Doctoral Psychology Internship Program in Health Service Psychology

Richard L. Roudebush VA Medical Center
1481 West 10th Street (116P)
Indianapolis, IN 46202
(317) 988-3366
http://www.indianapolis.va.gov/

Applications Due: November 15th

Serious Mental Illness and Recovery (2 positions) – 216812
Clinical Health Psychology in Primary Care (2 positions) - 216813

Note: Information in this brochure reflects updates as of August 31st, 2018

Accreditation Status

Internship Program The doctoral internship at the Richard L. Roudebush V.A. Medical Center is a member of the Association of Psychology Postdoctoral and Internship Centers (APPIC). This program is accredited by the Commission on Accreditation (CoA) of the American Psychological Association, effective November 5th, 2013 with the next site visit expected in 2020. For more information or questions please contact CoA at:

Office of Program Consultation and Accreditation
American Psychological Association
750 1st Street, NE, Washington DC 2000
Phone: (202) 336-5979/Email: apaaccred@apa.org
Web: www.apa.org/ed/accreditation

Application & Selection Procedures

Criteria for acceptance into the program

In accordance with VA policy, our internship seeks applicants who are U.S. citizens and are enrolled in APA-accredited doctoral programs in clinical or counseling psychology. In addition, we require that a prospective intern's university advisor or director of training verify that s/he approves and recommends that the student receive an internship at this facility, as specified on the APPIC “Academic Program's Verification of Internship Eligibility and Readiness” form. As an equal opportunity training program, the internship welcomes and strongly encourages applications from all qualified candidates, regardless of gender, gender identity, age, religion, race, ethnicity, culture, nationality, socioeconomic status, sexual orientation, disability, or other minority status. We are committed to ensuring a range of diversity among our training classes, and we select candidates representing different kinds of programs and theoretical orientations, geographic areas, ages, racial and ethnic backgrounds, sexual orientations, disabilities, and life experiences. All things being equal, consideration is given to applicants who identify themselves as veterans; as members of historically underrepresented groups on the basis or racial or ethnic status; as representing diversity based on sexual orientation; or as representing diversity based on disability status. These factors may be indicated on their application.

We also seek candidates who evidence professionalism, scientific mindedness and good interpersonal skills. In addition, we look for those who demonstrate strong verbal expressive skills and overall goodness-of-fit with our training program. We are interested in applicants who have obtained a range of clinical experiences but who are also interested in pursuing a range of ideas as their careers emerge. Applicants should have met the Basic Competency Requirements established by APA for readiness to enter the Internship Program. In addition, we require a minimum of 500 intervention hours, 60 assessment hours and 5 integrated reports. Other requirements include:

• Verification by the intern's host program DCT of eligibility for participation in the APPIC internship match, which is included in the completed AAPI
• Enrollment in an APA Accredited clinical or counseling graduate program (Ph.D or Psy.D)
• Successful completion of comprehensive examinations
• Graduate GPA of 3.0 or higher
• No evidence of significant professional conduct issues
• Completion of academic and practicum requirements
Further VA internship eligibility requirements:

1. U.S. citizenship. VA is unable to consider applications from anyone who is not currently a U.S. citizen. Verification of citizenship is required following selection. All interns and fellows must complete a Certification of Citizenship in the United States prior to beginning VA training.

2. A male applicant born after 12/31/1959 must have registered for the draft by age 26 to be eligible for any US government employment, including selection as a paid VA trainee. Male applicants must sign a pre-appointment Certification Statement for Selective Service Registration before they can be processed into a training program. Exceptions can be granted only by the US Office of Personnel Management; exceptions are very rarely granted.

3. Interns and Fellows are subject to fingerprinting and background checks. Match result and selection decisions are contingent on passing these screens.

4. VA training occurs in a health care setting. Some of the patients served by VA are elderly or infirm, and could succumb to common illnesses like influenza. It is important to be able to document that your vaccinations are up to date and that you have been screened for active tuberculosis prior to starting your training at VA or other hospitals. Securing a statement from university student health center, your regular health provider, or an urgent care clinic can expedite your appointment. Additionally, maintaining a current flu vaccination during the training year (or taking additional preventative measures to limit patient exposure to the flu) will be required. Please discuss this with the program training director after you have matched and well before to your start date to facilitate your onboarding.

5. Internship applicants also must meet these criteria to be considered for any VA Psychology Internship Program:

6. Doctoral student in good standing at an American Psychological Association (APA) or Canadian Psychological Association (CPA) accredited graduate program in Clinical, Counseling, or Combined psychology or Psychological Clinical Science Accreditation System (PCSAS) accredited program in Clinical Science. 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.

7. Approved for internship status by graduate program training director.

8. To be eligible for employment as a VA Psychologist, a person must be a U.S. citizen and must have completed an APA, or CPA accredited graduate program in Clinical, Counseling, or Combined psychology or PCSAS accredited Clinical Science program AND must have completed an APA or CPA accredited internship in Psychology, with the emphasis area of the degree consistent with the assignment for which the applicant is to be employed. The only exception is for those who complete a new VA internship that is not yet accredited.

Position information:

- The stipend for the training year is $24,133.00
- Only 52-week full-time internships are available (2088 hours).
- Our anticipated start date is typically the first full week in August
- This setting complies with all APPIC guidelines and with local licensing requirements.
- APPIC Program Match Numbers:
  - Serious Mental Illness and Recovery (2 positions) – 216812
  - Clinical Health Psychology in Primary Care (2 positions) - 216813

Application Process

Our internship program participates in the APPIC match, and application must be made through the online AAPI (APPIC Application for Psychology Internships), which can be found at the APPIC website: www.appic.org/. No mail or email application materials will be accepted. We request no additional supplemental documents beyond those indicated on the APPIC website. The deadline for completed applications is November 15th. Interviews will be arranged for selected applicants (see Candidate Interviews below for more information).

Offers of acceptance will be made in agreement with the guidelines developed by the Association of Psychology Postdoctoral and Internship Centers (APPIC). APPIC Match Policies are available on the APPIC website (http://www.appic.org/). Applicants must obtain an Applicant Agreement from the National Matching Service (http://www.natmatch.com/psychint) and register for the match to be eligible to match to our program. This internship 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. We will offer appropriate guidance to all applicants.
during the application process. We strongly suggest that you apply to this program only if it ranks highly in terms of your personal and professional priorities.

Prior to beginning the internship year, it will be necessary for applicants selected for the internship training program to complete an Optional Application for Federal Employment (OF 612) and a Declaration for Federal Employment (OF 306). Initial drug screen and physicals are mandatory and a part of the on-boarding process. During the training year, interns are responsible for adhering to the policies and procedures of the Psychology Training Program and the Psychology Section. Also, many of the laws, rules, and guidelines that apply to federal employees are applicable to trainees in federal training positions. For example, interns may be subject to random drug screening. A copy of the policies and procedures of this training program will be made available to intern applicants during orientation at the beginning of the training year.

The application procedure includes the following steps:

- Complete the on-line APPIC Application for Psychology Internships.
- Initiate three letters of recommendation from individuals, as part of the Online AAPI.
- Indicate in your cover letter your major track preferences. Candidates are encouraged to apply to multiple tracks.
- All materials should be received prior to November 15th.
- Psychology staff will review all applications and will offer interviews to those who best match with our program and clinical tracks. Preference is given to applicants who have specific training and/or research experiences that are consistent with the type of work that is performed at the Roudebush VAMC. Notification of interview status will be sent by December 15.

All correspondence and application materials should be sent to:

Training Director and Assistant Training Director

Amanda Wickett, Psy.D
Director of Training, Psychology
Roudebush VA Medical Center
1481 W. 10th St. (116P)
Indianapolis, IN 46202

Email: amanda.wickett@va.gov
Phone: (317) 988-3366
Fax: (317) 988-5204

Selection and Interview Process

The Selection Committee is comprised of a least all three major emphasis area mentors and meets to review all applications for basic eligibility. Each emphasis area mentor selects approximately 15 applicants to invite to interview. All personal interviews are conducted individually and by invitation only. Candidates will be informed by e-mail by December 15th as to whether they have been invited for a personal interview. Applicants invited to interview will be informed about the emphasis area for which they are being considered as applicants are free to apply to more than one emphasis area. Therefore, applications to more than one emphasis area does not necessarily mean that candidates will be considered for all areas of interest.

