Psychology Doctoral Internship Program in Health Service Psychology

Kyle Lythgoe, PsyD
Training Director
113 Comanche Road, MHS-5-FM
Ft. Meade, SD 57741
(605) 347-2511 ext. 7692
Email: Kyle.Lythgoe@va.gov
Website: https://www.blackhills.va.gov/PSYCHOLOGY_INTERNSHIP.asp

*Applications Due: November 15
*APPIC Match #: 155512

Accreditation Status
The doctoral internship at the VA Black Hills Health Care System is fully accredited by the Commission on Accreditation of the American Psychological Association. Next site visit is scheduled for the academic training year of 2027.

Office of Program Consultation and Accreditation
American Psychological Association
750 First Street NE, Washington, DC 20002-4242
(202) 336-5979; www.apa.org/ed/accreditation

This document may contain links to sites external to Department of Veterans Affairs. VA does not endorse and is not responsible for the content of the external linked websites.
Application & Selection Procedures

Application Criteria:

Applicants must meet the following prerequisites to be considered for our program:

- U.S. citizenship. VA is unable to consider applications from anyone who is not currently a U.S. citizen. Verification of citizenship is required following selection. All interns and fellows must complete a Certification of Citizenship in the United States prior to beginning VA training.
- A male applicant born after 12/31/1959 must have registered for the draft by age 26 to be eligible for any US government employment, including selection as a paid VA trainee. Male applicants must sign a pre-appointment Certification Statement for Selective Service Registration before they can be processed into a training program. Exceptions can be granted only by the US Office of Personnel Management; exceptions are very rarely granted.
- Interns are subject to fingerprinting and background checks. Match result and selection decisions are contingent on passing these screens.
- VA training occurs in a health care setting. Some of the patients served by VA are elderly or infirm, and could succumb to common illnesses like influenza. It is important to be able to document that your vaccinations are up to date and that you have been screened for active tuberculosis prior to starting your training at VA or other hospitals. Securing a statement from university student health center, your regular health provider, or an urgent care clinic can expedite your appointment. Additionally, maintaining a current flu vaccination during the training year (or taking additional preventative measures to limit patient exposure to the flu) will be required. Please discuss this with the program training director after you have matched and well before to your start date to facilitate your onboarding.
- As are other employees, matched interns are subject to random selection for drug screening exams once on staff.
- Doctoral student in good standing at an American Psychological Association (APA) or Canadian Psychological Association (CPA) accredited graduate program in Clinical, Counseling, or Combined psychology or Psychological Clinical Science Accreditation System (PCSAS) accredited program in Clinical Science. Persons with a doctorate in another area of psychology who meet the APA or CPA criteria for respecialization training in Clinical, Counseling, or Combined Psychology are also eligible.
- Approval for internship status by graduate program training director.

If you have more specific questions regarding eligibility requirements, including drug testing and background checks, please refer to the OPM website (https://www.opm.gov/).

Application Information:

- The deadline for filing applications and required documentation is November 15th.
- The VA BHHCS Psychology Internship is a participant in the APPIC Matching Program (#155512) and utilizes the “APPIC APPLICATION FOR PSYCHOLOGY INTERNSHIP.” This form should be completed online through the APPIC website: http://www.appic.org/
Apply to the program by including all the following information in the online APPIC application:

- Completed APPIC online application - APPI; which can be accessed at the APPIC Web Site: http://www.appic.org/
- In the APPI cover letter, a description of the applicant's specific interest in our internship program.
- Three (3) letters of recommendation from the applicant’s closest faculty advisors or practicum supervisors stressing the areas of training that should receive particular attention.
- Graduate school transcript(s)

NOTE: After receipt of the initial application package all communication will be accomplished via the e-mail address provided on the APPIC application unless otherwise specified. Applicants who have been selected during the uniform notification period will need to complete a Standard Form 171 for the appointment to be processed. All new Medical Center employees are subject to background checks and a random drug screen during their orientation period. Interns are included in the random selection for drug screening during their appointment. Because of significant time delay between completion of criminal background checks and the start of the internship year, interns, immediately upon selection will be instructed to begin the procedure for completing this background check.

The Internship Training Faculty will review applications and invitations for interviews will be extended to highly ranked applicants.

Notification of acceptance
The VA Black Hills Medical Center training program abides by APPIC and APA guidelines in the selection of interns. As required under APPIC policies, offers to interns may not be made before Match Day. Further, the VA Medical Center is an Equal Opportunity Employer. The selection of interns is made without discrimination on the basis of race, color, religion, sex, national origin, politics, marital status, physical handicap, or age.

