2024

St. Cloud VA Health Care System Match Number 238311



Himrich, Stephany J. & Bosowski, Andrea, C.

Psychology

Internship

Program

1/1/2024

Table of Contents

General Description of St. Cloud VA Health Care System (HCS)	3
St. Cloud VA Psychology Department	4
Local Information	5
Accreditation Status	6
Application & Selection Procedures	6
Requirements for Completion of Doctoral Internship	9
Training Stipend and Benefits	9
Administrative Policies and Procedures	10
Program Aims, Goals and Objectives	10
Training Model and Program Philosophy	11
Commitment to Diversity	13
Orientation	14
Core Activities	14
Cloud VA Psychology Department	14
Interprofessional Training Experiences	
Clinical Supervision and Evaluation of Progress	16
Supervision	16
Evaluation	16
Mentorship Opportunity	16
Research	17
Research/Administration Time	
Description of Rotations	17 1
	rs. VA does not

Mental Health Residential Rehabilitation Treatment Program (MH RRTP)	17
Health Psychology (Primary Care Mental Health Integration)	18
Outpatient Mental Health Clinic	
Acute Psychiatric Inpatient Unit	19
Building Bridges/Psychosocial Rehabilitation and Recovery Center (PRRC)	20
General Psychological Assessment	20
Leadership and MH Administration	21
Structure of Rotations During the Internship Year	21
Innovative Opportunities	22
Impact of COVID-19 on Training	22
Training Resources	23
Sample List of Didactic Topics	23
Internship Training Staff	23
Previous Internship Classes	
Post-Internship Placements/Employment	27
Tips for Potential Internship Applicants	19 19 19 19 10 11 11 11 11 11 11 11 12 11 12 11 12 11 12 11 12 11 12
Internship Admissions, Support, and Initial Placement Data/Program Tables (APA	<u>A)</u> 30
Internship Program Admissions (APA)	30
Financial and Other Benefit Support for Upcoming Training Year (APA)	31
Initial Post-Internship Positions (APA)	32
Eligibility Requirements for Psychology Trainees in VA	
Activities/Attractions in the St. Cloud Area	



Psychology Internship Program St. Cloud VA Health Care System 4801 Veterans Drive St. Cloud, MN 56303 (320) 252-1670/800-247-1739 www.stcloud.va.gov

> MATCH Number: 238311 Applications Due: November 15, 2024

General Description of St. Cloud VA Health Care System (HCS)

St. Cloud VA Health Care System (HCS) provides medical care to Veterans from Minnesota, northern Iowa, northwestern Wisconsin, and eastern North and South Dakota. The Health Care System delivers care to more than 39,500 unique patients annually in the Upper Midwest region. Sixty percent of our total Veteran workload is over the age of 66. Our facility also has three Community Based Outpatient Clinics (CBOCs) located in Alexandria, Brainerd, and Montevideo, Minnesota. Over 11,500 Veterans are enrolled for care in the three CBOCs. Our local facility and surrounding Community-Based Outpatient Clinics serve a large percentage of rural Veterans. Approximately 76% of our enrollees reside in rural areas.

Services include programs such as: the Outpatient Mental Health Clinic, Primary Care Mental Health Integration (PCMHI), Psychological Assessment, Residential Rehabilitation Treatment Program (RRTP), Psychosocial Rehabilitation and Recovery Center (PRRC), Acute Psychiatric Inpatient Unit, Outpatient Substance Use Disorder (SUD) Treatment Program, Mental Health Intensive Case Management (MHICM), Homeless Programming, and Vocational Rehabilitation services. Additional mental health services can be found in the Primary and Specialty Medicine and Extended Care Services Lines. The psychology staff work closely with Patient Aligned Care Teams (PACT) and within Behavioral Health Interdisciplinary Program (BHIP) teams in the facility.

St. Cloud VA HCS is one of the highest ranked VA Hospitals in the country regarding provisional of mental health care when compared to other VA Medical Centers. The Veterans Health Administration (VHA) uses a comprehensive performance improvement tool [i.e., Strategic Analytics for Improvement and Learning (SAIL) to compare quality among VA Hospitals across the country. SAIL includes key metrics used by the private sector as well as additional metrics that are important for addressing access to care, quality of mental health care,

employee perception about the organization, nursing turnover, efficiency, and capacity. In FY2023, the St. Cloud VAHCS was a top performer nationally in measures examining quality of mental health care and treatment and continuity of care. Both of these measures represent that we engage new Veterans and, once engaged, they continue to seek services through our facility. In keeping with the highest standards of quality demonstrated at our facility, our Doctoral Internship in Health Service Psychology strives to provide interns with an exceptional training experience.

St. Cloud VA HCS was recently named as a <u>Virtual Health Implementation Center of Excellence</u> (<u>CoE</u>) by the VHA's Office of Connected Care. Our facility is committed to improving our Veterans' access to care using new technology, including use of virtual care tools. Current virtual health methods include VA's online personal health record (i.e., MyHealtheVet), telehealth programs, online scheduling, text messaging appointment reminders, VA Video Connect appointments and several clinically approved applications (Apps) for computers and smartphones.

Our facility is designated an LGBTQ Healthcare Equality Top Performer according to the Healthcare Equality Index (HEI) of the Human Rights Campaign Foundation. The HEI is a nationally recognized benchmarking tool that evaluates a healthcare facility's policies and practices related to the equity and inclusion of LGBTQ patients, visitors and employees. More information on this designation can be found at: <u>https://www.hrc.org/hei</u>

St. Cloud VA Psychology Department

The psychology service staff includes about 30 psychology positions when fully staffed, with clinicians from diverse training backgrounds as well as psychometrists. Our psychology department proudly employs several individuals who are graduates of our internship program. Psychology staff are dispersed throughout the hospital in virtually all Veteran service areas and are involved in a wide array of clinic and administrative tasks. Some accomplishments and special designations of St. Cloud VA psychologists include:

- A trainer and consultant for the National Cognitive Behavioral Therapy for Substance Use Disorders (SUD) implementation program
- A trainer and consultant for the national Primary Care Mental Health Integration (PCMHI) implementation program
- Facility Behavioral Coordinators for STAR-VA program to address disruptive behavior related to dementia
- Representatives on several committees outside of the St. Cloud facility including:
 - \circ VISN 23 SUD Workgroup
 - VISN 23 PTSD Mentor/Mentee Program
- Multiple VISN 23 Network Star Awards
- A recipient of the VA Secretary's Honor Award for I-Care

- Psychologist who developed first mental health protocol (Activity Engagement) for use with the VA Annie App; Annie SME/Superuser; Connected Care Clinical Champion
- Appointments on editorial boards of peer reviewed journals
- Appointments as ad hoc reviewers for various peer reviewed psychological/neuropsychological journals
- Principal and/or co-investigators on research projects
- Publications in various peer reviewed journals
- Presentations at national conferences
- Specialty board certifications (ABPP)
- University faculty appointments
- Clinical Educators selected as part of the Office of Academic Affiliations (OAA) Rural Interprofessional Faculty Development Initiative
- LGBTQ+ Veteran Care Coordinator for the St. Cloud VA

Local Information

Located 65 miles (one hour) from Minneapolis/St. Paul, St. Cloud is a thriving Mississippi River city with much to offer. The area is comprised of the communities of St. Cloud, Waite Park, Sartell, Sauk Rapids, St. Joseph, and St. Augusta with several other communities nearby making the area population about 125,000 people. St. Cloud has been included on many "best places" lists including Forbes, the Kiplinger 50 and Sperling's. For many residents, it's the stable economy, the caring people, and the four varied breathtaking seasons that keep them here. Manufacturing, retail, and service industries are the commercial backbone of the region, equally supported by the extensive highly productive farming and dairy professions. For people who relocate here, affordable housing, safe neighborhoods, and easy access to recreation, excellent healthcare, abundant cultural activities and excellent schools attracted them to the region. Rolling farmlands, sparkling lakes, peaceful woodlands, and nearby state parks make this a perfect place to live. Housing costs are 20 percent lower than the national average and the cost of living here is exceptionally low. St. Cloud is home to St. Cloud State University, the College of St. Benedict, St. John's University, and St. Cloud Technical College. Seven local theatres have a variety of productions throughout the year. You can learn more about St. Cloud, MN at http://www.stcloudareachamber.com or http://www.aroundthecloud.org. Other activities/attractions are listed at the end of this brochure.



Reproduced with PAT. PAT is free software. Copyright © 2010, 2013 by Ian Macky

Accreditation Status

The doctoral internship at the St. Cloud VA Health Care System is a full-time (52-week 2,080 hours) rurally-focused psychology internship training program that has been funded by the Veteran Health Administration's Office of Academic Affiliations. Our program has been a member of APPIC since 2016. 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. The doctoral internship is accredited by the Commission on Accreditation (CoA) and the American Psychological Association (APA). Our next site visit will be in 2024.