Interviews are typically held the second and third Friday of January. Interviews serve as a two-way process: a chance for us to meet and learn more about you, and an opportunity for you to meet us and get a better understanding of our program. For those who are invited for an interview and are unable to visit our program in person, we will be happy to conduct an interview and answer your questions by telephone. An interview is required to match with our program.

Match Process

We will adhere strictly to the match policies established by APPIC. The only information that we may communicate to applicants prior to the February deadline is whether they are still under consideration for admission. Additional information regarding the match is available through the National Matching Services.
Psychology Setting

The Richard L. Roudebush VAMC is a Category 1A facility located in the heart of downtown Indianapolis, and it serves veterans from a 45-county area in Indiana and Illinois. The Psychiatry Service employs 33 psychologists and includes programs representing the entire continuum of mental health services. Our facility is affiliated with the Indiana University School of Medicine and has participated in training of IU psychology interns. We maintain academic affiliations with seven APA-approved graduate psychology programs at five different universities including University of Indianapolis, Indiana University - Purdue University Indianapolis, Ball State University, Indiana State University, Indiana University-Bloomington, and Purdue University.

The psychology staff members at our facility are supervised by a lead psychologist who reports to the Chief of Psychiatry and the Chief of Patient Care Services. The 33 psychologists are organized into six groups based on similarity of function, purpose, or activities. The program is overseen by lead psychologist Shannon Woller, Psy.D, ABPP, and is managed by both Director of Training Amanda Wickett, Psy.D and Associate Director of Training Paul Lysaker, Ph.D.

Training Model and Program Philosophy

We adhere to a practitioner-scholar training model and provide opportunities to engage in numerous clinical, educational, and research activities. Rather than developing one specific area of deep concentration, the program is designed to develop psychologists who are adept at managing a wide range of adult psychological disorders, conducting therapy in multiple modalities (e.g. individual and group), conducting and interpreting psychological and neuropsychological assessments, and providing psychoeducation. There are two emphasis areas: recovery oriented treatment for veterans with serious mental illness (Serious Mental Illness and Recovery; referred to as SMI) and Clinical Health Psychology in Primary Care. As a site serving primarily adult veterans and some active military service people, the population served is predominantly male, although a growing percentage of younger Veterans and active duty service members are women. Because we are a general medical and surgical facility rather than a neuropsychiatric facility, several of the training opportunities that we provide have a behavioral medicine or health psychology focus.

We utilize separate match numbers for each emphasis area, which helps ensure that applicants are guaranteed an experience in their expressed area of interest. We also flexibly tailor our internship program to meet the training needs of each intern. No differentiation is made between clinical and counseling interns with respect to the content of their clinical training experiences.

Training Schedule and Rotations

During orientation week, interns meet with their primary supervisor/mentor and the training director to discuss their preferences regarding their training schedule for the entire year. Interns then collaboratively establish their training plan with the other supervisors who will be involved in their training. The training director approves the training plan to ensure that it includes experiences that best meet the interns’ individual training needs and interests. Interns are expected to develop a well-balanced rotation schedule rather than one that is narrowly focused. Interns are given considerable latitude in their choice of specific rotations.

Interns can expect to participate in 12 hours of training activities weekly. Interns are expected to provide no less than an average of 10 hours of direct services per week. Interns will spend approximately 24 hours per week (3 days) in one of three major rotations and approximately eight hours per week (one day) in one of four minor rotations. Each rotation lasts six months, however involvement in the DBT program through the MHC requires a year-long commitment.

The intern will spend three days per week for one semester in their major emphasis area rotation [Severe Mental Illness and Recovery major rotation (SMI) or Clinical Health Psychology in Primary Care and the other six months in the Mental Health Clinic (MHC). Interns will be involved in a minor rotation in SMI or Clinical Health during the semester in which they are in their major rotations in the Outpatient Mental Health Clinic. To ensure sufficient exposure to the outpatient population, each intern will be required to complete one major rotation in the MHC. Thus, interns will have year-long exposure to their emphasis area while also focusing on generalist training in the MHC (see table on page 7).
Program Aims and Objectives

The overall mission of the doctoral psychology internship training program is to provide a high-quality, experiential learning environment from which to cultivate ethical, scientifically grounded, psychologically flexible skills, experience, and knowledge that will guide an intern in the transition from graduate student to entry-level professional in the field of psychology. Through a developmental approach, interns will experience graduated exposure to increased autonomy as training progresses throughout the year. Specific aims of the training program include ensuring interns demonstrate competence in nine key areas including:

1. Individual and Cultural Diversity
2. Professional Values, Attitudes and Behaviors
3. Ethical and Legal Standards
4. Communication and Interpersonal Skills
5. Assessment
6. Intervention
7. Supervision
8. Consultation and Interprofessional/Interdisciplinary Skills
9. Research

Among these aims, specific objectives involve the development of foundational and functional competencies reflecting readiness for entry-level practice. Objectives related to foundational competencies include developing awareness and abilities in reflective practice of self-assessment, scientific knowledge and methods, relationships, individual and cultural diversity, ethical and legal standards and policy, and interdisciplinary systems. Functional competency objectives include knowledge, skills and abilities in assessment, diagnosis and case conceptualization, intervention, consultation, research and evaluation, supervision and teaching, management and administration, and science and practice. We seek to expose our interns to an array of treatment settings and therapeutic challenges as they progress through the internship year to accomplish these objectives. Interns will learn through graded exposure, based on their individual needs, readiness, and previous experience. Graduating interns develop the competencies and a sense of professional identity needed for entry-level positions or post-doctoral residencies. Interns will receive training in shared decision making, the sustenance of long term relationships, and recovery and integration within interdisciplinary collaboration. See Requirements for Completion for more information about experiential training objectives.

Program Structure

We have four full-time funded internship positions. Interns will complete two six-month major rotations and two six-month minor rotations while supplementing training with adjunctive training experiences. Interns are guaranteed a rotation in their selected emphasis area and receive mentorship from their emphasis area supervisor. As indicated above, interns will complete a six-month minor rotation (one day per week) in their major emphasis area to ensure continuity of training, sufficient contact with mentor, and potential for long-term therapy cases under supervision of mentor. One primary supervisor will be associated with each major rotation and interns will be assigned a mentor who is also the primary supervisor in the intern’s respective area of emphasis. Each intern has one major and one minor rotation supervisor at any given time, and each rotation supervisor provides one hour of scheduled individual supervision weekly with additional supervision provided as needed.

As interns rotate throughout their year, they maintain a working relationship with their mentor who serves to provide support and guidance throughout the year. Each supervisor is responsible for selecting patients and making referrals, representing psychology with the intern in team meetings, and scheduling individual supervision and possibly some group supervision sessions as well. One day per week will be set aside for training activities including didactics, case presentations, reading, research, and special projects. Interns can expect at least two hours of individual supervision and two hours of group supervision per week. One hour of group supervision takes place in the context of treatment team staff meetings and related multidisciplinary meetings. There will also be opportunities to gain experience in supervision by providing adjunctive umbrella supervision to practicum students who are also receiving supervision by a licensed staff psychologist. The degree of responsibility given the intern and the amount of structure provided depends on his or her level of prior experience.
Interns will be formally evaluated at the mid-point and the end of each rotation and upon completion of the training year for a total of four evaluations to provide feedback and to cultivate a collaborative effort toward skill advancement. Interns also provide feedback to the program quarterly for the purposes of program quality enhancement. At mid-year and the year’s end, interns will meet with the training director individually to discuss training issues and program quality enhancement in more depth. Please see the Requirements for Completion section for more information about evaluation processes.

**Training Experiences**

Below is a list of the major and minor rotations, as well as the adjunctive experiences (e.g. DBT and CBT for insomnia) that are currently available for psychology interns at the Richard L. Roudebush VA Medical Center. The specific program developed by an intern must involve the approval of the Director of Training.

