Psychology Internship Program
Veterans Healthcare System of the Ozarks

Psychology Internship Program (MHC 116A)
c/o James M. Fuendeling, Ph.D., Training Director
Veterans Healthcare System of the Ozarks
1100 N College Ave
Fayetteville AR 72703
(479) 444-5048 or (800) 691-8387 ext. 65048 (Mental Health)
or ext. 67515 (Dr. Fuendeling)

MATCH Number Program Code: 233711

The Psychology Internship at Veterans Healthcare System of the Ozarks is a full time, one year internship in health service psychology where we emphasize a flexible, individualized approach to training and enjoy a collegial environment. Our program emphasizes generalist training while also offering the opportunity to emphasize PTSD treatment, Neuropsychology, or outpatient General Mental Health through your choice of major rotation. Our interns also gain experience with medical and psychiatric inpatients, and have opportunities for a range of other experiences within a comprehensive VA medical center. Faculty and interns collaborate in selecting minor rotations and other clinical experiences that best suit each intern’s needs and goals for training.

Accreditation Status
The psychology internship at the Veterans Health Care System of the Ozarks (VHSO) is a relatively new program, having taken our first class of interns in the fall of 2015. We are an APPIC member site, but are not APA accredited. We have registered with the APA Commission on Accreditation as a first step in pursuing accreditation. Please be advised that there is no guarantee that we will successfully achieve APA accreditation.

It is our intention to operate a psychology internship that provides quality generalist training in health service psychology and prepares interns for postdoctoral fellowships or entry level positions throughout the field and especially in the VA. While the internship is not currently accredited, we do anticipate that it will meet licensure requirements in Arkansas and most other states. It is also important to note that because this is a VA internship, graduates from this program will be eligible for VA postdoctoral fellowships and VA staff positions.
Questions regarding the program’s accreditation status should be directed to the APA Commission on Accreditation.

Office of Program Consultation and Accreditation
750 First St, NE
Washington DC 20002-4242
Phone number for general questions: 202-336-5979
Email address for general questions: appaccred@apa.org

Application and Procedures
The VHSO Psychology Internship participates in the APPIC Internship Matching Program (the Match), and complies with the policies and rules of the Match. Application to the VHSO Psychology Internship can only be made with the APPIC Application for Psychology Internship Online (AAPI Online). Please refer to the APPIC web site at www.appic.org for information on completing the AAPI Online and registering for the Match. This internship abides by the APPIC policy that no person at the training facility will solicit, accept, or use any ranking-related information from an intern applicant. Internship applicants must be enrolled in an eligible doctoral program that requires internship training and must expect to complete practicum experience by the start of internship. We invite applications from doctoral students in clinical, counseling, or clinical/scientific psychology.

The VHSO is an equal opportunity training program, and we are constantly seeking to increase the diversity of our trainees and faculty. We believe that our field is best served when it draws on the richness of a wide range of cultures, subcultures, personal characteristics and theoretical perspectives. Applicant screening and selection is merit based, with no preference based on age, sex, race, religion, ethnicity, sexual or gender orientation, political affiliation, or disability status. Diversity is inherent in all aspects of human relations. We are committed to the ideal that recognizing and respecting our diversity improves our ability to provide quality training and clinical services as well as facilitating personal and professional growth. Individuals of diverse backgrounds are particularly encouraged to apply and share their unique perspectives with the patients as well as the staff.

We will consider all applications for the 2017-2018 training year that are received by or on November 18, 2015. Applicants should state in their application material the major rotation or rotations in which they are most interested. This information is used to help us arrange interviews with the most appropriate internship staff for each applicant we interview and should not be viewed as a solicitation of ranking information. All eligible applications will be reviewed by multiple members of the Internship Training Committee. We anticipate conducting two on-site interview days. Applicants whom we intend to interview will be notified of exact
dates as soon as they are finalized. We will also conduct telephone interviews for applicants who cannot or choose not to attend in-person interviews.

In order to apply for the VHSO Psychology Internship, you should:

- Register for the APPIC Match through National Matching Services.
- Complete the AAPI Online, including a cover letter, three letters of recommendation, a curriculum vita, and graduate transcripts. Inclusion of a psychological evaluation report is preferred, particularly for applicants interested in a major rotation in neuropsychology. All patient identifiers should be scrubbed from this report before submission.
- Include a cover letter to the Internship Training Director, describing your interest in the Psychology Internship at VHSO and your rotation preferences or interests.
- Ensure that all application materials reach us by November 18, 2016.

