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Sioux Falls VA **Doctoral Psychology Internship** **Training Program 2024-2025**



Sioux Falls VA Health Care System
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Sioux Falls, SD 57105
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<http://www.siouxfalls.va.gov/>

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Training Rotations Overview

For every intern, the six fundamental experiences built into the internship program are:

Experience	Duration	Hours/Week	Supervision
2 Major Rotations <ul style="list-style-type: none"> • General Outpatient Mental Health OR General Outpatient Mental Health Telehealth Focus • Health Psychology • Posttraumatic Stress OR Posttraumatic Stress Telehealth Focus • Rehabilitation & Extended Care (REC): Behavioral Recovery Outreach (BRO) Team program and Community Living Center (CLC) Psychology 	6 months each	16	2 hours/week
1 (year-long) or 2 (six months each) Minor Rotation(s) <ul style="list-style-type: none"> • Administration • Group Psychotherapy • Military Sexual Trauma • Neuropsychology Assessment • Primary Care Mental Health 	12 months	7	1 hour/week
Year-long assessment requirement	12 months	7	1 hour/week
Testing Team (assessment group)	12 months	N/A	1 hour/week
Meetings	12 months	3	N/A
Didactics	12 months	2	N/A

Translating the fundamental experiences into a general weekly plan for the year looks like:

1st Rotation: July - January

1 hr	Required Assessment	Major Rotation #1	Major Rotation #1	Major Rotation #1 Supervision	Minor Rotation #1
1 hr				Meetings/Testing Team	
1 hr					
1 hr					
1 hr					
1 hr					
1 hr				Supervision	

2nd Rotation: January - June

1 hr	Required Assessment	Major Rotation #2	Major Rotation #2	Major Rotation #2 Supervision	Minor Rotation #2 OR continue Minor Rotation #1
1 hr				Meetings/Testing Team	
1 hr					
1 hr					
1 hr					
1 hr					
1 hr				Supervision	

Major Rotation Opportunities

GENERAL OUTPATIENT MENTAL HEALTH OR GENERAL OUTPATIENT MENTAL HEALTH *TELEHEALTH* *FOCUS*

Possible supervisor(s) include: Erin Murtha-Berg, PhD, Desiree Poppens, PsyD, and Open Position. Interns are expected to work with 1 or 2 supervisors throughout the duration of the rotation.

Duration: 6 months during the 1st or 2nd rotation.

Clinic description: The outpatient mental health clinic provides services for a wide variety of diagnoses and presenting issues, with interns typically assessing and treating Veterans using evidence-based psychotherapies for depressive disorders and anxiety disorders, such as major depressive disorder, persistent depressive disorder, generalized anxiety disorder, and/or panic disorder, etc. There may be opportunities for assessing and treating Veterans experiencing chronic pain, personality disorder, and insomnia.

At a minimum, interns will be expected to:

- Independently engage in individual therapy with at least 6, and up to 12, patients per week in person or via telehealth. The minimum expectation for the regular rotation is one telehealth patient, while the expectation for the telehealth focused rotation is the majority of cases are telehealth;
- Independently conduct biopsychosocial intakes and diagnostic interviews with individual therapy patients to be completed within three clinical hours;
- Collaboratively develop treatment plans with patients using objective, reasonable, and measurable goals. Make appropriate referrals to other disciplines as necessary;
- Attend and actively participate in weekly mental health outpatient treatment team consultation meetings, monthly interdisciplinary meetings, and Behavioral Health Interdisciplinary Program (BHIP) team meetings;
- Present individual therapy cases for feedback or coordination at BHIP meetings as appropriate;
- Provide evidence-based therapies including either:
 - Acceptance and Commitment Therapy;
 - Cognitive Behavioral Therapy;

- Conceptualize clients through the modality of treatment they are receiving and discuss evolving conceptualization weekly in supervision meetings;
- Enhance case formulation and treatment through readings to include the ACT for Depression and CBT for Depression therapy manuals;
- Observe and then co-facilitate group therapy sessions for Emotional Regulation including leading mindfulness exercises and homework review. In some circumstances where the intern is beyond the minimum levels of achievement for skills, then the intern may lead the therapy; and
- Complete their work and documentation according to timeline requirements and let the supervisor know if they are not able to meet this timeline.

Other opportunities may include:

- Complete additional comprehensive psychological assessment as needed for diagnostic clarification and treatment planning of individual therapy patients;
- Lead didactic instruction of new skills during Emotion Regulation Group;
- Observe and co-facilitate therapy sessions for groups that can include CBT for depression, ACT for Mood, or others, as available;
- Participate in elements of program development; and
- Facilitate individual or group therapy on an inpatient basis, as our inpatient psychiatric unit serves Veterans who are admitted for a number of mental health conditions such as depression, schizophrenia, schizoaffective disorder, bipolar disorder, anxiety disorders, dementia, and dual diagnosis issues.

HEALTH PSYCHOLOGY

Possible supervisor(s) include: Trisha Gaudig, PhD. Interns are expected to work with one supervisor during the duration of the rotation.

Duration: 6 months during the 1st or 2nd rotation.

Clinic description: This rotation focuses on the psychology of health and illness. Interns will experience an interdisciplinary approach to health promotion and disease prevention while engaging with Veterans through individual and group therapy via in-person and telehealth modalities under the following health-focused programs and services:

- Eating disorder treatment clinic.
- Mind-Body Medicine.
- MOVE! program (healthy weight management).
- Tobacco Cessation program.
- Whole Health.

At a minimum, interns will be expected to:

- Co-facilitate at least four group therapies and at least two individual therapies. Options include:
 - Eating disorder treatment clinic (individual, with group opportunities). Treatment approach is mainly enhanced cognitive behavioral therapy (CBT-E) and a secondary approach of Intuitive Eating;
 - Tobacco Cessation programming (group, with individual opportunities);
 - MOVE! programming focusing on diet/nutrition education and healthy weight management (group, with individual opportunities);
 - THRIVE shared medical appointments, focusing on Whole Health education and interventions aligned with Positive Psychology and Acceptance and Commitment Therapy;
 - Mind-Body Medicine group focusing on reducing and preventing the negative impacts of stress on the mind and body through use of a variety of mindfulness-based and complementary and integrative health interventions;
- Learn in-depth, and provide, patient-centered communication skills based in Motivational Interviewing for the Primary Care setting. In some circumstances where the intern is beyond the minimum levels of achievement and skills, then the intern may teach these skills to Primary Care and other clinicians within the facility and VISN23 through didactics, interdisciplinary team meetings, and group/individual clinician coaching;
- Independently document into the medical record behavioral health assessment reports, diagnostic intake reports, individual and group therapy progress notes, and mental and general health screening measures;
- Document administrative tasks and procedures, such as committee meeting agendas, minutes, and action tracking and status/progress reports to relevant committees; and
- Assist with marketing and recruitment of Veterans for participation in various clinical programs related to healthy living.

Other opportunities may include:

- Observe and conduct pre-bariatric surgery evaluations and participate on an interdisciplinary team to discuss evaluation results and Veteran candidacy for bariatric surgery;
- Co-lead SFVAHCS's Healthy Living Team meetings, and participate in outreach events planned by the committee;
- Serve an ad-hoc role on SFVAHCS's Health Promotion and Disease Prevention / Veterans Health Education and Information Committee, and participate in outreach events planned by the committee;
- Staff education about health and wellness through Whole Health and Health Promotion and Disease Prevention;

- Design and implement a program development project focused on Whole Health and/or Health Promotion and Disease Prevention;
- Guided Imagery group focusing on supporting emotional and physical well-being through guided imagery skills and practice (limited opportunity as this group currently takes place during didactic times); and
- Administrative tasks, which depend on program needs, including creating or reviewing, and writing, standard operating procedures (SOPs), a committee charter, Veteran-facing website content, and strategic planning.

POSTTRAUMATIC STRESS OR POSTTRAUMATIC STRESS *TELEHEALTH FOCUS*

Possible supervisor(s) include: Kari Leiting, PhD, and Desiree Poppens, PsyD. Interns are expected to work with two supervisors during the duration of the rotation.

Duration: 6 months during the 1st or 2nd rotation.

Clinic description: The outpatient clinic provides services to Veterans within a specialized focus on Posttraumatic Stress Disorder and sub-threshold symptoms of PTSD that have resulted in clinically significant distress or functional impairment. Services are provided to Veterans of all eras and can be focused on various types of traumatic events (e.g., combat, MST, accidents, injuries, etc.). Veterans often have complex histories and symptom presentations, which gives the intern the opportunity to refine differential diagnostic skills and gain experience with treatment planning that best meets Veteran's needs, readiness level, and stage of recovery.

At a minimum, interns will be expected to:

- Observe or conduct an average of two unique intakes per month to be completed within three clinical hours each;
- Conduct PTSD diagnostic interviews using Clinician Administered PTSD Scale for DSM-5 (CAPS-5). The intern will write at least one CAPS-5 interview summary documenting symptoms met and not met within each diagnostic cluster with behavioral examples;
- Measure treatment outcomes using measures such as the PTSD Checklist (PCL-5) and Patient Health Questionnaire-9 (PHQ-9);
- Engage in collaborative treatment planning with Veterans by presenting and explaining treatment options and assisting in matching treatment to Veteran's goals;
- Attend and participate in weekly Behavioral Health Interdisciplinary Program (BHIP) team meetings;

- Provide evidence based therapies with at least four, and up to 11, Veterans per week that include either:
 - Cognitive Processing Therapy;
 - Prolonged Exposure;
- The minimum expectation for the regular rotation is one telehealth patient, while the expectation for the telehealth focused rotation is the majority of cases are telehealth; and
- Complete work and documentation according to timeline requirements and let the supervisor know if they are not able to meet this timeline.

Other opportunities may include:

- Provide more than one evidence based therapy, such as Prolonged Exposure; Cognitive Processing Therapy; Exposure, Relaxation, and Rescripting Therapy; Concurrent Treatment of PTSD and Substance Use using Prolonged Exposure; Cognitive Behavioral Conjoint Therapy for PTSD; or others;
- Attend and complete training and consultation to be VA certified in CPT;
- Use other diagnostic and tracking measures throughout the course of training such as the Posttraumatic Cognitions Inventory (PTCI);
- Present current PTSD related journal article to supervisors or the Psychology Internship Training Committee psychologists;
- Gain experience in group therapy through observation and co-facilitation of a skills-oriented or support group for Veterans with trauma symptoms and often co-occurring conditions;
- Attend specialized webinar training opportunities on topics related to trauma and trauma treatments offered through National Center for PTSD, National MST Support Team, National CPT Training Program, and MIRECC; and
- Due to length of protocol with evidence-based psychotherapy (EBP) opportunities, the intern may complete the EBP with a Veteran following the formal end of the rotation. In this situation, there may be some overlap with another major rotation, and the training plan will accommodate this carryover if needed.

