are typically not conducted.

AMERICAN PSYCHOLOGICAL ASSOCIATION (APA) ACCREDITATION

The Psychology Residency Program at the Gulf Coast Veterans Health Care System is accredited by the American Psychological Association (APA) and has been since 1980. Contact APA at: 750 First Street, NE, Washington, DC 20002-4242. Phone: (202) 336-5500. Visit the APA web site at: www.apa.org. We have been training students in psychology since 1950.

ASSOCIATION OF PSYCHOLOGY POSTDOCTORAL AND INTERNSHIP CENTERS (APPIC) MEMBERSHIP

The Psychology Residency Program at the Gulf Coast Veterans Health Care System is a member of the Association of Psychology Postdoctoral and Internship Centers (APPIC) and fully subscribes to their selection procedures and policies. This site agrees to abide by the APPIC policy that no person at this training facility will solicit, accept or use any ranking-related information from any intern applicant. Please visit the APPIC web site to obtain additional information including the Uniform Application and Match Rules (<http://www.appic.org>).

APPIC Match Number: 1401

CORRESPONDENCE

Download application materials (AAPI) from the APPIC web site, above.

Send completed application materials and requests for information to:

Jefferson O. Rogers, Psy.D.
Director of Training
Psychology Service (116B)
Gulf Coast Veterans Health Care System
400 Veterans Boulevard
Biloxi, MS 39531-2410
Telephone: (228) 523-4792
Fax: (228) 523-4754
E-mail: jefferson.rogers@va.gov

(Note: For FedEx, and other such deliveries, specify "Building T-102, Room F117" in the address).

***IN MEMORIAM
JOHN C. HANSON, PH.D.***

This publication of the Psychology Residency Brochure is dedicated to our good friend and colleague, Dr. John C. Hanson who died unexpectedly in November, 2005 of cardiac arrest. Dr. Hanson was a former Psychology Resident of our program, was actively involved with training and supervision and was instrumental in providing disaster response support and treatment for VA employees following the devastation caused by Hurricane Katrina. We all miss him and his contributions to Psychology Service and the Training Program.