For questions about the APPI Online Application or APPIC Match, please contact APPIC directly at (202) 347-0022 or see their webpage at www.appic.org for more information.

Please be aware of the following requirements for this internship:

- 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 at a 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.
- Approved for internship status by graduate program training director.
- 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 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. 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.
- VA conducts drug screening exams on randomly selected personnel as well as new employees. Interns are not required to be tested prior to beginning work, but once on staff they are subject to random selection for testing as are other employees.
• Interns are subject to fingerprinting and background checks. Match result and selection decisions are contingent on passing these screens. Please find additional information about the required background checks at the following website:
• To comply with federal and VA rules and provide interns with liability protection, a current and valid Affiliation Agreement between VA and the sponsoring doctoral program must be on file before the intern can be appointed. Most APA-approved doctoral programs already have an agreement on file. More information is available at
  http://www.va.gov/oaa/agreements.asp (see section on psychology internships).
• Falsifying any of these documents will be grounds for dismissal from the internship.

Please direct questions about the VHSO’s internship or application process to:
  James Fuendeling, PhD
  Psychology Service, 116A
  1100 North College Ave, Bldg 44
  Fayetteville, AR 72703
  (479) 443-4301 or (800) 691-8387, ext. 67515
  James.Fuendeling@va.gov

Applicants and prospective applicants are also invited to contact our current interns to discuss their experiences and perspective on the internship. They can be reached via their office phone at (479) 443-4301 x63079.

Veterans Healthcare System of the Ozarks
Established in 1932, VHSO is a comprehensive, acute care facility that includes a 73 bed hospital, primary care clinics, and diverse outpatient clinics including optometry, dentistry, audiology, speech pathology, and—of course—mental health. In 2013, we opened a new clinical addition that allows us to provide a full continuum of patient-centered care through our primary and specialty care clinics in one location. VHSO also includes Community Based Outpatient Clinics (CBOCS) in Fort Smith, AR; Harrison, AR; Ozark, AR; Mt Vernon, MO; Branson, MO; and Jay, OK. We serve Veterans and their families throughout northwestern Arkansas, southwestern Missouri, and northwestern Oklahoma. Our population is largely rural. Diversity in our patient population is enhanced by a high local density of Fortune 500 companies, the University of Arkansas, and Northwest Arkansas’ status as a top retirement location. All of these factors attract Veterans who are not originally from the area and enhance the cultural, ethnic, and educational diversity of our patient population. At VHSO, we are proud of our culture of excellence in care. The facility has recently won VA’s Robert W. Carey Award for Excellence and the Arkansas Governor’s Quality Award. Our programs consistently maintain the highest levels
of accreditation (including Joint Commission and CARF). We also have multiple academic affiliations and training programs, including residency programs operated jointly with University of Arkansas for Medical Sciences. Within mental health, we have social work and physician assistant interns, practicum students in clinical psychology, and psychiatry residents.

Training in Psychology at VHSO
We believe internship should be a year of intensive clinical training and growth, preparing students for generalist practice or subsequent specialized training. Quality internship training is necessarily challenging, but should not be overwhelming. The experience should be a developmental one, in which interns grow from students, equipped with academic knowledge and able to practice under supervision, into professionals who are able to apply their knowledge and skills with faculty functioning in a more consultative role. Consistent with the graded model of training within each rotation, interns have the opportunity to shadow their supervisors, followed by joint work and monitoring with feedback, then increasing independence in supervised practice. We believe clinical training is at its best when it is a collaborative process that honors both the intern’s clinical interests and faculty’s understanding of the intern’s training needs and growth areas.