Program Schedule and Benefits

Schedule
The internship year begins in the middle of July and is divided into 3 four-month rotation experiences. The intern is required to complete a minimum of 2080 hours of training during the internship year and can expect to work 40 hours per week. There are ten paid federal holidays that apply to interns at the VA BHHCS. The intern accrues 104 hours (13 days) of annual leave per year, which must be used prior to the end of the internship training year. Additionally, interns accrue 104 hours (13 days) of sick leave per year. Interns are not required to use their accrued sick leave; however, they will not be paid the unused amount.

Stipends
Three internship positions are made available for 2080 hours each internship year for graduate level students from APA accredited doctoral programs in Clinical or Counseling Psychology. The program does not accept non-stipend, doctorate level interns in psychology. The Department of Veterans Affairs provides the stipends for these intern positions. All intern stipends are paid at
the nationwide amount determined annually by the VA Office of Academic Affairs. Current stipend information can be accessed on the VA Psychology Training website: http://www.psychologytraining.va.gov/

**Office Space**
The Psychology Internship at VA BHHCS provides office space for interns in compliance with APA Accreditation requirements. Offices are equipped with computer access to medical records, the internet, word processing, and e-mail.

**Library and Information Resources**
The VA BHHCS maintains access to a professional online library. This facility offers access to current journals, such as PSYCH-LIT and MEDLINE. Interns are free to utilize the library services to support their training and research needs.

**Liability Coverage**
Interns working under the supervision of psychologists at VABHHCS or at facilities with whom the Medical Center is providing contractual work are protected by the Federal Tort Claims Act, which provides for the Federal Government assuming the liability for professional practice of one’s duties within the scope of employment.

### Psychology Setting

The VA Black Hills Health Care System (VABHHCS) is affiliated with the University Of South Dakota School Of Medicine, and offers training for graduate and doctoral students. In addition to psychology interns, affiliations with other educational institutions provide intensive training experiences and continuing education for registered nurses, psychologists, physicians, pharmacists, physical therapists, podiatrists, counselors, occupational and manual arts therapists, and social workers. The VABHHCS is staffed with approximately 1,200 full and part-time employees. Staff physicians and consultants provide health care in a number of major specialties. The medical center staff is supplemented with volunteers from local and national service organizations, which provide a variety of services to patients.

**Psychology Internship Program**
The VABHHCS Psychology Internship Program in Health Service Psychology is an APA-accredited program that offers training to doctoral level interns. The responsibilities for supervising the psychology interns reside with the Psychology Staff of the VABHHCS.

The first week of the internship consists of a comprehensive orientation. At the end of the first week of orientation, the intern drafts a statement of training and educational goals for the internship year. The intern’s year of training will be based on and guided by this statement, advice of the intern’s graduate program director, and input from the internship faculty. The intern’s training plan may be changed during the training year, with the approval of the Clinical Training Committee.

The Clinical Training Committee has the responsibility of managing the program and coordinating all aspects of the training experience. A psychologist designated to be the Director of Clinical Training within the Mental Health Service Line (MHSL) chairs the Committee.
**Overall Goal**
The VABHHCS Psychology Internship Program is designed to provide students with a broad range of experiences in a variety of service delivery modalities with diverse client/patient populations to prepared them to be competent generalist practitioners. Interns are provided with the educational and experiential opportunities necessary for them to develop the confidence and competence to engage in the independent practice of professional psychology. The training program, by nature, is strongest in providing experience focused on rural and frontier healthcare. Consistent with the Practitioner Model of training, VABHHCS Psychology Internship Program strives to help interns develop the knowledge and skills necessary to function responsibly and independently as clinicians in a range of institutional, private, and academic settings.

**Core Competencies**
Each intern is expected to develop and demonstrate certain core competencies during the internship year. These core competencies are taught, monitored, and evaluated during each trimester placement. Successful completion of the internship requires the demonstration of these core competencies. Satisfying core competencies requires demonstration and observation of a level of knowledge and skill expected of an intern who is preparing to enter the professional practice of psychology. These core behaviors are addressed in seminars dealing with professional and personal ethics and are demonstrated and evaluated by direct/indirect observation, in case presentations, and in trimester evaluations by supervisors, as well as through individual and group supervision. Discussions with interdisciplinary staff, with whom the intern interacts within their various experiences, also become reflected in weekly supervision records. Core competencies are also addressed through evaluation at the beginning of the internship experience and in the various experiences by both trimester evaluations and roundtable discussions.