Questions related to the program's accreditation status should be addressed to: APA, Office of Program Consultation and Accreditation, 750 First Street, NE, Washington, DC 20002-4242; (202) 336-5979; e-mail: apaaccred@apa.org; Web: www.apa.org/ed/accreditation.



Application & Selection Procedures

Applicants must be enrolled and in good standing in an APA-accredited or Canadian Psychological Association (CPA)-accredited clinical, counseling, or combined psychology program; or a Psychological Clinical Science Accreditation System (PCSAS)-accredited program in clinical science. Applicants are required to have at least 250 direct intervention and 50 direct assessment hours of supervised graduate level pre-internship practicum experience, completed their comprehensive examinations, and proposed their dissertation (or equivalent) to be considered for interview or ranking. Applicants will be evaluated individually on their clinical experiences, academic performance, clinical interests, and research background. Preference will be given to applicants with interests in generalist training with an emphasis on interprofessional treatment. As an equal opportunity training program, the internship welcomes and strongly encourages applications from qualified candidates, regardless of gender, age, racial, ethnic, sexual orientation, disability, or other minority status. This agency provides reasonable accommodation to applicants with disabilities where appropriate. If you need reasonable accommodation for any part of the application and hiring process, please notify Dr. Stephany Himrich or Dr. Andrea Bosowski by telephone or email (contact information found later in this section).

In addition, applicants must meet the following VA requirements:

- 1. The applicant must have U.S. citizenship. VA is unable to consider applications from anyone who is not currently a U.S. citizen. Verification of citizenship is required following selection. All interns must complete a Certification of Citizenship in the United States prior to beginning VA training.
- 2. A male applicant born after 12/31/1959 must have registered for selective service by age 26 to be eligible for any US government employment, including selection as a paid VA trainee. Male applicants must sign a pre-appointment Certification Statement for Selective Service Registration before they can be processed into a training program. Exceptions can be granted only by the US Office of Personnel Management; exceptions are very rarely granted.
- 3. Interns are subject to fingerprinting and background checks. Match result and selection decisions are contingent on passing these screens.
- 4. Interns are not required to undergo drug screening prior to beginning work, but once on staff they are subject to random selection for testing as are other employees. A physical may also be required. <u>Note: A full listing of requirements can be found later in the brochure under the section entitled, "Eligibility Requirements for Psychology Trainees in VA."</u>
- 5. Interns are required to adhere to vaccination policy as specified by VA guidelines. NOTE: Much like the vaccine for influenza, all HPTs training in a VA facility must be fully vaccinated or have an exemption filed (medical or religious) with the local

Designated Education Officer (DEO).

https://vaww.va.gov/vaforms/medical/pdf/VA%20Form%2010-263%20COVID-19%20Vaccination.pdf.

<u>The deadline for receipt of completed application materials is November 15.</u> The following materials must be submitted through the APPIC website:

- 1. A completed APPIC Application for Doctoral Psychology Internship (AAPI). The AAPI is available for completion at the APPIC Web site: www.appic.org. The APPIC Verification of Internship Eligibility needs to be verified by your Director of Clinical or Counseling Training. The AAPI should include items 2-4.
- 2. A curriculum vitae.
- 3. Official transcripts of your graduate academic records.
- 4. Three letters of recommendation from faculty in your academic department or from practicing clinicians who know your work in psychology (e.g., externship agency, etc.).
- 5. For additional questions please contact:

Stephany Himrich, PsyD, LP (she/her/hers)

Co-Director of Psychology Training (Building 2, Room 149) St. Cloud VA Health Care System 4801 Veterans Drive St. Cloud, MN 56303 (320) 252-1670, extension 7298 Email: Stephany.Himrich@va.gov

And

Andrea Bosowski, PsyD, LP (she/her/hers)

Co-Director of Psychology Training (Building 115, Room 110) St. Cloud VA Health Care System 4801 Veterans Drive St. Cloud, MN 56303 (320) 252-1670, extension 6065 Email: Andrea.Bosowski@va.gov

Requirements for Completion of Doctoral Internship

The internship is structured as one year of full-time training to be completed in no fewer than 12 months. Program completion requires 2080 hours of internship training activities under clinical supervision with at least 25% of trainees' time in face-to-face psychological services to patients/clients. Holidays, vacation, and sick leave count towards the completion of the 2080 hours. The standard tour of duty is 8:00am to 4:30 pm. Performance evaluation of interns with feedback by clinical supervisors and other internship faculty is continuous; however, more formal evaluations are completed at established intervals throughout the training year. Maintaining good standing in completing the internship requires satisfactory ratings in the Profession-Wide Competencies. (See Program Aims, Goals and Objectives).

Training Stipend and Benefits



Internship Class 2018-19. Pictured from left to right are Kate Finn, Robert Weise, and Stephany Himrich. Photo reproduced with interns' permission

The St. Cloud VA Health Care System has three full-time (i.e., 40 hours per week) psychology internship training positions each year. For 2024-2025, interns receive a yearly stipend of \$36,768 for 2080 hours. Interns are eligible for health insurance (for self, spouse, and legal dependents) and for life insurance, just as are regular employees. When providing professional services at a VA healthcare facility, VA sponsored interns acting within the scope of their educational programs are protected from personal liability under the Federal Employees Liability Reform and Tort Compensation Act 28, U.S.C.2679 (b)-(d). Interns are paid for 11 Federal holidays. They accrue 4 hours of sick leave and 4 hours of annual leave for each full two week pay period as an intern, for a total of between 96 and 104 hours of each during the year. Interns will also be granted holiday/excused leave for rare cases involving an executive order (e.g., unplanned holidays such as Christmas Eve, days of mourning). In those circumstances, the intern(s) may be permitted excused time away from the facility, but the overall training year will remain intact. The intern's training experience will simultaneously be assured so that the opportunity for an adequate number of clinical hours is maintained.

Administrative Policies and Procedures

The policy of the Psychology Internship Program on Authorized Leave is consistent with the national standard. Applicants are welcome to discuss this with the Co-Directors of Training. All documents are available, in advance, by request.

Due Process - All Interns are afforded the right to due process in matters of problem behavior and grievances. A due process document is distributed to and reviewed with all interns during their first week of orientation at the St. Cloud VAHCS. Human Resources (HR) policies and procedures may apply in different circumstances.

Privacy Policy - We collect no personal information from potential applicants who 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 the intern's performance and such information is necessary in order to address these difficulties.

Program Aims, Goals and Objectives

The following are core foundational and functional competencies (based on the APA competency benchmarks) that a graduate of the internship program will demonstrate. These competencies are consistent with the overarching goals of the VHA, the scientist-practitioner training model, and the Standards of Accreditation for Health Service Psychology (SoA) outlined by the American Psychological Association's Commission on Accreditation (CoA). Upon successful completion of the training program, interns will:

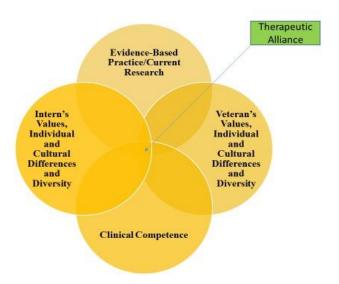
- 1. Demonstrate the substantially independent ability to critically evaluate and disseminate research or other scholarly activities (e.g., case conference, presentation, publications) at the local (including the host institution), regional, or national level.
- 2. Demonstrate the ability to respond professionally in increasingly complex situations with a greater degree of independence across levels of training including knowledge and in accordance with the APA Code and relevant laws, regulations, rules, policies, standards, and guidelines.

I felt like supervisors placed a high priority on my training needs and interests.

- Former Intern

3. Demonstrate the ability to conduct all professional activities with sensitivity to human diversity, including the ability to deliver high quality services to an increasingly diverse population. Intern demonstrates knowledge, awareness, sensitivity, and skills when working with diverse individuals and communities who embody a variety of cultural and personal background and characteristics.

