Eastern Oklahoma VA Health Care System

2024-2025 Psychology Doctoral Internship Program



MATCH Number Program Code: 242611

Please visit our website at the link below:

https://www.muskogee.va.gov/Behavioral Medicine Doctoral Psychology Internship Program.asp

EASTERN OKLAHOMA VA HEALTH CARE SYSTEM



Eastern Oklahoma VA Health Care System (EOVAHCS) is a comprehensive medical system serving nearly 50,000 Veterans from 25 counties in Eastern Oklahoma, also known as "Green Country." The Jack C. Montgomery (JCM) VA Medical Center in Muskogee is proud of being the first VA Medical Center in the nation named after a Native American. Jack C. Montgomery, a Medal of Honor recipient, served in World War II and was a member of Cherokee Nation. The large Community-Based Outpatient Clinic (CBOC) in Tulsa is also named after a Native American, Medal of Honor recipient and Muscogee Nation Citizen, Ernest Childers. The internship training program is primarily located in Tulsa, however, some rotations require time in Muskogee. Our motto is "Excellence Starts Here" and we strive to embody ICARE Values of Integrity, Commitment, Advocacy, Respect and Excellence in all we do.

The JCM Medical Center in Muskogee, Oklahoma provides 24 hour service through the emergency department and hospital wards including a 16 bed acute psychiatric unit.

Another Muskogee site is the East Behavioral Medicine Clinic which offers the majority of outpatient behavioral medicine service in Muskogee for general mental health (GMH), PTSD Clinical Team (PCT) and Substance Use Disorder Team (SUD). The Intensive Community Mental Health Recovery Service Range (ICHMRS) program is also based out of this location. ICHMRS serves rural Veterans with severe mental illness in their homes.

In July of 2020 EOVAHCS opened the Childers VA Outpatient Clinic in South Tulsa at 91st and Mingo. With over 180,000 thousand square feet, 22 acres and ample parking, the clinic also has retail store and food court. The clinic offers services including primary

care, primary care mental health integration (PCMH-I), chemotherapy and endoscopy. The clinic also houses behavioral health services including general mental health teams, substance use disorder team and Psychosocial Rehabilitation and Recovery Center (PRRC).



In addition to the Ernest Childers Clinic, behavioral medicine continues to use space in a 12-story building at Eleventh Street and Hwy 169 in east Tulsa. The second floor of the building contains the Women's Team, Military Sexual Trauma Team, PTSD Clinical Team, Intensive Community Mental Health Recovery Service (ICMHRS) and Homeless Outreach Team. Psychology Intern Training and Didactic Lecture series is located at Eleventh Street. Psychology Interns will most likely spend time at both Tulsa locations and in Muskogee over the course of the training year.

In addition to Muskogee and Tulsa clinics the system offers a range of services to Veterans at community-based outpatient clinics located in McAlester, Idabel and Vinita.

TULSA LIVING



Tulsa is the second largest metropolitan area in Oklahoma with a population just over 400,000. Cultural influences include Native American culture, the oil & gas boom and resulting Art Deco Architecture of the 1920's, a renowned music scene, art museums, urban wilderness areas and miles of running/cycling trails. The newest large attraction is the Gathering Place, a 66-acre park on the east bank of the Arkansas River. The park includes sport courts, a boathouse with boat rentals, splash playground, wetland pond and garden, trails and playgrounds for every developmental level. Tulsa has a small but efficient International Airport. A range of faith and a-theist communities can be found in the area including churches, synagogues, mosques and the atheist community of Tulsa.

The cost of living is very affordable in Tulsa (Overall cost of living index is 85 while the national average is 100) which is helpful for interns on a stipend who want to enjoy the amenities of a large metro area. Average rent for a 2-bedroom apartment in the Tulsa metro is approximately \$1,015 per month and studio/1 bedroom apartments can be found in the \$650-850 range. Tulsa is surrounded by suburbs which have been named in the top 10 best places to live in Oklahoma with A rated school districts; These include Jenks, Bixby, Broken Arrow and Owasso. The following links provide more information about Tulsa and activities happening in the area.

Visit Tulsa

2021 Best Places to Live in Oklahoma

Why I love Tulsa: Moms from the Tulsa area tell why they love living in Tulsa

Travel Oklahoma: Tulsa

ACCREDITATION STATUS

The doctoral internship at Eastern Oklahoma VA Health Care System was established in 2018. The internship program will be accepting their 7th class of interns for the 2024-2025 academic year. The program is currently fully accredited by the American Psychological Association (APA) Commission on Accreditation (CoA) following our initial site visit in May of 2019. We are up for re-accreditation and will be submitting our self-study in the spring of 2024 with an anticipated site visit in 2025. Questions related to the program's accreditation status should be directed to:

Office of Program Consultation and Accreditation
American Psychological Association
750 1st Street, NE, Washington, DC 2002
Phone: (202) 336-5979 e-mail: apaaccred@apa.org
Internet: http://www.apa.org/ed/accreditation

DOCTORAL PSYCHOLOGY INTERNSHIP

During the 2024-2025 training year, the EOVAHCS's Psychology Internship Training Program will provide training for 4 full-time psychology interns. The program is a 12-month, full-time appointment. All interns complete at least a total of 2080 hours of training. The usual tour of duty is 8:00am – 4:30pm, although some training experiences may involve a different schedule due to specific activities on that rotation (e.g. evening or Saturday therapy groups; outreach activities). Certain clinical rotations will offer experiences outside of the usual tour of duty, however, there are no mandatory after-hour expectations. As this is a training year, emphasis is placed on competent completion of training activities rather than the number of hours worked. This means that interns may, at times, work more than 40 hours in a week. For example: When navigating a clinical crisis with a client case consultation/supervision and the resulting medical record documentation must be completed before leaving for the day. Further, an intern may require more time to prepare for a specific competency, write reports, prepare for a presentation or complete required reading.

ABOUT THE PROGRAM

The primary mission of the EOVAHCS training program is to provide the highest quality generalist training using evidenced based psychotherapies and psychological assessments. All aspects of the training program facilitate the development of core competencies as recommended by APA. The Scholar-Practitioner model is followed and prepares interns as well-rounded competent clinicians in each of the core competencies. Our goal is to facilitate the development of critical thinking, clinical judgment, conceptualization, and problem-solving skills. Prior to the end of the training year, interns

will be expected to be competent in providing general psychological services to Veterans in an ethical, professional, and knowledgeable manner.

The internship program is structured to help trainees grow and mature both personally and professionally. In other words, the internship year focuses on two fundamental overarching areas: 1) foundational competencies in psychological practice and 2) developing a sound professional identity.

With regards to foundational competencies: Interns will learn to effectively communicate clinical observations, opinions, decisions (verbal and written) across interdisciplinary settings. Interns will develop and refine interpersonal skills needed to work effectively with patients, their families, and allied health professionals. Interns will further develop knowledge and sensitivity to cultural, ethical, and legal issues that impact psychological practice with an overall understanding of individual differences and cultural humility.

With regards to professional identity: Development of professional identify includes multiple dimensions: Supervisors will provide modeling, feedback, and a progressive degree of independence to help interns grow and develop a solid sense of themselves as an emerging professional. Specifically, we strive to help the intern transition from the student role to the professional role regarding self-image, increasing responsibilities, navigation of complex service delivery settings, and professional competence and confidence. Our program uses feedback and evaluations to help trainees grow in self-awareness, develop a refined sense of personal strengths and limitations, and clinical judgment with regards on when to act independently and when to seek consultation.

The training year begins with two to three weeks of training to orient trainees to the program, procedures, expectations and facility. Interns visit potential rotation sites, meet potential supervisors and are provided with information about each rotation in order to help them compose a training plan that best fits their interests and needs. We take great care to create a training plan and rotation sequence that is fair and accounts for the trainees' clinical interests and goals.