**Profession-Wide Competencies**
Our program incorporates experiential and didactic training in the following profession-wide competencies:

1) **Research** – Interns will be able to integrate current research and literature into their clinical practice and demonstrate critical thinking skills when presenting and discussing relevant research.

2) **Ethical and legal standards** - Interns should demonstrate knowledge of ethical and legal principles including the APA Ethical Principles and Code of Conduct. They will demonstrate an awareness of ethical delimas as they arise and apply ethical principles in decision making processes.

3) **Individual and cultural diversity** – Interns will demonstrate an awareness of their own personal/cultural background that may affect interactions with people different from themselves. They will show an understanding of current theoretical and empirical knowledge related to individual and cultural diversity and independently apply this knowledge in working effectively with the range of diverse individuals, groups, and communities.
4) **Professional values, attitudes, and behaviors** - Interns will conduct themselves across settings and contexts in a professional manner with staff and patients consistent with the values and attitudes of psychology. They will show opennessness and responsiveness to feedback from supervision. They will demonstrate the ability to manage work load and administrative tasks, as well as complete timely documentation. Interns will demonstrate professional judgment and responsibility with increasing independence and autonomy commensurate with increasing competency development throughout the training year.

5) **Communication and interpersonal skills** – Interns will communicate effectively verbally, nonverbally, and in writing. They will communicate psychological information to other professionals as well as patients and their families in a manner that is organized, concise, and understandable.

6) **Assessment** - Interns will be able to assess patients with a broad range of problems using a variety of psychological assessment instruments. They will gain proficiency in selecting assessment measurements, conducting clinical interviews, and integrating information from multiple sources to formulate accurate DSM diagnoses and develop clear case conceptualization that lead to appropriate treatment plans and recommendations tailored to answer the referral questions.

7) **Intervention** - Interns will be able to establish and maintain therapeutic rapport in the context of individual or group psychotherapy. They will demonstrate the ability to collaborate with patients and interdisciplinary teams in developing appropriate treatment plans and therapeutic goals addressing the patient’s presenting problem(s). Intern will utilize evidence-based psychotherapies as appropriate and demonstrate an awareness of process/relationship issues occurring within the therapeutic relationship. Interns will be able to identify and manage crisis needs and/or unexpected or complex situations. They also should be able to effectively coordinate their interventions with other members of the interprofessional team involved with the patient’s care.

8) **Supervision** - Interns will develop knowledge of supervision models and apply this knowledge in direct or simulated practice. Interns will provide effective supervised supervision to trainees (when available) or peers in typical cases appropriate to the service setting.

9) **Consultation and interprofessional / interdisciplinary skills** – Interns will demonstrate knowledge and respect for the roles of other professions. They will apply knowledge of consultation models and practices to contribute to team planning within interdisciplinary teams and gather appropriate data in order to answer the consultation need. Interns will show an awareness to consult with psychologists and professionals from other disciplines in the care of their patients.
Interns will be required to complete two of the following rotations, in addition to the mandatory rotation (Outpatient/Inpatient Mental Health), to complete the internship program.

**Outpatient/Inpatient Mental Health**

This mandatory rotation consists of outpatient services through the Mental Health Clinic and inpatient services through the Inpatient Psychiatric Unit (Ward 148). Interns will be required to follow patients through both of these areas and may also be called upon to provide unique duties for each service when required.

Psychologists working in the Outpatient Mental Health Clinic provide direct care services including assessment, treatment, and consultation to Veterans in need of these services and are referred by their primary physician. Clients are often referred following inpatient treatment of a substance abuse problem or major mental illness. Initial assessment and treatment for individuals entering directly through the outpatient care system include diagnoses of personality disturbances, psychoses, anxiety disorders, paraphilias, and mood disorders. Team meetings are held for case discussion to address treatment progress and changes in the provision of treatment. When feasible, family therapy and marital therapy are instituted to augment the treatment of a veteran.