**REHABILITATION & EXTENDED CARE (REC):
Behavioral Recovery Outreach (BRO) Team program and
Community Living Center (CLC) Psychology**

Possible supervisor(s) include: Rachel McClure, PhD. Interns are expected to work with one supervisor during the duration of the rotation.

Duration: 6 months during the 1st or 2nd rotation.

Clinic description:

1. The BRO Team program is an interdisciplinary team that helps manage chronic disruptive behaviors related to neurocognitive disorders for Veterans residing within the Community Living Center (CLC). BRO Team also provides consultation and collaboration with full-time caregiving staff at community based organizations (assisted living facilities, memory care units, etc.).
2. The CLC unit provides physical and medical care, rehabilitation, transitional care, respite care, and palliative and hospice care to Veteran's staying in the unit. CLC psychology provides mental health service and consultation to/for Veterans within the CLC. The psychologist offers individual therapy, assessment, family education, treatment planning, and consultation with CLC providers and nursing staff.

At a minimum, interns will be expected to:

- Work with Veterans experiencing different types of psychological issues and problems that are comorbid with or result from a variety of medical illnesses and conditions, such as chronic and metabolic diseases, post-major surgical rehabilitations, and cognitive disorders;
- Screen medical records for relevant psychological information;
- Participate in team meetings with BRO psychologist, nurse, and social worker;
- Work with the BRO psychologist and BRO interdisciplinary team;
- Observe consultation, treatment planning, and evidence-based behavioral intervention for Veteran's exhibiting problems of distressed behavior due to dementia and serious mental illness;
- Conduct initial CLC/BRO consult visits for therapy and provide short-term evidenced based interventions with at least six Veterans per week who reside in the long-term care unit;
- Become familiar with common medical terminology;
- Make appropriate notes and documentation; and
- Attend at least one CLC interdisciplinary staff huddle per week.

Other opportunities may include:

- Independently provide consultation, treatment planning (e.g., develop BRO / STAR-VA Behavior Plans), and evidence-based behavioral intervention for Veteran's exhibiting problems of distressed behavior due to dementia and serious mental illness;
- Provide treatment planning and consultation for community partners, facility staff, and ongoing care transition services to provide stabilization and consultation in community placements to reduce risk of rehospitalization, reduce inappropriate use of psychotropic medication, reduce caregiver burden and distress, and to improve Veteran quality of life;
- Observe or provide psychological and/or cognitive screening, assessment, and diagnoses;

- Work in interprofessional teams by collaborating with BRO Team nurse and social worker for treatment planning, and attending and speaking at CLC huddles and interdisciplinary treatment team meetings;
- Provide recommendations to medical staff (VA staff and community caregiving partners);
- Staff and hospital outreach and education (Alzheimer's disease and dementia awareness campaign at Sioux Falls VA);
- Assist in providing staff didactics (STAR-VA, Dementia Capable Care); and
- Attend and/or give presentations at BRO Community of Practice meetings.

Minor Rotation Opportunities

ADMINISTRATION

Possible supervisor(s) include: Available staff dependent on intern interests. The intern will be paired with a supervisor in an administrative role of interest and will learn the responsibilities and tasks associated with this role. Possible supervisors include:

- EBP Coordinator (Dr. Murtha-Berg).
- Mental Health Intensive Case Management (MHICM) program manager (Dr. Lohmann).
- Mental Health Outpatient Psychology Supervisor (Dr. Nelson).
- Psychology Internship Training Director (Dr. Blegen).

Duration: 6 months during the second rotation. This rotation is subject to approval by the Training Director based on intern performance during the first half of the internship training year and intern progress toward minimum hours requirement (500 direct client contact hours).

Contextual information: In addition to clinical work, psychologists can have responsibilities as program managers, as program developers, in personnel management, and as part of committees representing mental health.

At a minimum, interns will be expected to:

- Learn the responsibilities and tasks associated with their supervisor's role;
- Take part in at least one committee experience;
- Review, and write, policies and procedures;
- Interpret policies; and
- Shadow administrative or program management duties.

Other opportunities may include:

- Staff or hospital outreach or education;
- Community outreach or education;
- Attend teleconference training series calls;
- Attend webinar series; and
- Veteran outreach or education.

GROUP PSYCHOTHERAPY

Possible supervisor(s) include: Dependent on the selected groups. Interns are expected to work with 1 to 2 supervisors during the duration of the rotation.

Duration: 6 months during first or second rotation, or yearlong.

Contextual information: Choice of groups will depend on group availability and intern skill, experience, clinical interest, and major rotation schedule.

At a minimum, interns will be expected to:

- Co-facilitate at least two outpatient groups - options may include ACT-D, CBT-D, CBT-I, Emotion Regulation, Illness Management and Recovery, Mind-Body Medicine, Moral Injury, MOVE!, Seeking Safety, Social Skills Training, Tobacco Cessation, and THRIVE;
- Participate in recruitment of group members; and
- Complete documentation of group sessions.

Other opportunities may include:

- Co-facilitate or facilitate at least one inpatient group based on CBT skills;
- When an intern is above the minimum levels of achievement, the intern may lead an outpatient group;
- Develop new group therapy programming;
- Staff and hospital education and outreach of group availability;
- Screen for group participation;
- Complete treatment plans;
- Participate in online trainings; and
- Participate in consultation calls.

MILITARY SEXUAL TRAUMA

Possible supervisor(s) include: Desiree Poppens, PsyD. Interns are expected to work with one supervisor during the duration of the rotation.

Duration: 6 months during second rotation, or yearlong.

Contextual information: The Sioux Falls VA is committed to supporting survivors of Military Sexual Trauma (MST) by offering a variety of services to address any MST-related mental and/or physical health needs. The clinical population is complex, with many patients presenting with comorbid disorders and multiple traumatic events.

VA uses the term “military sexual trauma,” or MST, to refer to sexual assault or threatening sexual harassment that occurs during military service. Anyone in the military can experience MST, regardless of their age, race, ethnicity, gender, sexual orientation, physical abilities or branch of service. MST can occur at any time or place during military service — while on or off duty and on or off base. The perpetrator or perpetrators may or may not be known to the survivor and may be fellow service members or civilians. MST is an experience, not a diagnosis. As with other types of trauma, people can react to MST in many different ways. Although MST can be a life-changing experience, survivors are remarkably resilient. Some recover on their own. For many, however, the experience of MST continues to affect their mental and physical health, work, relationships or everyday life — sometimes years after the experience.

VA is committed to ensuring that MST survivors have access to the help they need in order to recover. The Veteran may still be eligible for MST-related care even if they are otherwise ineligible for other VA services. Every VA healthcare facility has a MST Coordinator, a professional who specializes in connecting survivors with care and services that are right for them. This rotation would involve working directly with the MST Coordinator to help complete the variety of administrative duties that come with this role.

At a minimum, interns will be expected to:

- Shadow administrative and program management duties (e.g., policy review);
- Be a part of MST program development;
- Assist with developing and executing the annual outreach and awareness campaign for Sexual Assault Awareness Month (April);
- Attend bimonthly teleconference training series webinars;
- Attend bimonthly VISN 23 MST Coordinator Calls;
- Attend bimonthly MST Coordinator Community Calls;
- Provide education to clinical staff through presentations at various service line’s interdisciplinary meetings (e.g., mental health, primary care, rehab and extended care, specialty medicine); and
- Provide education to administrative staff through presentations in preparation for the biannual Answer the Call Campaign.

Other opportunities may include:

- Veteran outreach or education;
- Assist in navigating eligibility determinations;
- Veteran clinical care such as co-facilitate MST group (if available); and
- Check MST hotline voicemail and triage in conjunction with MST coordinator.

NEUROPSYCHOLOGY ASSESSMENT

Possible supervisor(s) include: Emily Blegen, PsyD, ABN, and Kristi Wall, PsyD. Interns are expected to work with one supervisor for the duration of a six-month rotation, and for the yearlong minor experience will rotate supervisors after six months.

Duration: 6 months during first or second rotation, or yearlong.

Contextual information: As a required part of the internship program, each intern already will complete the required assessment experience encompassing one day per week. Then the intern has the option of adding this minor rotation for six or 12 months. This added time in neuropsychology assessment will offer the intern the ability to learn and develop more advanced knowledge and skills with neuropsychological batteries than the mandatory assessment rotation. Working closely with their supervisor, the intern will learn to carry out neuropsychological assessments from start to finish.

For interns considering neuropsychology postdoctoral fellowship and eventual board certification: If the intern completes this one day per week minor rotation for the entire year, which is in addition to the mandatory one day per week assessment training, then the training can expect time in neuropsychology to be about 40% of their time, which is less than the 50% of time consistent with the APPCN guidelines; however, time in training may support application to some neuropsychology postdocs.

The intern will achieve mastery in test administration and scoring, with the option to learn secure tele-neuropsychology methods. There is emphasis on increasing skills 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 the training. The intern will observe and provide feedback to the patients they assess and often to their families, an important and clinically sensitive task. The training emphasis on this rotation includes familiarization with cognitive models of normal brain functioning and neuroanatomy.

At a minimum, interns will be expected to:

- Independently evaluate and refine referral questions from providers in Mental Health, Primary Care, Neurology, Occupational Therapy, Inpatient Medicine, Vocational Rehabilitation, and the Caregiver Support Program;
- Gather historical and diagnostic information from medical charts and present these to their supervisor;
- Independently create appropriate test batteries to answer referral questions, which are then subject to approval by the supervisor;
- Independently complete outpatient diagnostic interviews for basic neuropsychological conditions (e.g., dementias, traumatic brain injury);
- Administer tests with rare errors;

- Hand score most cognitive tests (some tests require computer scoring);
- Score tests with rare errors;
- Accurately assess for and determine premorbid functioning;
- Understand the skill domains each test measures;
- Understand how norms impact interpretation of that test's data;
- Conceptualize etiologies for symptoms to independently reach most diagnoses and accurate rule outs;
- Write a full, comprehensive neuropsychological report draft to include writing background sections and behavioral observations, inputting test data, integrating test data, writing a preliminary summary section, and making appropriate recommendations;
- Lead two or more assessment feedback sessions, working closely with their supervisor;
- In combination with the required one day per week assessment training, the intern will complete one assessment every week. In some circumstances where the intern is beyond the minimum levels of achievement and skills, then the intern may see more than one case weekly;
- Complete at least 14 comprehensive reports by the end of the year. Beyond these minimum levels, interns may complete 36 reports or more by the end of the year;
- Answer inpatient consults; and
- Complete work and documentation according to timeline requirements and let the supervisor know if they are unable to meet this timeline.