Interns receive feedback from supervisors in an on-going informal manner throughout the year in addition to formal evaluations at mid-year and end of the year. Evaluations emphasize the intern's strengths and identify areas in need of improvement. In turn, interns evaluate supervisors and the supervision experience. Evaluations are mutually shared and discussed between intern and supervisor in a collaborative atmosphere that fosters both personal and professional development.

All EOVAHCS rotations provide the opportunity to train with multidisciplinary teams in a cooperative, collaborative, professional environment using evidenced based practices. Our diverse staff offers a breadth of viewpoints and experiences with a focus on Veterancentered care, emphasis on recovery and community re-integration.

PROGRAM STRUCTURE

EOVAHCS internship training program year includes into two rotations of six months each and a yearlong rotation focused on evidenced based assessment and psychotherapy. Interns are expected to achieve foundational competencies in clinical assessment, group and individual psychotherapy, consultation, treatment planning, professionalism, ethical/legal standards and policy, sensitivity to individual differences, cultural diversity, supervision, and scientific knowledge and methods.

Interns can expect to spend two days per week performing duties associated with their rotation, one day a week performing duties associated with assessment, one day a week performing duties associated with evidence based therapy, and one day reserved for training-related activities such as didactic seminars, group supervision, research, and the yearlong diversity seminar. Time on the training activity day is also individualized based on the intern's training goals/interests and can include committee work (e.g., LGBTQ Committee; Multicultural Committee; IPV Work Group, Mental Health Summit Planning Committee), and/or outreach (e.g., Native American Outreach, MST Outreach, Suicide Prevention, Tulsa Mayor's Veteran Advisory Council). Activities and roles associated with rotations vary, but generally include individual and/or group psychotherapy, psychological assessment, documentation, report writing, training, and supervision. EOVAHCS also has a research service and interns may have the opportunity to be involved with current research. Level of involvement may vary based on intern's interest but will include at minimum 2 hours of research work per month when studies are available. This may include tasks such as: data entry, data coding, assessment/screening administration, and possible opportunities for data analysis and writing contributions.

Interns receive two hours of individual face to face supervision each week from two separate licensed psychologists (Assessment Supervisor, Rotation Supervisor). In addition, interns have three hours of group supervision (Assessment, EBP, Training Directors) and two hours of didactic activities each week. The didactics and seminars are coordinated by training leadership and include topics such as multicultural/diversity considerations, ethics, professional development, supervision, empirically based treatments, and psychological assessment. Diverse perspectives in training are provided by clinical providers working in various areas of Veteran care as well as outside speakers with specific expertise.

Sample Training Structure

Rotation 1

15 hours per week

First half of internship year - 6 months

Rotation 2

15 hours per week

Second half of internship year - 6 months

Year Long Rotations

1 Day focused on Assessment1 Day focused on EBP Interventions

Weekly 2 hours individual supervision

One hour with Rotation Supervisor One hour with Assessment Supervisor

Weekly 3 hours group supervision

One hour with Training Director or Associate Director
One hour with EBP Supervisor
One hour with Assessment Supervisors

2 hours of Didactic Seminars Weekly

4 hours Group Project/Outreach/Committee Work/Misc. Activities

ROTATION DESCRIPTIONS

Each intern is required to participate in year long rotations which will focus on Psychological Assessment and Evidenced-Based Psychotherapy. These rotations will be located at the Tulsa Clinic. The options for the six month rotations are detailed below.

Psychological Assessment

Interns have the option to complete a personality/general diagnostic assessment or a neuropsychological assessment full year rotation. For both, interns will conduct assessments as referred by clinical providers within the EOVAHC System through a formal consult system. Interns may need to consult/collaborate with other professionals to clarify referral questions and provide meaningful feedback. Each assessment is individualized to the referral question and client. Psychological assessments include clinical interview, review of history and records, and administration of standardized psychological tests and measures. Following information gathering, test administration, scoring and interpretation, Interns write integrated assessment reports and present findings/feedback/treatment recommendations to both the referring source and patients as appropriate. Individual assessment supervisors assigned to each intern provide weekly individual and group supervision. Common assessments conducted include ADHD evaluations, Diagnostic Evaluations, Personality Assessments, PTSD Evaluations, and Cognitive Screenings.

Evidenced-Based Psychotherapy

Interns will become proficient in a minimum of two evidenced based therapies Cognitive Processing Therapy (CPT) for PTSD and Acceptance Commitment Therapy for Depression during the course of their training year. The training and consultation is provided by VA National consultants and/or Regional Trainers/Consultants in both CPT This unique training/consultation opportunity fulfills the training and ACT-D. requirements to apply for VA provider status once licensed and if the Intern continues in the VA system. Trainings for both CPT and ACT-D include face to face instruction, review of audio recordings, direct observation, supervision, and consultation. Interns will participate in group supervision with the EBP consultant for CPT and ACT-D. Individual supervision will be provided as necessary. As part of this rotation, interns conduct one comprehensive intake per week which includes gathering of psychosocial history, assessing relationship violence, conducting suicide risk assessment and, if appropriate, safety planning. Using the shared decision making model the Intern will also provide information and rationale about EBP's available and collaborate with the client to engage in treatment planning with the best fit based on the client's presenting symptoms and goals.

Rotation Options

Each intern will have two major (two days a week) six month rotations during the training year. Training directors and supervisors work take intern preferences into account however, rotations will be assigned based on multifactoral considerations. Interns remain at the assigned location for the duration of the six month rotation.

Choice of major rotations include: (Interns will choose two each lasting 15 hours per week for six months)

- Acute Psychiatric Inpatient Unit
- General Mental Health Clinic (GMHC)
- Home-Based Primary Care (HBPC)
- Primary Care Mental Health Integration (PCMH-I)
- PTSD Clinical Team (PCT)
- Psychosocial Rehabilitation and Recovery Center (PRRC)
- Rural Telemental Health
- Substance Use Disorder Team (SUD)/Veterans Treatment Court
- Women's Mental Health Speciality/Military Sexaul Trauma Treatment Program

In addition, rotation enhancements are potentially available and can be individualized per intern's training interests such as:

- Special Populations (underserved racial, cultural and sexual minorities)
- Specialty Assessment (organ transplant; bariatric surgery)
- Rural Telemental Health
- Administration
- Dilectical Behavioral Therapy (DBT)

Rotation Descriptions:

Acute Psychiatric Inpatient Unit

Interns work as part of a multidisciplinary treatment team on the inpatient mental health service one day per week and in the PRRC with is similar to a day treatment or partial hospitalization setting. During the day on the inpatient unit interns provide brief psychotherapy and psychological assessments. Common reasons for hospitalization include suicide ideation/attempts, homicidal ideation, substance use disorders, depression, grief and loss, active psychosis and/or mania. A large focus of the rotation is consulting and communicating about treatment conceptualization and planning with the team, which includes nursing, recreational therapy, social work and psychiatry staff. Psychological interventions consist of both group and individual treatments.

General Mental Health: Interns work as a team member of an interdisciplinary outpatient clinic, seeing veterans with a full spectrum of psychological disorders including depression, anxiety, non-combat PTSD, bipolar and other psychotic disorders. Psychological work in this rotation includes individual and group psychotherapy, participation in the initial intake and treatment planning process with Veterans. The intern develops and enhances skills in evidence based psychotherapy by facilitating group and individual therapy with a broad range of psychopathology. Skills in differential diagnosis, treatment and treatment planning are facilitated through the course of the therapeutic relationship. In this rotation a holistic, recovery-oriented approach to care is imperative and interns work closely with medication providers (nurse practitioners and psychiatrists) and social workers (homeless veteran coordinator, CWT and supported employment coordinator), as well as collaborating with primary and specialty care physicians.