**Major Emphasis Area Rotations**

- Serious Mental Illness and Recovery (PRRC)
- Clinical Health Psychology in Primary Care

**Generalist Major Rotations**

- Outpatient Mental Health Clinic (MHC) with option to participate in DBT training program or Trauma Recovery Program

**Minor Rotations**

1. Neuropsychology
2. Bioethics
3. Psychologists and Leadership
4. Rehabilitation for Persistent Pain
5. CBT for Insomnia (adjunctive experience)

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<tr>
<th>Major Emphasis Area</th>
<th>Semester 1</th>
<th>Semester 2</th>
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<td><strong>SMI intern #1</strong></td>
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<td>Major Rotation</td>
<td>SMI</td>
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<tr>
<td>Major Rotation</td>
<td>MHC</td>
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<td><strong>Health intern #1</strong></td>
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<td>Major Rotation</td>
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**Major Rotations**

**Serious Mental Illness and Recovery**

*Supervisor: Paul Lysaker, Ph.D., HSPP*

*Program:* This rotation focuses on long term psychotherapy with veterans with significant mental health needs including those related to schizophrenia, bipolar disorder, major depression, personality disorders, substance
use, and trauma. Treatment is delivered in the Psychosocial Rehabilitation and Recovery Center (PRRC), an outpatient clinic housing within the lager medical center. The PRRC is made up of an interdisciplinary team including psychologists, psychiatrists, nurse practitioners, social workers and graduate level trainees. Group programming offers a range of possible experiences, including process groups and social skills training. Patients seen in PRRC engage in group and individual therapy, and family counseling if desired.

Many of the patients treated in the PRRC have complex mental health needs which include potentially early trauma, social adversity, and multiple comorbid psychiatric and non-psychiatric medical conditions. The treatment is individualized and conceptualized as something that develops as the patient and clinician get to know one another. This rotation offers a strong recovery framework in which meaningful recovery must be directed by the patient. The clinical work and supervision is based on a metacognitive model of serious mental illness and personality disorders (Metacognitive Reflection and Insight Therapy; MERIT) which stresses interventions that assist clients to utilize integrated ideas about themselves and others to decide how to effectively respond to the psychosocial challenges posed by psychiatric conditions. It is an integrative and flexible approach in that it describes principles that can be adapted by therapists from other perspectives in order to promote metacognition and help clients meaningfully recover. This work, rather than focusing on the contents of thoughts alone, is interested in how information is pieced together to form a sense of the larger social world and to decide how to manage emotional pain. Emphasis will be placed on developing an understanding of barriers to recovery, which include stigma, emotion dysregulation, deficits in social cognition and metacognition, as well as methods used to formally assess these barriers and intervene accordingly.

Interns will become able to deliver services to effectively address cognitive and intersubjective processes. Interns will become able to utilize a range of empirically supported techniques based on the unique need of the patient. The intern will also be able to consult and participate in interdisciplinary treatment team meetings with fellow PRRC providers to develop comprehensive psychological conceptualizations to guide treatment planning. Interns may have the opportunity to offer supervision to practicum students who are providing similar services to adults with severe mental illness. Interns will become familiar with methods for assessing metacognition and using that as a framework to guide intervention.

There is a long history of quantitative and qualitative clinical research conducted at this site and interns will be strongly encouraged to become involved in that work in ways that match their own professional goals. The intern can participate at all levels of research including data collection, data analysis, and manuscript submission.

**Psychology Training Provided:** Individual and group psychotherapy, diagnostic and personality assessment, and clinical research.

**Roles and responsibilities of interns in this rotation include the following:**
- Carrying a caseload of individual psychotherapy patients during the rotation and throughout the training year
- Facilitating group psychotherapy
- Providing psychological assessment
- Attending team meetings
- Providing staff in-service and education
- Participating in ongoing clinical research

**Clinical Health Psychology**

**Supervisors:** Sarah Skeeters, PsyD, HSPP and Michael Hines, PsyD, HSPP

**Program:** This rotation is designed to provide the intern with a broad range of behavioral medicine clinical experiences, with a heavy emphasis on the patient-centered medical home model (known as Patient Aligned Care Teams, or PACT, within the VA system). The intern will learn to function as a vital member of a multidisciplinary team in primary care and will also play a role in the facility-level Health Promotion/Disease Prevention program by providing behavioral medicine services that help Veterans to make positive health behavior changes and by supporting patients’ self-management of such behaviors.

**Psychology Training Provided:** The intern will be based in the primary care clinics, frequently providing same-day patient care by conducting triage assessments for Veterans referred by their primary care providers. The intern will also carry a behavioral medicine caseload throughout the year and will have the opportunity to conduct
psychological assessments for Veterans being considered for spinal cord stimulators, organ transplant. The intern will co-facilitate behavioral medicine groups as well. Examples of the groups that may be available at various times during the rotation are: Chronic Pain Management, Managing Obesity in Veterans Everywhere (MOVE!), Multidisciplinary Diabetes Group Visit Clinic, Healthy Heart Stress Management. Opportunities may also exist for the intern to assist in providing training and consultation to other healthcare providers in order to enhance their ability to function as health coaches for their patients within the PACT model.

Roles and responsibilities of interns in this rotation include the following:
• Conducting triages and lengthier behavioral medicine evaluations
• Managing a caseload of behavioral medicine psychotherapy patients
• Co-facilitating health-related support and therapy groups
• Attending team meetings and educational activities
• Collaborating and consulting with providers representing other disciplines involved in patient care
• Utilization of evidence-based interventions (e.g., CBT, Motivational Interviewing) to promote both physical and mental health

Outpatient Mental Health

Supervisors: Jennifer Chambers, Ph.D & Amanda Wickett, Psy.D, HSPP

Program: The purpose of the rotation is to provide the intern with intensive experience in an outpatient mental health clinic. Dr. Chambers will supervise interns in this rotation. The Mental Health Clinic is a very active, full-service general adult outpatient mental health clinic, serving the full and comprehensive mental health needs of all veterans. Though not required, interested interns may have the opportunity to gain experience in working with evidence-based treatment of trauma under the secondary supervision of Dr. Wickett, in coordination with the PTSD Clinical Team.

Psychology Training Provided: Trainees may expect to treat individuals diagnosed with a wide spectrum of psychiatric disorders utilizing a variety of evidence-based individual, group, family, and marital/relationship psychotherapies including Cognitive Behavioral Therapy (CBT), Acceptance and Commitment Therapy (ACT) and Dialectical Behavioral Therapy (DBT) in application to specific disorders (depression, anxiety, personality disorder). Group psychotherapy experiences range from psychoeducational to experiential and supportive. Trainees rotating through MHC will participate with a multidisciplinary treatment team of psychiatrists, advanced nurse practitioners, psychologists, and social workers. Opportunities will be available to perform a wide variety of psychological assessments.

Dr. Jennifer Chambers has enhanced our DBT treatment program and will provide weekly supervision for students with interest in diagnostic assessment of borderline personality disorder and evidence-based psychotherapy treatment for borderline personality disorder (BPD) in the newly developed Dialectical Behavior Therapy (DBT) Program. The program follows Dr. Marsha Linehan’s dialectical cognitive behavioral model and case formulation to inform and guide treatment so relevant readings for basic knowledge of theoretical orientation will be required. The program consists of dual elements of treatment to include weekly skills training group and weekly individual psychotherapy. Training opportunities include diagnostic assessment, learning to use a structured clinical diagnostic screening tool, opportunities to co-facilitate the structured psycho-educational skills training group and to participate on the multidisciplinary DBT consultation team. Interns may elect to continue with a veteran as a long-term therapy case. Interns will be expected to carry a caseload of at least one veteran diagnosed with BPD and co-facilitate at least one of the four 8-week skills training modules for group. Interns who are highly interested in learning DBT will commit to a training plan that includes involvement with the DBT program throughout the year.

Dr. Wickett will act as secondary supervisor for interns who are interested and in the evaluation and treatment of veterans participating in the Trauma Recovery Program (TRP). Training experiences will vary depending on intern interest and supervisor availability. will be on a case-by-case basis and based upon availability. Dr. Wickett may also supervise diagnostic evaluations both in the context of the TRP and MHC. The TRP is a time-limited trauma-focused treatment program that offers evidence-based therapies to veterans with symptoms of PTSD. Interns interested in this areas of training will have the opportunity to learn and administer gold-standard
diagnostic interviews for PTSD diagnosis including the Clinician Administered PTSD Scale for DSM-5 (CAPS-5) and PTSD Checklist (PCL-5). If the intern chooses to participate in this training opportunity, they will carry a caseload of at least two veterans with PTSD and learn to provide Empirically Supported Treatments including Cognitive Processing Therapy (CPT) and/or Skills Training in Affective and Interpersonal Regulation (STAIR) in addition to carrying a caseload of general Mental Health Clinic patients; participate in weekly training and supervision of Cognitive Processing Therapy for PTSD; and will have opportunities to educate veterans, staff, and the community about signs, symptoms, and treatment of PTSD. Finally, the intern will have the opportunity to attend and participate in the multi-disciplinary PTSD Clinical Team Meetings.