Other opportunities may include:

- Observe the neuropsychologist complete tele-neuropsychology, and in some circumstances, when the intern is beyond the minimum levels of achievement and skills, then the intern may co-complete or independently complete such cases;
- Supervision of a practicum student in assessment (if available);
- Write inpatient reports; and
- Should an intern demonstrate the knowledge and skills to gain use of an automated spreadsheet for scoring, then they would be demonstrating above the minimum level of achievement.

PRIMARY CARE MENTAL HEALTH (PCMHI)

Possible supervisor(s) include: Kari Leiting, PhD. Interns are expected to work with one supervisor during the duration of the rotation.

Duration: 6 months during the second rotation.

Clinic description: The intern will work alongside staff in the Primary Care clinic and are available for walk-ins, emergency consultation, and scheduled patients. Veterans are identified as needing psychological assistance by their primary care team, and common referral questions include psychosocial stress, suicide risk assessments, adjustment difficulties, grief, decrease in medical compliance, mood issues, substance misuse, sleep problems, pain management, and other stressor or lifestyle-related problems. Several comorbid conditions frequently are seen.

At a minimum, interns will be expected to:

- Complete at least two, and up to five, mental health triages or initial evaluations per week;
- Learn to document and verbalize their findings and recommendations succinctly to accommodate a high volume and frequency of patient encounters inherent in integrated primary care;
- Provide 10 or more episodes of brief (4-6 sessions), evidence-based intervention;
- Observe mental health crisis management and complete suicide risk assessments and safety plans;
- Become familiar with common medical terminology;
- Efficiently review medical records for information relevant to their clinical role;
- Utilize supervision or consultation as questions arise;
- Make appropriate referrals to specialty programs;
- Read articles published on PCMHI as assigned;
- Attend one weekly Patient Aligned Care Team (PACT) team meeting; and
- Complete work and documentation according to timeline requirements and let the supervisor know if they are not able to meet this timeline.

Other opportunities may include:

- Shadow other members of the interdisciplinary team (e.g., psychiatry, nursing);
- Collaborate with Primary Care psychiatry, social work, and nursing;
- Attend other PCMHI-related meetings (e.g., Opioid Safety Initiative meeting);
- Co-facilitate a psychoeducation group;
- Participate in elements of program development;
- Participate in shared medical appointments;
- Attend PCMHI annual training (as available); and
- Attend PCMHI VISN training to obtain initial PCMHI certification.

The Sioux Falls Psychology Internship: A Unique Experience

Internship in and of itself is a great accomplishment and special experience. Nevertheless, the Sioux Falls VA Psychology Internship provides a distinctive experience in many ways!

Customizing Your Experience

We focus on creating individualized training plans, so that each of our interns receive all the foundational experiences, but then get to customize their VA experience to meet their professional goals and postdoctoral needs.

Support Whenever You Need It

Interns are not alone! Our team of Training Directors and supervisors is available at any time for consultation or urgent needs. Because an intern should not have to track down their foundational supervision and support, we schedule at least four hours per week for supervision, as well as a 30-minute weekly lunch with the Training Director, so that our interns always get the training and support they need. The minimum number of total supervision hours for our program is 200, but our interns typically end the year with well over that amount!

Mentorship

Mentors are experienced mental health professionals who journey with the interns in learning about, and supporting, the intern's path in psychology. After one month into internship, each intern is collaboratively matched with a mentor based on the intern's goals and preferences. While there is a network of psychology staff that provides mentorship in different ways (e.g., review CVs for postdoc, help interns identify gaps), the mentor serves as a non-evaluative advisor throughout the year. Some benefits of our mentorship program include assisting in developing and achieving career goals, promoting personal and professional development including increased job-related wellbeing and confidence, and providing a senior role model.

Protected Intern Time

At the end of each week, the intern class has 30 minutes to craft their own meeting. We encourage using this protected time as a source of peer support, communication, and self-care. Past interns have said the time was helpful in acclimating to internship, sharing training information, consulting, working on projects, and talking about what to do in and around Sioux Falls!

Private Intern Office Space

Each intern has their own office. Each office includes a laptop, two additional computer monitors, locked storage, testing table, sit-to-stand desks, white board, and access to the intern library with therapy and assessment resources so that the intern does not have to buy their own materials. We support our interns in having these private spaces so that our interns can work without distractions, see clients without having to “fight” for office space, and relax to promote wellbeing.

We Take Feedback to Heart

Feedback goes both ways, flowing between the interns and the internship program. We have a variety of processes where we are getting feedback from the interns before, during, and after the internship year, so we can continue to improve in every moment. We believe in listening with an open mind - all feedback is helpful! On the flip side, we regard giving feedback as extremely important to our interns knowing how others are seeing things and for the interns achieving their goals, so we provide feedback in a variety of ways and throughout the year. We aim to provide positive and constructive feedback that is transparent, direct, and objective.

Leadership and Administration Experiences

Our interns gain this competitive advantage as they pursue a permanent position after their internship. Sioux Falls VA interns are important members of interdisciplinary teams, process improvement, as well as group and peer supervision activities. They lead the diversity research project, lead journal reading groups (each intern leads two per year), and present formal case presentations (one assessment and one therapy case). We also offer a one-day per week minor rotation in administration (see above for ways in which that can be customized). In ways such as these, interns develop sought-after programmatic, management, and leadership skills!

Supervision that Evolves with You

Interns start their internship year with different experiences, strengths, and areas for growth. We take the time to get to know our interns prior to internship, during the orientation period, and beyond. We do not “throw” our interns into clinical work, and we know that our interns are valued members of our team, balancing a variety of duties. At the same time, our internship program will not unnecessarily “hold back” interns from experiences either. Supervisors balance providing support and oversight with being one step ahead of the intern’s development to create space for the intern to experience and grow. Supervisors start their rotations, and especially the year, with a hands-on approach, giving extra supervision and discussion. Toward the end of a rotation and the training year, supervision will become more consultative in nature, an important task that the intern will carry into their next career step!

Year-Long Assessment Training

Effective psychologists utilize assessment in every professional activity they do. This includes therapy intakes, risk assessment, evaluating the effectiveness of therapy, providing behavioral health evaluation for implantable therapy devices and transplants, multimodal psychological assessment, cognitive screening, functional and decision-making assessment, neuropsychological assessment, and more! One day per week, for the duration of the internship, interns receive a variety of those assessment experiences so that at the end of the internship year, our interns have developed skills in carrying out a variety of evaluations with Veterans from diverse backgrounds and with diverse conditions!

By the end of the internship, at a minimum, an intern will achieve a firm grounding in principles of assessment (including informed consent, validity, reliability, standard administration, diversity factors, behavioral observation, test engagement, ethics, premorbid functioning, test measurement, and basic assessment research and resources). The intern will be able to complete diagnostic interviews for basic referral questions and/or presenting problems (e.g., posttraumatic stress disorder, common dementias, mild traumatic brain injury), administer and score with minimal errors, conceptualize etiologies for symptoms to independently reach most diagnoses and accurate rule outs, and write at least seven comprehensive reports by the end of the year. If only doing this one day per week required assessment training, the intern is not expected to write a full report independently, but will become competent in writing background sections and behavioral observations, inputting test data, writing the preliminary integration of test data, and making appropriate recommendations. In this one day per week required assessment training, the intern is expected to complete an assessment every other week (allowing for initial orientation and training time as well as no shows and holidays). In some circumstances where the intern is beyond the minimum levels of achievement and skills, then

the intern may see cases weekly and may complete 20 reports or more by the end of the year. Interns will be involved in providing assessment feedback to patients, families, and referral sources as requested, working closely with their supervisor.

Customize Your “Testing Team”

Assessment topics are endless! Testing Team is group supervision focusing on assessment where the interns and neuropsychologists come together to focus on overall development of assessment skills and continued team growth. Every year, the focus and topics of Testing Team change based on the incoming interns’ interests. At the start of the year, we collaboratively establish the topics and questions to explore. Then, we dig into topics via research, presentations, webinars, discussions, and fact-finding of real Veteran cases. Interns are integral in this learning experience, and quickly become a part of the teaching, peer feedback, and peer support. Some of the topics for the 2022-2023 internship were cognitive reserve, delivering feedback, ageism, assessment with Native American Veterans, working with deaf and hard of hearing patients in neuropsychology evaluations, fellowship interview preparation, brain imaging, autism spectrum disorder, multiple system atrophy, progressive supranuclear palsy, Huntington’s disease, Lewy body dementia, cortical-basal ganglionic degeneration disease, posterior cortical atrophy, stroke, and cannabis use.

Intern-Driven Diversity Research Project

Psychologists shine in identifying critical gaps in equity, diversity, and inclusion; doing quality research that is sensitive to diversity; and engaging with others to create new dialogues and change. While we infuse diversity into all areas of our training program, we emphasize the importance of our interns giving back to the Sioux Falls VA and our Veterans in a tangible way. Although the patient population at the Sioux Falls VA is predominantly Caucasian and male, there are other populations that are served well to include African American, Native American/American Indian, Hispanic/Latino, Asian, female, urban, rural, highly rural, homeless, and elderly Veterans. There are Veterans who identify as gay, lesbian, bisexual, transgender, and nonbinary. There are opportunities to work with Veterans with TBI, amputation, visual and hearing loss, and neuromuscular disorders. Every year, the diversity research project principal assignment is always the same: interns will use learning and use skills in diversity, research, administration, program development, interdisciplinary collaboration, and interpersonal communication and presentation. However, each year the project is completely different! This is because the interns will review current issues of diversity, select a topic meaningful to their interests, design a project, complete an action plan, and share their results. Prior intern cohorts have even presented their findings to other CBOCs and state conferences.

CPT (Pre) Certification

In addition to an excess of EBPs the intern will chose from while creating a custom therapy training, we have a Cognitive Processing Therapy (CPT; for PTSD) Regional Trainer on staff to support any intern who elects to complete VA CPT training and the required case consultation. That means the intern will essentially “bank” the training so that upon becoming a licensed VA psychologist, they will have CPT Provider status.

Telehealth Focused Major Rotations

Interns can customize their General Outpatient and Posttraumatic Stress major rotations by providing telehealth services for the majority of their rotation. Offering telehealth to home and to the CBOCs (Sioux Falls VA’s community-based outpatient clinics) allows our interns to meet our mission of providing specialty care to Veterans located in more rural settings or who have barriers such as in leaving their home. Consistent with APA guidelines, the intern will develop skills to provide telehealth services in a developmental manner – first demonstrating competencies face-to-face before the introduction of providing telehealth.