Home Based Primary Care Rotation: Interns in the home based primary care rotation have the opportunity to learn how to provide a full range of psychological services to patients in the home who are unable to travel to the nearest VA Medical Center. Many of those served are in very rural areas of Eastern Oklahoma, which will add to this unique training experience. Specific services include screenings; psychological, cognitive, and capacity assessments; psychotherapy; and prevention-oriented services. Mental health treatment and prevention-oriented services will emphasize evidence-based and best practice approaches.

Primary Care Mental Health Integration

The primary care mental health integration (PCMHI) rotation provides evidence based behavioral health services to patients within the primary care setting. Psychological interns will work in collaboration with primary care physicians, nurses, and other PCMHI social workers and staff to provide integrated services that treat the whole person. Primary Care patients present with behavioral health concerns (anxiety, depression, PTSD, etc.) in addition to physical health concerns and medical conditions. Interns will receive warm hands offs from medical teams and provide feedback and consultation to the referring provider about patient care. Interns conduct brief functional assessments and interventions that facilitate patient progress towards behaviorally based goals. Consistent with the PCMHI model's episode of care, most patient appointments will be no more than 30 minutes with a maximum of 6-8 follow up sessions. Interns will also submit referrals and coordinate care when indicated to other specialty clinics and services. PCMHI not only aims to reduce symptoms of psychopathology, but to also improve patient functioning and quality of life. The rotation emphasizes a contextualism perspective to case conceptualization and the implementation of contextually and behaviorally based psychotherapeutic interventions.

Psychosocial Rehabilitation and Recovery Center (PRRC)

Interns are part of a recovery focused program for Veterans who have persistent severe mental illness including Schizophrenia, Schizoaffective Disorder, Bipolar Disorder, Severe Depression, and PTSD. The goal of the PRRC is community integration, reducing

emotional distress with evidenced based therapeutic interventions, and building skills to strengthen social supports. The Intern is expected to provide psychological assessment, individual, and group interventions to veterans with serious mental illness as part of an interdisciplinary team. The team includes the following disciplines: Vocational Rehabilitation, Recreational Therapist, Peer Support Specialist, Social Work, and Psychologist. Evidenced based practices include Seeking Safety, CBT for Depression, CBT for Anxiety, Mindfulness, Cognitive Behavioral Therapy for Schizophrenia, Dialectical Behavior Therapy, Cognitive Processing Therapy, and Social Skills Training for Schizophrenia.

PTSD Clinical Team (PCT): Interns gain experience in empirically supported assessment and treatments of PTSD related to combat. Interns will learn to reliably administer and score the Clinician Administered PTSD Scale (CAPS-5). Evidenced Based Psychotherapy training opportunities include: Cognitive Behavioral Therapy (CBT) Skills Groups, Cognitive Processing Therapy (CPT), CBT for Insomnia, and Prolonged Exposure Therapy. Training focus will be individualized based on intern's training, experience, and interest.

Rural Telemental Health: The Rural Telemental Health (RTH) rotation offers interns distinct and innovative training using technology to complement their psychotherapy, psychological evaluation, consultation, and interprofessional skills. Interns can expect to work towards decreasing health disparities in an interprofessional training model serving rural Oklahoma veterans in partnership with social work, psychiatry, and primary care using video teleconferencing. Interns learn the unique contributions of economic, social, and cultural factors affecting the mental health of rural veterans. As a result of socio-eco-cultural influences, many of our rural veterans have multifactorial medical and mental health issues; therefore, interns will acquire advanced skills and knowledge in assessment, evaluation, psychotherapy, consultation, and case management

Substance Use Disorder Team: The Eastern Oklahoma VA Health Care Systems (EOVAHC) Behavioral Medicine Service (BMS) offers a continuum of care for Veterans diagnosed with Substance Use Disorders (SUD) and Co-Occurring Disorders providing interns the opportunity to individualize their training experience. Opportunities include Substance Use Disorder assessment, consultation, evidence based therapies, outpatient and intensive outpatient (IOP) groups and may also include inpatient consultation. Evidence Based practices include Motivational Enhancement Therapy, Mindfulness, Seeking Safety, 12-Step Facilitation, a Cognitive Behaviorally focused Relapse Prevention and Acceptance Commitment Therapy approaches.

Tulsa Veterans Court (VTC) targets veterans charged with non-violent felonies and who also struggle with drug and/or alcohol addictions, and/or mental health problems. The Veterans Treatment Court is a collaborative effort among the 14th Judicial District Tulsa County Drug/DUI Court, U.S. Department of Veterans Affairs, Tulsa County District Attorney's Office, Tulsa County Public Defender's Office, Human Skills and Resources

Supervision, Tulsa County Court Services, and many other community partners. Tulsa Veterans Court is certified as a National Training Mentor Court.

Interns will have the opportunity to attend court dates, graduations and provide counseling services and case management to VTC participants. Interns on the SUD rotation have the unique opportunity to be trained by and consult with a National Trainer in MET

Women's Mental Health Specialty/MST Treatment Program: Interns gain experience in empirically supported assessment and treatments of PTSD related to sexual trauma in the military (MST) and outside the military. In addition to PTSD, frequent diagnoses treated within this clinic include Borderline Personality Disorder, Major Depressive Disorder, and Anxiety Disorders. Interns will gain exposure working with individuals with eating disorders, experiencers of intimate partner violence (IPV), and users of IPV. Evidenced Based Psychotherapy training opportunities include: Cognitive Behavioral Therapy (CBT) Skills Groups, Acceptance and Commitment Therapy (ACT), Skills Training in Affect and Interpersonal Regulation (STAIR), Dialectical Behavior Therapy (DBT) Skills Groups; Cognitive Processing Therapy (CPT), CBT for Insomnia, Mindfulness, Exposure Relaxation Rescripting Therapy for Trauma Related Nightmares (ERRT), Cognitive Behavioral Therapy for Depression and Prolonged Exposure Therapy. Interns will learn to reliably administer and score the Clinician Administered PTSD Scale (CAPS-5). Training focus will be individualized based on intern's past training, experience, and interest.

Enhancement Descriptions:

Special Populations: This rotation enhancement specializes in providing therapeutic services to Veterans from minority populations including: racial/cultural differences, LGBTQ, women, Veterans in the legal system, and Veterans with major physical disabilities. As psychologists, we have an ethical responsibility to provide culturally informed care for our clients and the communities with which we engage. However, clinicians also cite concerns about their abilities to apply knowledge of diversity to routine practice. This rotation enhancement will provide interns an opportunity to bridge the gap between knowledge and application. The Special Populations Rotation Enhancement is designed to be flexible, allowing interns the opportunity to create an experience fitting with personal and professional goals, prior training experience, and expectations

Specialty Assessment: This rotation enhancement specializes in providing assessments prior to medical procedures such as bariatric surgery and organ transplants. If the opportunity arises evaluations conducted for VA police candidates may be an option. Interns receive enhanced training in these specialty assessments/evaluations in regards to administering of standardized assessment instruments, psychosocial interview, interpretation, and report writing.

Administrative Enhancement: The administrative enhancement provides the opportunity for interns to practice administrative functions as they relate to mental health.

For example: Intern may assist with National VA mental health directives such as SMI ReEngage (outreach to Veterans with SMI who have been lost to care), EPIC (Early Psychosis Intervention Coordination), Inpatient Recovery Transformation Meeting (Review of recovery oriented practices on the inpatient unit) and local efforts such as the Complex Care Committee (Multidisciplinary team reviews of complex patients) and other systems as they arise. This rotation will develop an interns reflective and critical thinking skills, writing skills and navigation of systems/organizations.

Other Training Opportunities Across Rotations:

Evidenced Based Therapies: Interns have the unique opportunity to be exposed to other evidenced based therapies implemented on their rotations. The following is a list of Evidenced Based Therapies currently utilized by psychologists with provider status in that specific modality.