**Roles and responsibilities of interns in this rotation include the following:**
- Carrying a caseload of individual psychotherapy patients
- Facilitating and/or co-facilitating group psychotherapy. Groups offered include but are not limited to: Cognitive Therapy for Depression; Acceptance and Commitment Therapy for Anxiety
- Opportunities to conduct diagnostic psychological assessments
- Attending and actively participating multidisciplinary treatment team meetings
- Participating in vertical supervision of practicum students
- Learning and utilizing both brief, time-limited evidence-based psychotherapies and depth-oriented, integrative therapies

**Minor Rotations**

**Neuropsychology**

**Supervisors:** Ryan Greene, PsyD, HSPP and Jay Summers, PhD

**Program:** The purpose of the rotation is to provide training in neuropsychology that is tailored to the intern’s previous level of experience in the area. Specifically, interns with little to no experience in neuropsychology will have the opportunity to familiarize themselves with the process of neuropsychological assessment, including learning about normative statistical comparisons, standardized test administration, basic neuropsychological test interpretation, and basic report writing. Interns with a background in neuropsychology will have the opportunity to gain more experience with complex assessment, advanced neuropsychological test interpretation, comprehensive report writing, and application of current scientific research findings. The neuropsychology program provides clinical neuropsychological consultation to the entire healthcare facility. Patients referred to the program typically complete ½ day of neuropsychological testing. Typical diagnoses of patients seen include cortical and subcortical dementia due to various etiologies, mild cognitive impairment, cognitive dysfunction associated with conditions including traumatic brain injury, hepatitis C, and mood disorders. Other referral issues are related to mental capacity and appropriateness for medical procedures. Results of the patient’s testing are incorporated into the neuropsychological evaluation, the purpose of which is to describe the patient’s current cognitive and emotional functioning, consider potential etiological factors associated with cognitive dysfunction, and offer appropriate treatment recommendations to patients and their caregivers.

**Psychology Training Provided:** The intern can expect to learn a standard clinical interview and a flexible battery of neuropsychological tests, including those designed to assess engagement in the testing process. Interns will be responsible for interpreting test data and composing a neuropsychological report that contains diagnoses and recommendations applicable to the patient’s treatment regimen. Additionally, there will be an opportunity for interns to observe DBS brain surgery, conducted by the IU Movement Disorders team. Interns are assigned an average of approximately two outpatient neuropsychological cases each month, with alternating weeks allowing time for report writing and supervision of report edits. Supervision of testing is done on a one-to-one basis with a board-certified or board-eligible neuropsychologist.

**Rehabilitation for Persistent Pain**

**Supervisor:** Michael Hines, PsyD, HSPP

**Program:** This rotation is designed to provide the intern with experience in rehabilitation for persistent pain. Housed under Physical Medicine and Rehabilitation Services (PMRS), the intern will gain exposure to and experience in therapy for Veterans with persistent pain. Interns will serve as part of an interdisciplinary team,
conducting initial evaluations, individual and group CBT-CP, and part of the Active Self-Management Program (ASMP). Interns may have opportunity for co-treatment with other members of the interdisciplinary team and/or spinal cord stimulator evaluations.

**Psychology Training Provided:** The intern will be based in the Veteran’s Integrated Pain Clinic (which will move off site late 2018). Though the primary presenting concern for Veterans in the VIP Clinic is persistent pain, opportunities for treatment of mental health comorbidities exist. Interns may chose to participate in a joint staffing between VIP Clinic and Substance Use Disorders Clinic. The intern will carry a caseload throughout the rotation, will complete screeners, and will have the opportunity to conduct psychological assessments for Veterans being considered implanted pain devices.

**Roles and responsibilities of interns in this rotation include the following:**
- Conducting triages and lengthier pain focused mental health evaluations
- Managing a caseload of patients working toward rehabilitation in the VIP clinic
- Co-facilitating therapy groups
- Attending team meetings and educational activities
- Collaborating and consulting with providers representing other disciplines involved in patient care
- Utilization of evidence-based interventions (e.g., CBT-CP, CBT-I, Motivational Interviewing) to promote both physical and mental health

**Bioethics**

**Supervisor:** Shannon Woller, PsyD, HSPP, ABPP

**Program:** The Ethics Consultation Service (ECS) is an interdisciplinary service that responds to ethics consultation requests that are received from all areas of the Medical Center. The ECS uses the CASES approach which was developed by the National Center for Ethics in Healthcare to help requestors resolve ethical dilemmas they may face and provides consultation and support to staff, veterans, and veterans’ families who are struggling with ethical conflicts.

**Psychology Training Provided:** The purpose of this minor rotation is to provide interns with exposure to fundamental concepts in bioethics and the practice of bioethics consultation in a complex medical center. Ethical dilemmas arise in many facets of healthcare and our local Ethics Consultation Service provides a unique experience for interns to learn about and participate in ethics consultation. The rotation is designed to familiarize interns with the steps of ethics consultation and to allow them to participate in the full process of ethics consultation. During the rotation, interns will become active members of the Ethics Consultation Service as well as attend ethics related trainings and engaged in self-study related to ethics consultation.

**Roles and responsibilities of interns in this rotation include the following:**
- Attending Ethics Consultation Service Meetings each week
- Reading and discussing assigned materials covering bioethics and bioethics consultation
- Actively participating in an ethics consultation team and responding to ethics consults
- Presenting a lecture to the Ethics Consultation Service covering a topic relevant to bioethics
- Learning about the roles and impact of diversity in bioethics

**Psychologists and Leadership**

**Supervisor:** Shannon Woller, PsyD, HSPP, ABPP

**Program:** Psychologists are in a unique position to become strong leaders in medical centers. This minor rotation is intended to expose interns to leadership and administrative activities that psychologists can perform in medical centers. The rotation will include meetings with psychologists in positions of leadership in our medical center, attendance at interdisciplinary meetings in which psychologists play a leadership role, mentorship related to leadership development, and self-study on leadership and management. This minor rotation is only available during the second half of the internship year and will be available only to interns with a track record of excellent performance in the first half of the internship year.
**Psychology Training Provided:** Leadership skills, communication skills, meeting management, conflict management, personnel management, stress and self-management, and data management related to leadership.

**Roles and responsibilities of interns in this rotation include the following:**

- Reading and discussing materials covering leadership skills and activities
- Meetings with Medical Center leadership
- Attending meetings chaired by psychologists
- Attending multidisciplinary meetings where psychologists represent mental health for the medical center
- Leading role-played meetings and participating in mock conflicts as a mental health expert
- Presenting a lecture on a topic related to leadership to staff psychologists and co-interns

**Didactics**

The Internship Seminar meets weekly throughout the year. Each two-hour session consists of topics spanning the breadth of internship rotation areas, as well as issues commonly encountered by our patients and staff. Areas covered include: Introduction to Military Culture and the VA, Psychological Disorders, Health Psychology within Primary Care, Personality Disorders and Attachment, Supervision and Consultation, Interdisciplinary Perspectives, Pharmacotherapy, Ethics and State Law, Neuropsychological Assessment, Psychotherapy Orientations and Modalities, Rehabilitation, First-episode and Chronic Psychosis, Metacognitive Approaches to Treatment, Assessment and Treatment of Disorders related to Traumatic Stress Exposure and related conditions, and others. Several seminars are dedicated to topics related to Professional Development and Interprofessionalism. Several experiential diversity seminars are also included on training day throughout the year. Psychology staff members and some invited speakers will be responsible for the training provided in the Internship Seminar.