- 4. Demonstrate behavior and comportment that reflects values and attitudes of psychology; demonstrate personal and professional self-awareness and reflection with awareness of competencies and appropriate self-care.
- 5. Relate effectively and meaningfully with a wide range of individuals, including colleagues, communities, organizations, supervisors, supervisees, and those receiving professional services.
- 6. Demonstrate competence in evidence-based psychological assessment with a variety of diagnoses, problems, and needs in the context of Health Service Psychology.
- 7. Demonstrate competence in evidence-based interventions consistent with a variety of diagnoses, problems, and needs; and across a range of therapeutic orientations, techniques, and approaches.
- 8. Demonstrate evidence-based knowledge of supervision models and practices and apply this knowledge in direct or simulated practice. Supervision involves the mentoring and monitoring the development of competence and skill in professional practice and the effective evaluation of those skills. Supervisors act as role models and maintain responsibility for the activities they oversee. Examples of supervision include, but are not limited to role-played supervision, peer supervision or direct supervision.
- 9. Demonstrate consultation and interprofessional/interdisciplinary skills through intentional collaboration of professionals in health service psychology with other individuals or groups to address a problem, seek or share knowledge, or promote effectiveness in professional activities.



Training Model and Program Philosophy

The primary aim and objective of the Psychology Internship Training Program is to train doctoral level psychology students to function as independent and ethically-minded entry-level professionals who are proficient in the core competencies of applied health service psychology.

It is designed to facilitate the integration and consolidation of the prerequisite academic and experiential learning through a full year of supervised training. The Psychology Internship Training Program's philosophy is based on the <u>scientist-practitioner model</u>, with an emphasis on training in the provision of mental health services in a medical setting. Our training approach emphasizes implementation and promotion of empirically-based treatment modalities and protocols while fostering the psychological flexibility, problem-solving attitudes, and proficiency in individual/cultural differences and diversity needed to apply empirically grounded treatment approaches. We encourage the review of empirical literature to ground and enhance the intern's professional skills alongside the professional experience of learning from mentors through ongoing supervision and consultation. As scientist-practitioners, we foster an appreciation for the scientific underpinnings of psychology and ethically-based professional decision-making.

The primary focus of the internship year will be depth and breadth of training. Delivery of direct patient care is a primary mechanism for experiential and applied learning; however, training is the primary mission of the program. Internship experiences are planned to meet interns' training goals and needs through the selection of two distinct major rotations, two minor rotation, and one yearlong rotation. Each major and minor rotation has a duration of about six months, while the yearlong training experience will span the entirety of the training year. The training model is anticipated to be <u>developmental</u> in that interns are closely monitored and their competencies in different areas are assessed throughout the year. It is expected that interns will be increasingly more independent and autonomous over the course of the year as they demonstrate sufficient competence, comportment, sound judgment, and grounded decisionmaking.

The Psychology Internship Training Program is focused on providing generalist training in health service psychology to ensure the VA has a constant source of well-trained and qualified psychologists. Our program is designed to be grounded in the understanding that a psychologist must be able to demonstrate core foundational and functional competencies prior to specialization. Thus, interns will have a set of shared core experiences, didactics, and seminars that will allow cohesive cohort development, while also providing a range of optional rotations to suit varied training needs and professional aspirations. Interns take an active role in establishing training goals with each supervisor and rotation experience, as well as overarching goals for the training year. They will engage in self-observation, reflection, and evaluation throughout the year that will help them consolidate their learning and develop a cohesive professional identity. Additionally, they will be supported to appreciate their own cultural stimulus and learn how to act on that awareness in the service of advocacy and healthcare service delivery. The program will provide opportunities for working with a patient population rich in individual and cultural differences and diversity, while working under the supervision of professional health service psychologists who represent a wide range of theoretical orientations, clinical experiences, and areas of expertise. Interns will be exposed to a broad range of clinical environments, clinical situations, scientifically informed learning, and didactic training experiences. Enhancement of ethical reasoning, clinical judgment and decision-making,

awareness and attitudes pertaining to individual and cultural differences and diversity, and interprofessional communication are integral components of the training experience.

Commitment to Diversity: In response to the growing need for psychology to integrate cultural competency into professional practice, the American Psychological Association (2002) developed Guidelines on Multicultural Education, Training, Research, Practice, and Organizational Change. In 2017, the APA adopted Multicultural Guidelines: An Ecological Approach to Context, Identity, and Intersectionality, which include 10 guidelines to provide psychologists with a framework for providing multicultural services. Importantly, these guidelines assert that psychologists should "aspire to recognize and understand that as cultural beings, they hold attitudes and beliefs that can influence their perceptions of and interactions with others as well as their clinical and empirical conceptualizations" (APA, 2017). Reflexivity is an important tool for multicultural competency within psychology and the training program at the St. Cloud VA HCS. Due in part to our geographic location, the psychology staff largely represents individuals who are White. As staff, we acknowledge that the formation of our training program and approaches provided, while multicultural in nature, are presented largely by White psychologists. It is imperative that we locate this positionality and our intersectionality so that we may continue to grow, uncover biases, and challenge patterns of oppression and privilege that may be influential to service delivery. We strive to promote culturally adaptive interventions, culturally appropriate research, and continuous introspection amongst ourselves as well as our interns.

In addition, the Psychology Internship Program places a strong emphasis on attracting a diverse group of interns and on maintaining an awareness of diversity issues during the internship year. The program and staff involved in providing training recognizes that attracting diverse interns is significantly important to the health of the program and greater facility. It also represents a way a way we can continue to grow in our knowledge and enhance the well-being of both interns and staff alike. To assist with our commitment to diversity, our training committee has established a partnership with the Diversity and Inclusion Committee for Employees (DICE).

I felt very fortunate for the opportunities that were presented to enhance my skills. - Former Intern

Land Acknowledgement: Cultural institutions have an obligation to support ongoing education as well as accurate and responsible representation. By harnessing institutional voice,

there is a capacity to effect change into the future far beyond institutional walls. Through our continued actions, we seek to demonstrate a commitment toward greater public education of Native sovereignty and cultural rights. With these initial steps we contribute toward equitable relationships and reconciliation. Minnesota is home to the homelands of many indigenous nations, including but not limited to: Sisseton, Anishinabewaki, Mdewakanton, Wahpekute, and the Yanktonai. The St. Cloud VA, Alexandria CBOC, and Brainerd CBOC occupy the lands of the Mdewakanton. The Montevideo CBOC occupies the lands of the Wahpekute. The St. Cloud VA additionally serves members of the Leech Lake Band of Ojibwe.

Orientation: Intern orientation will include a thorough explanation of goals, expectations, and policies of the training program, including evaluation and due process. Interns will receive a practical orientation to the context of the VA, record keeping, security, and will also participate in a review and discussion of the ICARE values. They will also participate in introductory trainings such as Motivational Interviewing (MI) skills and the Recovery Model to emphasize patient-centered care. Interns will be educated about expectations for continuity of care, lines of supervisory/clinical responsibility, and the availability of patient care resources and backup consultation/supervision to ensure continuity of care in circumstances which their direct supervisor is not available.

Core Activities: In addition to major and minor rotations, interns will complete a year-long training experience which can include an emphasis on psychotherapy, diagnostic interviewing, psychological assessment, integrative report writing, triage/risk assessment, and/or the provision of consultation and supervision (e.g., peer supervision or roleplayed supervision).

Interns will be expected to provide evidence-based care; and they will be encouraged to engage in self-monitoring and Performance Improvement. Interns will be expected to establish, track, and use quality measures to enhance patient outcomes across their work settings. Each intern will be required to complete a minimum of six psychological assessment batteries during the training year; however, more assessment opportunities will be available. A battery is defined as a clinical interview, records review, and a minimum of two psychological tests and/or measurements.

Interns will participate in twice monthly psychology staff meetings/case conferences. Each intern will present clinical cases to the psychology staff during the internship year. Additionally, each Intern will present to the staff one or more professional and/or research topics.

Training Seminars/Didactic Training: Interns are required to attend a set of core seminars and didactic trainings throughout the year. This formal training is accomplished via a calendar of weekly seminars and didactics as outlined in the supplemental materials. Students may also have the opportunity to participate in a local Journal Club (occurs intermittently during Psychology staff meetings) and Grand Rounds from the Minneapolis VA via V-Tel or audio.

Assigned readings, literature reviews, and computer-based searches provide supplemental materials in this context, as required. Seminars emphasize expanding competence, critical thinking, application of knowledge, and professional identity development. Seminars will have a range of didactic, experiential, and applied components with a focus on research, assessment, interventions, individual and cultural differences and diversity, and professional issues. Interns will evaluate each training seminar/didactic. Aggregate feedback will be reviewed by the Training Committee and copies will be sent to each seminar presenter. Each Intern will develop and present their own didactic to psychology staff on a topic in which they are passionate/interested in.

