



Clinical Psychology Postdoctoral Fellowships

With an Emphasis in Primary Care Integration and Health Psychology

With an Emphasis in PTSD

White River Junction VA Medical Center

Carrie Lukens, PhD
215 North Main Street
White River Junction, VT 05009
(802) 295-9363 (x5827)

<https://www.va.gov/white-river-junction-health-care/work-with-us/internships-and-fellowships/>

Applications Due: December 1, 2025

Accreditation Status

The postdoctoral fellowship program at the **White River Junction VA Healthcare System (WRJ VAHCS)** is accredited as a Clinical Psychology Residency Program by the Commission on Accreditation of the American Psychological Association. The program was reaccredited in 2019 for 10 years with our next site visit scheduled to be held in 2028.

Application & Selection Procedures

Eligibility Requirements are listed on the VA psychology training homepage.

[Resources for Health Professions Trainees Coming to VA | Eligibility and Forms - Office of Academic Affiliations](#) and [Eligibility and Forms](#) and [Am I Eligible v5.pdf \(va.gov\)](#)

Primary items are emphasized below, and a more complete listing is provided at the end of this brochure. All applicants for our doctoral internship program must meet all of these requirements.

General Qualifications: A candidate for the WRJ VAHCS Clinical Psychology Postdoctoral Fellowship-Focus in Primary Care Integration and Health Psychology must meet the following criteria:

- U.S. citizenship. VA is unable to consider applications from anyone who is not currently a U.S. citizen. Verification of citizenship is required following selection. All interns and fellows must complete a Certification of Citizenship in the United States prior to beginning VA training,
- A male applicant born after 12/31/1959 must have registered for the draft by age 26 to be eligible for any US government employment, including selection as a paid VA trainee.
- Interns and Fellows are subject to fingerprinting and background checks. VA appointment is contingent upon HR's determination of eligibility (and suitability) for Federal employment.
- VA conducts drug screening exams on randomly selected personnel as well as new employees.
- Have received a doctorate from an APA or CPA accredited graduate program in Clinical, Counseling, or Combined Psychology or PCSAS accredited Clinical Science program. Persons with a doctorate in another area of psychology who meet the APA or CPA criteria for respecialization training in Clinical, Counseling, or Combined Psychology are also eligible.
- Have completed an internship program accredited by APA or CPA or have completed a VA-sponsored internship.

The WRJ VAHCS psychology postdoctoral fellowship program abides by all APA guidelines and requirements. Questions related to the program's accredited status should be directed to the Commission on Accreditation:

Office of Program Consultation and Accreditation

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

The WRJ VAHCS is also a member of the Association of Psychology, Postdoctoral and Internship Centers (APPIC) and participates in the National Matching Service (www.natmatch.com/psychint/) and abides by the APPIC guidelines as set forth in the APPIC MATCH POLICIES. These policies can be accessed at the APPIC website www.appic.org.

Specific Qualifications: The postdoctoral fellowship program has one fellowship position for the 2026-2027 training year and may receive funding for a second position. We will receive confirmation of this funding in November and will update our materials then. Our fellowship has two primary emphases to choose from: one in Health Psychology and Primary Care Integration and a second in Trauma and PTSD with our PTSD Clinical Team. If we receive funding for two positions, we will accept one candidate for each emphasis. If we do not receive funding for the second fellowship position, we will interview and rank candidates for both emphases.

The fellowship at the WRJ VAHCS is clinically-oriented and so places a premium on those experiences that prepare applicants for clinical practice informed by scholarship. Highly regarded candidates will have completed clinically-oriented internships and have experiences conducting individual psychotherapy (i.e., brief and long-term psychotherapy with adults and clinical interviewing) and psychological assessment.

For our health psychology primary care integration fellowship, we seek applicants with some prior training and experience in working in health psychology and a primary care setting. Highly regarded candidates will have some clinical experience in both health psychology and in primary care, completed coursework in health psychology, and have experience with cognitive-behavioral therapy and other modalities, such as motivational interviewing, ACT, and mindfulness.

For our PTSD psychology fellowship, we seek applicants with some prior training and experience with EBPs for PTSD. Highly regarded candidates for our PTSD fellowship will have clinical experience with relevant EBPs, such as CPT, PE, WET, EMDR, as well as PTSD assessment.

The WRJ VAHCS believes in the mission of the Veteran's Healthcare Administration (VHA): "To fulfill President Lincoln's promise to care for those who have served in our nation's military and for their families, caregivers, and survivors."

We are an equal opportunity training program, and we welcome and strongly encourage applications from all qualified candidates, regardless of race, ethnicity, religion, sexual orientation, disability, parental status, military status, or other minority status.

Application Procedures: Interested persons who meet the eligibility criteria should submit the following materials:

1. A letter of interest indicating intent to apply to the postdoctoral fellowship program, which emphasis you are applying for (Health Psychology and Primary Care Integration or Trauma and PTSD), and why you are applying to our program. Please include a brief description of your professional goals and aspirations for the fellowship program and your career.
2. Curriculum vitae describing previous training (including internship) and work experiences, and other scholarly activity and/or research.
3. Three letters of recommendation, one of which must be from an internship clinical supervisor.
4. Official graduate transcripts.
5. Letter from your dissertation chair regarding dissertation status and anticipated completion date if dissertation has not been defended at the time of this application.

Application review begins on December 1, 2025. We will consider applications submitted after the due date and invited interviews will follow until the position is filled.