In addition to the above clinical experience for trainees wanting to complete the minor rotation, all interns will participate in weekly didactics comprised of lectures on topics pertinent to the field of neuropsychology, fact-finding cases, case presentations, and article reviews. Subjects included in this series include neurocognitive screening measures, functional neuroanatomy, differentiation of normal aging and dementing processes, traumatic brain injuries, and the differential diagnosis of multiple neurodegenerative illnesses, etc. Interns will also be required to present to the group on a topic of their interest related to assessment.

In addition to the Internship Seminar, one hour per week is dedicated to a group supervision seminar. This is a forum for interns to present cases, journal articles and special projects. This time will also be utilized to discuss supervision, application to post-doctorate programs, professional career development, licensure preparation, and other related topics.

**Requirements for Completion**

It is expected that each intern will attend all scheduled didactic presentations and actively engage in the training rotations for the full duration of the assignment unless there is prior approval for the absence.

Program completion requires 2088 hours of internship training activities under clinical supervision (two to four hours weekly). It is expected that, upon completion of the program, all interns will demonstrate competence in the nine general domains mentioned above.

Completion of the internship program is conditional upon an intern meeting the stated objectives along with professional behavior that meets or exceeds competencies. No partial credit is granted regarding the internship. Successful completion of the internship is an all-or-none decision.

Interns are rated from Level 0 – Level 5 across each competency area and then given an overall score for each rotation. Level 3 reflects “many skills in this area have been acquired and intern works with moderate supervision.” Level 4 reflects “most skills in this area have been acquired and intern works with minimal supervision.”

An overall rotation score from both major and minor rotations is documented at mid-year and at the year’s end. For successful completion of internship, an intern should not receive a mean score on of less than “Level 4” in all competency domains. In addition, minimum levels of competency are required in essential domains which include those listed in the table below.
At the beginning of each rotation, the assigned supervisor(s) will review the competency assessment with the intern and clarify critical domains for that professional experience. Overall rotation scores should flow naturally from the scores assigned, however, specific domains may have greater or lesser weight from one rotation to another (i.e., neuropsychology – assessment skills; MHC – intervention skills).

Despite some variability, there are Critical Foundational skills our program considers essential for the development of all psychologists. As such, the following minimum competency thresholds must be obtained order to be granted an overall score greater than or equal to Level 3:

<table>
<thead>
<tr>
<th>Critical Foundational Competency Components</th>
<th>Minimum Score for 1st Semester Major and Minor Rotations</th>
<th>Minimum Score for 2nd Semester Major and Minor Rotations</th>
</tr>
</thead>
<tbody>
<tr>
<td>Individual &amp; Cultural Diversity: Self-Awareness</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>Professional Values, Attitudes &amp; Behaviors: Self-Assessment and Self-Care</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>Communication and Interpersonal Skills: Affective Skills</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>Ethical &amp; Legal Standards: Ethical Conduct</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>Research: Scientific Foundation of Psychology</td>
<td>3</td>
<td>4</td>
</tr>
</tbody>
</table>

Throughout the internship year, the intern will receive ongoing evaluation. If, at any point, the supervisor evaluates the intern to be performing at a substandard level, or if the intern scores lower than the minimum required scores in the Critical Foundational Competency or rotation-specific Science and Practice areas, this will prompt a remediation plan to go into effect. This written remediation plan will be developed by the intern's primary supervisor with the intern's input. The plan will be tailored to meet the specific needs of the intern to enhance the areas of substandard performance and to support the intern in meeting the minimum required standards.

If the intern does not respond to remediation (i.e. continues to perform at substandard level), due process probationary procedures will be implemented.

**Initial Evaluation:** Prior to beginning the internship, the intern completes a self-evaluation that examines experiences with specific treatments, inquiries about perceived areas of strength and weakness, and helps to define overall training aims. At the beginning of internship, the intern’s performance is observed closely by the primary supervisor to identify strengths and further assess training needs. Supervisors then share these observations informally with each other in a staff meeting one month after commencement of the first rotation and make recommendations to interns as indicated.

**Rotation Evaluations:** Interns are evaluated at the midpoint and end of each rotation (quarterly). This involves written evaluation of the intern's progress and performance during the rotation. The intern also evaluates the supervision received. Feedback is exchanged to improve the quality of supervision and to facilitate the professional development of the intern. At the end of each rotation, training staff meets to evaluate each intern's progress per specific criteria that have been provided in written form to interns during the first week of internship. The Supervising Psychologist communicates the results of this evaluation to each intern individually. The evaluation serves to establish aims for the second half of the internship.

**Final Evaluation:** This follows the same format as the end-of-rotation evaluation and occurs during the final month of the internship. Each intern completes a written evaluation of the internship experience as well, including recommendations for change, and this is submitted to the Director of Psychology Training and overall results are shared with training staff. Each intern completes a written evaluation of the internship experience as well, including recommendations for change, and this is submitted anonymously to the Director of Psychology Training. Results are discussed with the training committee and are utilized to improve program quality.

**Specific Program Requirements for Successful Completion of the Internship**

- Diversity/Issues related to individual and group differences are addressed as in integral part of all clinical material addressed. In addition to this, we require special emphasis diversity experiences which include the completion of a Diversity Project. For this project, the intern selects a dissonant area of diversity to
pursue either within their assigned major or minor rotations, organization treatment areas, or volunteer organization within the community at large, in which they are exposed to a patient population, treatment issue, or therapeutic service area that differs significantly from their own area of comfort or experience. Immersion experiences are preferred and encouraged. Interns write a reaction paper and present their experience, findings, and key leanings about themselves and others in group supervision (diversity seminar)

- Case conceptualization and presentation
  - Present at least two case studies in a didactic presentation, which employs your theoretical orientation, client conceptualization and treatment description. Explain your conceptualization of patient’s symptoms and diagnosis based on your orientation. Two articles relevant to the case (e.g. describing the theory, evidence based treatment, challenges in working with the population) should be provided to fellow interns and training director the week prior to the presentation

- Caseload sufficient that a minimum average of 10 client hours/week face-to-face direct service is provided
  - During the year, the intern will carry at least 3 long-term individual therapy cases throughout the year.
  - Within the first month of internship, students are encouraged to contact their respective licensing board to ascertain if this requirement will fulfill their state licensing requirement

- Interns are required to complete 12 comprehensive assessments that respond to the referral question and integrate appropriate data to provide diagnostic and/or treatment recommendations using at least three measures

- Lead or Co-lead at least 2 psychotherapy (either psycho-educational or process-oriented) groups with a minimum of 6 sessions each

- Video or audio-tape sessions or be involved in "live" supervision.
  - A sampling of assessment and/or therapy sessions at the beginning of the rotation will be observed by the rotation supervisor either via means of audio/video recording or through live observation. Recording or live observation throughout the duration of the rotation will be left up to the discretion of the rotation supervisor who will base their decision on intern needs, interest, and time availability/practical logistics.
  - have tape ready for supervision
  - provide information for case conceptualization

- Attend all intern didactic seminars unless on Leave Status. Participation in some didactic seminars (e.g. competency-based supervision) are required for completion. Interns will complete a pre-test and a post-test for these trainings to demonstrate learning. If on Leave Status, this requirement has been made-up by completing a response paper that evidences intern’s review of relevant literature and response summarizing the topic missed. When appropriate, interns may also elect to complete a different self-guided learning task and take the pre-test and post-test for that topic area

- Complete Hours Log and submit monthly summary of training hours to training director.

- Attend 1 professional development activity per month. (This may include psychology grand-rounds, psychiatrically oriented medical staff luncheon, IUSM neuropsychology case presentation, Seminars/Conferences at the local, regional, or national level).

- Be prepared for and attend 4 hours of supervision per week
  - Intern supervision is regularly scheduled and sufficient relative to the intern’s professional responsibility assuring at a minimum that a full-time intern will receive 4 hours of supervision per week, at least 2 hours of which will include individual supervision

- Prepare and present one two-hour didactic seminar to peers on topic of choice

- Mean score of ‘level 3’ or greater in all competency domains except Individual & Cultural Diversity: Self-Awareness, Professional Values, Attitudes & Behaviors: Self-Assessment and Self-Care, Communication and Interpersonal Skills: Affective Skills, Ethical & Legal Standards: Ethical Conduct and Research: Scientific Foundation of Psychology, which must be at ‘level 3’ or greater by mid-year and ‘level 4’ or greater by the year’s end

- Engage in umbrella supervision of practicum students

**University Contacts:** We follow the Councils of Chairs of Training Councils (CCTC) guidance for communication between host program. At the beginning of internship, the Director of Psychology Training corresponds with the university director of clinical/counseling training for each incoming intern. A copy of this brochure is sent to the directors. This affords the university faculty an opportunity to communicate with the Director of Psychology Training about the internship and the training needs of their students. Competency evaluations at mid-year and upon the year’s end are sent to host program DCT. Additional exchanges between
the internship and the intern’s academic program faculty are welcome and may be necessary under special circumstances.