Get to Know Sioux Falls

A “Best Place” to Live

Sioux Falls shows up on multiple lists ranking the best places to live! Some examples are:

#1 for Best Cities for Young Professionals: [Best Cities for Young Professionals 2023 \(worldpopulationreview.com\)](https://www.worldpopulationreview.com/best-cities-for-young-professionals-2023)!

#6 for Best Places to Raise Kids: [Best Places to Raise Kids - 2020 Edition - SmartAsset!](https://www.smartasset.com/best-places-to-raise-kids-2020/)

#10 of the Best Places to Live in America: [Sioux Falls, SD ranked #10 2020 Top 100 Best Places to Live in America - Livability!](https://www.livability.com/best-places-to-live-in-america-2020/)

Strong Sense of Community and Culture

“VERY FRIENDLY, LOW CRIME COMMUNITY
WITH AN AFFORDABLE COST OF LIVING”



“Friendly Neighbors”



“Diverse activity
options year round”

“People are
genuinely friendly”

“GREAT COMMUNITY ENGAGEMENT”

These were survey responses from the mental health department at Sioux Falls VA asking for descriptions of Sioux Falls culture. The social landscape of Sioux Falls is rich, including historic downtown, local small businesses, global presenters, and numerous outdoor and indoor activities – there is something for everyone to do in the community!

The Largest City in South Dakota, but With a Small Town Feel

Sioux Falls was built on the banks of the Big Sioux River named for the Sioux Tribe of American Indians and the waterfalls of the Big Sioux River. The population of the city is just over 200,000 people. While it is not a “big city” by population, Sioux Falls is the largest city in South Dakota offering a variety of shopping, attractions, dining, and entertainment options as found in larger metropolitan areas, but with a small-town, welcoming feel and a reasonable commute!



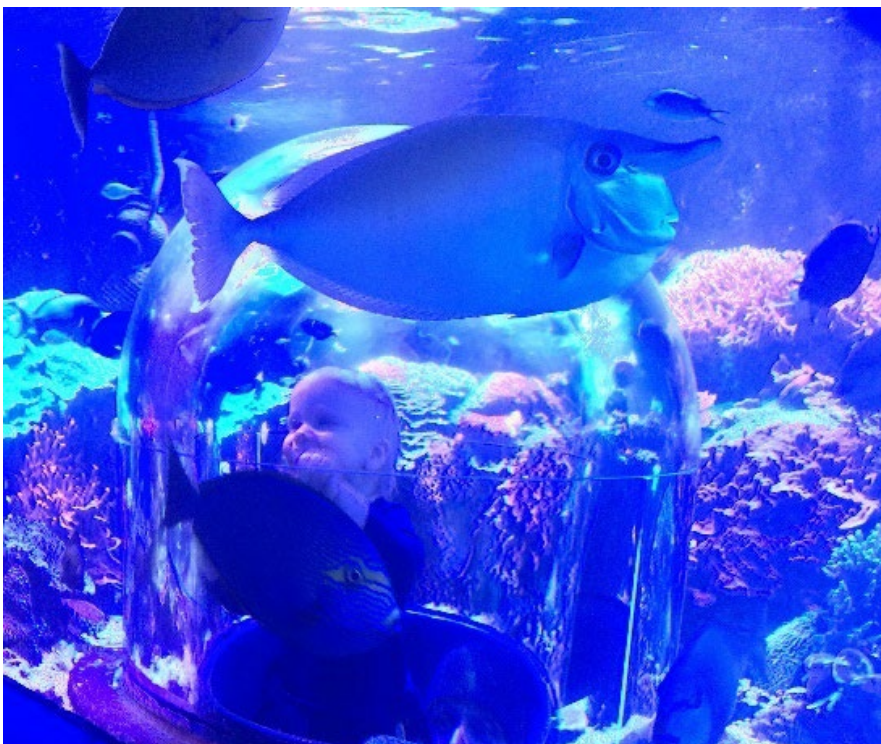
Falls Park. Photo Courtesy: The Sioux Falls Convention and Visitors Bureau

Plentiful Outdoor and Family Activities

Sioux Falls has a wonderful park system with over 80 parks. There is a 30-mile paved bike trail that wraps itself around the city along the Big Sioux River greenway and through urban and wildlife areas. One of the most popular parks is Falls Park, where the Big Sioux River falls over

slabs of pink quartz near downtown Sioux Falls. It is a 123-acre park in the middle of the city with viewing areas, walkways, and picnic areas to enjoy the Big Sioux River falls. Boating, golfing, camping, kayaking, and biking are among activities made easier by the local park system and are frequently enjoyed in Sioux Falls. There are hiking areas in, and within 30-60 minutes from, Sioux Falls that include: Devils Gulch, Palisades State Park, Newton Hills State Park, Blue Mounds State Park, and Good Earth State Park. Other outdoor spaces include dog parks, Japanese Gardens, disc golf parks, play areas, aquatic centers, and amphitheaters.

There are a lot of year-round activities for the family, and many are low-cost and free. To name just a few, the Great Plains Zoo and Delbridge Museum of Natural History has more than 1,000 animals, hosts popular events such as the Zoo Boo where children get to Trick or Treat around the zoo, and offers camps for children. Wild Water West waterpark has waterslides, a wave pool, a baby pool, batting cages, bumper boats, go karts, mini golf, paintball, and more. Siouxland Libraries offer free Storytime including songs and stories, activity classes, a great selection of children's books, and play area. Great Shots offers fun, interactive golf games as people tee off from climate-controlled, private bays on a 250-yard driving range. Sioux Falls and surrounding communities host regular festivals to include farmers markets, the South Dakota Peach Festival, South Dakota Chislic Festival, Sioux Empire Fair, Czech Days, Pride in the Park Festival, Sidewalk Arts Festival, and Festival of Bands. The Butterfly House and Aquarium has over 800 free-flying butterflies from around the world in a tropical conservatory and hundreds of marine fish and corals in aquariums, including a stingray touch pool and aquarium bubble where the kids feel like they are swimming with the fish!



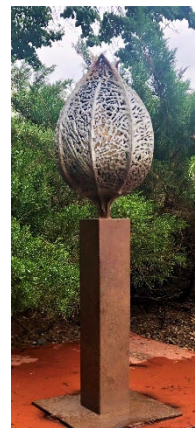
Butterfly House and Aquarium In-Tank Children's Viewing Bubble. Photo Courtesy: Emily Blegen

Vibrant Downtown

Downtown Sioux Falls hosts “First Fridays” where all the local businesses come together to create a unique event filled with free admission or perks, live music, food trucks, street art, and tours of local galleries. There is the Sculpture Walk, where new and unique sculptures are brought to the streets downtown every year.



Phillips Avenue Shops. Photo Courtesy: The Sioux Falls Convention and Visitors Bureau



Sculpture Walk Sculptures.

Photos
Courtesy: Emily Blegen



To get to know vibrant downtown Sioux Falls even more, take a look at The Downtown Sioux Falls website <https://dtsf.com/>



Cathedral Drone.
Photo Courtesy: The Sioux Falls Convention and Visitors Bureau

Foodie Culture

A diverse food culture with a local farm-to-table emphasis is strong in Sioux Falls. Some of our mental health staff's favorite places to eat include:

- * [CH Patisserie](#), led by Bravo's Top Chef Just Desserts season two winner: [CH Patisserie](#)
- * [Look's Marketplace](#), aired on season 33 of Guy Fieri's Diner's, Drive-Ins & Dives: [Look's Marketplace | Meat Market | Deli | Bakery | Sioux Falls \(looksmarket.com\)](#)
- * [Sanaa's Mediterranean](#), gourmet Mediterranean at a value, known for some delicious gluten free and vegan food: [Sanaa's Gourmet \(sanaacooks.com\)](#)
- * [Breadico](#), phenomenal breads, sourdough making classes, and more: [Home | Breadico](#)
- * [Josiah's](#), popular local coffeehouse, café & bakery: [Josiah's Coffeehouse, Cafe & Bakery \(josiahcoffee.com\)](#)
- * [Ode to Food and Drinks](#), with views being right on the canal off 8th street: [Home | odetofoodanddrinks](#)
- * [Parker's Bistro](#), fine dining at its best [Parker's Bistro: Fine Dining Restaurant Downtown Sioux Falls \(parkersbistro.net\)](#)
- * [M.B. Haskett](#), community deli and restaurant [M.B. Haskett Delicatessen \(mbhaskett.com\)](#)

Cultural Arts

There are a number of theatres, dinner theatres, playhouses, museums, galleries, live music, comedy shows, and more in and around Sioux Falls. To highlight just three of them, Sioux Falls has the Washington Pavilion, a historic cultural venue featuring art galleries, hands-on science exhibits, and theater performances. Washington Pavilion's Visual Art Center (VAC) hosts six galleries of changing exhibits and the Egger gallery which hosts the Northern Plains Tribal Art collection. The VAC hosts a variety of local, regional, and nationwide exhibitions and is free on the first Friday evening of every month. Washington Pavilion's Kirby Science Discovery Center features more than 100 hands-on exhibits for all ages. The Pavilion also hosts local and national touring theatre performances year-round; recent events include: Jersey Boys, the Nutcracker, Les Misérables, The Color Purple, and Waitress. The Pettigrew Home, built in 1889, was purchased by Senator Pettigrew in 1911, who was a world traveler, amateur archaeologist, and had a passion for collecting – he collected so much that he built his own museum at the back of his home and opened it to the public in 1925. Since 1926, it has been preserved. Admission is free to walk the home and see the exhibits.



Pettigrew Home and Museum. Photo Courtesy: The Pettigrew Home and Museum Facebook Page

Live music is all over Sioux Falls. Given that Sioux Falls is the largest city in the area, a wide variety of concerts, shows, and entertainers make their way through. Some of these include the Sioux Falls Jazz Fest, which is a free, three-day outdoor jazz and blues musical event, featuring two stages of music. Levitt at the Falls offers 50 free concerts all summer long. Riverfest is a party on the Big Sioux in downtown Sioux Falls with live music, food trucks, live art, and fireworks. The Downtown Block Party on the Eastbank is a First Fridays free event in the summer with live music from regional acts, food vendors, beer and wine, and shopping.



Downtown Sioux Falls Block Party. Photo Courtesy: The Sioux Falls Convention and Visitors Bureau

Sports

Sioux Falls is home to several amateur and professional teams. Baseball fans can enjoy watching the Sioux Falls Canaries (AAIPB), hockey fans can watch the Sioux Falls Stampede (USHL), and indoor football fans can enjoy the professional league Sioux Falls Storm (IFL). University athletics also hold tournaments in Sioux Falls, such as the postseason Summit League Men's Basketball Tournament.