First notification of interview will be no earlier than December 15th.

Interviews will begin on January 5th, 2026.

Applicants can apply electronically via the APPA CAS application portal: www.appic.org/Postdocs/APPA-CAS-Postdoc-Application-Information

In addition to the materials submitted by applicants to the postdoctoral fellowship program, the WRJ VAHCS may also consider other publicly available materials including, but not limited to, information available through the internet.

Questions can be directed to the Director of Training or the Associate Director of Training:

Carrie Lukens, Ph.D.
Training Director
Carrie.Lukens@va.gov
(802) 295-9363, ext. 2135

Sarah Knapp, Ph.D.
Associate Training Director
Sarah.Knapp1@va.gov
(802) 295-9363, ext. 6184

Mailing Address

Veterans Affairs Medical Center (116B)
163 Veterans Drive
White River Jct., VT 05009-0001
APPIC Program Code Number: 9120

The selected applicant must have successfully defended their dissertation and completed all other degree requirements before they begin the fellowship program. Selected fellows, under extraordinary circumstances, may petition the Training Committee for a thirty day extension. If granted, the start date of the fellowship would be delayed, and the fellow would be required to extend their fellowship (possibly without compensation) in order to fulfill fellowship requirements. Selected fellows who are denied an extension or are unable to begin the fellowship within thirty days of the original start date will be de-selected from the program. In this unusual circumstance, alternative candidates may be contacted to fill the position as quickly as possible.

Selection and Interview Process: Written application materials will be reviewed upon receipt, and top candidates will be invited for personal interviews. Candidates for interview will be selected based on several criteria including meeting the requirements described above, clinical experiences, and match with our program. Please be sure to indicate a preferred email address, as well as daytime and evening telephone numbers, in your application materials so you can be reached to schedule an interview.

The training committee will meet to review the applicants invited for interviews and rank order the candidates. The postdoctoral program begins on August 1, 2026 and ends July 31, 2027. In certain circumstances we can allow for different start dates.

Psychology Setting

The Clinical Psychology Postdoctoral Fellowship Program at the WRJ VAHCS is located in the Mental Health and Behavioral Science Service Line (MHBSS). Our department is very proud of our tradition of integrating multiple disciplines into the care of our patients. Psychologists, psychiatrists, social workers, nurse practitioners and master's level mental health professionals work alongside each other in meetings, leading groups, collaborating on the care of individual patients, and in developing treatment offerings. In our service, fellows literally work next to and collaborate with other mental health



disciplines on a daily basis. As a result, fellows become used to regular consultation with other staff and participate in inter-professional teams as a normal mode of professional practice.

The MHBSS has established programs in general outpatient care and acute care (inpatient), primary care (Primary Care Mental Health Integration Clinic), treatment of substance use disorders (outpatient and residential substance use disorder treatment programs), recovery-based services (including transitional housing and supported employment), PTSD outpatient services, and neuropsychological assessment. We also have an array of behavioral medicine programs in collaboration with primary and specialty care medical services. These programs include diabetes education and support groups, evaluations for surgical procedures, including organ transplant, specialized assessment and intervention with oncology and palliative care patients, weight loss programs (including MOVE and intuitive eating), and interventions for patients with chronic pain and insomnia. We serve primarily, though not exclusively, patients from the lower half of the socioeconomic strata. Recently there has been a growing number of middle-class working patients primarily represented by the increasing numbers of Veterans from recent and ongoing military missions. Most patients receiving specialized mental health care are dually diagnosed with one or more of the following diagnoses: substance use disorders, PTSD, depression spectrum disorders, and personality disorders.

The WRJ VAHCS training program has a faculty of eight doctoral-level psychologists. Administratively, the program is supervised by the Director of Psychology Training, who oversees and implements internship and postdoctoral recruitment and selection, assigns trainees to faculty supervisors, and coordinates clinical experiences. In addition to the postdoctoral fellowship program, we sponsor an APA-accredited psychology internship program.

Medical School Affiliations: The WRJ VAHCS is dually affiliated with the Geisel School of Medicine at Dartmouth (GSMD) and the University of Vermont (UVM) College of Medicine.

The WRJ VAHCS affiliation with GSMD supports more than 150 individuals in 17 specialties. Forty percent of the clinical medicine activity for GSMD students takes place at the VA, and these students rank the VA as superior to their non-VA training options. This affiliation has also provided the substrate to support the National Center for PTSD, the National Quality Scholars Program, a field station in Patient Safety, VA Outcomes Group, a Rural Health Initiative, a VA Research and Development Service and a new Inter-Professional Patient Safety Fellowship.

The WRJ HCS has supported a formal affiliation with the University of Vermont (UVM) College of Medicine in Burlington, Vermont, since 1994. This affiliation provides the mechanism for medical residents, cardiology, and psychiatry fellows and students to rotate through our Lakeside Community Based Outpatient Clinic (CBOC) in Burlington, Vermont. This CBOC also supports UVM trainees in advance nurse practice and social work.

Allied Health Affiliations: WRJ VAHCS maintains over 40 other current academic affiliations with colleges and vocational schools to provide a variety of professional and technical experiences for nursing, physician assistants, optometry, physical and occupational therapy, social work, radiology, medical technology, and other fields.