Cognitive Processing Therapy (CPT): CPT is a manualized, cognitive-behavioral, time-limited (12-17 weeks) treatment approach for trauma related symptoms. This therapy is provided in both individual and group therapy formats.

Prolonged Exposure Therapy (PE): PE is a manualized, cognitive-behavioral time-limited (10-15 weeks) treatment approach for veterans with a diagnosis of PTSD. This therapy is provided in individual format only.

Motivational Interviewing/Motivational Enhancement Therapy (MI, MET): MI and MET are client centered therapeutic styles for eliciting behavioral change. These are used frequently with patients with Substance Use Disorders.

Dialectical Behavioral Therapy Skills Group (DBT): DBT is a manualized approach focusing on the skills of mindfulness, interpersonal effectiveness, emotion regulation, and distress tolerance.

Acceptance and Commitment Therapy (ACT): ACT uses acceptance and mindfulness processes along with commitment to behavioral change to bring about greater psychological flexibility. ACT is evidence based to treat depression and is also used for chronic pain, anxiety, psychosis and other disorders.

Cognitive-Behavioral Therapy for Depression (CBT-D): CBT-D focuses on cognitive restructuring along with behavioral activation to treat depressive symptoms. This is available in group and individual format.

Interpersonal Therapy for Depression (IPT): IPT is based on the principle that there is a relationship between the way people communicate and interact with others and their mental health. This therapy encourages the patient to regain control of mood and functioning typically lasting 12–16 weeks.

Cognitive-Behavioral Therapy for Insomnia (CBT-I): CBT-I focuses on cognitive restructuring and behavioral changes to treat insomnia. This is available in group and individual formats.

Cognitive-Behavioral Therapy for Chronic Pain: This is a manualized, time-limited (12 weeks) that focuses on CBT skills for pain management. This is available in group and individual formats.

Exposure, Relaxation, and Rescripting Therapy (ERRT): This is a manualized, timelimited (5 weeks) cognitive-behavioral therapy for the treatment of trauma related nightmares. This is available in group and individual formats.

Social Skills Training: Evidenced based treatment for veterans with severe mental illness. This is available in group format.

Integrated Behavioral Couples Therapy (IBCT): This is a couple therapy that incorporates the strategies of behavioral couple therapy with new strategies for promoting acceptance in couples. Studies indicate that IBCT is an effective intervention for reducing marital distress and improving relationship satisfaction.

SUPERVISION

The EOVAHCS has an active training team with 17 licensed doctoral level psychologists available as supervisors for the internship program. All supervisors have regular and weekly times for individual supervision. All Interns have at least two individual supervisors throughout the course of the year (Assessment, Rotation) and meet one hour per week with EBP supervisor for group supervision, one hour per week for assessment group supervision, and one hour per week with Training Director or Associate Training Director for group supervision. Thus a *minimum* of two hours of face-to-face individual supervision and three hours of group supervision is provided each week by a licensed psychologist. Further, Interns participate in direct observation and feedback, modeling, case review, co-treatment with a supervisor, treatment team meetings, team huddles and "as needed" consultation (with supervisors, other psychology staff, and treatment team staff).

SUPERVISION OF PRACTICUM STUDENTS

Interns can gain experience supervising practicum students in individual and group formats throughout the year. This experience is supervised, and the intern is provided with formalized instruction and guidance to build this competency area. Group supervision starts at the beginning of the year. Using a competency-based supervision framework, interns guide junior practicum students through self-reflective exercises in topic areas related to working with diverse patient populations. Group supervision is intended to be experiential with the use of role play and case vignettes to improve trainees capacity for self-reflection and awareness of diversity related issues. Group supervision will take place twice per month and two Interns will cofacilitate each supervision session. A licensed psychologist will be responsible for reviewing group umbrella supervision through live

observation at a minimum of 1 time every 6 months. The supervising psychologist will also review the supervision session in the intern's individual and group supervision.

Individual umbrella supervision, if it occurs, will likely begin at midyear. The midyear start ensures interns have adapted to the setting, training environment and completed supervision didactics and readings. During the spring and/or summer of the training year, interns, if deemed developmentally prepared, will provide supervision to practicum students for psychological assessment. Assessment supervision will be conducted both individually and, in a group setting to facilitate high quality practice with interviewing, chart review, test selection, administration, scoring, interpretation, report writing and providing feedback. Licensed psychology supervisors will provide umbrella supervision weekly throughout the process.

INTERN DIDACTICS

EOVAHCS Didactic Seminar takes place weekly for the duration of the training year and covers a broad range of topics addressing specific competencies and multiple roles of the contemporary psychologist. Didactics and seminars are coordinated by training leadership and focus on multicultural/diversity considerations, ethics, professional development, supervision, empirically based treatments, and psychological assessment. Didactics are provided by psychology staff, community partners, consultants, presentations by interns. Additionally, Behavioral Medicine Service holds monthly staff meetings, professional development and case consultation meetings. Our psychology discipline also holds a Quarterly Psychology Seminar which is a full afternoon of education. Further, the VA provides a variety of trainings throughout the year that are available for interns to attend based on interest and approval from their supervisor and Training Director.

DIVERSITY SEMINAR AND GROUP PROJECT

The Diversity Seminar and Group Project strives to foster and encourage a life-long practice of professional multicultural competence. The interns and Group Project Coorinator(s) work to embrace the idea of cultural humility and develop a process of openness, self-reflection and ongoing professional and personal development. Aspects of the project include: participation in culturally considerate supervision, delivery of culturally competent clinical interventions, encouragment of reflection on cultural identity and cultural interactions in professional spaces through personal reflective practice, group discussion, and facilitation of experiential encounters that increase awareness of cultural identity and interactions, as well as knowledge of a cultural group.

As part of the diversity seminar, interns will create individual and group presentations. First, each intern will present on an aspect of diversity in a formal presentation and facilitate discussion. The individual presentation could highlight an experiential project, deep self-reflection, or exploration of a particular case and all will include relevant research/literature. In the later part of the training year, interns present as a group on a

topic of their choosing, related to diversity, as part of the quarterly psychologist training seminar.

CONTINGECNY PLANNING FOR COVID-19 PANDEMIC

The COVID-19 pandemic has created numerous personal and professional challenges for us all. One of these challenges is uncertainty about what will happen next week, next month, or throughout the year. The EOVAHCS Internship has made every attempt and will continue to work hard to ensure interns have meaningful training experiences in spite of difficulties associated with the pandemic. We strive to be transparent at all times; however, we are not able to predict how specific rotations or training opportunities may evolve during the year.

Interns are trained on all telehealth modalities, policies, procedures, assessment and treatment during orientation. These procedures are to be fully implemented in the event quarantine measures are engaged due to the COVID-19 or other health pandemic. All orientation activities, didactics, and supervision can be provided via virtual means if needed. Interns are provided with VA laptops which enable them to log onto the EOVAHCS network remotely.

The EOVAHCS has the ability, if necessary, transition all psychology trainees to full-time telework while maintaining virtually all training activities without significant disruption. Specifically, trainees continue to see veterans via telehealth for individual therapy, group therapy and limited assessment. Interns continue attending and participating in didactics and supervision via virtual media technologies, and engage in live, direct observation of clinical care by supervising psychologists.

Direction to work from home is a decision that will be made with consultation from training program and facility leadership and the Designated Education Officer. Note: Interns are considered paid employees of the VA for the internship year and are expected to follow policies that apply to VA staff during the COVID-19 pandemic. Further, interns must be deemed competent to provide telehealth care from home by supervisors prior to this being an option. Supervisors will work to conduct a minimum of 2 live observations of telehealth sessions during the first six weeks out of orientation in addition to testing knowledge of telehealth policy during supervision to ensure competence.