Mentorship and role modelling are fundamental teaching tools in this process, and we seek to perform our roles as training psychologists in a largely transparent way that helps interns to understand both our approach to training and the professional roles for which they are preparing. We believe these roles include several values that are so pervasive that they constitute part of the ground upon which professional practice rests. These values include ethical behavior; an understanding of professional psychology as both a human art and the extension of science into clinical practice; and the importance of maintaining our own personal balance and humanity while doing this challenging work. The clinical practice of psychology draws upon multiple ways of knowing, and we respect this diversity of knowledge bases but give pride of place to the results of empirical research. We respect the diverse experiences, identities, and cultural values of our patients and recognize that our clinical work with them must utilize their cultural identity if we are to be effective agents of healing. We value diversity of identity, opinion, and theoretical orientation within psychology as well, and seek to model that as a strength that allows us to draw on multiple approaches in our work. In line with this, we hope to expose interns to different approaches to supervision and teaching and to encourage interns’ development of flexible thinking in clinical problem solving and application of clinical technique. We also respect the knowledge base and fresh perspectives that our interns bring, and welcome interns to freely share their ideas, questions, and feedback.
The major training activity at VHSO is experiential learning through the direct provision of health services. This includes experience on multiple rotations, allowing a diversity of training in psychology and in various interdisciplinary treatment teams. Students will also have structured didactic experiences delivered by supervisors and other professional staff as well as some outside presenters. These will include topics presented in a single session and some presented across several sessions or in a recurring seminar format. Interns will engage in research and scholarly inquiry as part of clinical rotations that emphasize evidence-based practices, through independent and guided consultation of the literature to inform clinical decisions, journal club, and as part of preparing their own presentations. Interns may also have opportunities to engage in scholarly and research projects with faculty as clinical load, dissertation progress, and availability of projects allow. We intend to encourage interns’ development as consumers of clinical research and, for those interested, contributors to the growth of the field.

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**Training Goals & Objectives**

In order to prepare interns for entry level employment in the VA or for advanced training through postdoctoral fellowships, the Psychology Internship at VHSO will provide training and/or supervised experience in the several recognized professional competencies of health service psychologists.

These competencies include:

- Research
- Ethical and legal standards
- Individual and cultural diversity
- Professional values, attitudes, and behaviors
- Communication and interpersonal skills
- Assessment; intervention, supervision
- Consultation and interprofessional/interdisciplinary skills
Many of these competencies are integral to clinical work, and will thus be areas of training that are included in all clinical rotations and experiences. Some, such as individual and cultural diversity and supervision will receive additional attention through seminars. In line with our setting in a VA Medical Center, all of our interns will gain extensive experience working with veterans. We expect that all of our interns will demonstrate competency in use of empirically based psychotherapies with an adult population. We also work to ensure that all of our interns have meaningful clinical experiences in integrated psychological assessments, group therapy, and working in interprofessional treatment teams. Naturally, a higher level of competence is expected in each intern’s area of major rotation.

**Minimum Requirements**

Based on a one year, full time internship, we have the following minimum requirements for successful completion of the internship.

- Complete at least 500 hours (25% of full time effort) of direct patient contact
- Complete at least 200 hours (10% of full time effort) of supervision
- Complete at least 100 hours (5% of full time effort) of didactic training experience

**Evaluation**

Interns receive continuous evaluation and feedback through individual supervision. The Training Committee also reviews each intern’s progress monthly. This discussion will include each intern’s strengths and challenges as a clinician and as a trainee. We have found these regular, informal reviews to be a valuable way of identifying growth areas that can then be addressed in individual supervision and/or tailoring future clinical assignments to address specific training needs. If we are successful as a faculty, we should be able to address intern’s growth areas through training and supervision in ways that lead to better training experiences without having to resort to formal remediation. Any areas of concern that are raised in these monthly discussions will also be shared with the interns by individual supervisors or the Training Director. Interns receive formal, written evaluation of their performance at or about the midpoint and endpoint of the internship. Interns are also encouraged to provide continuous informal feedback about their rotations and their supervision experiences. This can be provided directly to individual supervisors or to the Training Director, who is typically available at least several times a week for informal meetings or consultation. Interns are also invited to provide formal feedback regarding their rotations and supervisors at the end of each rotation and through an exit survey completed near the end of the internship. In case these evaluation and feedback methods prove inadequate, the VHSO Psychology Internship does have formal, written grievance and remediation policies. These are provided to all interns at the beginning of internship as part of the Policy and Orientation Manual, and will also be provided to applicants.
and other interested parties on request. Please email the Training Director if you would like to receive this information.