**Facility and Training Resources**

Interns are provided with office space and will each have his or her own computer and phone, along with space to write reports and notes. They have access to the online VA Medical Library, as well as the Medical Library located on the grounds. A program support assistant serves psychology and assists interns in scheduling and managing appointments.

**Administrative Policies and Procedures**

Our internship policy and procedure manual covers all domains applicable to our trainees, including, but not limited to (a) Administrative (e.g., training committee structure and function, intern's involvement in faculty meetings, intern selection, evaluations of interns, faculty, rotation, etc.); (b) Training (e.g., compliance with training and ethical requirements, outside placements, supervisor qualifications, rotation placement changes, etc.); and (c) Other (e.g., grievance procedures, disciplinary procedures.). Our privacy policy is clear: we will collect no personal information about you when you visit our website, and our internship program does not require self-disclosure.

**Due Process:** A specific policy is established to ensure and guide due process for all interns. Grievances covered by this policy include, but are not limited to (a) challenging a performance rating, (b) grievances, against clinical, teaching, supervision, or other professional behavior of faculty member(s); or (c) challenging a program policy or procedure. (This policy does not deny the intern's right to grieve directly to the Chief of Staff or the Human Resources Management Service.)

Leave policies follow the national VA standards for sick and annual leave. Five working days of Authorized Absence will be granted for approved professional activity including attendance at educational events, conferences, dissertation defense, and similar activities. To be approved, educational events or conferences must be relevant to practice or research in clinical or counseling psychology. The professional relevance of the activity is judged by the Director of Psychology Training after consulting with the intern, the immediate supervisor and, if necessary, the Training Committee.

**Training Staff**

**PSYCHOLOGY STAFF QUALIFICATIONS AND INTERESTS**

**BOO, Jenelle N.**  
Current VA Position: Clinical Psychologist, Director of PTSD Clinical Team  
Degree: Ph.D., Ball State University, 2010  
VA Hire: 2013  
Doctoral Internship: Illinois State University, Student Counseling Services, 2009-2010  
E-mail address: jenelle.boo@va.gov  
Licensure: Virginia (2011)  
Theoretical Orientation: Integrated Interpersonal, Feminist, Cognitive Behavioral  
Areas of clinical specialization: PTSD, Sexual Trauma, Interpersonal Trauma, Spirituality, College Student Development  
Publications: Interpersonal Relationships, Attachment, Career Development and Dual Roles, Giftedness  
Professional Organizations: American Psychological Association (Division 17, Counseling Psychology; Division 35; Society for the Psychology of Women)  
Intern Training Role: Diversity Training Coordinator  
Teaching/Training Interests: Evidence-Based Therapy for PTSD, Diversity Issues (Spirituality, Gender), Sexual Assault, Supervision

**CHAMBERS, Jennifer**  
Current VA Position: Clinical Psychologist, Complex Care Program Manager  
Degree: Ph.D., George Mason University, 2008
VA Hire: 2012
Doctoral Internship: Washington DC VA Medical Center; 2002-2003
E-mail address: jennifer.chambers@va.gov
Theoretical Orientation: Cognitive Behavioral, Dialectical Behavior Therapy
Areas of clinical specialization: Personality Disorders, Co-occurring Disorders
Intern Training Rotation: MHC
Teaching/Training Interests: Dialectical Behavior Therapy; Personality Disorders

GREENE, Ryan
Current VA Position: Clinical Neuropsychologist, Older Adult Mental Health Clinic
Area of Specialization: Neuropsychology
Degree: PsyD, Wheaton College, 2014
Doctoral Internship: Henry Ford Health System, Detroit, MI, 2013-2014
Postdoctoral Fellowship: Neuropsychology Fellowship, Indiana University Medical School, Indianapolis, IN, 2014-2016
VA hire: 2016
E-mail address: ryan.greene13@va.gov
Licensure: Indiana (2016)
Theoretical Orientation: Biopsychosocial
Areas of clinical specialization: Clinical Neuropsychology
Professional Organizations: American Psychological Association (APA), Indiana Psychological Association (IPA), International Neuropsychological Society (INS), American Board of Professional Psychology (ABPP)
Intern Training Rotation: Neuropsychology Minor Rotation
Teaching/Training interests: Neuropsychological evaluations for neurodegenerative illnesses, Pre-surgical cognitive assessments for DBS and epilepsy surgeries, Psychological collaboration within multi-disciplinary medical teams

HINES, Michael
Current VA Position: Clinical Psychologist, Integrated Pain Clinic
Area of Specialization: Clinical Psychology
Degree: Psy.D., Clinical Psychology, University of Indianapolis, 2010
Doctoral Internship: University of Missouri – Kansas City Counseling Services, Kansas City, MO, 2009-2010
Postdoctoral Fellowship: Indiana University/Purdue University-Indianapolis (IUPUI) Counseling and Psychological Services, Indianapolis, IN, 2010-2011
VA hire: 2018
E-mail address: Michael.Hines7@va.gov
Licensure: Indiana (2011)
Theoretical Orientation: Integrative, CBT, ACT, Interpersonal
Areas of clinical specialization: Pain Psychology, Health Psychology, Substance Use Disorders
Intern Training Rotations: Clinical Health Psychology in Primary Care, Rehabilitation for Persistent Pain
Teaching/Training interests: Pain Neuroscience, Non-pharmacological Treatment of Persistent Pain

LYSAKER, Paul H
Current VA Position: Staff Psychologist, Psychosocial Rehabilitation and Recovery Center
Area of Specialization: Clinical Psychology
Degree: Ph.D., Kent State University, 1991
Doctoral Internship: West Haven VAMC, 1988-1989
VA hire: 1998
E-mail address: plysaker@iupui.edu
Licensure: Indiana 1995
Theoretical Orientation: Integrative
Areas of clinical specialization: Integrative Psychotherapy, Metacognitive and intersubjectively focused psychotherapy for persons with serious mental illness
Publications: Psychosis, schizophrenia, vocational rehabilitation, psychotherapy, stigma, phenomenology, trauma, metacognition, theory of mind, insight
Professional Organizations: American Psychological Association
Intern Training Rotation: Serious Mental Illness and Recovery
Teaching/Training interests: Psychotherapy and metacognition
SCHNUR, Kristoffer
Current VA Position: Health Behavioral Coordinator/Clinical Psychologist
Area of Specialization: Clinical Psychology
Degree: Ph.D., Counseling Psychology, Indiana State University, 2009
Doctoral Internship: GEO Care South Florida State Hospital 2008-2009
VA hire: December 2012
E-mail address: Kristoffer.schnur@va.gov
Licensure: Indiana (2010)
Theoretical Orientation: Integrative
Areas of clinical specialization: CBT-I for Insomnia, general psychotherapy, psychological testing, behavioral health assessments, Training providers in patient centered communication (Motivational Interviewing), Tobacco cessation, health psychology
Intern Training Rotation: CBT for Insomnia (adjunctive experience)
Teaching/Training interests: CBT-I for Insomnia, general psychotherapy, psychological testing, behavioral health assessments, Training providers in patient centered communication (Motivational Interviewing), Tobacco cessation, health psychology

SKEETERS, Sarah
Current VA Position: Staff Psychologist, Primary Care Mental Health Integration
Area of Specialization: Clinical Psychology
Degree: Psy.D., University of Indianapolis, 2014
Doctoral Internship: Hunter Holmes McGuire VAMC, Richmond, VA 2013-2014
Postdoctoral Fellowship: Dayton VAMC Postdoctoral Fellowship Program Emphasis in Primary Care Integration, Women’s Health, and Behavioral Medicine, 2014-2015
VA hire: 2015
E-mail address: Sarah.Skeeters@va.gov
Licensure: Indiana (2015)
Theoretical Orientation: Cognitive-Behavioral
Areas of clinical specialization: Clinical health psychology, adjustment to chronic illness, non-pharmacological management of persistent pain, behavioral medicine
Professional Organizations: American Psychological Association
Intern Training Rotation: Clinical Health Psychology in Primary Care
Teaching/Training interests: Clinical health psychology, adjustment to chronic illness, non-pharmacological management of persistent pain, psychological manifestations of chronic illness, organ transplantation (cadaveric and live donor), behavioral medicine