Interprofessional Training Experiences

As a key part of the interns' training, interprofessional educational experiences will be provided in areas of shared didactics with other disciplines when possible (e.g., social work, nursing,



Internship Class 2021-22. Pictured from left to right are Kathryn Faulkner, Olivia Weber, and Taylor McMillen. Photo reproduced with interns' permission.

pharmacy, and chaplaincy). Other disciplines will be requested to teach didactics to expose the student to a variety of other professions and discuss the unique role that each discipline plays in the health care system. Opportunities to function as members of high functioning interprofessional clinical teams will be available, allowing the intern to provide co-patient work and receive occasional cross-supervision from other disciplines. The training program at the St. Cloud VA HCS will strive to provide training experiences with a culturally and ethnically diverse group of Veterans. The intern will have the benefit of collaboration in the patient care setting with numerous disciplines including psychiatrists, social workers, pharmacists, physicians, advanced practice nurses, RN's, LPN's, technicians, and a variety of psychologists with diverse interests and backgrounds. Interprofessional education will be overseen by the Co-Directors of Training for the Psychology Internship Program.

Clinical Supervision and Evaluation of Progress

Supervision: In accordance with APA guidelines, interns will receive a minimum of 4 hours of regularly scheduled supervision per week along with ongoing mentoring relationships (non-supervisory). A minimum of 2 hours will be spent in individual supervision, and all supervision will be conducted by a licensed psychologist. Supervision each week will generally consist of 1 to 2 hours of individual supervision for the major rotation, 1 hour of individual supervision for the minor rotation, 1 hour of individual supervision in the year-long rotation, and 1 hour of group supervision.

Evaluation: Evaluations are conducted quarterly by major, minor, year-long, and group rotation supervisors. Six-month and annual reviews are also conducted by the Co-Directors of Training. The Co-Directors of Training will meet regularly with the supervisory staff and Training Committee to obtain progress reports about the interns' adjustment, functioning, and engagement in the different components of the training experience. If concerns are noted, the supervisor, in consultation with the training team, will identify corrective interventions to promote the necessary learning and development. If repeated deficiencies are noted, the supervisor, in consultation with the Co-Directors of Training, will develop a formal remediation plan to be shared with the intern's academic program. Interns will also evaluate all supervisors, at the end of each rotation, using the *Intern Evaluation of Rotation/Supervisor* form. Interns will evaluate each rotation and core experience and provide meaningful feedback, which will be reviewed by the Co-Directors of Training.

Mentorship Opportunity: A Mentor in the St. Cloud VA Psychology Internship Program is an individual who is selected by an intern who can provide professional and personal development in a non-evaluator situation. The Mentor uses their experience and gained wisdom to provide



Internship Class 2017-18. Pictured from left to right are Jessica Anderson, Cory Voecks, and Maria Valmas. Photo reproduced with interns' permission.

guidance that will help the intern develop. The mentor is NOT in a supervisory position and is NOT in a position to mandate action. Instead, the mentor is meant to be an individual who

displays their own vulnerabilities, shares their experiences, helps think through issues that arise, and ultimately is a support to the intern.

All licensed psychologists and graduate psychologists (under the supervision of a licensed psychologist) at the St. Cloud VA are eligible to be mentors, though this is a voluntary position. Interested psychologists will fill out a Mentor Bio Form. These brief biographies will be provided to interns at the beginning of the internship year. Within the first couple of weeks of internship, a luncheon will be set up during which the interns may have a chance to speak with possible mentors. After this luncheon, each intern will submit a list of their top 3 mentor choices to the Co-Directors of Training. A brief discussion about best fit for mentor may occur.

Research

Research/Administration Time: Although it is preferred that a prospective intern is near the completion of their dissertation or research project, up to 4 hours per week *may* be provided to assist in dissertation/project completion. If the dissertation/research project is complete, interns may be provided an opportunity to work with our local Research Program Coordinator to learn about research currently underway and will be invited to participate as time allows. Opportunities to observe or participate in various committees (e.g., Integrated Ethics Committee, Research and Development Committee) may also be available.

In the spirit of the scientist-practitioner model, interns *may* be allowed to participate for up to 4 hours per week in local research-related activities. Attempts will be made to match available research training opportunities to the intern's interests, academic training and professional goals. Interns have the opportunity to participate in one of the following options:

- Dissertation/research project.
- Collaboration with psychology staff members on local Institutional Review Board (IRB) and/or Research and Development (R&D) approved research projects.
- Local quality assurance (QA)/quality improvement (QI) projects under the direction of a staff psychologist. Opportunities for Program Development may also be available as time allows.
- Other research-related activities as approved by the Co-Directors of internship training.
- <u>It should be noted that completion of the Intern's dissertation is of highest priority</u> <u>for the training year</u>. Therefore, completion of the dissertation will take precedence over participation in QA/QI or research projects.

Description of Rotations

Mental Health Residential Rehabilitation Treatment Program (MH RRTP) (Major, Minor, or Yearlong Rotation)

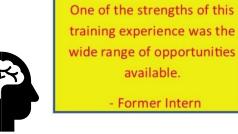
The MH RRTP is the largest residential behavioral health unit in VISN 23 and one of the largest in the Midwest. This 148-bed residential program provides dual diagnosis treatment for Veterans experiencing symptoms of a variety of mental health and substance use disorders. Although the vast majority of Veterans are from VISN 23, referrals come from across the nation.

The MH RRTP demonstrates superior program efficacy, utilizes several evidence based psychotherapies and clinical best practices, and has a robust outcome management system that guides programmatic and clinical decision making. The program includes various disciplines including psychology, social work, nursing (psychiatric NP, RN, LPN), psychiatry, recreation, and nutrition. Training opportunities in the RRTP rotation include individual therapy, group therapy, substance abuse screening, biopsychosocial and psychological assessment, suicide risk assessment with safety planning, possible opportunities for neurocognitive screening, and participation on interdisciplinary teams. Limited opportunities for couple's therapy may also be available.

<u>Supervisors</u>: Stephany Himrich, PsyD, LP; Cory Voecks, PsyD, LP.; Dacia Oberhelman, PhD, LP; Brendan McCollum, PsyD, LP; Stephanie Pagano, PsyD, ABPP; and Olivia Weber, PsyD

Health Psychology (Primary Care Mental Health Integration) (Major or Minor Rotation)

The overall purpose of the Primary Care Mental Health Integration program (PC-MHI) is to provide integrated care for Veterans' physical and mental health conditions, as well as to improve access and quality of care. The PC-MHI is a blended program (co-located and collaborative) providing evidence-based intervention to treat common mental health concerns right in the primary care setting. The integration of mental health services in primary care settings has been found to: Improve identification of prevalent mental health conditions, improve access to appropriate evaluation and treatment, improve treatment engagement and adherence, increase the probability of receiving high quality care, improve clinical and functional outcomes, and increase patient satisfaction. The schedule is fast-paced, and there are various benefits of the PC-MHI model of care such as: a) the ability to provide frequent access for same-day appointments (allowing patient to be seen by mental health professional on same day as seen by primary care provider), b) capability of providing consultation to assist primary care physicians with risk assessments, diagnostic clarification and additional assessment, triage, and follow-up, c) option of providing psychoeducation and evidence-based intervention for brief treatment of insomnia, pain, mild depression/anxiety, lifestyle concerns, adjustment to illness, or medication adherence concerns, as well as other presenting concerns, and d) ability to provide triage and facilitate referral to more intensive levels of care (i.e. specialty mental health care) when appropriate. The multidisciplinary team includes social workers, nurse practitioners, physicians, and psychologists. Training opportunities/responsibilities of the trainees for this rotation may include individual therapy, group therapy, brief mental health screening, pain assessment and treatment, some specialty assessments (e.g., bariatric), and tobacco cessation. Supervisors: Andrew Kingwell, PhD, LP; Lei`a Twigg-Smith, PsyD, LP



Outpatient Mental Health Clinic (Major, Minor, or Yearlong Rotation)

The Outpatient Mental Health Clinic is an intensive training experience consisting of an ethnically diverse population of Veterans with various diagnoses including (but not limited to) PTSD, depression, anxiety, personality disorders, and substance use disorders. Interns would have exposure to a wide variety of mental health and comorbid conditions. This rotation includes strong collaboration with interdisciplinary team(s) in the form of the Behavioral Health Interdisciplinary Program (BHIP) which include psychiatry, psychology, psychiatric nurse practitioners, social work, registered nurses, and licensed practice nurses. Interns receive education and training in the use of evidence-based clinical interventions such has Cognitive Behavioral Therapy, Acceptance and Commitment Therapy, and Cognitive Processing Therapy. Opportunities for psychological assessment are available. Therapy modalities include individual, group, and couple's therapy. Opportunities for use of V-TEL could be explored as an option on this rotation.