**Program Structure**

The Psychology Internship at VHSO is a full-time, one year internship. Interns will complete approximately 2000 hours of internship training during a twelve month calendar year. We are offering 3 positions for the 2017/2018 training year. The anticipated stipend is currently $24,014. As federal employees, interns are eligible for health insurance (for self, spouse, and legal dependents) and life insurance. Interns receive the 10 annual federal holidays. Interns also accrue 4 hours of sick leave and 4 hours of annual leave for each full two-week pay period as an intern, for a total of between 96 and 104 hours of each during the year.

**Training Calendar**

Our training year begins on the fourth Monday of August and is built around three trimesters of four months each. Each intern will complete a major rotation in General Mental Health, PTSD Clinical Team, or Neuropsychology. Major rotations may be assigned for two or for all three trimesters and are expected to take up the equivalent of two days each week. Minor rotations will be arranged according to the interests, abilities, and training needs of the interns, as well as the training capacity of the minor rotations. Major rotation areas will generally be available as minor rotations, though the experience offered as a minor rotation will obviously be less in-depth. Our goal is to allow flexibility in building each intern’s training schedule so that we can provide the most useful training experiences for each student.

**Rotations**

**General Mental Health (GMH) Team:** The General Mental Health Team consists of four psychologists, three social workers, a marriage and family therapist, four psychiatrists, and four nurses. The GMH Team serves a broad array of Veterans with a wide variety of presenting problems. Our GMH unit is currently in the process of reorganizing around Behavioral Health Interdisciplinary (BHIP) Teams, providing interns the opportunity to participate in an integrated, interdisciplinary environment of care in which teams of mental health professionals work together, in partnership with our Veterans, to reach mutually agreed upon goals. Core experiences will include individual psychotherapy, marital/couples therapy, group psychotherapy, psychological assessment, differential diagnosis, and consultation with medical providers and treatment teams throughout the larger medical center, including our 17-bed inpatient psychiatric unit. Options for additional training may include biofeedback, Motivational Interviewing, Interpersonal Psychotherapy (IPT), Cognitive-Behavioral Therapy for Insomnia (CBT-I), Cognitive-Behavioral Therapy for Depression (CBT-D), Acceptance and Commitment Therapy, anger management, and other modalities. GMH is a dynamic team of
caring, highly motivated professionals who are committed to providing effective, evidence-based, Veteran-centered mental health care. Interns will broaden their assessment and therapy skills as well as develop strong skills in interdisciplinary collaboration. Depending on interest and clinical maturity, opportunities may also be available for provision of psychological services in our Community-Based Outpatient Clinics (CBOCs) via Telehealth technology, an increasingly important modality for providing mental health care to rural Veterans or those with mobility limitations. This is a Major or Minor Rotation. Supervisors: Kevin Kells, PhD and Jenny Bivona, PhD

PTSD Clinical Team (PCT): The PTSD Clinical Team consists of three psychologists, three clinical social workers, one nurse, and one psychiatrist. Services are provided primarily for outpatient Veterans who have experienced combat-related and/or military sexual trauma (MST). Core experiences will include integrative clinical assessment, differential diagnosis, treatment planning, individual psychotherapy, and group psychotherapy. A core component of this rotation will be providing evidence-based psychotherapies (EBPs), as providers in this clinic offer Prolonged Exposure (PE), Cognitive Processing Therapy (CPT), Cognitive Behavioral Therapy for Insomnia (CBT-I), Acceptance and Commitment Therapy (ACT), and Dialectical Behavior Therapy (DBT). In addition to an emphasis on initial evaluation and individual therapy, a variety of options for facilitating or co-facilitating group psychotherapies will be available, including CPT, CBT-I, ACT, DBT skills, Motivational Interviewing (MI) for treatment readiness, Seeking Safety (SS), mindfulness/biofeedback, anger management, and process support groups. An additional option available to interns on this rotation is working with Veterans dually diagnosed with PTSD and one or more concurrent substance use disorders. Relative amount of training in EBPs in individual psychotherapy, group psychotherapies, and individual or group psychotherapy for dually diagnosed Veterans will be tailored to the interests of the intern in addition to the needs of the PTSD clinical team. This is a Major or Minor Rotation. Supervisors: Evan Eason, PhD & Hilary Casner, PhD