The Inpatient Psychiatric Unit (Ward 148) at the Fort Meade Campus is a 10 bed locked inpatient unit staffed by PAs, RNs, LPNs, Nursing Assistants, a psychiatrist, a psychologist, a social worker and a Nurse Practitioner. The patient population of the unit represents a broad spectrum of psychiatric disorders. Psychological services on Ward 148 include formal psychological consultation reports for diagnosis and treatment planning and other consultation requests such as assessment of suicidality and dangerousness, interview-based diagnostic formulations, individual and group psychotherapy, interventions for behavior management, and discharge planning.

**Goals of Outpatient/Inpatient Mental Health**

On this rotation the intern: will assume progressively independent responsibility for the treatment and assessment of patients enrolled in the Outpatient Mental Health Clinic and Inpatient Psychiatric Unit; will learn to view cases from the perspective of risk management, utilization review, and treatment efficacy; will be exposed to ethical, legal and professional considerations as they impact patient care in inpatient and outpatient settings; and will further delineate and develop a theoretical orientation and adapt it to cases within these settings.

**Health Psychology**

The Integrated Health Psychology experience features assessment; individual, couples and group psychotherapy; and consultation for Veterans with a wide variety of disorders and medical conditions. The primary treatment activities are at the Ft. Meade campus, and include inpatient
and outpatient Health Psychology-Primary Care and participation in the Ft. Meade Multidisciplinary Pain Team. We use a biopsychosocial model of care, which incorporates evidence-based treatment modalities, and complementary and alternative interventions to serve our patients, many of whom have co-occurring disorders. Our treatment teams include a health psychologist(s), physicians, physician assistants, social workers, nurses, nurse practitioners, LPNs, dietitians, pharmacists, occupational therapists, physical therapists, and addiction therapists. We actively contribute to Primary Care, Mental Health, and Geriatrics and Extended Care Services and apply Health Psychology principles and practices, including a wide variety of assessment and treatment interventions, and program evaluation and development.

**Goals of the Health Psychology Experience**

Our service gives the intern experience with the broad range of activities necessary for the effective treatment of a wide variety of conditions, disorders and diseases in the Mental Health, Primary Care and other service lines, with the goal of providing truly integrated care. The intern will become familiar and skilled with evidence-based approaches such as cognitive-behavioral interventions, psychoeducational activities, as well as complementary and alternative approaches. They will learn professional skills of case conceptualization and development of treatment goals and objectives within a biopsychosocial framework, inter-professional relationship enhancement, and ethical and professional responsibilities.

**Independent Clinic Mental Health Experience**

This experience comprises one full rotation with emphasis on developing an independent clinic offering outpatient mental health experiences with opportunities for assessment/group therapy/consultation with an intensive outpatient addictions program. The highlight of this rotation is to learn how to develop an outpatient practice. Either the outpatient mental health component or the addictions component can be taken as specialty experiences within the rotation.

**B. Outpatient Mental Health**

Veterans in the Rapid City area are provided with outpatient psychological services at the Rapid City VA Clinic. The intern will be able to serve as the primary therapist for Veterans and offer individualized treatment for their specific needs, which is representative of the psychologist role seen in an outpatient mental health clinic. The intern will conduct psychological assessments, administer psychological tests, respond to consults, and conduct individual, couples, and family psychotherapy. This rotation offers an exceptional experience in working independently in the psychologist role. While there is contact with medical staff, one psychiatrist, and one psychiatric physician’s assistant, the intern will have more freedom to work autonomously with their clients compared to other VA service programs in the hospital setting.

**C. Rapid City Addiction Disorders Service**

Veterans with addiction disorders and dual diagnoses are treated in an outpatient evening format. Individual and group approaches are employed. The treatment program follows an individualized approach for the Veteran who would be expected to accomplish
treatment goals within four to six weeks. Interns serve as primary therapists, complete psychological assessments, provide individual psychotherapy, facilitate therapy groups, administer psychological tests, write integrative summaries and provide consultation to the multidisciplinary addiction disorders treatment team. The intern would be expected to contribute to individualized treatment planning and be vital members of the addiction disorders treatment team consisting of addiction therapists, a social worker, nurses and a physician's assistant. This rotation offers a unique opportunity to work with families and significant others as another modality to augment sobriety and mental health for the Veteran.

**Neuropsychology**

The Neuropsychology experience features assessment, consultation, and treatment for patients with neurological disorders that affect their cognitive functioning. Disorders typically seen on the rotation include: Dementia of the Alzheimer's Type, Dementia Associated with Alcoholism, Traumatic Brain Injury, Brain Tumors, Parkinson's Disease, Stroke, Anoxia, Toxic Poisoning, Attention Deficit Disorder, and Learning Disabilities. Referrals come from inpatient and outpatient physicians, and from within the VA Black Hills Health Care System (including Primary Care, Mental Health Services, Substance Abuse Treatment Services, Extended Care, Medicine, and Surgery). The patients served include males and females from Caucasian, Native American and other ethnic backgrounds.