Training Model and Program Philosophy

The postdoctoral fellowship program at the WRJ VAHCS subscribes to the following characteristics commonly associated with the scholar-practitioner model of training:

- 1) A scholarly approach to practice via reflection and critical thinking;
- 2) An application of scholarly work and empirically-based research data to the practice of psychological assessment and clinical practice;
- 3) An emphasis on the psychologist as an informed consumer of scholarly work including theoretical material and empirical research;
- 4) A recognition of the importance of generating knowledge through practice;

- 5) An expectation that fellows will attend and become active participants in academic/didactic activities.

Our postdoctoral fellowship program is based on the philosophy that sound and effective clinical practice is built on knowledge of the theoretical and empirical literatures, critical thinking, and self-reflection. We train our fellows to implement and promote established, efficacious treatments and encourage our fellows to draw upon theoretical and empirical literature to enhance the development of their professional skills over time. Moreover, we train our fellows to view knowledge and understanding of themselves as integral to the treatment process.

Program Goals & Objectives

The clinical psychology postdoctoral fellowship programs-Emphasis in Health Psychology and Primary Care Integration and Emphasis in Trauma and PTSD at the WRJ VAHCS-are designed to teach early-career professionals the knowledge and skills to function as independent, ethical, and competent psychologists consistent with the highest standards of practice. We emphasize the development of compassionate and humane approaches to the alleviation of human suffering and the enhancement of personal health and growth.

The primary goal of the psychology postdoctoral fellowship program is to prepare early-career professionals in the ethical practice of clinical psychology a variety of other settings including primary care and to serve as leaders in the integration of mental and physical health care. Our postdoctoral fellowship graduates are well prepared to begin working in a diverse number of environments, including primary care settings, outpatient clinics, and medical center-based care. A second major goal is to develop clinical psychologists who will be scholars and practitioners. We train our postdoctoral fellows to be active, continuous consumers of professional literature and to use this literature to inform their practice, providing effective, evidence-based treatment for a variety of clinical conditions. The third major goal of our training program is to develop psychology leaders who continue to expand the practice and application of psychological principles into existing and newly developing areas of practice, including primary and specialty care mental healthcare and/or medicine as well as biomedical ethics. A fourth major goal of our postdoctoral program is to train professional psychologists well-versed in the understanding and treatment of psychopathology and utilization of psychological principles for areas such as health promotion and chronic disease management with the ability to utilize multiple theoretical orientations (cognitive behavioral therapy, ACT, etc) in their case conceptualization and treatment. We believe that the ability to draw upon these rich bodies of knowledge will enable our postdoctoral fellows to more effectively conceptualize and treat a diverse group of patients with a wide range of clinical issues.

Our fellowship program uses a competence-based practice and assessment model. We strive to operationalize the skills and abilities we believe are most essential to effective, ethical clinical practice. Fellow's skill levels are formally assessed three times during the year. We begin with assessing competence in nine general areas and then assess more specific competencies in skill/practice areas.

The general competence areas in which fellows are assessed are:

- A. Research/Scholarly Inquiry: Demonstrates integration of science and practice in clinical work, research, and clinical presentations.
- B. Ethical and Legal Standards: Responds professionally in increasingly complex situations with a greater degree of independence across settings. Applies ethical concepts and awareness of legal issues regarding professional activities with individuals, groups, and organizations.
- C. Individual and Cultural Diversity: Demonstrates the ability to be culturally responsive (i.e. awareness, sensitivity, and skills) in delivering patient care, community engagement, conducting research, collaborating with others, and when supervising interns and/or practicum students. Is able to demonstrate awareness of how self/individual characteristics and values may interface with the professional environment.
- D. Professional Values, Attitudes, and Behaviors: Comportment reflects the values and attitudes of psychology. Practices with personal and professional self-awareness and reflection, with

- awareness of competencies, and with appropriate self-care. Responds professionally in increasingly complex situations with a greater degree of independence across levels of training.
- E. Communication and Interpersonal Skills: Relates effectively and meaningfully with individuals, groups, and/or communities. Responds professionally in increasingly complex situations and with a greater degree of independence across levels of training.
 - F. Assessment: Conducts evidence-based assessment consistent with the scope of Health Service Psychology.
 - G. Interventions: Demonstrates competence in evidence-based interventions consistent with the scope of Health Service Psychology.
 - H. Supervision and Teaching: Supervision and training in the professional knowledge base of enhancing and monitoring the professional functioning of others.
 - I. Interdisciplinary/Interprofessional Consultation and Collaboration: Ability to provide expert guidance or professional assistance in response to a client/program's needs or goals. Demonstrates knowledge of key issues and concepts in related disciplines. Identifies and interacts with professionals in multiple disciplines.

These general areas are assessed every four months with a formal, summative evaluation. Together with the fellow, competence levels are discussed and assessed using the following competency descriptions:

Level 0 - Competence below the level expected at the beginning of the fellowship. Supervision is very directive, structured, and intensive. Multiple large gaps in skills and/or knowledge are present. Remedial work is needed in this competency area.

Level 1 - Competence at a level expected at the beginning of the residency. Supervision is directive and the supervisor provides extended input during routine supervision. Gaps in skills and/or knowledge are present and are a major focus of ongoing supervision.

Level 2 - Competence is progressing well. Resident is acquiring new skills and/or refining existing skills in this domain. Routine communication in supervision involves a combination of the resident reporting to the supervisor and the supervisor advising the resident.

Level 3: Demonstrates a level of competence expected upon completion of the postdoctoral residency. Routine supervision is typically collaborative, and the resident shows at most minor gaps in knowledge and/or skills. Minimal supervision/professional consultation required to address highly complex issues or circumstances that arise with relatively low frequency.