Supervisors: Kristin Jurek, PsyD, LP; Jennifer Roth, PsyD, LP; and Kailey Carlson, PsyD, LP

Acute Psychiatric Inpatient Unit (Major, Minor, or Yearlong Rotation)

The Acute Inpatient Mental Health Unit is a 15-bed Acute Psychiatric Unit for Veterans who present with a wide range of psychiatric diagnoses including posttraumatic stress, major depressive disorder, psychotic spectrum disorders, anxiety disorders. Many patients also present with comorbid substance use disorders and complex medical issues. Acute mental health services are provided to patients by an interdisciplinary team using the recovery model of care. The inpatient mental health team is comprised of a psychologist, nurse practitioners, a psychiatrist, social workers, a peer support specialist, pharmacists, nurses (RNs and LPNs), and a chaplain. Team members from various programs and disciplines are consulted and involved based on unique patient needs. The Mental Health Treatment Coordinator and members of Veteran's outpatient treatment team are invited to participate in care during inpatient stay. Training opportunities for this rotation include brief individual therapy, group therapy, psychological screening/assessment, participation and consultation on interdisciplinary teams, and exposure to the civil commitment process.

Supervisor: Andrea Bosowski, PsyD, LP

Building Bridges Psychosocial Rehabilitation and Recovery Center (PRRC) (Major, Minor, or Yearlong Rotation)

The PRRC is a transitional outpatient treatment and educational center that assists Veterans with diagnoses of so-called serious mental illness (SMI) to reclaim and improve the quality of their lives. Each individual defines and pursues a personal mission and vision for his or her future, based on the person's individual strengths, values, interests, personal goals, and unique roles within the community. The PRRC team strives to work cooperatively with each individual Veteran in a manner that respects personal dignity, while instilling hope, validating strengths and efforts, teaching important skills, and facilitating full integration into the community, through the provision of the most efficacious treatment strategies available. The PRRC

promotes goals of rehabilitation, recovery, health maintenance, improved quality of life, and community integration in addition to the specific treatment of medical, mental illnesses, and substance disorders. Training opportunities/responsibilities of the trainees for this rotation may include individual psychotherapy, group psychotherapy and/or psychoeducation, psychological screening/assessment (Collaborative and Therapeutic Assessment), and consultation within an interdisciplinary context.

Supervisor: Andrew Dahlstrom, PsyD, LP



General Psychological Assessment (Minor or Yearlong Rotation)

Psychological assessment and diagnostic interviewing skills are crucial for the development of a licensed psychologist. Rotation experiences are tailored to meet the training needs of individual interns. Those on rotation will be exposed to referrals from St. Cloud VA's Outpatient Mental Health Clinic, RRTP, and potentially PRRC. Interns will be exposed to a wide range of opportunities designed to expand their knowledge base in general clinical psychology, psychopathology, and personality assessment. Through developmentally appropriate supervision, interns will conduct efficient clinical interviews, administer assessments and measurement-based care, understand and interpret results, and communicate findings in a clear and effective manner through feedback sessions with Veterans and their families. A flexible battery approach based on referral question and Veteran need will be utilized. The rotation includes potential for experience with the Collaborative and Therapeutic Assessment model. <u>Supervisors:</u> Louis Pagano, PhD, ABPP; Benjamin Jurek, PsyD, LP; Brendan McCollum, PsyD, LP

Leadership and MH Administration: (Minor Rotation)

Many budding psychologists have little formal training or exposure to leadership and program administration practice or literature, and this rotation seeks to address some of these common training or experience gaps. This rotation offers an introduction to leadership and administration for psychologists in the VA setting and is a good fit for interns who may aspire to leadership roles or who may be interested in topics like program development/evaluation. There are three main goals of the rotation. One goal is for interns to understand servant leadership, a model of ethical, evidence-based leadership. This occurs through review of professional literature,

participation in meetings and committees, and shadowing of your supervisor. Another primary goal is for interns to understand systems (e.g., functioning, change processes, and indicators). This is accomplished through use of VA handbooks and directives, data dashboards and interactions with mental health leaders. Finally, because clinical skills are vitally important, the intern spends at least 25% of their time completing clinical work within the MH ICC. The intern would primarily be involved in providing individual and/or group therapy and participating in multidisciplinary treatment team meetings. Interns will be responsible for individual psychotherapy, group psychotherapy, multidisciplinary treatment team participation, program development and evaluation, and staff education/training.

<u>Supervisors:</u> Nicole Hofman, PhD, LP; Benjamin Jurek, PsyD, LP; and Brendan McCollum, PsyD, LP

YEARLY ROTATION STRUCTURE			
First Major Rotation	Second Major Rotation		
6 months	6 months		
16 Hrs. per Week	16 Hrs. per Week		
First Minor Rotation	Second Minor Rotation		
6 months	6 months		
8 Hrs. per Week	8 Hrs. per Week		
Year-Long Rotation			
8 Hrs. per Week			
Rotation Focus: Assessment, Therapy, or Combination Experience			
Other Year-Long Activities			
4 Hrs. Research Time per Week			
3 Hrs. of Individual Supervision per Week (1 Hr. per Rotation)			
1 Hr. of Group Supervision per Week			
2 Hrs. (at Minimum) of Didactic Trainings per Week			

Innovative Opportunities

The St. Cloud VA HCS provides innovative opportunities for interns to work with Veterans in rural settings. As such, several unique training opportunities exist. For example, the St. Cloud VA HCS has the largest Mental Health Residential Rehabilitation Treatment Program (MH RRTP) in VISN 23. The 148-bed program is focused on evidence-based/ integrated care for Veterans with comorbid mental health and substance use diagnoses. Program evaluation is an important part of the RRTP. Programming is data driven, and modifications to the treatment program are made according to outcome data. Specialty PTSD treatment opportunities are also present in the MH RRTP and Outpatient Mental Health clinics.

Impact of COVID-19 on Training

The COVID-19 pandemic has created challenging and uncertain times for everyone in both personal and professional contexts. We are very aware of the stressors created by the pandemic, and the challenges of continuing to provide quality care for our Veterans. Changes have been made in response to the modalities of care provided, including the increased use of virtual/telehealth versus face-to-face modalities for the past several months. We will model services based on the latest research and federal/state guidance. As with most training programs going through the challenges of these times, we cannot predict with absolute certainty how specific rotations might change for the training year. However, we remain committed to providing a high-quality training experience for the intern with flexibility to provide an exceptional generalist experience. The health and safety of our interns and Veterans is of the utmost importance. We will continue to update our status and our training materials as the situation evolves. If you have questions, reach out to Drs. Stephany Himrich (Stephany.Himrich@va.gov) and/or Andrea Bosowski (Andrea.Bosowski@va.gov).

NOTE: Pursuant to VHA Directive 1193.01, VHA health care personnel (HCP), inclusive of trainees, are required to be <u>fully vaccinated</u> against COVID-19 subject to such accommodations as required by law (i.e., medical, religious or pregnancy). If selected, you will be required to be fully vaccinated against COVID-19 and submit documentation of proof of vaccination before your start date. The agency will provide additional information regarding what information or documentation will be needed and how you can request a legally required accommodation from this requirement using the reasonable accommodation process.

Training Resources

Psychology interns have assigned space with computer and telephone access. Each intern has administrative and program support for training and consultation with electronic medical record management, telemental health, clinical applications, data management related to clinical workload, and program and facility performance improvement programs. Interns will be assigned personal laptops and online access to journals.

Sample List of Didactic Topics:

• Military Culture

- On Transference and Countertransference: Deepening the Therapeutic Relationship
- Geriatric Issues
- Women's Issues
- LGBTQ+ Affirmative Care
- Military Sexual Trauma (MST)
- Moral Injury
- Value-Based Conflicts in the Patient-Provider Relationship
- Rural Mental Health
- Collaborative and Therapeutic Assessments
- Use of Technology in Therapy
- Psychology in the Medical Setting
- Assessment with the PAI and MMPI-2 RF
- White Identity Development and Implicit Bias
- Nature and Mental Health: Ecotherapy and Nature-Oriented Treatments
- Didactics on evidence-based practice such as ACT, CBT-I, PE, CPT, and EMDR
- Grand Rounds through Minneapolis VA HCS V-TEL

Internship Training Staff

Karen M. Ashby, PsyD, LP, Minnesota School of Professional Psychology- Twin Cities, 2006. Clinical Interests: Cognitive Behavioral Therapy, Cognitive Processing Therapy, Motivational Interviewing, mindfulness-based techniques, women veterans, eating disorders, grief, and domestic violence.

Andrea Bosowski, PsyD, LP, (She/Her/Hers), (Co-Director of Training), Chicago School of Professional Psychology, 2022. Clinical Interests: serious and persistent mental illness, TBI, the impact of systems on motivation and behavior and postvention. Trained in CPT and CBT-I. Program Coordinator for the Acute Psychiatric Inpatient Unit.