SUMMERS, Jay
Current VA Position: Staff Psychologist, Primary Care
Area of Specialization: Clinical Psychology
Degree: Ph.D., University of Kansas, 1993
Doctoral Internship: Palo Alto VAMC, 1992-1993
VA hire: 2012
E-mail address: jay.summers@va.gov
Licensure: Arizona (1994)
Theoretical Orientation: Cognitive-Behavioral
Areas of clinical specialization: Clinical neuropsychology, rehabilitation psychology, health psychology
Professional Organizations: American Psychological Association, Arizona Psychological Association
Intern Training Rotation: Neuropsychology
Teaching/Training interests: Psychological assessment, neuropsychological assessment, mindfulness-based psychotherapy

WICKETT, Amanda
Current VA Position: Director of Training, Psychology; Substance Use Disorder-PTSD Specialist
Area of Specialization: Clinical Psychology
Degree: Psy.D., Clinical Psychology, University of Indianapolis, 2004
Postdoctoral Fellowship: Metropolitan Saint Louis Psychiatric Center, Saint Louis, MO, 2004-2005
VA hire: 2007
E-mail address: amanda.wickett@va.gov
Licensure: Missouri (2005), Indiana (2006)
Theoretical Orientation: Constructivist, Integrative
Areas of clinical specialization: Trauma and Addiction, Psychology of Women, Severe Mental Illness, Cluster B Personality Disorders
Professional Organizations: American Psychological Association
Intern Training Rotation: MHC with emphasis on Trauma Recovery
Teaching/Training interests: Assessing and Treating Co-occurring Trauma and Substance Use Disorders, Cognitive Processing Therapy, Dissociation, Clinical Supervision, Integrative and Intersubjective Psychotherapy Approaches

WOLLER, Shannon E.
Current VA Position: Lead Psychologist & MHC Director
Area of Specialization: Health Psychology; ABPP in Health Psychology; APA Ethics Fellow
Degree: Psy.D. University of Indianapolis, 2008; ABPP in Health Psychology
Predoctoral Internship: Dayton VA Medical Center, Dayton, OH
VA hire: 2008
Email: Shannon.woller@va.gov
Licensure: Indiana (2009)
Theoretical Orientation: Eclectic
Professional Organizations: American Psychological Association, Indiana Psychological Association; APA Ethics Fellow
Intern Training Rotations: Leadership and Bioethics
Teaching/Training interests: Health psychology, HIV, chronic pain, sexual health, mindfulness, pre-surgical psychological assessment, ethics, obesity, and HIV.
The Canal at White River State Park

“White River State Park boasts world-class attractions and destinations that offer distinctive experiences for every visitor. Greenspaces, trails, trees, and waterways co-mingle alongside cultural, educational, and recreational attractions across 250 beautiful acres in downtown Indianapolis. White River State Park is a great place to hold events, too! The greenspaces, hardscapes, and facility rentals are perfect locations for weddings, parties, charity events, corporate get-togethers and more.” - https://www.whiteriverstatepark.org/
Indianapolis Arts Garden

“Owned and operated by the Arts Council of Indianapolis, the Indianapolis Artsgarden is a destination for arts and culture in the heart of downtown. The structure is a seven-story tall glass and steel icon over the intersection of Washington and Illinois Streets. The Artsgarden presents more than 250 free and public performances each year, along with monthly visual arts exhibitions by central Indiana artists. It is also rented for private events, including weddings, corporate receptions, and nonprofit events, which support funding for public arts programming.” - https://indyarts.org/artsgarden
Indianapolis Art Center

“The Indianapolis Art Center was founded in 1934 as a Works Progress Administration program during the Great Depression to serve artists. Today, the Art Center inhabits a beautiful Michael Graves-designed building which sits on a 9.5 acre stretch along the banks of the White River in the Broad Ripple neighborhood of Indianapolis. Each year, the Art Center offers hundreds of art classes, over 50 art exhibitions in six art galleries, an Outreach program that takes art to underserved communities, and the Broad Ripple Art Fair.” - https://www.indplsartcenter.org/
Indianapolis Museum of Art

“As the Indianapolis Museum of Art has grown to become an internationally renowned museum, we now turn our attention toward increasing our emphasis on combining art with nature. This combination of art and nature was always part of the original vision—and now we see a vision for the next fifty years. The galleries are surrounded by gardens, water features, over a hundred acres of woodland filled with surprise and beauty. The campus itself is ideal for performances, afternoon walks, kite-flying, cloud-gazing, memory-making, new-idea-having. There’s a mansion to stage unforgettable events, restaurants for relaxing, bars for microbrews and friendships. Newfields is a setting where it’s easy to make connections of all sorts. Like no place else in Indianapolis.” - https://discovernewfields.org/
Lucas Oil Stadium – Home of the Colts

“Lucas Oil Stadium is a state-of-the-art retractable roof, multi-purpose facility seating over 67,000 fans while featuring spectacular views of the downtown Indianapolis skyline. Opened in 2008 as the new home of the NFL’s Indianapolis Colts, this facility already boasts an impressive resume having been named the 2009 Sports Facility of the Year by Street and Smith’s SportsBusiness Journal and having their Fieldturf surface ranked as the NFL’s best artificial surface in both 2009 and 2010.” - http://www.lucasoilstadium.com/about.aspx
Eagle Creek Park

“With 1400 acres of water and 3900 acres of forest, Eagle Creek Park is one of the largest city parks in the nation, offering unmatched opportunities for recreation, enjoyment, and discovery of nature only minutes from downtown Indianapolis. Eagle Creek has a wide variety of facilities and programs.” - http://indy.gov/EGOV/CITY/DPR/ECPARK/Pages/default.aspx
Downtown Indianapolis

“Jazz? Rock? 80s Power Ballad Karaoke? Whatever your taste in music (or libations), Indy has something for the night owl in everyone.”  

Local Information

The Richard L. Roudebush Indianapolis VA Medical Center, located two miles northwest of the heart of downtown Indianapolis, has been serving Indiana Veterans since 1932. As Indiana’s tertiary care facility, the Indianapolis VAMC receives referrals from VA facilities at Ft. Wayne and Marion, Indiana, and from nearby Danville, Illinois for primary care, mental health care, dental care and a wide variety of specialties.

The medical center is committed to providing care where Veterans live, and operates five Community Based Outpatient Clinics (CBOC’s) located in Bloomington, Martinsville, Western Indianapolis (Indy West), Terre Haute, and most recently Columbus, Indiana. An additional clinic at West Lafayette, Indiana will be welcomed to the Richard L. Roudebush VA Medical Center Family of Community Outpatient Care in FY2017. The more than 64,000 patients (nearly 4,000 women Veterans) treated by the Indianapolis VA Medical Center require over 717,000 outpatient visits and almost 7,900 inpatient episodes of care yearly.

The Richard L. Roudebush VA Medical Center is affiliated with the Indiana University School of Medicine and physician residents and fellows pursue clinical training under the supervision of VA physicians in 22 accredited medical specialties. There are also nursing student affiliations with the Indiana University School of Nursing as well as education arrangements with 31 universities representing 94 fields of study involving dentistry, pharmacy, social work, allied health, psychology and others. The Pharmacy Residency program features a strong affiliation with both Purdue University and Butler University.
The City of Indianapolis

Census data from 2010 suggests that approximately 820,445 persons reside within Indianapolis and that the metro area is home to approximately 1,756,241. Indianapolis is diverse in terms of race, ethnicity, country of origin, language, religion, sexual orientation and gender identity. Based on 2010 census data the population of Indianapolis is 61.8% white, 27.5% black, 9.4% Hispanic/Latino and 2.1% Asian. Living in Indianapolis is extremely affordable. Indianapolis was rated in the top 10 affordable cities by Money Magazine in 2012 and was the largest city in the top 10 of the most affordable cities in the United States.