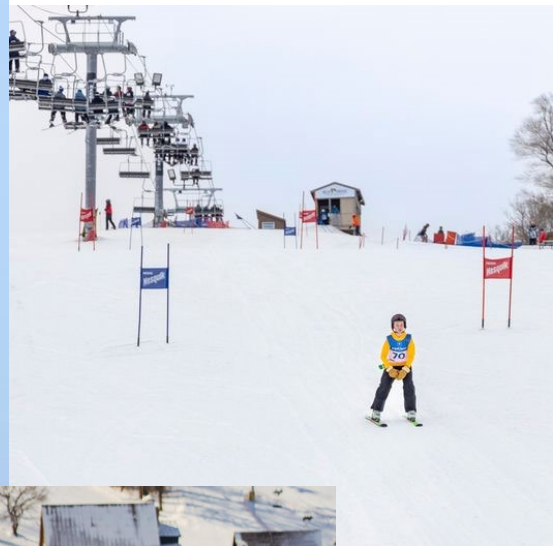


Summit League Tournament. Photo Courtesy: The Sioux Falls Convention and Visitors Bureau

Sioux Falls is the home of University of Sioux Falls, Augustana University, Southeast Technical Institute, Sanford School of Medicine of The University of Sioux Falls, South Dakota Public Universities and Research Center, and National American University – Sioux Falls. Additionally, Dakota State University, South Dakota State University, and University of South Dakota are within an hour's drive of Sioux Falls.

Wintertime

Wintertime boasts cozy sweaters, skiing and snowboarding, warm fires, snow for Christmas decorations, warm drinks with pumpkin spice or peppermint mocha, and more! Our survey of the Sioux Falls VA mental health team yielded a consistent response in terms of winter being the single most drawback about living and working in Sioux Falls due to “the winters,” “longer winters,” and “winter is really cold.” At the same time, there also were survey responses listing wintertime activities as some of their favorite activities to do in Sioux Falls. For example, perks include “real seasons,” “holiday lights downtown and in the park,” Great Bear Recreation Park, and outdoor adventures at our local parks such as sledding and ice skating. Check out: [Winter Family Fun in Sioux Falls | Experience Sioux Falls](#)



Great Bear Ski Valley. Photos Courtesy: Great Bear

Sioux Falls Royal C Johnson Veterans Memorial Hospital

The Sioux Falls VA Health Care System (SFVAHCS) is a Joint Commission accredited, complexity level 2 medical center. The Sioux Falls VA is a teaching hospital (affiliated with the University of South Dakota Sanford School of Medicine) providing a full range of patient care service, with state-of-the-art technology as well as education and research. Care is provided to eligible Veterans in eastern South Dakota, northwestern Iowa, and southwestern Minnesota. The Sioux Falls VA is part of VA Midwest Health Care Network, which includes facilities in Minnesota, North Dakota, Iowa, Nebraska, and South Dakota. The Royal C Johnson Veterans Memorial VA Medical Center is in Sioux Falls, South Dakota with four community-based outpatient clinics (CBOCs) located in Aberdeen, SD; Dakota Dunes, SD; Spirit Lake, IA; and Watertown, SD; and one outreach clinic in Wagner, SD.

For more information to orient yourself to the Sioux Falls VA, please check the Sioux Falls VA website, www.siouxfalls.va.gov.

Internship in Health Service Psychology

Accreditation Status

The predoctoral internship at the Sioux Falls VA Health Care System has been accredited by the Commission on Accreditation of the American Psychological Association (APA) since 2014. We completed our most recent site visit in April of 2023 and were awarded 10-year re-accreditation. The next site visit will be in 2033.

Questions related to our accreditation status should be directed to the Commission on Accreditation:

Office of Program Consultation and Accreditation
American Psychological Association
750 1st Street, NE, Washington, DC 20002
Phone: 202-336-5979
E-mail: apaaccred@apa.org
Web: www.apa.org/ed/accreditation

Positions Offered, Stipend, & Time Requirements

Two internship positions are offered. For the upcoming training year, the internship begins on **July 1, 2024**, and the stipend is \$33,469. Only 52-week full-time internships are available. Total training hours equal 2080 hours for the internship year.

The standard “tour of duty” is 8:00 a.m. to 4:30 p.m. with 30 minutes for lunch and two 15 minutes breaks. Unsupervised time outside the regular 40-hour tour of duty cannot involve direct patient contact. Any hours worked beyond the 8:00 a.m. to 4:30 p.m. tour of duty Monday through Friday will be documented on Trainee Time Sheets. The hour requirements are a minimum expectation, and the emphasis should be placed on doing what needs to be done to gain the desired training rather than on the number of hours worked. The internship structure is expected to help the intern adhere to a 40-hour per week work schedule for all major work duties, but just like with any job or education, some time outside of the tour of duty may be needed to read journals, practice presentation skills, work on extracurricular psychology projects, or to “catch up” on urgent emails after being out sick. The internship is

designed to duplicate the first year of a VA staff psychologist in terms of time commitment, leave time, and flexibility of time schedule.

Application and Selection Procedures

See our home page: [Psychology Training Program | VA Sioux Falls Health Care | Veterans Affairs](#) for additional eligibility, application, and selection guidelines and procedures. An overview is provided here.

Application Process

To apply, applicants should follow the APPIC Match Guidelines as we follow the match policies established by APPIC. Other than the basic APPI, no supplementary materials are required for application to our program.

To be considered, all application materials for the 2024-2025 internship year need to arrive no later than 11:59 p.m. EST on **November 30, 2023.**

A selection committee comprised of psychologists involved in internship training reviews applications. We look for interns whose training goals match the training that the Sioux Falls VA offers. Highly competitive applicants are those who have very good knowledge and clinical experience in intervention and assessment. We also look for applicants who have the personal characteristics necessary to function well in our internship setting, including diverse characteristics, organization skills, initiative, sound ethics, and effective communication skill.

The Sioux Falls VA Health Care System training program will closely adhere to guidelines put forth by the APA, VA, and APPIC. As required under APPIC policies, offers to interns may not be made before Match Day. Further, VA Health Care System is an Equal Opportunity Employer. The selection of interns is made without discrimination based on race, color, religion, sex, national origin, politics, marital status, physical handicap, or age. We are committed to providing a supportive and professional environment that values and promotes diversity.

All new VA Health Care System employees are subject to background checks. Because of significant time delay between completion of criminal background checks and the start of the internship year, shortly after selection interns will be instructed to begin the procedure for completing this background check, and match result and selection decisions are contingent on passing the screens. Interns are included in the random selection for drug screening during their appointments. 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 a VA hospital. 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) and current COVID vaccination will be required. A Training Qualifications and Credentials Verification Letter [[2021TQCVLGuideFINALv4.pdf \(va.gov\)](#)] is required as part of the onboarding process. The letter documents extern, intern, or postdoctoral resident readiness for starting their clinical work at a VHA facility. There are requirements for such things as Hepatitis B vaccination (or signing a declination form), TB screening, screening against the List of Excluded Individuals and Entities database, etc. VA guidelines direct male applicants to have registered with the Selective Service System by age 26 years. See VA Psychology webpage for further details about eligibility requirements ([Resources for Health Professions Trainees Coming to VA | Eligibility and Forms - Office of Academic Affiliations](#)). The above site also includes links to eligibility requirements to train at VA Facilities [[Am I Eligible v5.pdf \(va.gov\)](#)] and VA being a drug free workplace [[VHA HPTsDrug-FreeWorkplaceOAA HRA.pdf \(va.gov\)](#)].

Health Professions Trainees (HPTs) are appointed as temporary employees of the Department of Veterans Affairs. As such, HPTs are subject to laws, policies, and guidelines posted for VA staff members. There are infrequent times in which this guidance can change during a training year which may create new requirements or responsibilities for HPTs. If employment requirements change during the course of a training year, HPTs will be notified of the change and impact as soon as possible and options provided. The VA Training Director will provide you with the information you need to understand the requirement and reasons for the requirement in timely manner.

Interns appointed for 90 days or more and who participate in training a minimum of 130 hours per month meet the eligibility requirements for Federal Employee Health Benefits (FEHB). Interns can enroll in FEHB on their first day at VA and be covered by the first pay period. Interns are not eligible for benefits such as Vision, Dental, FMLA, paid parental leave, etc.

Address application questions to:

Emily Blegen, PsyD, ABN
Director of Training, Psychology
Sioux Falls VA Health Care System
2501 West 22nd Street
Sioux Falls, SD 57105
Phone: 605-333-6890
Emily.Blegen@va.gov

Candidate Interviews

All personal interviews are conducted remotely, typically via video. The reason we focus on video interviews is to reduce barriers that may interfere with someone applying to our

internship program. Interviews are individual and coordinated by invitation only. Interviews are required of all applicants who make the final selection round. Candidates will be informed by email by end-of-business on Wednesday, **December 6, 2023** concerning whether or not they have been invited for a personal interview. We regard interviews as a two-way process - a chance for us to meet and learn more about the applicant and an opportunity for the applicant to meet us and get a better understanding of our program. Interview Days are scheduled for 8:00 a.m. to 2:30 p.m. CST and involve an informational session with the training director(s) and supervisor(s) for several rotations, lunchtime discussions, and formal interviews. For the current selection cycle, interviews will take place on Monday, **December 18, 2023**; Monday, **January 8, 2024**; and Wednesday, **January 17, 2024**. Applicants will need to be available to interview on one of those days should they be invited for an interview. All invitation emails are released at the same time, to allow for equal opportunity to schedule a preferred interview date. As there are a limited number of spots available on each day and we may not be able to accommodate an applicant's first date choice, we ask the applicant also to specify alternate day preferences. Interview day appointments will be determined by the order in which emails are received. Once an interview day has been agreed upon, we will provide further information and details. We adhere strictly to the selection process guidelines established by the APPIC.

Match Process

We will follow the match policies established by APPIC. Our program uses one match number for all positions. Internship programs may choose to inform applicants prior to the February deadline as to whether or not the applicants remain under consideration for admission, but may not communicate other ranking information. 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. Additional information regarding the match is available through the National Matching Services. The Sioux Falls VA Match Number is 220611.

Training Model, Philosophy, & Evaluation

SFVAHCS Mission Statement: To honor America's Veterans by providing exceptional health care that improves their health and well-being.

SFVAHCS Mental Health Service Line Mission Statement: To help improve the health and well-being of Veterans and their families through use of best evidence practice health care, in a timely manner.

SFVAHCS Psychology Internship Mission Statement: To provide a wide range of experience in the application of psychological principles, including psychotherapy and psychological

assessments, through exposure to Veterans of varying backgrounds and cultures, thus fostering substantial responsibility in carrying out professional functions to prepare the intern to become an independent practitioner as a clinical psychologist.