Level 4 - Demonstrates a level of competence commensurate with that of an experienced practicing or board-certified psychologist. Supervision is collaborative and collegial and may resemble peer supervision between independent practitioners. There are no significant gaps in knowledge or skill in this competency area.

Program Structure

The postdoctoral fellowship is composed of a number of core experiences, most of which occur simultaneously throughout the year. These experiences for the fellow in Health Psychology and Primary Care Integration include a rotation in the PCMHI (located in the Primary Care Service), primary care integration, specialty care medicine (insomnia, diabetes care, and pain service), and specialty mental health clinic (BHIP). The PTSD fellow will engage in intensive training in evidence-based assessment and treatment for Veterans diagnosed with PTSD related to any type of trauma. The PTSD fellow will also have the option to engage in clinical duties in another setting in our department depending on clinical interest and training goals. These optional settings include BHIP, PCMHI, Health Psychology, the Burlington Lakeside Clinic (BLC CBOC), Residential Rehabilitation Treatment Program (RRC) for substance use disorders, and our inpatient psychiatry unit. Both fellows will implement a quality improvement or program development project in conjunction with a supervisor.

Postdoctoral fellows engage in varied activities during the course of a work week which approximates the schedules of staff members. A typical day for a fellow includes seeing outpatients in primary care and/or specialty care medicine clinics and specialized mental health care, collaborating with medical and other

mental health providers, attending a seminars or journal clubs, and receiving supervision. Fellows also attend weekly staff meetings and participate in multidisciplinary treatment teams. Fellows typically work a forty-hour week and will likely complete readings and other assignments for seminars/journal clubs outside of this time.

Postdoctoral fellows receive a minimum of two hours of individual supervision per week, as well as additional supervision for other elected experiences. Fellows also attend several seminars/didactics focused on professional development, clinically relevant topics, and supervision.

Supervision: Supervision is a core part of the fellowship experience. Fellows receive at least two hours of individual supervision per week: one hour for their work in the primary and specialty care medicine clinics or the PCT and an hour for their work in the specialized mental health care clinic or other primary elective rotation. In addition, fellows receive supervision depending on selected rotations or experiences they have opted to participate in. The fellowship encourages all trainees to become thoughtful and knowledgeable about the evolution of their own professional identity and conceptualize their clinical decisions.

Eight doctoral psychologists serve as supervisory staff for all clinical experiences (see section on Training Faculty). Other psychology staff members may also serve as ad hoc supervisors for other experiences such as the QI or program development project. The supervisors will mentor the fellow via modeling, teaching, supervising skills, and professional demeanor. The Director of Training and the supervisors will assist the postdoctoral fellows in establishing a caseload and acquiring the types of experiences necessary for individual growth in the role of psychologist. Each supervisor will help ensure that the fellow's training objectives are met and will complete evaluations of fellow's performance three times during the training year. Live observation and video/audio recordings of sessions are used in the supervision process.

The faculty of the White River Junction VA postdoctoral fellowship values self-reflection in professional training. We view self-reflection as 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 fellows are encouraged to discuss this issue with prospective supervisors.

Training Experiences

The training experiences will vary depending on which emphasis you are training in. Fellows are required to complete a quality improvement or program development project.

Emphasis in Health Psychology and Primary Care Integration

The fellow in health psychology and primary care integration will be involved in four primary areas of emphasis consisting of the Primary Mental Health Integration Clinic (PCMHI), primary care integration programs (smoking cessation, pain management, insomnia, weight management), specialty care integration (Oncology Service, diabetes care), and specialty mental health care (outpatient psychotherapy/BHIP or PCT depending on availability of supervisors).

PCMHI: Postdoctoral fellows provide assessment and short-term psychotherapy in the PCMHI Clinic which is located in the Primary Care Service. In this year-long rotation, fellows learn to conduct brief, problem-focused assessments and brief psychotherapy. Patients come to this access mental health clinic from primary and specialty care medicine for walk-in or pre-scheduled mental health services. Patients can be seen by both a therapist and a medication provider who conduct brief, biopsychosocial assessments. Therapists and medication providers consult with each other and the patient and make treatment recommendations, including referrals for psychotherapy, trials of medication, hospitalization, and to support or other groups. In this setting, postdoctoral fellows learn to consult with both psychiatric medication providers as well as primary care physicians about each patient seen in the clinic. Interns and practicum students rotate through PCMHI and there are opportunities for tiered supervision for the fellow.

Typically, the fellow will supervise one of the practicum students for one half-day shift in PCMH. There may also be an opportunity to do an additional half-day shift in the Women Veteran's Primary Care clinic.

Primary Care Integration: Postdoctoral fellows work closely with the mental health team in primary care to implement and expand mental health programs in the primary care service. Fellows provide behavioral health care (health promotion and disease management strategies), as well as providing care through an open access clinic for primary care patients as well as consultation to medical providers. These programs include evidenced-based individual and group interventions for hypertension, lifestyle change/weight loss, smoking cessation, pain management and insomnia programs.

Specialty Care Integration: Postdoctoral fellows work with the team providing diabetes shared medical visits. When working with the diabetes team, the fellow provides consultation, short-term psychotherapy, co-facilitates support groups and participate in multidisciplinary treatment team meetings.