Recreation in Indianapolis:

• Sports - Home of the 2006 World Champion Indianapolis Colts (and host of the 2012 Super Bowl), Indiana Pacers, Indiana Fever, Indianapolis Indians AAA baseball, and the Indianapolis Motor Speedway with events such as the Indy 500.

• Fitness – There are clubs, marathons/half-marathons, triathlons (yes, there is water in Indy), countless gyms, yoga studios, and personal trainers to meet your every fitness need.

• Parks and Outdoor Activities - Close proximity to Eagle Creek Park (the largest municipal park in the nation), White River State Park, the Monon Trail, the Indianapolis Zoo, and many wonderful state parks within an hour drive.
• Dining – Indianapolis is home to countless award winning restaurants in all price ranges! We have some amazing established and up and coming chefs who are drawing national attention. Downtown, Broad Ripple, Mass Ave, Fountain Square, and the International Market Place offer options ranging from steakhouses, fine dining, small farm-to-fork establishments, vegetarian/vegan restaurants and cuisine from around the world.

• Cultural Activities - A variety of opportunities with the Indianapolis Symphony Orchestra, the Indiana Repertory Theater, Phoenix Theater, Indy Fringe Fest, the Heartland Film Festival, and the Indianapolis Arts Center.

• Museums - Options are available for all interests including the Children's Museum, the Indianapolis Museum of Art, Indiana State Museum, NCAA Hall of Champions, and the Eiteljorg Museum.

• Family Friendly Activities - Indianapolis is a great place to find family friendly activities. The zoo and Children’s Museum are great downtown options and Conner Prairie just northeast of the city offers a unique living history experience with hands on activities. Indianapolis is also home to many excellent public and private schools, and countless opportunities for kids to get involved in sports, camps and the arts.

• Festivals – Festivals abound in Indy throughout the year! Food, music and culture are not in short supply.

• Shopping – From the small, independent shops on Mass Ave., to numerous malls, to outlet shopping just south of Indianapolis in Edinburg, there are options for every shopping need.

• Orchards, farmers markets and more.

• For more information see Visit Indy.com

**Directions to the Richard L. Roudebush VA Medical Center**

The Outpatient Mental Health Clinic (MHC) is located on the 5th floor in the main building.

**From the North**
I-65 to West Street Exit (#114). Turn west (right) on 11th Street which becomes 10th Street. Follow 10th Street until you see the VA Medical Center on the left hand side of the road.
I-69 South to I-465, south to I-70, west to I-65 North to West Street Exit (#114). Turn west (right) on 11th Street which becomes 10th Street. Follow 10th Street until you see the VA Medical Center on the left hand side of the road.

**From the South**
I-65 to I-70, west on I-70 to West Street Exit (#79), north (right) on Missouri Street which turns to West Street. Follow West Street, which turns into Dr. Martin Luther King Jr. Street to 11th Street. Turn west (right) on 11th Street which becomes 10th Street. Follow 10th Street until you see the VA Medical Center on the left hand side of the road.
I-465 to I-65, north to I-70, west on I-70 to West Street Exit (#79), north (right) on Missouri Street which turns into West Street. Follow West Street, which turns into Dr. Martin Luther King Jr. Street to 11th Street. Turn west (right) on 11th Street which becomes 10th Street. Follow 10th Street until you see the VA Medical Center on the left hand side of the road.

**From the West**
I-70 east to West Street Exit (#79), north (right) on Missouri Street which turns into West Street. Follow West Street, which turns into Dr. Martin Luther King Jr. Street to 11th Street. Turn west (right) on 11th Street which becomes 10th Street. Follow 10th Street until you see the VA Medical Center on the left hand side of the road.
US-136 turn east (right) onto Crawfordsville Road, or take I-74 which becomes Crawfordsville Road. Follow Crawfordsville Road (Speedway) which becomes 16th Street. Follow 16th Street to Stadium Drive. Turn south (right) onto Stadium Drive. Follow Stadium Drive to 10th Street. Turn west (right) onto 10th Street. Follow 10th Street until you see the VA Medical Center on the left hand side of the road.

**From the East**
I-70 to I-65, north to West Street Exit (#114). Turn west (right) on 11th Street which becomes 10th Street. Follow 10th Street until you see the VA Medical Center on the left hand side of the road.
Internship Program Admissions

In accordance with VA policy, our internship seeks applicants who are U.S. citizens and are enrolled in APA-accredited doctoral programs in clinical or counseling psychology. In addition, we require that a prospective intern’s university advisor or director of training verify that s/he approves and recommends that the student receive an internship at this facility, as specified on the APPIC “Academic Program’s Verification of Internship Eligibility and Readiness” form. As an equal opportunity training program, the internship welcomes and strongly encourages applications from all qualified candidates, regardless of gender, gender identity, age, religion, race, ethnicity, culture, nationality, socioeconomic status, sexual orientation, disability, or other minority status. We are committed to ensuring a range of diversity among our training classes, and we select candidates representing different kinds of programs and theoretical orientations, geographic areas, ages, racial and ethnic backgrounds, sexual orientations, disabilities, and life experiences. All things being equal, consideration is given to applicants who identify themselves as veterans; as members of historically underrepresented groups on the basis or racial or ethnic status; as representing diversity based on sexual orientation; or as representing diversity based on disability status. These factors may be indicated on their application.

We also seek candidates who evidence professionalism, scientific mindedness and good interpersonal skills. In addition, we look for those who demonstrate strong verbal expressive skills and overall goodness-of-fit with our training program. We are interested in applicants who have obtained a range of clinical experiences but who are also interested in pursuing a range of ideas as their careers emerge. Applicants should have met the Basic Competency Requirements established by APA for readiness to enter the Internship Program. In addition, we require a minimum of 500 intervention hours, 60 assessment hours and 5 integrated reports. Other requirements include:

- Verification by the intern’s host program DCT of eligibility for participation in the APPIC internship match, which is included in the completed AAPI
- Enrollment in an APA Accredited clinical or counseling graduate program (Ph.D or Psy.D)
- Successful completion of comprehensive examinations
- Graduate GPA of 3.0 or higher
- No evidence of significant professional conduct issues
- Completion of academic and practicum requirements

Does the program require that applicants have received a minimum number of hours of the following at time of application? If Yes, indicate how many:

<table>
<thead>
<tr>
<th>Total Direct Contact Intervention Hours</th>
<th>Yes</th>
<th>No</th>
<th>500 hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Direct Contact Intervention Hours</td>
<td>Yes</td>
<td>No</td>
<td>60 hours</td>
</tr>
</tbody>
</table>

Financial and Other Benefit Support for the Upcoming Training Year

| Annual Stipend/Salary for Full-time Interns | $24,133.00 |
| Annual Stipend/Salary for half--time Interns | N/A |
| Program provides access to medical insurance for intern? | Yes | No |
| If access to medical insurance is provided: | |
| Trainee contribution to cost required? | Yes | No |
| Coverage for family member(s) available? | Yes | No |
| Coverage for legally married partner available? | Yes | No |
| Coverage for domestic partner available? | Yes | No |
| Hours of Annual Paid Personal Time Off (PTS and/or Vacation) | 224 |
| Hours of Annual Paid Sick Leave | 104 |
| 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 | No |
| Retirement benefits? | Yes | No |
Initial Post-Internship Positions

Total # of intern’s wo was in the 3 cohorts

<table>
<thead>
<tr>
<th></th>
<th>2014-2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total # of interns</td>
<td>14</td>
</tr>
</tbody>
</table>

Total # of interns who did not seek employment because they returned to their doctoral program/are completing doctoral degree

<table>
<thead>
<tr>
<th>Setting</th>
<th>PD*</th>
<th>EP*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Community mental health center</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>Federally qualified health center</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Independent primary care facility/clinic</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>University counseling center</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Veterans Affairs medical center</td>
<td>8</td>
<td>1</td>
</tr>
<tr>
<td>Military health center</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Academic health center</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Other medical center or hospital</td>
<td>2</td>
<td>0</td>
</tr>
<tr>
<td>Psychiatric hospital</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Academic university/department</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Community college or other teaching setting</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>Independent research institution</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Correctional facility</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>School district/system</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Independent practice setting</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>Not currently employed</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Changed to another field</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Other</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Unknown</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

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