Philosophy Statement: Our training program provides competency-based training experiences to provide exceptional health care through the use of best-evidence practices in a timely manner to improve the health and wellbeing of our Veterans. We are committed to providing a generalist training. We give broad range of high-quality learning opportunities and supervision to the intern, with a strong emphasis in rural health care, in a supportive and professional environment. We view the internship training program as a service to the psychology profession and not as a revenue or labor source. It is the aim of the internship to assist the intern in completing the final formal training required on their way to becoming an independent practitioner by meeting the specific goals and objectives set forth by the internship program.

Program Aims, Competencies, and Requirements for Completion

Training will consist of a competency-based education, developing specific skills over the course of the internship year. Per APA Guidelines and Principles, the primary training method for the intern will be experiential in that the intern will provide services through direct contact with Veterans. Interns achieve a minimum of 500 direct contact hours with Veterans. There will be a wide range of quality professional training with education that is broad in focus, so the skills learned will be generalizable to other populations including those outside of VA. These competencies are enhanced by supervision and didactics.

The aim of our program is to prepare interns for entry to postdoctoral positions as an independent psychologist, and to carry on the goals, ethics and ideals of the profession as they enter the field of professional psychology. Consistent with our overall aim, it is expected that upon completion of the program, all interns will meet the following nine competencies, expressed through the following elements:

Competency: Demonstrate competency in the knowledge of and ability to consistently provide accurate **Diagnostic Skills, Assessment and Case Conceptualization**.

Elements

- 1) Establishes rapport with the patient.
- 2) Diagnostic interviewing skills.
- 3) Differential diagnostic skills and knowledge of the most recent version of the
- 4) DSM/ICD.
- 5) Completes interview within a reasonable time frame.
- 6) Selection of appropriate assessment tools based on referral question, client history, and support by the empirical literature.
- 7) Appropriate administration of assessment tools.
- 8) Appropriate scoring of assessment tools.

- 9) Appropriate interpretation of assessment tools.
- 10) Reliably evaluates risk for suicide/harm concerns and potential for violence and documents evaluation.
- 11) Completes suicide/homicide risk assessments and safety plans as appropriate.
- 12) Writes a comprehensive, yet concise, report which clearly addresses the referral question.
- 13) Report includes all necessary biopsychosocial information as well as collateral information.
- 14) Report includes accurate/defensible conclusions/conceptualization which incorporates theory and case material.
- 15) Report includes useful recommendations that are clear and concrete.
- 16) Provides meaningful, understandable and useful communication of results (e.g., client, family members, other professionals).
- 17) Understands effects of medical conditions and medications on psychological functioning.
- 18) Manages expected workload pertaining to assessment.

Competency: Demonstrate competency in the knowledge of and ability to consistently and appropriately apply empirically supported *Clinical Skills* while providing individual and group **Psychotherapy/Counseling**.

Elements

- 1) Completes required patient records promptly and accurately.
- 2) Discusses issues of confidentiality and informed consent with the patient.
- 3) Recognizes and responds appropriately to patient crisis, facilitating the patient's exploration and expression of affectively difficult issues during crisis.
- 4) Demonstrates appropriate clinical judgment regarding intervention during patient crisis.
- 5) Collaboratively establishes therapy goals and develops a treatment plan.
- 6) Formulates a useful case conceptualization from a theoretical perspective to guide treatment.
- 7) Establishes and maintains an effective therapeutic alliance.
- 8) Applies therapeutic techniques in an effective and flexible manner.
- 9) Independently delivers Evidence Based Therapies.
- 10) Demonstrates awareness of personal issues that could interfere with therapy.
- 11) Maintains professional boundaries.
- 12) Plans for termination and manages termination in a healthy manner.
- 13) Coordinates care with other providers.
- 14) Monitors and documents patient progress during therapy and toward goals and adjusts therapy approach as needed.

- 15) Manages expected workload pertaining to intervention.
- 16) Demonstrates appropriate clinical judgment regarding supervision and consultation during patient crisis.

Competency: Demonstrate competency in the knowledge of, ability to collaborate in and appropriate provision in direct or simulated practice of **Supervision**.

Elements

- 1) Collaborates effectively with other providers or in interdisciplinary settings.
- 2) Appreciates and integrates perspectives from theory, scientific literature, and other professions in supervision with supervisor.
- 3) Develops expected knowledge regarding supervision.
- 4) Able to establish and maintain an effective supervisory relationship.
- 5) Provides appropriate feedback/guidance to relevant parties such as supervisees.
- 6) Deals with boundary issues and the power differential in supervisory relationship as needed.
- 7) Integrates awareness and knowledge of individual and cultural diversity in providing supervision.

Competency: Demonstrate competency in the knowledge of and ability to consistently provide appropriate type and level of information when providing **Consultation and Interprofessional/ Interdisciplinary Skills**.

Elements

- 1) Conducts consultations with skill and knowledge.
- 2) Prepares clear and useful feedback and recommendations to all appropriate parties.
- 3) Appreciates and integrates perspectives of other professionals to maintain a climate of mutual respect.
- 4) Integrates knowledge of one's own role and those of other professions to appropriately assess and address/coordinate the health care needs of the patients and populations served.
- 5) Performs effectively in different team roles to plan and deliver patient-/population-centered care that is safe, timely, efficient, and effective.
- 6) Develops expected knowledge regarding program evaluation and development.

Competency: Demonstrate competency in the knowledge of and ability to consistently apply **Scholarly Inquiry**.

Elements

- 1) Seeks out professional writings regarding assessment cases.
- 2) Seeks out professional writings regarding treatment cases.

- 3) Awareness and use of current literature, research and theory in interventions/assessments.
- 4) Independently compares EBP approaches with other theoretical perspectives and interventions in case conceptualization and treatment planning.
- 5) Uses findings from outcome evaluation to alter intervention strategies as indicated.
- 6) Demonstrates independent, critical thinking in scholarly endeavors.

Competency: Demonstrate competency in the knowledge of and ability to consistently demonstrate appropriate behavior in compliance with **APA Ethical Principles, Professional Standards, and Legal Issues**.

Elements

- 1) Demonstrates knowledge of issues related to confidentiality and informed consent.
- 2) Demonstrates awareness of APA ethical guidelines and ethical issues that arise in professional activities and applies ethical decision-making processes to resolve them.
- 3) Demonstrates ability to think critically about ethical and legal issues.
- 4) Behaves in a manner that is consistent with ethical guidelines.
- 5) Adheres to ethical guidelines in assessment.
- 6) Adheres to ethical guidelines in treatment.
- 7) Adheres to ethical guidelines relevant to consultation and supervision.
- 8) Adheres to ethical guidelines relevant to scholarly inquiry.

Competency: Demonstrate competency in the knowledge of and ability to consistently demonstrate sensitivity and awareness regarding **Cultural and other forms of Diversity**.

Elements

- 1) Demonstrates awareness of numerous aspects of individual diversity, and how their own personal/cultural history, attitude, and biases may affect how they understand and interact with people different from themselves.
- 2) Adapts professional behavior in a manner that is sensitive and appropriate to the needs of diverse others.
- 3) Sensitive to issues of diversity in assessment.
- 4) Sensitive to issues of diversity in case conceptualization.
- 5) Sensitive to issues of diversity in treatment.
- 6) Sensitive to issues of diversity relevant to consultation and supervision.
- 7) Sensitive to issues of diversity relevant to scholarly inquiry.

Competency: Demonstrate competency in the ability to consistently and appropriately convey **Professional Values, Attitudes, and Behaviors**.

Elements

- 1) Reliably manages expected workload.
- 2) Responds appropriately to supervisory feedback.
- 3) Manages conflicting environmental and supervisory demands appropriately.
- 4) Well prepared for supervisory meetings and effectively presents clinical material in supervision.
- 5) Recognizes how personal characteristics and biases impact therapy/assessment work and seeks supervision/consultation when needed.
- 6) Awareness of own competence and limitations as a clinician.
- 7) Awareness of continuing developmental professional goals.
- 8) Possesses an appropriate level of confidence in clinical abilities and has a sense of self as a “Psychologist.”
- 9) Is able to appropriately express professional needs to supervisors.
- 10) Interacts professionally and respectfully with other staff, appropriately managing boundaries.
- 11) Demonstrates accountability, responsibility, and dependability.
- 12) Shows initiative.
- 13) Exercises good judgment as a professional.
- 14) Concern for the welfare of others and their general well-being is evident in all professional contexts.

Competency: Demonstrate competency in effective communication skills and the ability to form and maintain successful professional relationships involving **Communication and Interpersonal Skills**.

Elements

- 1) Interacts effectively with psychology staff and program leadership.
- 2) Oral communication is clear and reflects a thorough grasp of professional language and concepts.
- 3) Uses appropriate professional language when communicating with other health care providers.
- 4) Nonverbal communication is professional/appropriate.
- 5) Written communication is clear and reflects a thorough grasp of professional language and concepts.
- 6) Forms and maintains respectful and productive relationships with clients.
- 7) Forms and maintains respectful and productive relationships with peers, colleagues, and supervisors.
- 8) Understands diverse views in complicated interactions.
- 9) Manages difficult interpersonal challenges and conflictual relationships when needed.

Competency elements are operationalized and are a measurable reflection of the program's stated aims and competencies. These ratings will be used to show the intern has achieved the expected minimum levels of achievement, has successfully completed the internship requirements, and has demonstrated the ability to move on to entry-level practice in the field of professional psychology. The means for assessing these competencies will be varied and include self-assessment, direct observation, formal and informal case presentations, review of written work, review of test data, discussion of clinical interaction, individual and group supervision, and input from other interdisciplinary staff.

Assessment of competencies will occur throughout the internship year. Informal feedback will be given on a regular basis during supervision. Formal evaluation of competencies is completed midway through, and near the end of, internship, with the intern's current supervisors and Training Director providing feedback to the intern. At the end of the year, the Training Director will consolidate and summarize the intern's training history and competency ratings that will be used as part of the data for the year-end reports for the Office of Academic Affiliations (OAA). Ongoing evaluation of the program by the intern also will be gathered for didactic seminars, supervisors, and the program itself. Further follow-up evaluations will be attempted at one and three years, which will assess the degree to which the program met its aims and objectives and if and when the intern became licensed, obtained work on a part-time or full-time basis, and if the work was in their chosen field. Information gleaned from all evaluations will be used to further improve and change the program as needed.