Health Psychology: Postdoctoral fellows work with the health psychology team utilizing short-term, evidence-based treatment approaches for referrals such as coping with chronic disease, chronic pain and insomnia. Fellows can be trained in and utilize CBT-CP, CBT-I, ACT-CP and others. Fellows will also attend weekly team huddles, conduct behavioral health evaluations for solid organ transplant and other pre-surgical evaluations (e.g. spinal cord stimulator, cochlear implant, stem cell therapies, bariatric surgery), lead health-focused groups such as Sleep 101 and Pain 101/Rehab, co-lead MOVE! weight management groups with a dietitian, and facilitate groups such as PST, CBT-CP and ACT in the RRC or our inpatient mental health unit. Fellows often co-facilitate these groups with practicum students which provides an opportunity for a tiered supervision experience.

Specialty Mental Health Care/BHIP: Postdoctoral fellows work in the general outpatient mental health clinic, also known as the Behavioral Health Interdisciplinary Program team-based care or BHIP. They carry a caseload of outpatients seen weekly in either short-term or long-term psychotherapy. Fellows are supervised in the practice of short-term and long-term psychotherapy from a theoretically integrated perspective. In this clinic, a holistic, recovery-oriented approach to care is taken, so fellows work closely with medication providers (nurse practitioners and psychiatrists), social workers (homeless veteran coordinator and supported employment coordinator), as well as collaborating with primary and specialty care physicians. Fellows are often able to focus this work on specific areas of interest such as women Veterans, military sexual trauma, couples and family therapy, PTSD, or anxiety. This depends on supervisor and patient availability.

Emphasis in Trauma and PTSD

The fellow in Trauma and PTSD will engage in intensive training in evidence-based assessment and treatment for Veterans diagnosed with PTSD related to any type of trauma. These opportunities provide a wide array of experiences. The fellow will also choose an elective rotation depending on their interests. This could include Specialty Mental Health Care/BHIP, Burlington Lakeside Clinic (BLC CBOC), Health Psychology, PCMH, or other rotations tailored to your interests such as group or individual work in the inpatient unit and/or the Residential Recovery Center.

PTSD Clinical Team (PCT): Postdoctoral fellows work in the PCT, which prioritizes the use of evidence-based psychotherapies to target and reduce symptoms of PTSD. Fellows will have an opportunity for supervised experience with gold-standard treatments for PTSD, which may include Cognitive Processing Therapy (CPT), Prolonged Exposure (PE), Concurrent Treatment of PTSD and Substance Use Disorder using PE (COPE), and Written Exposure Therapy (WET). Fellows may also have an opportunity for supervised experience in trauma informed interventions, such as Skills Training in Affective and Interpersonal Regulation (STAIR), Acceptance and Commitment Therapy for PTSD (ACT-D), and Cognitive Behavioral Therapy for Nightmares (CBT-N). Not all referrals will engage in an evidence-based psychotherapy, and some cases will employ an integrative framework. Fellows will likely have an opportunity to conduct assessments such as the Clinician Administered PTSD Scale (CAPS-5). They will also co-facilitate the Seeking Safety Group with a psychology intern in a tiered supervision experience. The PTSD fellow is required to attend the National Center for PTSD (NCPTSD) journal club which meets

weekly at the NCPTSD, which is co-located on our campus. Fellows will present a journal article at least once during the training year under mentorship from staff at the NCPTSD.

Specialty Mental Health Care/BHIP: Postdoctoral fellows may elect to work in the general outpatient mental health clinic, also known as the Behavioral Health Interdisciplinary Program team-based care or BHIP. They carry a caseload of outpatients seen weekly in either short-term or long-term psychotherapy. Fellows are supervised in the practice of short-term and long-term psychotherapy from a theoretically integrated perspective. In this clinic a holistic, recovery-oriented approach to care is taken so fellows work closely with medication providers (nurse practitioners, clinical pharmacists, and psychiatrists), social workers (homeless veteran coordinator, and supported employment coordinator), as well as collaborating with primary and specialty care physicians. Group opportunities in the RRC or our inpatient psychiatric unit are also possible and there may be opportunities to supervise a practicum student in these groups or in their individual BHIP work in a tiered supervision experience.

Health Psychology: Postdoctoral fellows may elect to work with the health psychology team utilizing short-term, evidence-based treatment approaches for referrals such as coping with chronic disease, chronic pain and insomnia. The rotation can be tailored to your specific interests, such as chronic pain or insomnia. Fellows can be trained in and utilize CBT-CP, CBT-I, ACT-CP and others. Fellows can also attend weekly team huddles, conduct behavioral health evaluations for organ transplant and other surgical procedures, run health-focused groups like Sleep 101 and Pain 101/Rehab, participate in MOVE! weight management groups, and facilitate groups such as PST, CBT-CP and ACT in the RRC or our inpatient mental health unit.

PCMHI: Postdoctoral fellows may elect to work in the Primary Care Mental Health Integration Clinic which is located in the Primary Care Service. In PCMHI, fellows learn to conduct brief, problem-focused assessments and brief psychotherapy. Patients come to this access mental health clinic from primary and specialty care medicine for walk-in or pre-scheduled mental health services. Patients can be seen by both a therapist and a medication provider who conduct brief, biopsychosocial assessments. Therapists and medication providers consult with each other and the patient and make treatment recommendations, including referrals for psychotherapy, trials of medication, hospitalization, and support groups. In this setting postdoctoral fellows learn to consult with both psychiatric medication providers as well as primary care physicians about each patient seen in the clinic.