The training program is still exploring options for virtual/remote psychological testing if in person operations are suspended during the training year; however, the training committee is committed to ensuring the interns participate in activities to ensure assessment competency is met. However, the health and safety of our Psychology Trainees and competent care of our nation's veterans, is of utmost importance to us. We will continue to provide high quality training in professional psychology while simultaneously keeping our trainees' health and wellness at the forefront.

STIPEND APPOINTMENT - DOCTORAL PSYCHOLOGY INTERNSHIP

The current stipend for full-time VA Interns is \$33,469 paid biweekly throughout the annual appointment period. Currently, this stipend is subject to Federal Income Tax withholding. Recent changes have now mandated that Interns be classified as full-time employees, making them eligible for health insurance benefits. Interns are not eligible for participation in VA retirement programs.

The Internship is a full-time, one-year appointment and will start on Monday, July 29th, 2024. Under the federal sick leave/annual leave program, Interns accrue 4 hours of paid sick leave and 4 hours of paid annual leave (vacation) every 2-week pay period. This equates to approximately 13 days of sick leave and 13 days of annual leave over the course of the Internship year. Interns are also allowed to take to up to three days of paid Authorized Absence (AA). This time can be used for post doc or job interviews, returning to their academic program for meetings related to dissertation or research, graduation ceremony, or educational activities of interest such as conferences that are not a part of the internship program. These days can only be used with prior supervisor and TD approval. In addition, there are 11 Federal Holidays. Leave may not be used as an extended block during any one rotation. Instances in which the one-year period needs to be extended because of illness or other extenuating circumstances will be addressed individually by the Training Committee. Any approved extension of the one-year training period would occur without funding.

APPLICATIONS

Applicant Eligibility:

Applicants for Internship must have advanced standing in a clinical or counseling psychology doctoral program accredited by the American Psychological Association. We do not review applications of students from programs currently on probationary status with APA. All applicants must receive the written endorsement of their program Training Director as having completed all departmental requirements for Internship eligibility. This is expected to include all coursework and qualifying examinations with at least initial progress toward the dissertation/research project. Applicants should have a reasonable certainty of completing all requirements for the doctorate including dissertation defense, within one year following the start of the internship. Applicants should have at a minimum 50 supervised hours of assessment experience and 250 supervised hours of intervention experience.

The Eastern Oklahoma VA Healthcare System is an Equal Opportunity Employer and encourages applications from members of minority and non-traditional groups.

If selected, the Federal Government requires male applicants to VA positions who were born after 12/31/59 sign a Pre-appointment Certification Statement for Selective Service Registration before they are employed. Male applicants are required to have registered with the Selective Service System before the age of 26. All interns will complete a Certification of Citizenship in the United States prior to beginning the internship. We cannot consider applications from anyone who is not currently a U.S. citizen. Interns are subject to fingerprinting and background checks. Match result and selection decisions are contingent on passing these screens. The VA conducts drug screening exams on randomly selected personnel as well as new employees. Interns are not required to be tested prior to beginning work, but once on staff, they are subject to random selection as is all other clinical staff.

APPLICATION PROCESS

Our program is using the APPIC Application for Psychology Internship (AAPI) to enable you to complete one application for all sites that are participating in the APPIC uniform application process. The AAPI is available through the APPIC web site. Please go to the APPIC web site at www.appic.org for more information about accessing and completing the online application.

Please be aware that the "Academic Program's Verification of Internship Eligibility and Readiness" form must be submitted **ELECTRONICALLY** to the Internship site by your graduate Director of Clinical Training. Instructions regarding this part of the application process are contained in the online AAPI. No mail or email application materials will be accepted Applicants are encouraged to complete the application as early as possible so that ample time will be available for application review.

For any questions please contact:

Arena M. Mueller, PsyD Interim Training Director Arena.mueller@va.gov 918.610,2000

Jordan Heroux, PhD Associate Training Director Jordan.heroux2@va.gov 918.610.2000

For your application to be complete, we must receive the following materials through APPIC by 8am on November 13th, 2023.

- Online APPIC Application for Psychology Internship (AAPI)
- Your Curriculum Vitae—to be submitted as part of AAPI
- Three letters of recommendation—to be submitted as part of AAPI
- Graduate school transcripts—to be submitted as part of AAPI
- Your Academic Program Verification of Internship Eligibility and Readiness Form—to be submitted by your Director of Clinical Training as part of AAPI
- Cover letter (no longer than two pages) addressing how your experiences to date and current career goals make you a good fit for the training offered at EOVAHCS and emphasizing rotations of interest
- Should you choose, you may also identify representation with an element of diversity in your cover letter

All applications will be reviewed by a selection committee comprised of the Director and Associate Director of Training along with at least two other training committee members. We will attempt to have applications reviewed by training staff that are a part of the applicant's identified rotations of interest. Applications are evaluated across several criteria including: grade point average, dissertation status, awards, scholarly activity, professional activities, experience with evidence based intervention and assessment, strength of letters of recommendation, quality of written application materials, and goodness of fit with the program goals and objectives. All things being equal, consideration is given to applicants representing elements of diversity, including, but not limited to, age, disability, ethnicity, gender identity, language, national origin, race, religion, culture, sexual orientation, social economic status, and military service.

Applicants who are selected for interview will be invited by email no later than December 11, 2023. Interviews will be virtual and occur on the following dates: **December 20, 2023 January 9, 2024; and January 11, 2024.** Interviews will include a group meet-and-greet, overview of the program with training director and associate training director, a group panel of supervisors providing information on rotations, Q&A with current interns and two individual interviews with training faculty. Interview day is scheduled from 8am to 4:30pm CST. Requests to meet with specific staff are welcome.

Policies and procedures regarding internship offers and acceptance recommended by the APPIC and the Council of Directors of Clinical Training Programs will be followed for the appointment of Interns to the Eastern OK VA Healthcare System's Psychology Internship Training Program. The 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 prior to Uniform Notification Day.

Trainee Qualifications and Credentials Verification Letter (TQCVL)

Once selected for an internship position, in order to qualify for VA training, each intern must first be listed on a Trainee Qualifications and Credentials Verification Letter (TQCVL). A TQCVL from the director of the sponsoring (VA or non-VA) program must be submitted to the VA Facility Director through the VA Designated Education Officer (DEO) prior to onboarding. The TQCVL confirms that specific information has been verified by the sponsoring entity for each trainee listed. All trainees who will receive training at a VA facility must be listed on a TQCVL.

The TQCVL confirms that an intern is:

- Enrolled in or accepted into the accredited training program and has had primary source verification of appropriate qualifications and credentials as required by the admission criteria of the training program;
- Qualified, and has the required credentials, to participate in the accredited training program as agreed to by the sponsoring institution, affiliated participating institutions, and the VA;
- Compliant with all US citizenship or immigration and naturalization laws and therefore suitable to be appointed to a Federal Government position; and
- Meets the essential functions (physical and mental) of the training program and immunized following current CDC guidelines and VHA policy for healthcare workers to protect themselves, other employees and patients while working in a healthcare facility.

Internship Program Admissions

Date Program Tables are updated: August 2023

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

Eastern Oklahoma VA Psychology Training Program prioritizes goodness of fit for intern goals, areas of needed growth and training opportunities. The primary goal is provision of high-quality generalist training using evidenced based therapies and assessments. The Scholar-Practitioner model is the foundation philosophy and prepares interns as well-rounded, evidence informed, ethical and culturally aware clinicians.

The integration of research, practical experience and client preference is essential in the development of professional competency. Therefore, emphasis is placed on learning evidence-based practices, research-based programming, and application of science into practice such that interns grow and develop strong skills in critical thinking, conceptualization, and problem-solving skills.