Orientation

The orientation period is important for welcoming and orienting the intern to the internship program. Orientation includes (but is not limited to) the following:

- 1) Complete personnel processing.
- 2) Learn about hospital-wide policies and procedures.
- 3) Receive office assignments, parking tags, ID badges, and other related materials.
- 4) Tour the medical center.
- 5) Review administrative guidelines of the Mental Health Service Line and the Psychology Internship Training Program.
- 6) Meet with psychologists.
- 7) Complete baseline evaluation and assessment of skills.
- 8) Develop individual training plans for selected rotations.
- 9) Receive diversity research and policies, and discuss with Training Director or Assistant Training Director, including, but not limited to:
 - a. American Indian and Alaska Native Mental Health: Diversity Perspectives on Enduring Disparities (Gone & Trimble, 2012)

- b. Assessment and Treatment of Trauma with TGNC Clients (Richmond et al., 2017)
 - c. Client Perceptions of Therapists' Multicultural Orientation: Cultural (Missed) Opportunities and Cultural Humility (Owen et al., 2015)
 - d. Disarming Racial Microaggressions: Microintervention Strategies for Targets, White Allies, and Bystanders (Sue et al., 2019)
 - e. Guidelines for Psychological Practice with Lesbian, Gay, and Bisexual Clients (APA, 2012)
 - f. Guidelines for Psychological Practice with Transgender and Gender Nonconforming People (APA, 2015)
 - g. VA/DoD PTSD Practice Guidelines (2017)
 - h. Veterans' Perceptions of Racial Bias in VA Mental Healthcare and Their Impacts on Patient Engagement and Patient-Provider Communication (Eliacin et al., 2020)
 - i. Working with Veterans and Military Families: An Assessment of Professional Competencies (Leppma et al., 2016)
- 10) Complete telehealth training.
 - 11) Compete training in the computerized medical record.
 - 12) Complete training to conduct biopsychosocial intakes.
 - 13) Complete foundational didactics covering suicide prevention, interpersonal violence, therapy, assessment, and military culture.
 - 14) Shadow therapy sessions.
 - 15) Shadow assessment sessions.
 - 16) Supervisors observe the interns.

Didactics

Learning will be offered through regularly scheduled didactic seminars. We want interns to receive high quality didactics from providers and others who are experienced in a variety of mental health and evidence-based specialties to further the interns' development and growth and increase competency knowledge. Didactic topics cover the program's aims and competencies. Topics typically include diversity, ethics, behavioral health, rural mental health, psychological assessment, psychological treatment, neuropsychology, preparation for internship and licensure, suicide prevention, military culture, trauma, psychopharmacology, telehealth, adjunct programs, substance use, research, and consultation and supervision. Didactics are sequential, with early didactics being foundational. In keeping with APPIC standards, successful completion of the internship requires a minimum of 100 hours of scheduled didactic training and case conferences.

Scheduled didactics for most recent cohorts:

Acceptance and Commitment Therapy for Chronic Pain
Acceptance and Commitment Therapy for Depression
Acceptance and Commitment Therapy for Problem Anger
Additional Approaches to CBT
American Indian Culture & Mental Health
Basics of Evidence Based Care
BRO Psychology
CAPS-5
CBOC Psychology
Challenging Clinical Situations Panel
Cognitive Behavioral Therapy for Chronic Pain
Cognitive Behavioral Therapy for Depression
Cognitive Behavioral Therapy for Insomnia
Cognitive Processing Therapy
Compensation and Pension
COPE
Couples Therapy
DBT and STAIR
Diversity in the Workplace
EPPP and Licensure
Ethical and Clinical Suicide Prevention Considerations
Evidence-Based Treatments for Persons with Psychotic-Spectrum Disorders
Group Therapy
Hospice and Palliative Care
Hospital-Based Careers
How to be Successful on Internship
Impact of Rural Characteristics on Mental and Physical Health Care
Inpatient Assessment
Interpersonal Psychotherapy
Legal and Professional Considerations
LGBTQIA
Military Culture
Military Sexual Trauma
Mindfulness Based Relapse Prevention
Moral Injury
Motivational Interviewing
Neuroanatomy
Neuropsychology of Malingering
Neuropsychology Testing

Polytrauma Clinic
Postdoctoral Planning
Practical Neuroanatomy for the Practicing Psychologist
Primary Care Mental Health Integration
Promoting Intern Well-Being
Program Development and Program Evaluation
Prolonged Exposure
Psychology Differential Diagnostics
Psychopharmacology
PTSD Assessment
PTSD Didactic Series (Vtel series through the Minneapolis VA)
Role of Social Work in VA
Sexual Health and Behaviors
Special Topics for MI: MI for PACT Providers
Substance Use Disorders: Assessment and Treatment
Suicide Prevention
Supervision
The Ins and Outs of Private Practice
The Nuts and Bolts of Providing PTSD Treatment Over a Telehealth Modality
Toxic Chemical Exposure
Validity Testing in Psychological & Neuropsychological Evaluations
Women's Health
Women Warriors: Stories of Strength and Resilience

*Additional didactic opportunities will come up throughout the year. The above menu is subject to change for the 2024-2025 training year.

Leave Policies and Requests

Holidays

The intern is eligible for all 11 federal holidays (including New Year's Day, Martin Luther King, Jr. Day, Presidents' Day, Memorial Day, Juneteenth National Independence Day, Independence Day, Labor Day, Columbus Day, Veterans' Day, Thanksgiving, and Christmas).

Annual Leave

The intern accumulates 13 days (104 hours) of earned leave to be used at their discretion - business, personal, planned medical appointments, etc. after it is earned. The intern should submit the electronic leave request prior to taking leave and as far in advance as possible, typically no less than 45 days out when it involves clinic time. Annual leave accrues at 4 hours

per pay period, so one must have enough leave stored to take said authorized leave. It is the intern's responsibility to plan for and use leave appropriately. For example, if an intern wishes to use a significant block of annual leave during the winter holiday season, or to interview for non-VA postdoctoral positions, then the intern should avoid using this type of leave early in the internship. Interns should plan to use all of their annual leave before completion of the internship.

Sick Leave

The intern accrues 13 days (104 hours) of sick leave at a rate of 4 hours per pay period. Sick leave can be used for personal illness with 5 of the 13 days available for care of an ill family member. In addition to calling in sick to the mental health secretary as early as possible (ideally by 7:00 to allow for contacting patients about scheduling changes), interns shall call or text message the Director of Training as early as reasonably possible on the morning of each sick day to allow for adequate coverage of intern responsibilities. In cases such as illness, where prior approval is not possible, the intern should submit the electronic leave request within 8 hours of returning to work. If an intern is sick for more than three days, written documentation from a doctor stating that the intern was incapable of working due to illness may be requested. Unused sick leave can be credited to future federal government positions for a period of three years (including a VA post-doc).

Authorized Absence

The intern is allotted 5 days (40 hours) of authorized absence per year as long as the intern demonstrates satisfactory progress towards training goals. Authorized Absence may apply to professional meetings, lectures, workshops, conferences, seminars, dissertation defense, and VA job or VA postdoctoral position interviews. Authorized absence cannot be used for the purpose of working at home or school on the dissertation project, nor for non-VA jobs or non-VA postdoctoral interviews - in those cases authorized leave should be used. Final approval for all AA must be obtained from the Director of Training, followed by the Outpatient Mental Health Service Line Program Manager, Mental Health Service Line Director and/or the quad.

Maintenance of Record

Intern files are securely stored by the Training Director. Paper files include relevant onboarding documents, hours tracking, evaluations (self-assessment, mid- and final-year evaluations by the training committee, exit data, post-internship evaluations), certificates of completion, and licensure endorsements. Electronic files include some of the same items, but also contain relevant educational projects, case presentations, communication with the intern's university,

grievances, remediation plans and actions, APPI and interview process data, training plans, and graduated levels of responsibility forms.

Candidate application and interview day materials, select evaluation results, and current intern training plans are available to the psychology training team in a secured online VA system folder that is accessible to the training team during the applicable year.

Intern files are also securely stored in the Health Professions Trainees (HPT) education folder along with the trainees Clinical Training Onboarding Case File, which include their application for employment and other relevant onboarding documents, TQCVL, and trainee completion documentation.

De-identified and identified intern data is recurrently provided to APPIC (e.g., degree types, school types, post-internship job category), APA (e.g., self-study), OAA (VA Office of Academic Affairs), and the HPT committee as part of annual updates.

Due Process

The internship program follows due process guidelines to assure that decisions are fair and nondiscriminatory. All trainees are afforded the right to due process in matters of problematic behavior and grievances. A due process document is distributed to every intern in the internship training manual during orientation and subsequently reviewed with the Director of Training. The manual also contains information regarding expected performance and conduct, the evaluation process, procedures for making decisions about problematic performance and conduct, remediation plans including time frames and consequences for failure to rectify problems, and procedures for appealing the program's decisions or actions.

Privacy Policy & Self-Disclosure

Privacy policy: We collect no personal information from you when you visit our website.

Self-Disclosure: We do not require interns to disclose personal information to their clinical supervisors except in cases where personal issues may be adversely affecting an intern's performance, and such information is necessary to address these difficulties.

Post-Internship Placement

Prior interns have followed internship by formal VA and non-VA therapy and assessment postdocs, employment with the VA (the Sioux Falls VA and others), employment in private practice, employment at medical centers, and as adjunct faculty.

The Psychology Training Team

Emily Blegen, Psy.D., ABN

Minnesota School of Professional Psychology, 2014

Director, Psychology Internship Training

Board Certified Neuropsychologist, Assessment

Dr. Blegen is a board certified neuropsychologist and Internship Training Director. She continued at the Sioux Falls VA following her completion of internship training at the Sioux Falls VA. Her primary clinical responsibilities are completing outpatient and inpatient neuropsychological evaluations. She serves as a clinical member on the Vocational Rehabilitation Committee. She has provided coordination for and supervision of university practicums in neuropsychology assessment at the Sioux Falls VA. She has supervised intern and graduate psychologist clinical training in inpatient group therapy, outpatient SMI individual and group therapy, and marital therapy, as she received her master's degree from Pepperdine University in marriage and family therapy with a focus on group therapy for schizophrenia. From a clinical and research perspective, Dr. Blegen is interested in effects of toxic chemical exposure, tele-neuropsychology, and culturally sensitive rural health care. In her free time, she enjoys spending time with her family, spending time outside in Sioux Falls like going to the farmer's market, and playing hockey.

Trisha Gaudig, Ph.D.

Palo Alto University, 2020

Health Behavior Coordinator

Dr. Gaudig completed her predoctoral internship at the Sioux Falls VA before earning her doctoral degree from Palo Alto University. In her role as the SFVAHCS Health Behavior Coordinator, she works with various clinical and administrative teams facility-wide to integrate evidence-based health behavior change, preventative care, and self-support interventions into Veteran care. Part of her role includes providing TEACH for Success (TEACH) and Motivational Interviewing (MI) skills training and follow-up clinician coaching to providers and nursing staff as an aim to promote health and disease prevention. She is co-chair of the Health Promotion and Disease Prevention Program Committee. She is also a member of the Psychology Internship Training Committee, and Dementia Committees, at the Sioux Falls VA and VISN23. She enjoys the outdoors, especially running, hiking, and camping. She also loves spending time with her husband and her dog, Mr. Burns, who is a retired racing greyhound.