The experience follows a model of gradually increasing involvement. It begins with the intern observing the neuropsychologist, then becoming a co-assessor, and finally conducting complete neuropsychological assessments, under the supervision of the neuropsychologist. Interns coming into the program with advanced neuropsychology and/or testing skills will advance more quickly with regard to involvement in the evaluation process. Interns may have the opportunity to attend and participate in the Polytrauma/TBI Clinic. Opportunities exist for those interested in individual and group cognitive rehabilitation.

**Goals of the Neuropsychology Experience**

The Neuropsychology experience at the Fort Meade Campus is designed to acquaint interns with neuropsychological assessment if they have not had such experience thus far. This rotation also provides the opportunity to advance the skills of interns who enter the program with previous neuropsychological experience. Interns will become proficient in interviewing clients, choosing and administering test batteries, scoring and interpreting test results, writing neuropsychological reports, providing feedback to clients on the assessment results and consulting with referral sources on how to best implement the recommendations provided by the evaluation. For those interns desiring to enter the field of neuropsychology, the experience will need to be followed by a post-doctoral residency in neuropsychology.

**Outpatient PTSD Clinical Team (PCT)**

The Outpatient PTSD Clinical Team (PCT) experience features assessment, consultation, case management, and treatment for veterans with a diagnosis of Post Traumatic Stress Disorder and co-occurring disorders. The Outpatient PCT rotation is located in the Rapid City and Pine Ridge...
Community Based Outpatient Clinics. Initial contact with the veteran may be while he/she is on inpatient status (usually Fort Meade), in residential treatment in Hot Springs, in outpatient treatment (usually primary care) or just transitioning from active military service. Treatment may also extend to the veteran’s family and/or significant others. Referrals originate from inpatient and outpatient physicians at the VA Black Hills Health Care System (predominately Psychiatry, Addictive Disorders and Primary Care), the Rapid City Vet Center, veteran’s organizations, and self-referrals. During this rotation, interns work with veterans who have combat and military-related PTSD as well as veterans exposed to Military Sexual Trauma (MST). The veterans served include a significant proportion of Native American veterans (approximately 15 – 20%). Because of the nature of the populations serviced, this rotation follows a model of gradual involvement that varies in course depending upon the skills and rapport-building capabilities of the intern, individual client characteristics, and the severity of the PTSD issues.

**Goals of the PTSD Clinical Team (PCT) Rotation**

The PCT experience is designed to acquaint the intern with a greater understanding and appreciation of the military-related issues associated with PTSD, and how to help treat these issues in veterans with those challenges. The intern will, by the end of the rotation, gain skills in diagnosing PTSD, as well as formulating and implementing treatment strategies for PTSD and other related conditions. The intern will show a greater understanding of the etiological dynamics of combat and military-related PTSD, and demonstrate knowledge of evidence based therapies in the treatment of PTSD. These include Prolonged Exposure (PE), Cognitive Processing Therapy (CPT), and Cognitive Behavioral Treatment for Insomnia (CBTi). In addition to a regular case load of patients, the intern will co-facilitate two treatment groups. The intern will become part of a multidisciplinary team and develop an understanding of the role of a professional psychologist in such a setting.

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**Minor Rotations (Optional)**

Interns may choose from the following minor rotations for up to 8 hours per week depending on scheduling of major and minor rotations of entire intern class.

**Addiction Disorders Services**

Veterans with addiction disorders and dual diagnoses are treated in an outpatient evening format. Individual and group approaches are employed. The treatment program follows an individualized approach for the Veteran who would be expected to accomplish treatment goals within four to six weeks. Interns serve as primary therapists, complete psychological assessments, provide integrative summaries and provide consultation to the multidisciplinary addiction disorders treatment team. The intern would be expected to contribute to individualized treatment planning and be vital members of the addiction disorders treatment team consisting of addiction therapists, a social worker, nurses and a physician’s assistant. This minor rotation offers a unique opportunity to work with families and significant others as another modality to augment sobriety and mental health for the Veteran.
Extended Care Behavioral Health Services

(Geropsychology/Rehabilitation/Convalescence/Nursing Home/Hospice)

The Extended Care experience features assessment, consultation and treatment for Veterans of all ages rehabilitating from medical and surgical issues, many of whom have psychiatric and neurological disorder. Disorders typically seen on the rotation include: PTSD, Schizophrenia, Bipolar Disorder, Depression, Anxiety, Dementia, and TBI. Referrals come from the medical team associated with the 80 bed unit. The patients served include male and females of Native America, Caucasian and other ethnic backgrounds.