*Kailey Carlson, PsyD, LP, (She/Her/Hers), Minnesota School of Professional Psychology, 2017. Clinical/Research Interests: Complex PTSD, Cognitive Processing Therapy, Prolonged Exposure, and Eye Movement Desensitization and Reprocessing Therapy.

*Andrew Dahlstrom, PsyD, LP, (He/They), White, cisgender, ally, Minnesota School of Professional Psychology, 2017. Former Psychology Intern at St. Cloud VA Health Care System (2016-17). Clinical Interests: Relational psychoanalytic psychotherapy, EMDR (EMDRIA Trained), Internal Family Systems, personality organizations and disorders, Collaborative and Therapeutic Assessment, serious mental illnesses, affective neuroscience, attachment theory, complex developmental trauma, phenomenological contextualism, supervisory relationship dynamics, leadership development, human sexuality, human differences, and social justice.

Kathryn, Faulkner, PsyD, (She/Her/Hers), White, cisgender, advocate, St. Mary's University of Minnesota, 2022. Former Psychology Intern at St. Cloud VA Health Care System

(2021-2022). Clinical/Research Interests: trauma/PTSD, anger, anxiety, depression, duel diagnosis, self-care, Veteran Population, multicultural diversity, Cognitive Behavioral Therapy, Evidence Based Practice. Outpatient Mental Health.

Stephany Himrich, PsyD, LP, (She/Her/Hers), White, cisgender, advocate, (Co-Director of Training). University of St. Thomas, 2019. Former Psychology Intern at St. Cloud VA Health Care System (2018-2019). Clinical/Research Interests: Acceptance and Commitment Therapy, Relational Cultural Theory, psychological assessment, co-occurring mental health and substance use disorders, LGBTQ* affirmative care, social justice advocacy, the impact of gender and power on professional development, and the integration of diversity and reflexivity in supervisory relationships. St. Cloud VA HCS LGBTQ+ Veteran Care Coordinator.

Abby Everaerts, PsyD, LP, Wheaton College, 2012, St. Cloud State University (M.S. in Gerontology). Former psychology intern at The Hazelden Betty Ford Foundation; psychologist resident at GeroMedical Psychological Services. Clinical/Research interests: Geropsychology, Encore/Plus 50, psychological assessment, CBT, ACT outpatient groups, Motivational Interviewing, and co-occurring mental health and substance use disorders.

Nicole L. Hofman, PhD, LP, (She, Her, Hers), White, cisgender, ally, University of South Dakota, 2014. Clinical/Research Interests: Cognitive Behavioral Therapy; Cognitive Processing Therapy; mindfulness-based treatments; psychology assessment and treatment of difficulties associated with emotion regulation, substance use disorders, PTSD, and MST; relational impacts of diverse and differing values/beliefs within the patient-provider and supervisory relationships; supervision, and training. MH Special Programs Manager with clinical and administrative oversight of the Homeless, Suicide Prevention, MH Occupational Therapy, and Recovery Programs.

Benjamin Jurek, PsyD, LP, (He/Him), Xavier University, 2008. Clinical/Research Interests: Cognitive Behavioral Therapy for dual diagnoses, Cognitive Processing Therapy, serious mental illnesses, program evaluation, program development, systems redesign, and leadership development. Trainer/Consultant for the Cognitive Behavioral for Substance Use Disorders Program.

Kristin T. W. Jurek, PsyD, LP, (She/Her/Hers), University of St. Thomas, 2016. Clinical Interests: Cognitive Processing Therapy, Eye Movement Desensitization and Reprocessing, Internal Family Systems, Mindfulness-based techniques, interpersonal techniques, Dialectical Behavior Therapy, Logotherapy, Acceptance and Commitment Therapy, self-compassion, and trauma disorders. St. Cloud VA HCS Local Recovery Coordinator.

Andrew Kingwell, PhD, LP, Alliant International University/California School of Professional Psychology-San Diego, 2018. Former Psychology Intern at St. Cloud VA Health Care System (2016-17). Clinical/Research Interests: Psychological testing, mindfulness, Motivational Interviewing, Acceptance and Commitment Therapy, substance abuse, existential approaches.

Brendan McCollum, PsyD, LP (He/Him/His), Georgia Southern University, 2014. Clinical/Research Interests: Violent Media and Aggression, PTSD, Acceptance and Commitment Therapy, Internal Family System, psychological assessment, co-occurring mental health and substance use disorders, evidence-based psychotherapies, psychosocial stressors effect on mental health. Assistant Chief for MH-RRTP; Evidence-Based Psychotherapy Coordinator.

Dacia Oberhelman, PhD, LP (She/Her/Hers), University of North Dakota, 2021. Clinical Interests: Cognitive Processing Therapy, cognitive behavioral therapy, anxiety disorders, interpersonal techniques, integrated behavioral healthcare, self-compassion, grief and loss, identity development, psychological assessment, trauma disorders, women's mental health, and training and supervision of early career psychologists.

***Louis A. Pagano, Jr., PhD, ABPP, (He/Him/His),** University of North Dakota, 2015. Predoctoral Internship at Wilford Hall Ambulatory Surgical Center (Air Force). Board certified in Behavioral & Cognitive Therapies. Interests: application of behavioral, cognitive, social, and learning science to psychological practice; and efficacy claims of controversial assessment techniques, diagnoses, and forms of psychotherapy. St. Cloud VA HCS Research Coordinator.

***Stephanie Pagano, PsyD, ABPP, (She/Her/Hers),** Minnesota School of Professional Psychology/Argosy, Twin-Cities, 2014. Internship and residency at Brooke Army Medical Center. Clinical interests/passions: trauma work, MST, moral injury, EBTs for trauma/PTSD, serving active and veteran populations. Trained in ACT, CBT, CPT, CBTi, EMDR and PE; also use WET and STAIR/NST.

Janine Paxson, PhD, LP, Chief of Psychology, Western Michigan University, 2005. Clinical/Research Interests: Cognitive Behavioral Therapy, health psychology/behavioral medicine, integrated care (Primary Care Mental Health Integration), Cognitive Behavioral Therapy for Insomnia, treatment of trauma sequelae/PTSD (Cognitive Processing Therapy and Prolonged Exposure Therapy), program development, evaluation, and clinical outcomes.

Jennifer C. Roth, PsyD, LP, Minnesota School of Professional Psychology, 2016. Clinical Interest/Research Interests: Cognitive Processing Therapy and Prolonged Exposure for PTSD, Cognitive Behavioral Therapy, individual psychotherapy, mindfulness, Clinical Video Telehealth, the interface of informatics and mental health, and supervision/training.

*Cory Voecks, PsyD, LP, University of St. Thomas, 2018. Former Psychology Intern at St. Cloud VA Health Care System (2017-2018). Clinical/ research interests: moral injury, anxiety disorders, and acceptance and commitment therapy.

Lei`a L. Twigg-Smith, PsyD, LP, (She/Her/Hers), White, cisgender, ally. Chaminade University of Honolulu, 2020. Former Psychology Intern at St. Cloud VA Health Care System (2019-2020). Clinical/Research Interests: Clinical Health Psychology, Emotionally Focused Therapy, Acceptance and Commitment Therapy (ACT), Behavioral Medicine pre-surgical

psychological evaluations, co-occurring mental health and substance use disorders, harm reduction, geropsychology, Multicultural diversity in Veteran-provider and student-supervisor relations. Former Health Behavior Coordinator.

Olivia Weber, PsyD, LP, (She/Her/Hers), White, cisgender, advocate. University of St. Thomas, 2022. Former Psychology Intern at St. Cloud VA Health Care System (2021-2022). Clinical/Research Interests: Cognitive Processing Therapy, Written Exposure Therapy, psychological assessment, co-occurring mental health and substance use disorders, Gestalt therapy practices, the use of art, literature, and music in therapeutic settings, group therapy, relational-focus, and the impact of diversity of client presentations and interactions.

Kimberlee Zetocha Halverson, PhD, LP, University of North Dakota, 2009. Clinical/Research Interests: Cognitive Processing Therapy (CPT), Prolonged Exposure therapy (PE), Virtual Reality Exposure Therapy (VRPE), technology application to therapy, PTSD, Military Combat trauma, applied behavioral analysis, Cognitive Behavioral Therapy for Chronic Pain (CBT-CP), Biofeedback, Hypnosis, and Primary Care Mental Health Integration (PCMHI).

Note: Asterisk (*) Indicates the training staff person is a Veteran.