Neuropsychology: Neuropsychology is a diagnostic and consultative service, provided mostly on an outpatient basis, though limited opportunities for inpatient assessment may be available. Typical referral questions include assessment of traumatic brain injury, differential diagnosis of dementias, and assessing relative contributions of behavioral and organic etiologies in impaired patients. Patients often present with complex problems and etiologies. Working closely with the supervising neuropsychologist, interns will learn to carry out neuropsychological assessments from start to finish. This begins with evaluating and refining referral questions from providers in Mental Health, Primary Care, Neurology, Speech and Language Pathology, and Inpatient Medicine, as well as programs such as the Caregiver Support Program. The assessment process continues with gathering and evaluating historical and diagnostic
information from medical charts and interviews and tailoring test batteries to address the specific patient’s level of functioning and relevant differential diagnoses. Interns will achieve mastery in administration and scoring of tests and also in interpretation of test data. Writing neuropsychological reports that are informative and useful to both referring providers and patients will be a major emphasis of training. Interns will also provide feedback to the patients they assess and often to their families, an important and clinically sensitive task that often determines the final utility of the neuropsychological assessment. Neuropsychological Assessment is available as a **Major or Minor Rotation.** **Supervisors: James Fuendeling, PhD and Kevin Kells, PhD**

**Integrated Substance Abuse Clinic/PTSD Clinical Team:** The Substance Abuse Clinic/PTSD Clinical Team (SAC/PCT) rotation will provide interns the opportunity to work with Veterans presenting for treatment of one or more substance use disorders (SUD) or comorbid SUDs and PTSD. Veterans may be in residential treatment, intensive outpatient, or aftercare programs. This is an opportunity to work with a multidisciplinary team of psychologists, licensed clinical social workers, addiction therapists, clinical pharmacists, and psychiatrists. Core experiences will include integrative clinical assessment, differential diagnosis, treatment planning, and individual and group psychotherapy. Interns will have the opportunity to provide individual and group psychotherapies such as Motivational Interviewing, Seeking Safety, Acceptance and Commitment Therapy, Dialectical Behavior Therapy, Cognitive Behavioral Therapy (CBT) for Insomnia, CBT for chronic pain, Cognitive Processing Therapy, and Prolonged Exposure Therapy. Other service modalities provided in SAC/PCT include 12-step facilitated, psychoeducation, and vocational rehabilitation groups. An emphasis for interns on this rotation will be working in an integrative manner in a multifaceted, patient-centered program. Program development and evaluation opportunities will also be available based on the needs of the clinic and the intern’s interests. This is a **Minor Rotation.** **Supervisors: Hilary Casner, PhD & Kevin Kells, PhD**

**Palliative Care Team:** In the Palliative Care rotation, the intern works closely with the interdisciplinary Palliative Care Team, including a physician, an advanced practice nurse, a medical social worker, a chaplain, a pharmacist, a dietician, and a clinical psychologist. The intern receives supervised experience primarily through the inpatient five-bed Hospice Palliative Unit (HPU) and inpatient consultations throughout the medical center. Training objectives include development of skills in brief psychological evaluation and intervention, including supportive psychotherapy and grief counseling, with people who have life-limiting illness or are at end of life, as well as with their families and support systems. There is also a focus on working with medical and surgical teams as referral sources and collaborators. The primary goal of this rotation is to provide the intern with an understanding of the varied diagnostic picture and psychosocial needs of palliative care patients. The intern will also be
exposed to the diverse roles providers assume in this interdisciplinary, collaborative approach to palliative care. This is available as a **Minor Rotation. Supervisor: A. Jill Clemence, PhD**

**Health Psychology:** In this rotation, interns will have an opportunity to participate in case conceptualization and treatment of individuals with diverse health issues while working within the framework of a biopsychosocial model. Interns will learn to conduct pain evaluations and pre-surgical assessments (transplant evaluations, bariatric surgery evaluations), and will engage in consultation with health care professionals from other disciplines. A focus on interprofessional collaboration is emphasized while providing services to Veterans managing chronic health conditions. Areas of emphasis are coping with illness as well as modifying health-related behaviors through focused interventions. Interventions may include 1) pain and stress management skills training, 2) counseling for adjustment to chronic disease and disability, 3) patient education, 4) motivational interviewing, and 5) group, family and/or individual treatments. Interns may gain experience using CBT-Chronic Pain, CBT-Insomnia, ACT-Chronic Pain, and therapeutic assessments on this rotation. Exposure to program development and evaluation activities as well as outreach opportunities may also be available, based on the interest of the intern. This is available as a **Minor Rotation. Supervisor: A. Jill Clemence, PhD**