All things being equal, consideration is given to applicants representing diversity varibles, including, but not limited to, age, disability, ethnicity, gender identity, language, national origin, race, religion, culture, sexual orientation, social economic status, and military service (please also refer to Application Process above).

Does the program require that applicants have received a minimum number of hours of the following at time of application? If Yes, indicate how many:		
Total Direct Contact Intervention Hours	Amount: 250	
Total Direct Contact Assessment Hours	Amount: 50	

Describe any other required minimum criteria used to screen applicants:

Our internship seeks students from APA accredited Ph.D. or Psy.D. clinical or counseling programs who are in good standing. Applicants must have competed at least 3 years of academic study, have completed their comprehensive/qualifying exams and proposed their dissertation.

Financial and Other Benefit Support for Upcoming Training Year*

Annual Stipend/Salary for Full-time Interns	\$33,469.00	
Annual Stipend/Salary for Half-time Interns	N/A	
Program provides access to medical insurance for intern?	Yes	No
If access to medical insurance is provided:		
Trainee contribution to cost required?	Yes	No
Coverage of family member(s) available?	Yes	No
Coverage of legally married partner available?	Yes	No
Coverage of domestic partner available?	Yes	No
Hours of Annual Paid Personal Time Off (PTO and/or Vacation)	10)4
Hours of Annual Paid Sick Leave	104	
In the event of medical conditions and/or family needs that require extended leave, does the program allow reasonable unpaid leave to interns/residents in	Vas	Na
excess of personal time off and sick leave? Other Benefits (please describe): federal holidays (11), professional development	Yes	No
Other Benefits (picase describe). Tederal Holidays (11), professional development	i cicase time	

^{*}Note. Programs are not required by the Commission on Accreditation to provide all benefits listed in this table (Provide an Aggregated Tally for the Preceding 3 Cohorts)

	2020-2023	
Total # of interns who were in the 3 cohorts	0	
Total # of interns who did not seek employment because they returned to their doctoral program/are completing doctoral degree		
	PD	EP
Community mental health center		
Federally qualified health center		
Independent primary care facility/clinic		
University counseling center		
Veterans Affairs medical center	3	2
Military health center		
Academic health center	1	1
Other medical center or hospital		
Psychiatric hospital		
Academic university/department	1	
Community college or other teaching setting		
Independent research institution		
Correctional facility		1

School district/system		
Independent practice setting	2	
Not currently employed		
Changed to another field		
Other		
Unknown		

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

EOVAHS PSYCHOLOGY TRAINING STAFF: (listed in alphabetical order)

EOVAHSC Psychology Internship Training Committee

CHRISTOPHER ALLEN, PH.D.

Oklahoma State University, 2017 Licensed Psychologist- Oklahoma General Mental Health Team LGBTQ+ Coordinator

Dr. Allen completed a Master's degree in School Guidance Counseling with certification as a Licensed Professional Counselor at Southwestern Oklahoma State University in 2010 and a doctorate in Counseling Psychology in 2017. Dr. Allen joined Southwestern Oklahoma State University faculty as a staff clinician, providing therapy to adjudicated males in a group home adventure program. Dr. Allen completed post-doctoral work with OU Health Science Center in primary care with an emphasis in child abuse and neglect. Dr. Allen joined the staff at Oklahoma City Indian Clinic as a therapist and moved on to do private practice in Norman, Oklahoma, working with the LGBTQ+ population prior to joining the Eastern Oklahoma VA Healthcare system in 2020. He is currently providing individual and group therapy with a special emphasis on LGBTQ+ mental healthcare and serving as the LGBTQ+ Veteran Care Coordinator. Dr. Allen also has a specialty clinic providing EMDR therapy.

ANN BATCHELER, PH.D.

Oklahoma State University, 2009 Licensed Psychologist- Oklahoma BHIP Supervisor General Mental Health Team

Dr. Batcheler graduated from Oklahoma State University in 2009 with a Ph.D. in Counseling Psychology. Her studies emphasized cultural diversity and social justice and her dissertation assessed implicit attitudes toward gays and lesbians. She completed her pre-doctoral internship at the University of Idaho. Dr. Batcheler holds B.S. and M.S. degrees in Physical Education from Texas A&M University and an M.A. In Counseling Education from Sam Houston State University. Her post-doctoral background includes multidisciplinary interventions with families who have lost custody of their children due to substance abuse issues. She also worked with developmentally delayed adolescents and their families in a residential treatment program. She joined the Jack C. Montgomery VAMC in 2015 as an outpatient general psychologist, addressing a wide spectrum of mental health issues. Additional clinical responsibilities include providing psychological evaluations for candidates for bariatric surgery and organ transplants.

CHARLENE BELL, PH.D.

Palo Alto University, 2019 Licensed Psychologist – Kansas Psychologist Women's Mental Health/Sexual Trauma Treatment Team

Dr. Bell received her Ph.D. in clinical psychology from Palo Alto University in California in 2019. While at Palo Alto University, her research focused on interpersonal trauma, self-efficacy, and empowerment and resilience. She developed an empowerment self-defense program as a therapeutic intervention for homeless women in transitional housing who had experienced interpersonal trauma, which she provided consultation on until the program became a permanent service offering in the Behavioral Department. Dr. Bell completed her predoctoral internship and postdoctoral training at the Eastern Oklahoma VA Healthcare System. She joined the staff as a licensed Psychologist in the Women's Mental Health and Military Sexual Trauma Clinic in 2021. She has provider status for Cognitive Processing Therapy for PTSD, Interpersonal Therapy for Depression, Cognitive Behavioral Therapy for Insomnia and Acceptance Commitment Therapy for Depression.

PATRICIA M. BYRD, PH.D.

University of Tulsa, 2009 Licensed Psychologist – Oklahoma

Women's MH /MST Program Manager Regional CPT Trainer/Consultant

Dr. Byrd received her Ph.D. in clinical psychology from the University of Tulsa in 2009. While at the University of Tulsa, she was a research lab manager for the Trauma Research: Assessment, Prevention, and Treatment Center with primary responsibilities focusing on managing randomized controlled trials involving Exposure, Relaxation, and Rescripting Therapy which is an evidenced based treatment for trauma related nightmares. Dr. Byrd completed her internship at the Federal Bureau of Prisons FCI in Fort Worth, TX. She worked after internship for the Federal Medical Center Carswell, in Fort Worth, TX as a Drug Treatment Specialist and the Suicide Prevention Coordinator working with federal women inmates. Dr. Byrd joined the staff at the EOVAHCS in 2013 as the PTSD/SUD Psychologist. She became the Military Sexual Trauma Coordinator in 2014 and created an evidenced based outpatient treatment program for male and female veterans who have experienced sexual trauma. Dr. Byrd received Practicum Student Supervisor of the year from the University of Tulsa in 2016.

PETER C. CIALI, Ph.D.

Oklahoma State University, 2006 Licensed Psychologist – Oklahoma Home Based Primary Care National CBT-D Consultant

Dr. Ciali received his Ph.D. in counseling psychology from Oklahoma State University in 2006. He completed his clinical internship at Sharp Mesa Vista Hospital in San Diego, CA in 2005, with an emphasis in cognitive behavioral therapy. Dr. Ciali began his career in private practice and he joined the staff at the Jack C. Montgomery VAMC in 2009. He serves as a VACO national consultant in Cognitive Behavioral Therapy depression.

DIANE GENTHER, PH.D.