Previous Internship Classes

2023-2024 (current class)

Saint Mary's University of Minnesota (Counseling PsyD) University of Tennessee, Knoxville (Clinical PhD) George Fox University (Clinical PsyD)

2022-2023

University of North Dakota (Clinical PhD) Alliant International University California School of Professional Psychology (Clinical PhD) University of Montana (Clinical PhD)

2021-2022

Carlow University (Counseling PsyD) Saint Mary's University of Minnesota (Counseling PsyD) University of St. Thomas (Counseling PsyD)

2020-2021

Chicago School of Professional Psychology-Chicago Campus (Clinical PsyD) Palo Alto University (Clinical PhD) Saint Mary's University of Minnesota (Counseling PsyD)

2019-2020

Chaminade University/Hawai`i School of Professional Psychology at Argosy University (Clinical PsyD)

Suffolk University (Clinical PhD) University of North Dakota (Clinical PhD)

2018-2019

Loma Linda University (Clinical PsyD) University of St. Thomas (Counseling PsyD) University of St. Thomas (Counseling PsyD)

2017-2018

Suffolk University (Clinical PhD) University of St. Thomas (Counseling PsyD) University of St. Thomas (Counseling PsyD)

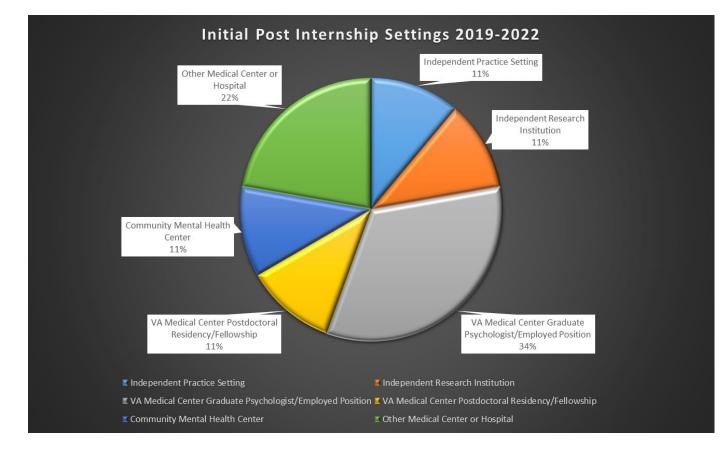
2016-2017

Alliant International University/California School of Professional Psychology-San Diego (Clinical PhD) Fielding Graduate University (Clinical PhD) Minnesota School of Professional Psychology-Twin Cities (Clinical PsyD)

Post-Internship Placements/Employment

CARE Counseling; Minneapolis, MN (Postdoctoral Fellowship) Hillcrest Psychological Associates; San Diego, CA (Postdoctoral Associate) University of Wisconsin-Madison; Madison, WI (Postdoctoral Fellowship in Clinical Neuropsychology) Pine Rest Hospital; Grand Rapids, MI (Postdoctoral Fellowship in Clinical Neuropsychology) Banner Sun Health Research Institute; Sun City, AZ (Postdoctoral Clinical and Research Fellowship in Clinical Neuropsychology, after dissertation was completed) Cambridge Health Alliance/Harvard Medical School; Cambridge, MA (Postdoctoral Residency in Clinical Neuropsychology) Kaiser Permanente; San Francisco, CA (Postdoctoral Residency in Chronic Pain) Granite Falls Health; Granite Falls, MN (Psychologist- Private Hospital Setting) Minneapolis VA Health Care System; Minneapolis, MN (Postdoctoral Fellowship in Primary **Care-Mental Health Integration**) Natalis Counseling and Psychology Solutions; St. Paul, MN (Postdoctoral Fellowship- Private Multi-Group Practice) St. Cloud VA Health Care System (Graduate Psychologist- BRO Geriatrics, Outpatient MH, Behavior Health Coordination, MH-RRTP, and Inpatient/PRRC) Thomson Memory and Attention; Lake Elmo, MN (Postdoctoral Residency in Clinical Neuropsychology) Tomah VA Medical Center; Tomah, WI [Graduate Psychologist-Outpatient Addiction Treatment Program (ATP), after dissertation was completed]

VA Connecticut Health Care System; West Haven, CT (Postdoctoral Residency in Clinical Neuropsychology)



VA Illiana Health Care System; Danville, IL (Graduate Psychologist- Geriatrics)

Tips for Potential Internship Applicants

Since our facility has recently obtained full accreditation applications have become increasingly more competitive. Unfortunately, our Selection Committee encounters errors by potential interns during the application and/or interview process that may substantially reduce chances of a successful match. Therefore, these tips are designed to assist the applicant with submitting a competitive application and having a successful interview at St. Cloud VA HCS:

- 1. <u>Read the brochure</u>- Although this suggestion would appear to be intuitive to most applicants, our Selection Committee encounters applicants who appear to have limited (or no) knowledge of the various services/rotations that we provide.
- 2. <u>Pay particular attention to your cover letter included as part of the AAPI application</u>. The cover letter provides the Selection Committee with a very important first impression of your application. Tell us why you want to receive training with our program. Common mistakes found in the cover letter include presence of typographical and grammatical errors, general or vague information as to the reason for interest in our program, little or no mention of specific rotations that might be of interest, and carelessly placing the name of the wrong internship program in the cover letter.
- 3. Describe why you want to work with our Veterans- While previous exposure to working with Veterans is viewed favorably by the Selection Committee, lack of experience in working with this population does not exclude applicants from receiving serious consideration. However, the applicant should provide a clear rationale for desire to work with Veterans in the cover letter and, if invited, during the clinical interview. Failure to provide rationale for wanting to obtain experiences working with Veterans will likely result in lower scores during the review and ranking process.
- 4. <u>Be prepared to discuss your theoretical orientation</u>- At the current level of training, interns should have reasonable skills necessary to clearly articulate their theoretical orientation and provide examples of how skills were used in practicum experiences. Our program emphasizes evidence-based practices, and the intern should articulate desire for training in evidence-based interventions offered by VHA.
- 5. <u>Be prepared to discuss rotation and clinical interests</u>- In your cover letter and during the clinical interview, be prepared to tell us about your current and future interests/aspirations. Specifically, we are interested in knowing how your interests and future aspirations will fit with our program. What specific rotations and clinical skills are you interested in receiving as part of your training, and how does our program meet those interests?

INTERNSHIP ADMISSIONS, SUPPORT, AND INITIAL PLACEMENT DATA/PROGRAM TABLES

Date Program Tables are updated: 7/1/2023 Internship Program Admissions

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:

Applicants must be enrolled and in good standing in an APA-accredited or CPAaccredited clinical, counseling, or combined psychology program; or a PCSASaccredited program in clinical science. Applicants are required to have at least 250 direct intervention and 50 direct assessment hours of supervised graduate level pre-internship practicum experience, completed their comprehensive examinations, and proposed their dissertation (or equivalent) to be considered for interview or ranking. Applicants will be evaluated individually on their clinical experiences, academic performance, clinical interests, and research background. Preference will be given to applicants with interests in generalist training with an emphasis on interprofessional treatment. In addition, applicants must meet the following VA requirements:

- The applicant must have U.S. citizenship. VA is unable to consider applications from anyone who is not currently a U.S. citizen. Verification of citizenship is required following selection. All interns must complete a Certification of Citizenship in the United States prior to beginning VA training.
- 2. A male applicant born after 12/31/1959 must have registered for selective service by age 26 to be eligible for any US government employment, including selection as a paid VA trainee. Male applicants must sign a pre-appointment Certification Statement for Selective Service Registration before they can be processed into a training program. Exceptions can be granted only by the US Office of Personnel Management; exceptions are very rarely granted.
- 3. Interns are subject to fingerprinting and background checks. Match result and selection decisions are contingent on passing these screens.
- 4. Interns are not required to undergo drug screening prior to beginning work, but once on staff they are subject to random selection for testing as are other employees. A physical may also be required.