**Primary Care Mental Health Integration/Women’s Clinic:** This rotation will take place within the medical center’s Primary Care service. The intern will learn about various models of behavioral health prevention and mental health care within the primary care setting and will grow progressively more comfortable working alongside other disciplines such as Primary Care Physicians, Physician Assistants, Advance Practice Nurses, RNs, LPNs, Social Workers, and Pharmacists. Interns will gain experience with direct patient care, as well as skills in consultation and education of primary care providers. Triage, suicide risk assessment, and brief interventions are learned and practiced, relying on evidence-based psychotherapies and practices such as Cognitive-Behavioral Therapy and Motivational Interviewing. Also included are behavioral health coaching and educational activities in areas such as smoking cessation, weight management, sleep hygiene, pain management, and management of chronic illness. In the Women’s Clinic, special attention will be given to the needs of our growing population of women Veterans, and interns will be given opportunities to work alongside the Women’s Clinic team in providing assessment, brief therapy, and consultation services in this unique setting. Rates of trauma – previous to, during, and after military service – are high in this population. Frequent presentations of childhood abuse, domestic violence, Military Sexual Trauma, and PTSD make assessment of trauma and crisis stabilization essential components of this rotation as well. This is a **Minor Rotation. Supervisor: Jenny Bivona, PhD**
Psychosocial Rehabilitation and Recovery Center (PRRC)/Mental Health Intensive Case Management (MHICM): Located in an office complex a few blocks from the medical center, this well-regarded program will allow the intern to see the paradigm of recovery in action. The intern will apply recovery principles to clinical care through diverse experiences with Veterans with serious mental illnesses. The intern will work as a “recovery advisor” for several (3-5) Veterans, a role that entails completing an initial assessment as well as working collaboratively with Veterans and other providers to develop and implement a recovery plan for each Veteran. The intern will meet regularly with these Veterans for individual therapy and ongoing support related to recovery goals as needed. These regular meetings may take place in an office setting as well as in the community and/or Veteran’s place of residence. In addition, the intern will gain experience providing recovery-oriented group treatment to this population, including co-facilitating a community integration group and a recovery-oriented transition group that provides education and support to individuals transitioning from the inpatient setting. The intern will be invited to assist in program evaluation and outcomes activities related to the system-wide implementation of recovery. The intern will also have the unique opportunity to take an active role in the Peer Support Program and the Veteran Mental Health Consumer Council. While a psychologist is not assigned to PRRC/MHICM at this point, senior interdisciplinary staff will work alongside the intern, readily available for urgent needs, and the psychologist supervisor for this rotation will be immediately available by phone. This rotation will only be available later in the training year to interns who demonstrate appropriate clinical maturity. This is a Minor Rotation. Supervisor: James Fuendeling, PhD

Home-Based Primary Care: Home-Based Primary Care (HBPC) is a multidisciplinary program providing medical care to largely home-bound, older Veterans. Veterans are typically suffering from several serious medical conditions and may be medically fragile. Caregiver stress is part and parcel to these fragile home-care systems. Being a primary care program, eligibility generally does not focus on psychiatric conditions; however, most of these Veterans struggle with co-morbid depression and anxiety, along with associated social isolation. Examples of intervention opportunities for psychology interns include suicide assessment and at-home safety management; various evidence-based interventions for treating depression such as Cognitive-Behavioral Therapy (CBT) and Acceptance and Commitment Therapy (ACT); psychological assessment, including mental capacity assessments and cognitive screening; case management opportunities as Veterans and their families consider life changing decisions around long-term care placement; family and couple’s therapy; and behavioral consultations and support for the HBPC treatment team. HBPC offers an intense, non-traditional treatment experience that incorporates multiple disciplines into a home-based family environment. Interns are exposed to the interface of medical and psychological treatment with complex
medical cases requiring a high level of clinical judgment and systems-oriented thinking. This is a
**Minor Rotation.** **Supervisor:** Patrick Lavery, PhD

**Other Supervised Training Experiences**
Any roles that are appropriate to psychologists in professional practice are appropriate training
activities during the internship. Specifically, these include assessment, interviewing,
psychotherapy, consultation, administration, research, program development, and training.
While not all of these experiences may necessarily be gained during the internship, the majority
can be gained over the course of the internship through rotation assignments and
psychotherapy and assessment casework. Depending on interns’ interests, other training
experiences may be arranged and formally added to interns’ training plans to their major and
minor clinical rotations.