Shared Required Experiences

Both fellows are required to complete a quality improvement or program development project and teach the psychiatry interviewing course.

Quality Improvement or Program Development Project: Psychologists in Academic Health Centers are becoming increasingly involved in the development of new institutional programs, policies, and guidelines; the redesign of existing systems; and the evaluation of current policies and procedures. This aspect of training aims to expose residents to these aspects of professional practice and provide skills in systems re-design and/or program evaluation. Both postdoctoral fellows must choose to do either a quality improvement or program development project. Fellows works on a project in their area(s) of interest that will fill some need within the medical center. Supervisors will work with the fellows to establish measures to evaluate needs or outcomes, design a project or program to address the needs, and evaluate the impact of the project or program.

Teaching Psychiatry Interviewing Course: Both fellows co-teach an eight session, weekly psychiatry interviewing course with a staff psychiatrist for Dartmouth Geisel School of Medicine medical students. This course is provided from November-January for second-year medical students learning about psychiatry and psychiatric interviewing skills. Students perform a 30-minute diagnostic interview with a psychiatric patient while observed by other students and both group leaders. The group leaders collaborate to provide feedback about interviewing skills and facilitate discussion of psychiatric conditions and treatments. Group leaders are responsible for evaluating students, providing written and oral feedback, and grading a written case discussion for each of the students.

Seminars and Case Conferences: Fellows attend their respective team meetings, PCT or Health Psychology and PCMH, which focus on clinical issues, referrals, and clinic flow.

Fellows attend a professional development seminar that meets at least monthly, focused on topics of professional growth and identity. Topics may include EPPP and licensure, transitioning into staff roles, supervision, and leadership roles available to psychologists.

Fellows may participate in the trainee didactic seminar which focuses on clinical topics and others of special interest to veterans and supervision. This seminar meets weekly and is attended by all levels of trainees.

In addition to the seminars, fellows participate in the department grand rounds program. This is offered weekly by the MHBSS line. Staff members, psychiatry residents, and interns present on topics of interest to mental health.

The PTSD fellow is required to attend the National Center for PTSD journal club which meets weekly and present a journal article at least once during the training year. This journal club is optional for the health psychology and primary care integration fellow.

Requirements for Completion

Requirements: To remain in good standing, postdoctoral fellows are required to make progress toward competency in all domains; utilize supervision for professional growth and achievement of competencies; participate in and complete readings/assignments for all seminars, case conferences, journal clubs and supervision; demonstrate reasonably appropriate ethical and professional behavior and maintain a full workload.

To successfully complete the fellowship, postdoctoral students are required to meet minimum practice (workload) expectations, achieve competency in all required domains, be in good standing throughout the year and complete the program in its entirety. Early departures from the program will disqualify the fellow from official completion/graduation. Performance standards within each competency domain are detailed in the evaluation forms which are completed by supervisors three times per year.

Facility and Training Resources

Abundant resources exist to support training. Fellows are provided comfortable, individual offices and computers that allow access to electronic records, email, and the internet.

The Learning Resource Center (LRC) at the WRJ VAHCS maintains books and periodicals encompassing an array of psychology and medical journals. Trainees can sign-up for the review service in which they receive the tables of contents to selected journals to review and select articles they wish to read. In addition, the LRC maintains audiocassettes, videocassettes, and other audiovisual resources. The LRC also provides Internet access for searches of professional literature. The Librarian at the LRC is available to help trainees with literature searches as well as inter-library loan requests for journal articles and books.

Administrative Policies and Procedures

Time Requirements: The postdoctoral fellowship is a one-year experience requiring at least 40 hours of "on duty" time per week. The starting date is generally the first business day of August, and the end date is the last business day in July. Postdoctoral fellows are required to gain a minimum of 2080 hours of training (minus leave time) during the training year. If fellows are not able to complete the full 2080 hours during the training year or have not satisfied the minimum requirements, they can, with approval from the training director, complete the remaining hours and requirements during the next training year; fellows will not receive a stipend for the additional hours required to complete their training.

Stipend: Fellows receive a competitive stipend paid in biweekly installments. VA postdoctoral fellowship stipends are locality adjusted to reflect different relative costs in different geographical areas. Currently, the stipend for the WRJ VAHCS postdoctoral fellowship is \$61,135 annually for the 2026-2027 training year.

Benefits: The postdoctoral fellowship appointments are for 2080 hours, which is full-time for a one year period. VA fellows are eligible for health insurance including vision and dental (for self, married spouse, and legal dependents). As temporary employees, fellows may not participate in VA retirement programs.

Holidays and Leave: Fellows receive the 11 annual federal holidays. In addition, fellows accrue 4 hours of sick leave and 4 hours of annual leave for each full two-week pay period they work, for a total of between 96 and 104 hours of each during the year.

Authorized Absence: Subject to approval by the Director of Training, fellows may be given authorized absence without charge to leave, when the activity is considered to be of substantial benefit to VA in accomplishing its general mission or one of its specific functions, such as education and training. Fellows may be granted authorized absence for VA job interviews.

Due Process Statement: It is the practice of the WRJ VAHCS fellowship 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.

Since 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.

Self-Disclosure: The faculty of the WRJ VAHCS fellowship value self-reflection in professional training. We view self-reflection as 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 fellows are encouraged to discuss this issue with prospective supervisors.

As stated in the APA Ethics Code, a fellow may be required to disclose personal information if it becomes necessary to evaluate or obtain assistance for a fellow 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.