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	Ν	<u>Y</u>	Amount: 250 Hrs.	
Total Direct Contact Assessment Hours	Ν	<u>Y</u>	Amount: 50 Hrs.	
Describe any other required minimum criteria used to screen applicants: <u>N/A</u>				

Financial and Other Benefit Support for Upcoming Training Year*

Full-time Intern stipend for 2024-2025 (Annual Stipend/Salaries for	\$36,145
2024-2025 will be confirmed early in 2024):	
Annual Stipend/Salary for Half-time Interns	<u>N/A</u>
Program provides access to medical insurance for intern?	<u>Yes</u> No
If access to medical insurance is provided Trainee contribution to cost required? Coverage of family member(s) available? Coverage of legally married partner available? Coverage of domestic partner available?	Yes No Yes No Yes No Yes <u>No</u>
Hours of Annual Paid Personal Time Off (PO and/or Vacation)	104
Hours of Annual Paid Sick Leave	104
In the event of medical conditions and/or family needs that require extended leave, does the program allow reasonable unpaid leave to interns/residents in excess of personal time off and sick leave?	<u>Yes</u> No
Other Benefits (please describe): Up to 5 additional days of Release Time to defend dissertation and/or for professional development activities	Yes No

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

Initial Post-Internship Positions

	2019-2022	
Total # of interns who were in the 3 cohorts	9	
Total # of interns who did not seek employment because they returned to their doctoral program/are completing doctoral degree	0	
	PD	EP
Community mental health center	1	0
Federally qualified health center	0	0
Independent primary care facility/clinic	0	0
University counseling center	0	0
Veterans Affairs medical center	1	3
Military health center	0	0
Academic health center	0	0
Other medical center or hospital	2	0
Psychiatric hospital	0	0
Academic university/department	0	0
Community college or other teaching setting	0	0
Independent research institution	1	0
Correctional facility	0	0
School district/system	0	0
Independent practice setting	1	0
Not currently employed	0	0
Changed to another field	0	0
Other	0	0
Unknown	0	0

(Provide an Aggregated Tally for the Preceding 3 Cohorts)

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

Eligibility Requirements for Psychology Trainees in VA

The Department of Veterans Affairs (VA) adheres to all Equal Employment Opportunity and Affirmative Action policies. As a Veterans Health Administration (VHA) Health Professions Trainee (HPT), you will receive a Federal appointment, and the following requirements will apply prior to that appointment:

- 1. U.S. Citizenship. HPTs who receive a direct stipend (pay) must be U.S. citizens. Trainees who are not VA paid (without compensation-WOC) who are not U.S. citizens may be appointed and must provide current immigrant, non-immigrant or exchange visitor documents.
- 2. U.S. Social Security Number. All VA appointees must have a U.S. social security number (SSN) prior to beginning the pre-employment, on-boarding process at the VA.
- 3. Selective Service Registration. Male applicants born after 12/31/1959 must have registered for the Selective Service by age 26 to be eligible for U.S. government employment, including selection as a paid or WOC VA trainee. For additional information about the Selective Service System, and to register or to check your registration status visit https://www.sss.gov/. Anyone who was required to register but did not register before the age of 26 will need to apply for a Status Information Letter (SIL) and request a waiver. Waivers are rare and requests will be reviewed on a case by case basis by the VA Office of Human Resources Management. This process can take up to six months for a verdict.
- 4. **Fingerprint Screening and Background Investigation.** All HPTs will be fingerprinted and undergo screenings and background investigations. Additional details about the required background checks can be found at the following website: http://www.archives.gov/federalregister/codification/executive-order/10450.html.
- 5. **Drug Testing.** Per Executive Order 12564, the VA strives to be a Drug-Free Workplace. HPTs are not drug-tested prior to appointment, however are subject to random drug testing throughout the entire VA appointment period. You will be asked to sign an acknowledgement form stating you are aware of this practice. See item 8 below.
- 6. Affiliation Agreement. To ensure shared responsibility between an academic program and the VA there must be a current and fully executed Academic Affiliation Agreement on file with the VHA Office of Academic Affiliations (OAA). The affiliation agreement delineates the duties of VA and the affiliated institution. Most APA-accredited doctoral programs have an agreement on file. More information about this document can be found at https://www.va.gov/oaa/agreements.asp (see section on psychology internships). Post-degree programs typically will not have an affiliation agreement, as the HPT is no longer enrolled in an academic program and the program is VA sponsored.
- 7. **TQCVL.** To streamline on-boarding of HPTs, VHA Office of Academic Affiliations requires completion of a Trainee Qualifications and Credentials Verification Letter (TQCVL). An

Educational Official at the Affiliate must complete and sign this letter. For post-graduate programs where an affiliate is not the program sponsor, this process must be completed by the VA Training Director. Your VA appointment cannot happen until the TQCVL is submitted and signed by senior leadership from the VA facility. For more information about this document, please visit <u>https://www.va.gov/OAA/TQCVL.asp</u>

- 8. **Health Requirements**. Among other things, the TQCVL confirms that you, the trainee, are fit to perform the essential functions (physical and mental) of the training program and immunized following current Center for Disease Control (CDC) guidelines and VHA policy. This protects you, other employees and patients while working in a healthcare facility. Required are annual tuberculosis screening, Hepatitis B vaccine as well as annual influenza vaccine. *Declinations are EXTREMELY rare*. If you decline the flu vaccine you will be required to wear a mask while in patient care areas of the VA.
- 9. **Primary Source Verification of all Prior Education and Training** is certified via the TQCVL. Training and Program Directors will be contacting the appropriate institutions to ensure you have the appropriate qualifications and credentials as required by the admission criteria of the training program in which you are enrolled.

10. Additional On-boarding Forms. Additional pre-employment forms include the Application for Health Professions Trainees (VA 10-2850D) and the Declaration for Federal Employment (OF 306). These documents and others are available online for review at https://www.va.gov/oaa/app-forms.asp. Falsifying any answer on these required Federal documents will result in the inability to appoint or immediate dismissal from the training program.

11. **Proof of Identity per VA.** VA on-boarding requires presentation of two source documents (IDs). Documents must be unexpired and names on both documents must match. For more information visit: <u>https://www.oit.va.gov/programs/piv/_media/docs/IDMatrix.pdf</u>

12. Additional Information Regarding Eligibility Requirements. Trainees receive term employee appointments and must meet eligibility requirements for appointment as outlined in VA Handbook 5005 Staffing, Part II, Section B. Appointment Requirements and Determinations.

https://www.va.gov/vapubs/viewPublication.asp?Pub_ID=646&FType=2

Selective Service website where the requirements, benefits and penalties of registering vs. not registering are outlined: <u>https://www.sss.gov/Registration/Why-Register/Benefits-and-Penalties</u>

13. Additional information specific suitability information from Title 5 (referenced in VHA Handbook 5005):

(a) *Specific factors*. In determining whether a person is suitable for Federal employment, only the following factors will be considered a basis for finding a person unsuitable and taking a suitability action:

- (1) Misconduct or negligence in employment;
- (2) Criminal or dishonest conduct;
- (3) Material, intentional false statement, or deception or fraud in examination or appointment;
- (4) Refusal to furnish testimony as required by § 5.4 of this chapter;
- (5) Alcohol abuse, without evidence of substantial rehabilitation, of a nature and duration that suggests that the applicant or appointee would be prevented from performing the duties of the position in question, or would constitute a direct threat to the property or safety of the applicant or appointee or others;
- (6) Illegal use of narcotics, drugs, or other controlled substances without evidence of substantial rehabilitation;
- (7) Knowing and willful engagement in acts or activities designed to overthrow the U.S. Government by force; and
- (8) Any statutory or regulatory bar which prevents the lawful employment of the person involved in the position in question.

(b) *Additional considerations*. OPM and agencies must consider any of the following additional considerations to the extent OPM or the relevant agency, in its sole discretion, deems any of them pertinent to the individual case:

- (1) The nature of the position for which the person is applying or in which the person is employed;
- (2) The nature and seriousness of the conduct;
- (3) The circumstances surrounding the conduct;
- (4) The recency of the conduct;
- (5) The age of the person involved at the time of the conduct;
- (6) Contributing societal conditions; and
- (7) The absence or presence of rehabilitation or efforts toward rehabilitation

Activities/Attractions in the St. Cloud Area

St. Cloud and Central Minnesota offer a wealth of activities for interns. The area provides activities for those who prefer larger cities as offered in the Minneapolis/St. Paul area (about 1 to 1 ¹/₂ hours away), as well as outdoor enthusiasts who might prefer areas such as the Brainerd lakes region. Minnesotans enjoy a state that has four distinct seasons with a variety of activities offered throughout the year. A list of some of the activities found in the St. Cloud area include:



Photos taken by Dr. Glen Palmer (reproduced with permission)

Munsinger Gardens- https://ci.stcloud.mn.us/161/Munsinger-Clemens-Gardens

St. Cloud Rox (semi-professional baseball team)- https://northwoodsleague.com/st-cloud-rox/

Paramount Theater for the Arts- www.paramountarts.org/

Lake George and Summertime by George Music Festival- www.summertimebygeorge.com/ Quarry Park and Nature Preserve

https://co.stearns.mn.us/Recreation/CountyParks/QuarryParkandNaturePreserve

Charles Lindbergh State Park, House, and Museum http://www.mnhs.org/lindbergh









Photos taken by Dr. Stephany Himrich and Dr. Glen Palmer (reproduced with permission)

CrowWingStatePark:

https://www.dnr.state.mn.us/state_parks/park.html?id=spk0 0139#homepage



Photo taken by Dr. Glen Palmer (reproduced with permission)

St. Cloud VA HCS Campus:





Photos taken by Dr. Stephany Himrich (reproduced with permission)