**Supervision**
Supervision is provided both formally and informally during the internship year. Supervision is
a key component in the intern’s training experiences, and often the difference between merely
doing clinical work versus learning and growing in one’s professional role. The feedback,
guidance, and sounding board provided by a good supervisor are among the most valuable
resources a trainee can have in facilitating their development. In keeping with APA and APPIC
standards, a minimum of four hours of formal, face to face supervision is scheduled each week.
Additional hours are frequently accumulated and logged through informal or extra scheduled
time. Providing supervision is also a core professional skill that interns will need as they move
forward in their own careers. Thus, learning to provide supervision is also part of the internship
experience.

*Individual Supervision:* Interns will have a minimum of one hour of individual supervision
scheduled each week for each rotation. Typically this will be one hour for their major rotation
and one hour for their minor rotation. If interns are completing an additional clinical experience
outside of their regular rotations (e.g., an intern with rotations in Neuropsychology and PTSD
may also have a long term therapy case in General Mental Health), they will receive additional
supervision for that experience.

*Group Supervision:* The interns will meet for two hours of group supervision every Thursday
morning. This time may be used to discuss clinical issues of interest to all the interns, critical
events that have occurred in one of the intern’s rotations, or group discussion of a particular
case. Group supervision will also provide training in how to present patients in brief to frame
clinical consultation and discussion. Faculty supervisors will rotate roughly every trimester,
allowing the interns to experience different styles of group supervision and exposing them to a variety of faculty in this setting.

**Training in Supervision:** Training in supervision is provided through two main activities. One is a monthly seminar series in supervision that will run for roughly half the year. This will include faculty presentations on major topics in supervision, readings, group discussion and in class exercises. The second is supervised experience in supervision. Interns will conduct regular peer supervision with each other as part of this experience. There may also be opportunities to provide supervision to practicum students or counselors at the Fayetteville Vet Center, in which case the interns would receive umbrella supervision from a psychologist on the Training Committee.

**Didactics**

**Formal Didactic Sessions:** Clinical education includes formal weekly didactic sessions. These sessions are scheduled for two hours every week with a formal presentation and discussion. Didactic topics will include various subjects in evidence based therapies, assessment, culture and diversity, and professional and medical issues. Presenters will include psychology faculty, other medical center staff, and some outside presenters drawn from the University of Arkansas or surrounding community. Other mental health staff are invited and encouraged to attend to promote a collegial and training oriented environment.

**Special Seminars:** Two particular topics, Cultural and Individual Diversity and Supervision, will be the subject of monthly seminars. Each of these special topic seminars will run for approximately half the training year.

**Journal Club:** Interns will have a monthly journal club meeting in which an intern will present an article for discussion. They will also invite a faculty member to attend as a discussant.

**Intern Presentations:** The training schedule includes slots for approximately a dozen presentations by interns. Each intern can expect to give three or four presentations. Topics will be a combination of clinical case presentations and research presentations. We expect that interns will present on their dissertation research, but other topics are possible as well. These presentations can provide a valuable opportunity to practice conference presentations or job talks, as well as providing a platform for interns to explore other topics of particular interest to them.
Training Staff

**Jenny Bivona, PhD.** Licensed in 2010, Dr. Bivona specializes in provision of several evidence-based therapies such as Acceptance and Commitment Therapy (ACT), particularly when provided in a group psychotherapy setting. A special interest includes women Veterans’ mental health issues.

**Hilary Casner, PhD.** Licensed in 2015. Dr. Casner specializes in treatment for combat-related trauma, military sexual trauma, and substance use disorders.

**A. Jill Clemence, PhD.** Licensed in 2004. Dr. Clemence is a Health Psychologist and Affiliate Faculty of the Erik Erikson Institute at the Austen Riggs Center. She serves as the Associate Editor of the *Journal of Personality Assessment* and is on the Board of Trustees at the Society for Personality Assessment. She specializes in management of chronic pain. Clinical interests include palliative care and assessment of surgical readiness in patients seeking bariatric surgery and organ transplant.