Kari Leiting, Ph.D.

University of New Mexico, 2016
Assistant Director, Psychology Internship Training
Staff Psychologist, Posttraumatic Stress Clinic
Cognitive Processing Therapy Regional Trainer

Dr. Leiting received her doctoral degree from the University of New Mexico in 2016 after completing her doctoral internship at the Cincinnati VA Medical Center. She received focused training in graduate school about treatment for anxiety and trauma-related disorders. Trauma has been a passion since early graduate school, and she sought clinical and research opportunities to expand training with populations who have experienced trauma including sexual assault on college campuses and Veterans who have experienced combat and non-combat related trauma. She joined the Sioux Falls VA in 2016. She is currently a staff psychologist in the Outpatient Mental Health Clinic at the Sioux Falls VA and is a PTSD specialist with the majority of her caseload being providing evidence-based treatments for PTSD. She is the Internship Assistant Training Director and facilitates the internship Diversity Training Workgroup. She loves training and providing supervision to interns on the PTSD rotation, with a strong emphasis on provision of culturally competent, evidence-based psychotherapy services. She is formally trained in Cognitive Processing Therapy (Dr. Leiting is a CPT Regional Trainer), Prolonged Exposure, Motivational Interviewing, Cognitive Behavioral Therapy for Depression, Cognitive Behavioral Therapy for anxiety, Mindfulness Based Relapse Prevention, and Seeking Safety. She is a clinical member of the Behavioral Health Interdisciplinary Program (BHIP) team. Dr. Leiting enjoys spending her free time working on puzzles, reading, and attempting to keep plants alive.

Erik Lohmann, Psy.D.
Regent University, 2016
Coordinator, Mental Health Intensive Case Management (MHICM) Program
Staff Psychologist

Dr. Lohmann interned at the Sioux Falls VA Health Care System, and returned to the mental health service line after being part of a group private practice where he provided outpatient psychotherapy for couples and individuals and completed diagnostic and forensic assessments. His current duties primarily consist of working in the Intensive Community Mental Health Recovery (ICHMR) / Mental Health Intensive Case Management (MHICM) as the program coordinator, co-leading a Moral Injury group (ACT-based) with the mental health service line chaplain, and serving on two committees for the Workplace Violence Prevention Program (WVPP). He has been part of the Psychology Internship Training Committee since 2019. Prior to his work in MHICM, Dr. Lohmann was in the Outpatient Mental Health clinic, where he provided outpatient psychotherapy for couples and individuals (CBT, ACT, IPT, IBCT, and CPT). When not working, Dr. Lohmann spends time riding or running on the local

bike trail, enjoying time with his spouse or friends, and chasing his two children and furry canine.

Erin Murtha-Berg, Ph.D.

University of North Dakota, 2017

Coordinator, Evidence-Based Psychotherapy (EBP)

Staff Psychologist, Outpatient Mental Health

Dr. Murtha-Berg interned at the Fargo VA Health Care System prior to earning her doctoral degree from the University of North Dakota. She is currently a staff psychologist in the outpatient mental health clinic and serves as our facility's Evidence-Based Psychotherapy (EBP) coordinator and Measurement Based Care (MBC) champion. She is passionate about providing psychotherapies that are supported by research to help Veterans make meaningful change in their lives and in finding ways to measure treatment progress. In her role as EBP coordinator and MBC champion, she engages in administrative tasks that support implementation of EBPs and MBC for mental health and behavioral conditions at our facility. Clinically, her interests are generalist in nature and include treatments for depression, anxiety, and trauma. She provides a variety of EBPs including but not limited to ACT for depression and anxiety, CBT, CPT, and MI. She is also a clinical member of the Behavioral Health Interdisciplinary Program (BHIP) team. Dr. Murtha-Berg is active in internship training as well, serving on the Psychology Internship Training Committee and supervising the General Mental Health rotation. She enjoys sampling local restaurants and coffee shops, reading non-fiction, and spending time with her family, including a beagle and corgi.

Summer Nelson, Ph.D.

University of Tulsa, 2013

Supervisor, Outpatient Mental Health Psychology

Staff Psychologist

Dr. Nelson completed her predoctoral internship training at the Salem VA Medical Center in Salem, Virginia before earning her doctoral degree from the University of Tulsa. In her current position as the Outpatient Mental Health Psychology Supervisor, she supervises psychologists and social workers within several outpatient programs at the Sioux Falls VA and surrounding CBOCs. Specifically, she has program oversight of all psychotherapy services, Primary Care Mental Health Integration (PCMHI), the Suicide Prevention Program, and the Behavioral Health Interdisciplinary Program (BHIP) teams. Her current role is primarily administrative, though she has expertise in treatment for PTSD, including CPT, PE, and STAIR, and Military Sexual Trauma, previously serving as the local MST coordinator. Additional clinical interest areas include measurement-based care and personality disorders. She serves on the Employee Threat Assessment Team, Medical Records Committee, and Psychology Internship

Training Committee. In her free time, she enjoys getting outside with her family and her dog, Steamboat. She also loves to knit (“badly” per her assessment), cook, and read.

Desiree Poppens, Psy.D.

California Lutheran University, 2017

Military Sexual Trauma Coordinator

Staff Psychologist, Outpatient Mental Health and Polytrauma

Dr. Poppens is currently a staff psychologist and the Military Sexual Trauma Coordinator for the Sioux Falls VA. She works within the Outpatient Mental Health Clinic and the Polytrauma Clinic. Dr. Poppens graduated from California Lutheran University in 2017 and completed her internship at the Sioux Falls VA Health Care System. The majority of her clinical caseload focuses on treating PTSD by providing evidenced based treatments, including Cognitive Processing Therapy and Prolonged Exposure. The basis of her interest in exposure treatments stems from early training experiences in Exposure and Response Prevention, which she continues to provide to Veterans diagnosed with OCD. Dr. Poppens primarily works from a cognitive-behavioral approach and commonly provides treatment to Veterans who struggle with depressive and anxiety disorders. In addition, she has been trained in Dialectical Behavioral Therapy and currently facilitates the Emotion Regulation Group, strongly modeled after DBT Skills Training. She is a member of the Polytrauma Interdisciplinary Team, providing assessment and treatment recommendations for those with polytrauma injuries. As the Military Sexual Trauma Coordinator, she is the main point of contact for both Veterans and staff who have questions about MST, and she helps provide ongoing MST education to staff. She is passionate about providing supervision and training experiences to interns on the PTSD, Group Psychotherapy, and MST rotations. She serves on the Psychology Internship Training Committee and the Behavioral Health Interdisciplinary Committee (BHIP). As a transplant from California, in her free time she greatly enjoys being active and outdoors as much as possible, including going on hikes, boating, swimming, or exercising.

Kristi Wall, Psy.D.

University of Denver Graduate School of Professional Psychology, 2017

Staff Neuropsychologist, Assessment

Dr. Wall completed her clinical internship in the neuropsychology track at the Central Arkansas VA Health Care System and her two-year postdoctoral residency in neuropsychology at the University of Oklahoma Health Sciences Center psychology training consortium. She is currently pursuing ABPP-CN board certification. Her primary clinical responsibilities are completing outpatient and inpatient neuropsychological evaluations. She also serves as a member of the Dementia Committee and is particularly passionate about improving dementia care. Her clinical and professional interests include differential diagnosis of dementia,

dementia-capable care, caregiver support, and supervision and mentorship of emerging professionals. In her off hours (when not preparing for ABPP), Dr. Wall loves spending time with family, baking, painting, creating nail art, doing jigsaw puzzles, and solving virtual escape rooms.

Edwin Yerka, Ph.D.

California School of Professional Psychology, San Diego, 1999

Staff Psychologist, Spirit Lake CBOC

Dr. Yerka completed his APA accredited internship training at Pacific Clinics in Santa Fe Springs, California. He is a staff psychologist at the Spirit Lake CBOC with 100% of time doing telehealth. His primary clinical and research interests include Acceptance and Commitment Therapy and other mindfulness-based psychotherapies, CBT, anxiety, depressive disorder, addictive behaviors, Cognitive Processing Therapy for PTSD, couple's therapy, behavioral health integration, telehealth psychology, and forensics. His forensic work includes evaluating claimants applying to social security disability, civil commitment examinations, competency to stand trial and criminal responsibility. He conducts psychological evaluations for new hire and annual VA Police officers. He has VA certifications in Cognitive Behavior Conjoint Therapy for PTSD (CBCT-PTSD) and Cognitive Behavior Therapy for Chronic Pain (CBT-CP). He serves on the Psychology Internship Training Committee. In his free time, Dr. Yerka enjoys being active with golfing, racquetball, traveling, camping, and volunteering in his community.

Additional Psychology Staff Not Yet Licensed:

Rachel McClure, Ph.D.

Loma Linda University, 2022

Graduate Psychologist, Rehabilitation & Extended Care (REC; BRO & CLC)

Dr. McClure completed her predoctoral internship at the Sioux Falls VA before earning her doctoral degree from Loma Linda University. She works within the Behavioral Recovery Outreach (BRO) Team program and Community Living Center (CLC). As such, her caseload is divided. Firstly, as the BRO Team psychologist, she focuses on treating and managing neurocognitive disorder related disruptive behaviors of inpatient and community dwelling Veterans through direct intervention and caregiver consultation and education. Secondly, as the CLC psychologist, she provides evidenced based treatments to inpatient Veterans receiving medical care, rehabilitation, transitional care, respite care, and palliative and hospice cares, in addition to education for Veteran's support systems, and treatment planning and consultation with interdisciplinary care teams. She is a member of the Dementia Committee, Geropsychology Committee, BRO Community of Practice, and Psychology Internship Training Committee. She enjoys discovering and listening to new music, reading, watching Angel's

baseball games, volunteering with local youth and women's organizations, and spending time with her family and her snuggly rescue Pitbull dog.

Thank You!

We hope you have enjoyed reading about all the activities our psychology program, and Sioux Falls, has to offer. If there is anything else you would like to know, please do not hesitate to reach out (Dr. Blegen: Emily.Blegen@va.gov). We wish you the best of luck with the internship process!



River Greenway. Photo Courtesy: The Sioux Falls Convention and Visitors Bureau



Downtown Sioux Falls. Photo Courtesy: The Sioux Falls Convention and Visitors Bureau