The staff recognizes the benefit of personal psychotherapy for all psychology trainees. We consider the decision to seek psychotherapy a personal one, but may, in some circumstances, suggest or encourage fellows to seek personal psychotherapy.

Training Staff

Allington, Casey, Ph.D. is a clinical psychologist lead facility trainer in PCMH. His clinical interests include brief treatments particularly focused in trauma and PTSD including PE for Primary Care.

Fagan, Sarah, Psy.D. is a clinical psychologist in the Behavioral Health Interdisciplinary Program. She is also the Military Sexual Trauma Care Coordinator at WRJ VA and works with veterans who are impacted by MST, supporting them in accessing care and resources. Her clinical interests include dialectical behavior therapy, military sexual trauma, and evidence-based psychotherapies focused on addressing anxiety and depression.

Knapp, Sarah, Ph.D. is a clinical neuropsychologist and the Associate Training Director for the Fellowship. Her interests include teleneuropsychology, cultural considerations in assessment, and evaluations for dementia and traumatic brain injuries. She is also currently engaged in research projects related to cultural considerations in psychology training.

Kutter, Catherine, Ph.D. is a clinical psychologist in the Behavioral Health Interdisciplinary Program. Her clinical interests include evidence-based psychotherapies, measurement-based care, dialectical behavior therapy, LGBTQ+ affirmative care, chronic pain management, and provision of care to a rural population through telehealth.

Lukens, Carrie, Ph.D. is the director of psychology training and a clinical psychologist on the health psychology team. Her clinical interests include teaching, training, and supervision, integrated primary care psychology, anti-racism and anti-harassment initiatives including ERASE, chronic disease management including autoimmune disorders, diabetes, obesity, and other metabolic disorders, mindfulness, motivation enhancement, and health behavior change.

Rousseau, Glenna, Ph.D. is a clinical health psychologist, program manager for integrated health, and the health behavior coordinator at WRJ. Her clinical interests are in brief assessment/ treatment interventions, health psychology, behavioral medicine, group treatment for obesity and diabetes, integrated mental health and primary care.

Smith, Adam, Psy.D. is a clinical psychologist on the BHIP/General Outpatient team and on the mental health management team. His clinical interests include training, supervision, team-based care, and rural mental health issues.

Treworgy, Shanna, Psy.D. is a clinical psychologist in and Team Lead for the PTSD Clinical Team. She has completed certification trainings including Prolonged Exposure Therapy, Cognitive Processing Therapy, Eye Movement Desensitization and Reprocessing, Acceptance and Commitment Therapy for Depression, as well as a Mindfulness and Psychotherapy certification from the Institute for Meditation and Psychotherapy. Her specific interests include evidence-based therapies for PTSD, mindfulness-based psychotherapies, supervision, and program development and evaluation.

Trainees

Graduates and Current Postdoctoral Fellows Degrees and Graduate Programs

2025-2026

St. John's University
Ph.D. in Clinical Psychology
Internship: Denver Health Medical Center, CO

Antioch University New England
Psy.D. in Clinical Psychology
Internship: Federal Bureau of Prisons, FCC Allenwood, PA

2024-2025

University at Albany-SUNY
Ph.D. in Counseling Psychology
Internship: WRJ VA Healthcare System, VT

University of Kentucky
Ph.D. in Clinical Psychology
Internship: Montana VA Healthcare System, Fort Harrison, MT

2023-2024

Fielding University
Psy.D. in Clinical Psychology
Internship: WRJ VA Healthcare System, VT

University of Hartford
Psy.D. in Clinical Psychology
Internship: Manchester VA Medical Center, NH

2022-2023

Illinois Institute of Technology
Ph.D. in Clinical Psychology
Internship: VA Medical Center, Togus, Maine

2020-2021

Regent University Clinical Psychology Program
Psy.D. in Clinical Psychology
Internship: Cheyenne VA Medical Center, WY

2019-2020

Nova Southeastern University
Psy.D. in Clinical Psychology
Internship: WRJ VA Healthcare System, VT

Nova Southeastern University
Psy.D. in Clinical Psychology
Internship: Broward County Medical Center, FL

Local Information

The WRJ VAHCS is located in rural New England on the border of New Hampshire and Vermont. Situated in the scenic New England countryside, the location offers easy access to the pleasures of country living including picturesque New England villages and farms, excellent skiing, hiking, and boating as well as Arts and Cultural events sponsored by Dartmouth College across the river in Hanover, New Hampshire. White River Junction also affords easy travel to Boston and Montreal. Both Hanover and Dartmouth provide a culturally and ethnically diverse community with opportunities for social and culturally diverse networking and support.

Links to Local Information:

VA Medical Center, White River Junction, Vermont

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

Dartmouth College Counseling Center

[About | Dick's House: Dartmouth College Health Service](#)

National Center for PTSD

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

Housing:

[Employee Rentals Info | Dartmouth Real Estate Office](#)

Local Events:

<http://hop.dartmouth.edu>

<http://www.lebanonoperahouse.org>

<http://www.claremontoperahouse.com>

<http://www.newportoperahouse.com>

<http://www.flynncenter.org>

<http://www.thecolonial.org>

Racial/Ethnic Resources:

Networking and Support at Dartmouth College (www.dartmouth.edu/~ide/)

- First Friday of the Upper Valley (Black Professionals)
- French, Italian and German Conversation and Potluck Lunchs
- Hanover-Joigny and Hanover-Nihonmatsu Exchanges
- Multicultural Families of Vermont and New Hampshire
- Nomaste Friends (South Asians in the Upper Valley)
- Upper Valley Chinese School