University of Kansas, 2012 Licensed Psychologist – Oklahoma General Mental Health Team

Dr. Genther received her Ph.D. in counseling psychology from the University of Kansas in 2012. She completed her internship at the White River Junction VA Medical Center, which provided a dual-focused training model in dynamic and cognitive-behavioral treatment modalities. The White River Junction VA Medical Center houses the National Center for PTSD headquarters, and her internship also included subspecialty training in the assessment and treatment of PTSD through partnership with the National Center. Following internship, Dr. Genther worked as a staff psychologist in university counseling, where supervision of practicum students and interns constituted a significant portion of her work. She returned to the VA Health Care System in 2015, and in her current position, works exclusively in Telemental Health through the General

Mental Health Clinic, treating veterans at the Vinita CBOC. She is also a supervisor for the Rural Telemental Health rotation. Her clinical approach is collaborative and integrative, borrowing from dynamic and cognitive-behavioral schools of thought to best address the needs of the individual veterans with whom she works. She has recently completed the Interpersonal Therapy for Depression VA Training Program and is excited to offer supervision in this particular EBP for interns who are interested. Her supervision approach is developmental and tailored to the specific training needs and goals of her supervisees.

LEAH HALL, PH.D

University of Minnesota, 2015 Licensed Psychologist – Oklahoma Coordinator, Eating Disorder Team Women's Mental Health/Sexual Trauma Treatment Team

Dr. Hall is a graduate of the University of Minnesota Clinical Science and Psychopathology Research Program, where her research focused on the use of functional MRI methods to 60 investigate neural correlates of eating disorders and major depressive disorder. Dr. Hall completed her doctoral internship at the Jesse Brown VAMC in Chicago, IL where clinical training emphasized psychological assessment as well as evidence based treatment for PTSD, substance use disorders, and anxiety disorders. Dr. Hall joined the staff at the EOVAHCS in 2015 and is currently working with the VA's Office of Women's Mental Health as a faculty member with the Multidisciplinary Eating Disorder Treatment Initiative. She is also a VA certified provider in the delivery of DBT, PE, CBT-D, ACT-D, CPT, and RISE.

JORDAN HEROUX, PH.D.

University of Tulsa, 2016 Licensed Psychologist – Oklahoma Interim Associate Training Director Women's MH/MST Team VA National ACT Consultant/Trainer

Dr. Heroux received his Ph.D. in clinical psychology from the University of Tulsa in 2016. His primary area of specialty is diagnostic and personality assessment with an emphasis on therapeutic/collaborative assessment methods. He completed his internship at the VA Puget Sound Health Care System, American Lake Division where he trained in residential substance use, general mental health, and outpatient PTSD clinics. He also pursued postdoctoral training in VA psychosocial rehabilitation and recovery, PTSD intervention and assessment, and Residential Rehabilitation Treatment Programming (RRTP). Dr. Heroux's theoretical orientation is primarily behavioral, and he often integrates second and third wave cognitive-behavioral perspectives, client-centered motivational and values considerations, and appreciation for adaptive personality traits in his case formulation and intervention. He has provider status in Acceptance and Commitment Therapy (ACT), Prolonged Exposure (PE) Therapy,

Social Skills Training (SST). He is a national consultant and trainer for Acceptance Commitment Therapy for Depression.

STEVEN KNIGHTEN, PSY.D.

Forest Institute of Professional Psychology, 2012 Licensed Psychologist - Missouri SUD Clinical Team, with PTSD emphasis

Dr. Knighten completed his Master's degree in Counseling Psychology at Northeastern State University in 2005 and his doctorate in Clinical Psychology at Forest Institute of Professional Psychology in 2012. His pre-doctoral internship was at the La Frontera Psychology Consortium in Tucson, AZ where his main concentration was at the University of Arizona working with students with learning disorders, with additional rotations in substance use disorder treatment and psychological testing. Dr. Knighten started at the Waco/Central Texas VA in 2017 as the lead for the substance abuse treatment program. In 2019 he transferred to the Stillwater, OK clinic under the Oklahoma City VA where he was the first in person mental health therapy provider. Dr. Knighten transferred to the Tulsa/EOVAHCS clinic in 2021 to become the new SUD/PTSD Psychologist. He has a special interest in Cultural Diversity issues including advocating for marginalized populations, and he is a member of the Tulsa VA BMS Multicultural Committee. Dr. Knighten is a US Army Veteran and enjoys working to serve his fellow Veterans.

MEGAN MCARTHUR, PSY.D.

Wheaton College 2019 Licensed Clinical Psychologist – Colorado Graduate Medical Education (GME) Expansion Project Director Neuropsychologist

Dr. McArthur began working at the Eastern Oklahoma VA Health Care System in 2020 in a liaison role dedicated to improving interprofessional clinical training and academic affiliate relations. She conducts neuropsychological assessment and is engaged in assessment supervision. She completed a Doctor of Psychology degree with a concentration in Neuropsychology at Wheaton College near Chicago in 2019, followed by a postdoctoral fellowship in Clinical Neuropsychology at the consortium of University of Oklahoma Health Sciences Center and Oklahoma City VA Health Care System. Prior to completing her graduate studies, Dr. McArthur was employed by the Veterans Benefits Administration and made rating decisions on veterans' claims for service-connected disability benefits. She was previously employed in an inpatient psychiatric unit and in group homes for adults with developmental disabilities in Cleveland, Ohio. Her research interests include the impact of emotional trauma on development and cognition and the person-centered application of neuropsychological recommendations.

MICHAEL MCKEE, PH.D.

Oklahoma State University, 2003 Licensed Psychologist, Oklahoma & Kansas BHIP Supervisor General Mental Health Team

Dr. McKee has been with the VA for three years and works in General Mental Health. His specialty is CBT for chronic pain patients. He is also trained in CPT for veterans with PTSD. Due to his extensive background in working with incarcerated and court ordered populations, he is often referred patients with anger management problems. Dr. McKee received his Ph.D. in Counseling Psychology from Oklahoma State University (2003) and a Master's Degree in Community Counseling from the University of Oklahoma (1986). His undergraduate degree is from Southwest Missouri State University with an emphasis in communication and religious studies. Dr. McKee's focus in graduate school was the relationship of negative self-schemas to partner attachment styles among male batterers. His previous work experiences include call-in chaplain for Norman Regional Hospital, volunteer chaplain for the support group Parent's Responding to Infant Death Experience, program director for MENder's court ordered anger management program, therapist and student supervisor on the residential sex offender treatment program at Joseph Harp Correctional facility, and program director and group therapist for court ordered substance abuse patients at Prairie View, Inc. in McPherson, KS.

Patrick McNeely, PSY.D.

The Institute for Psychological Sciences
Divine Mercy University, 2022
Licensed Psychologist – Alabama
Staff Psychologist – Acute Psychiatric Inpatient Unit

Dr. McNeely received his Psy.D. in clinical psychology at Divine Mercy University in Sterling, VA in August 2022. He completed the Acute Psychiatric Inpatient, Psychosocial Rehabilitation and Recovery Center, Evidence Based Practice (CBT-I & CPT), and Psychological Assessment rotations during his clinical internship at the Eastern Oklahoma VA Healthcare System (EOVAHCS). Dr. McNeely's doctoral research focused on spiritual recovery from Moral Injury in Combat Veterans. He is licensed in the state of Alabama and joined the team as a staff psychologist on the acute psychiatric inpatient unit at the Jack C Montgomery VA Hospital as well as serving on the psychology internship training committee. Dr. McNeely immigrated from Quebec, Canada to Nebraska with his family at the age of 4. In his spare time, he enjoys spending time with his family, BBQing, watching Nebraska Football, and exploring Oklahoma.

ARENA MUELLER, PSY.D.

Adler School of Professional Psychology 2006
Licensed Clinical Psychologist – Ohio
Licensed Clinical Professional Counselor- Illinois
Local Recovery Coordinator
Interim Director of Training
VA National ACT Consultant/Trainer

Dr. Mueller completed a Master's Degree with emphasis in substance use disorder at the University of Missouri-Kansas City in 2000 and doctoral work at the Adler School of Professional Psychology in Chicago in 2006. Dr. Mueller worked as a psychiatric emergency therapist in community hospital emergency rooms in the greater Chicago area and responded to the aftermath of the 2008 shooting at Northern State University in Illinois. Dr. Mueller has worked for University Counseling Centers in Missouri, Texas and Ohio where supervision of practicum students and interns was a major responsibility. In 2009 she began working at the Eastern Oklahoma VA Healthcare system where she has held roles that included the treatment PTSD, Substance Use Disorders and serious mental illness. Dr. Mueller holds faculty status at the University of Tulsa and Oklahoma State University. In her free time she researches and write about the history of homes in her midtown Tulsa neighborhood.