**E. Allan Eason, PhD, ABPP.** Licensed in 2008. Coordinator of the PTSD Clinical Team, Adjunct Assistant Professor of Psychology at the University of Arkansas. His specialties include provision of evidence-based psychotherapies, PTSD evaluation and treatment, TBI, assessment, behavioral sleep medicine, training and supervision, group psychotherapy, and multicultural psychology.

**James Fuendeling, PhD.** Licensed in 2001. Neuropsychologist and psychology internship Training Director. Recently completed a five-year term of service as a member of the Arkansas Psychology Board. Specializing in neuropsychological assessment.

**Kevin Kells, PhD.** Licensed in 2004. A member of the General Mental Health Team, Dr. Kells is a thirty-year Army Veteran and specializes in palliative care and psychological assessments.

**Patrick Lavery, PhD.** Licensed in 1986. Currently serving as a psychologist in Home-Based Primary Care. Specializing in Acceptance and Commitment Therapy (ACT), Violence Risk Assessment, and psychological and neuropsychological assessment.

**Terri Miller, PhD.** Licensed in 2000. Dr. Miller currently serves as a psychologist in Compensation and Pension. She specializes in psychological assessment. Special interests include cultural competence and community education regarding behavioral health issues.
Adjunct Faculty

Tammy Brazeal, PhD, ABPP. Licensed in 1999. Dr. Brazeal works out of our Mt. Vernon, Missouri Community-Based Outpatient Clinic (CBOC), providing psychological services to disabled rural Veterans through the Home-Based Primary Care program. Dr. Brazeal specializes in Cognitive-Behavioral Therapy and has numerous areas of professional interest.

Leslie Landrum, MD. Licensed in 1989. Dr. Landrum is the Director of the VHSO Hospice and Palliative Care Unit. Interests include palliative and end-of-life care.

Brian Moore, MSW, LCSW. Licensed since 1999, Mr. Moore is the Program Coordinator of VHSO’s MHICM, PRRC, and RANGE programs.

Aaron Shaw, PhD. Dr. Shaw has been a licensed Marriage and Family Therapist since 2005.

William Thornton, PhD. Licensed since 2008. Special interests include the expansion and proliferation of evidence based treatments in actual practice. Dr. Thornton is a member of the PTSD Clinical Team serving Veterans out of our CBOC located in Fort Smith, Arkansas.

Living in Northwest Arkansas
Fayetteville, Arkansas is a city of about 80,000 in the Boston Mountains region of the Ozarks. It is consistently ranked as one of the best college town in America by several different sources. Fayetteville is frequently found in rankings of the least expensive places to live in American as well. We benefit from low housing costs and overall cost of living, while still enjoying educational and recreational opportunities well beyond expectations for a city of our size. There is a variety of reasonably priced rental housing near the medical center, meaning interns will not need to spend much time commuting. Outside of work, we have an entertainment district that includes small music venues in downtown Fayetteville, as well the Walton Arts Center and nearby Arkansas Music Pavilion that attract national touring acts, Broadway musicals, and national caliber jazz and classical music. We are also near a true national treasure, the Crystal Bridges Museum of American Art, and the recently opened Amazeum hands-on discovery museum. Fayetteville and Northwest Arkansas are also growing centers for local food and craft brewing movements, and our downtown Farmer’s Market was recently named one of the best in the entire country! Outdoor recreation begins with the growing regional trail system that allows bicycling and walking on dedicated trails throughout the region. Numerous state parks and the Ozark Highland Trail system also offer extensive camping and hiking opportunities. A variety of water sports are within easy reach, including white water rafting and kayaking on the Mulberry River and the Buffalo River (America’s first National River), as well as world-class trout fishing in the tail waters of the Beaver Lake and Bull Shoals
Lake dams on the White River. Beaver Lake, with over two hundred miles of shoreline and numerous state parks and boat ramps, can be reached in twenty minutes from the medical center. Many of our staff have very active lives outside of work and will undoubtedly be quite happy to share their favorite recreational and scenic sites, restaurants, museums, and cultural events.