PFLAG -Supports, Educational Resources, and Advocacy

<https://pflag.org>

Upper Valley Fatherhood Network: 603-448-5922

WISE (Women's Information Service): 603-448-5922

Women's Resource Center: 603-650-4377

Women's Network of the Upper Valley: 603-643-6819

Religious Resources

For a complete list of religious groups in the area please visit:

[Recognized Student Groups | The William Jewett Tucker Center \(dartmouth.edu\)](#)

Local News:

<http://www.vnews.com>

Outdoor Sports:

<http://www.skinh.com>

<http://www.vermontvacation.com>

<http://www.visitnh.gov>

Transportation:

<https://dartmouthcoach.com>

<http://www.flymanchester.com>

<https://flights.capeair.com/en/essential-travel-lebanon>

Weather:

<https://sites.dartmouth.edu/dpa/weather/>

Postdoctoral Program Admissions

Date Program Tables are updated: 9/19/2025

Briefly describe in narrative form important information to assist potential applicants in assessing their likely fit with your program. This description must be consistent with the program's policies on intern selection and practicum and academic preparation requirements:

The postdoctoral fellowship program seeks applicants with some prior training and experience in working in a primary care setting and health psychology or experience in the treatment of PTSD. The fellowship at the WRJ VAHCS is clinically-oriented and so places a premium on those experiences that prepare applicants for clinical practice informed by scholarship. Highly regarded candidates will have completed clinically-oriented internships and have experiences conducting individual psychotherapy (i.e., brief and long-term psychotherapy with adults and clinical interviewing), psychological assessment, health psychology or PTSD, and clinical practice in primary care and outpatient mental health settings.

Highly regarded candidates will also have completed coursework in health psychology or trauma and have experience with cognitive-behavioral psychotherapy.

Describe any other required minimum criteria used to screen applicants:

The selected applicant must have successfully defended their dissertation and completed all other degree requirements before they begin the fellowship program. Selected fellows, under extraordinary circumstances, may petition the Training Committee for a thirty-day extension. If granted, the start date of the fellowship would be delayed, and the fellow would be required to extend their fellowship (possibly without compensation) in order to fulfill fellowship requirements. Selected fellows who are denied an extension or are unable to begin the fellowship within thirty days of the original start date will be de-selected from the program. In this unusual circumstance, alternative candidates may be contacted to fill the position as quickly as possible.

Financial and Other Benefit Support for Upcoming Training Year*

Annual Stipend/Salary for Full-time Residents	\$ 61,135	
Annual Stipend/Salary for Half-time Residents	n/a	
Program provides access to medical insurance for resident?	Yes	
If access to medical insurance is provided:		
Trainee contribution to cost required?	Yes	
Coverage of family member(s) available?	Yes	
Coverage of legally married partner available?	Yes	
Coverage of domestic partner available?		No
Hours of Annual Paid Personal Time Off (PTO and/or Vacation)	96	
Hours of Annual Paid Sick Leave	96	
In the event of medical conditions and/or family needs that require extended leave, does the program allow reasonable unpaid leave to interns/residents in excess of personal time off and sick leave?	Yes	
Other Benefits (please describe): VA fellows are eligible for health insurance including dental and vision (for self, married spouse, and legal dependents). Fellows receive paid leave for annual federal holidays. Fellows may be given authorized absence without charge to leave for education and training.		

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

Initial Post-Residency Positions

	2022-2025	
Total # of residents who were in the 3 cohorts	5	
Total # of residents who remain in training in the residency program	1	
	PD	EP
Community mental health center		
Federally qualified health center		

Independent primary care facility/clinic		
University counseling center		
Veterans Affairs medical center	1	2
Military health center		
Academic health center		1
Other medical center or hospital		
Psychiatric hospital		
Academic university/department		
Community college or other teaching setting		
Independent research institution		
Correctional facility		
School district/system		
Independent practice setting		1
Not currently employed		
Changed to another field		
Other		
Unknown		

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

Eligibility Criteria:

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.

- 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.
- 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.
- 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.
- 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>. Please also see OAA's [Affiliate's Resource Page](#) for more information.
- 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. Please note: Although the recreational and medical use of cannabis and

cannabis products such as CBD, is legal in Vermont, it remains federally prohibited. It is understood that our facility cannot train individuals who test positive for cannabis. See item 8 below and the following link for more information: **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/vhapublications/ViewPublication.asp?pub_ID=8152. 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.

6. **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://department.va.gov/academic-affiliations/resources/affiliate-resources/>
 - 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. With regard to COVID vaccinations: Health Professions Trainees (HPTs) are appointed as temporary employees of the Department of Veterans Affairs. As such, HPTs are subject to laws, policies, and guidelines posted for VA staff members. There are infrequent times in which this guidance can change during a training year which may create new requirements or responsibilities for HPTs. If employment requirements change during the course of a training year, HPTs will be notified of the change and impact as soon as possible and options provided. The VA Training Director for your profession will provide you with the information you need to understand the requirement and reasons for the requirement in timely manner.
 - 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.
7. **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://department.va.gov/academic-affiliations/resources/health-professions-trainees/eligibility-and-forms/>. Falsifying any answer on these required Federal documents will result in the inability to appoint or immediate dismissal from the training program.
8. **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: [PIV Credential Identity Verification Matrix \(va.gov\)](#).