HEATHER RANGER KOBEL, PH.D.

Oklahoma State University, 2002 Licensed Psychologist – Oklahoma Home Based Primary Care Psychologist

Dr. Ranger Kobel works as a clinical psychologist and staff psychologist in the Home Based Primary Care Program. She received her Master's degree in Clinical Psychology from Emporia State University in 1998. Dr. Ranger Kobel joined the United States Air Force in 2001 and completed her residency in Clinical Psychology at Wilford Hall Medical Center, Lackland Air Force Base, Texas in 2002. That same year, she graduated with her Ph.D. from Oklahoma State University. Upon completion of her Air Force residency program, Dr. Ranger Kobel served four additional years as an Air Force Clinical Psychologist. Upon completion of her service in the Air Force in 2006, Dr. Ranger Kobel worked in private practice and as an adjunct professor at Oklahoma State University. In 2007, she was hired as an Outpatient Clinical Psychologist at The Eastern Oklahoma VA Healthcare System. Dr. Ranger Kobel served in that capacity until March of 2016, at which time she joined the Home Based Primary Care team. She also continues to maintain a private practice and has acted as a clinical supervisor for doctoral practicum students for Oklahoma State University.

ALYSSA RIPPY, PH.D.

University of Tulsa, 2007 M.A. Industrial Organization Psychology Licensed Psychologist – Oklahoma PRRC Program Coordinator

Dr. Rippy serves as the Program Coordinator of the PRRC, based at the Behavioral Medicine Clinic in Tulsa. She provides evidence based therapeutic interventions to Veterans with severe mental illness within a recovery-based framework. Prior to working with the PRRC, she served as the Program Coordinator for the Acute Psychiatric Unit at the Jack C. Montgomery VAMC. Dr. Rippy was recognized by the University of Tulsa with an award for *Excellence in Clinical Supervision* in 2012. She has coordinated the psychology practicum program for seven years and has provided individual supervision to pre-doctoral students as well as VA Psychologists who are under supervision for licensure. Dr. Rippy has focused the majority of her research on the relationship between PTSD and increased paranoia among combat Veterans as well as examining the effects for perceived discrimination on mental health.

JOHNNA SMASAL, PH.D.

University of Tulsa, 2006 Licensed Psychologist – Oklahoma Intimate Partner Violence Assistance Program Coordinator Women's MH/MST Team

Dr. Johnna Smasal earned her Ph.D. in Clinical Psychology from the University of Tulsa in 2006. Dr. Smasal completed her pre-doctoral internship at Northeastern Oklahoma Psychology Internship Program and worked in private practice with special emphasis on trauma related evaluations and interventions. She served as Director of Operations for a children's residential program in the Tulsa area. She has a strong background in supervising postdoctoral residents and pre-doctoral interns. She recently joined the team in December of 2018 and is developing the Intimate Partner Violence Assistance Program.

RIVER SMITH, PH.D.

University of Tulsa, 2008 Licensed Psychologist – Oklahoma Associate Director of Training PTSD Clinical Team CBT-I Consultant

Dr. River Smith earned her PhD in Clinical Psychology from the University of Tulsa in 2008. Dr. River Smith completed her pre-doctoral internship and postdoctoral fellowship in Primary Care Mental Health at the University of Oklahoma Department of Psychiatry and Behavioral Sciences as VA funded trainee. Her clinical and research interests are

in the area of combat stress, risk, resilience and PTSD. She has worked on the Posttraumatic Stress Disorder Clinical team serving Iraq and Afghanistan veterans at this facility since 2009. She is certified in Prolonged Exposure Therapy, Cognitive Processing Therapy and Cognitive Behavioral Therapy for Insomnia.

ELISE BERRYHILL TAYLOR, PH.D.

University of Oklahoma - 1998 Licensed Clinical Psychologist - Oklahoma Program Manager Substance Use Disorder and Veterans Treatment Court CBT-SUD Consultant

Dr. Taylor is responsible for the management of the EOVAHCS Veterans Treatment Court Program (third program in the Nation and one out of four mentor courts in the Nation). The Veterans Treatment Court provides training to other court systems and VA programs seeking to develop their own Veterans treatment court. She supervises the justice outreach activities of the Readjustment Counselor/VTC Liaison and Veterans Justice Outreach Coordinator positions. In addition to the justice programs, Dr. Taylor manages the Substance Use Disorder program. These services include an intensive outpatient program, residential and detoxification services, outpatient/aftercare, intake and assessment, medications, Buprenorphine/Suboxone clinic, SUD/PTSD services, education, individual, family and group treatment, and case management as well as consultative services to the medical and psychiatric inpatient programs at the Medical Center. She has been employed with the VA since 2005.

Prior to her VA service, Dr. Taylor was the Clinical Director for the Muscogee (Creek) Nation Behavioral Health and Substance Abuse Services for eight years. Her specialty areas include child/adolescent mental health, American Indian identity and acculturation issues, and addiction. She belongs to the Eco (Deer) Clan and Ocevpofa (Hickory Ground) Tribal Town. She has also worked with Alaska Natives, New Mexico Pueblo tribes and Dine'. She is married to a Tribal Veteran and has two sons.

David Webster, Ph.D.

University of Nebraska-Lincoln – 2002 Licensed Counseling Psychologist - Arkansas Psychology Section Chief

Dr. Webster is a counseling psychologist holding professional licensure in Arkansas. Dr. Webster completed his doctorate (2002) in counseling psychology at the University of Nebraska-Lincoln; Masters of Arts (1997) in community counseling at the University of New Hampshire Durham; Masters of Divinity (1981) at Gordon-Conwell Theological Seminary; and, Bachelors of Science in psychology (1975), Cumberland College. Dr. Webster's professional background has been diverse to include several years as a child and family staff psychologist in Fort Smith, Arkansas; several years working with military populations including active duty Soldiers with the Department of Defense (army) at both Fort Wainwright, Alaska and Fort Stewart, Georgia and veterans at the Fairbanks

Veterans Center in Fairbanks, Alaska and now presently at the Eastern Oklahoma VA Healthcare Systems (EOVAHCS), and finally as program director of the Ph.D. program in clinical-community psychology at the University of Alaska Fairbanks. Primary clinical interests focus on treating psychological trauma, traumatic grief, and moral injury.

ASHLEY WOODS, PH.D.

University of Alaska Fairbanks/Anchorage-2018 Licensed Psychologist-Oklahoma Primary Care Mental Health Integration Psychologist

Dr. Woods received her Ph.D. in clinical-community psychology with a rural indigenous people's emphasis from the University of Alaska Fairbanks/Anchorage joint program in 2018. Dr. Woods completed her post-doctoral residency at the University of Oklahoma Health Science Center. During her post graduate work, she provided integrated healthcare services at the Oklahoma City VA south clinic and OU Children's Hospital. Dr. Woods has experience in pediatric psychology, trauma-focused CBT for children/youth, and child abuse prevention/intervention. She completed her internship with Community Health of Central Washington in Yakima. Her clinical internship included integrated healthcare practice emphasizing the Primary Care Behavioral Health model, focused acceptance and commitment therapy (FACT), and health behavior change. Dr. Woods' primary research and clinical interests include theory and application of contextual psychotherapies, disparities in health, culturally specific definitions of pathology and wellness, and systems theory.