Some patients have no psychiatric disorders, but require support and assistance in various life transitions, some created by their medical condition, including dying. Interns will be involved in the routine depression and mental status screening, participate in weekly team meetings, and work with patients with a wide range of issues as indicated above. They will provide a minimum of one in-service presentation to nursing staff (15-20 minutes) and may be given the opportunity to present in other settings.

The experience follows a model of gradually increasing involvement. It begins with the intern observing the milieu and the psychologist, then becoming co-assessor/so-therapist, and finally independent assessment and therapy under the supervision of the psychologist. The intern will relearn and explore the critical nature of the therapeutic relationship as it applies to life transitions.

Interns will be able to participate in specific activities including but not limited to:

1) Assist Veterans receiving short term rehabilitation services (G ward) for issues related to coping skill development, motivation, pain management, family dynamics, transition problem solving, adjustment, depression, anxiety, etc.
2) Assisting Veterans who are receiving long term care, more traditional nursing home care (G&E Wards) who may need support, coping with placement medical condition, etc.
3) Participate in dementia care and Star-va program. Intern can assist with dementia related cognitive evaluations, capacity evals, etc.
4) Assist Hospice patients and families (E Ward) by providing support for death and dying issues, psychospiritual issues of “what’s next,” family dynamics, grief, etc.
5) Participate in Behavioral Recovery Outreach (BRO) program by going out in the community helping to problem solve and assist with treatment/treatment planning for difficult cases, and training other agencies on Star-va program.
6) Work in “huddles” teaming with nurses, recreation therapy, occupational therapy, physical therapy, geriatric psychiatry, etc.
7) Provide training to nursing staff and line staff on geropsych issues.

Goals of the Extended Care Experience

The extended care experience at the Fort Meade VAMC is designed to acquaint the intern with geropsychological assessment, support and intervention procedures, as well as consultation and membership in the treatment team. Interns completing the experience will have basic competencies in administering, scoring and interpreting assessment instruments appropriate to the setting.
Health Psychology
The intern may choose this experience as a minor rotation. The description for this rotation is similar to the Health Psychology major rotation; however the time committed as a minor rotation would be substantially less.

Neuropsychology
The intern may choose this experience as a minor rotation. The description for this rotation is similar to the Neuropsychology major rotation; however the time committed as a minor rotation would be substantially less.

PTSD Clinical Team (PCT)
The intern may choose this experience as a minor rotation. The description for this rotation is similar to the PTSD major rotation; however the time committed as a minor rotation would be substantially less.

Areas of Emphasis (Optional)
Interns may choose the following emphasis throughout their internship year (and other emphasis as they become available)

Psychopharmacology Emphasis
Interested interns may select an emphasis in psychopharmacology. Throughout each rotation they will have opportunities to observe various prescribing providers (psychiatrists, physician assistants, nurse practitioners) as they work with patients. Working directly with the prescribing providers affords the interns with a valuable experience in the processes of med management and additional perspectives on diagnosis and treatment.

Geropsychology Emphasis
Interested interns may select an emphasis in geriatric psychology. As the U.S. demographics shift to an increasingly older population and demands for medical/psychological services increase among this population, experience and training specific to older adults has become more important. Although our internship does not have a formal geropsychology tract, the geropsychology emphasis allows the intern to obtain supervision and experience in the specialty area of geropsychology while maintaining the overall focus on generalist training. Throughout each rotation interns will have opportunities to work with patients in late adulthood to gain experience in assessment and treatment that are unique to this population, and to gain an understanding of the similarities and differences in providing services to this culturally diverse age group.
Supervision Model

The supervision arrangement described in this section is designed to assure a minimum of four hours of structured supervision weekly to interns.

One-to-One Supervision
Each intern must receive a minimum of two hours of required, direct, individual supervision per week with his or her experience supervisor. For a split experience involving two supervisors, each supervisor provides a minimum of one hour of individual supervision per week. Activities such as case discussion, supervisory observation, critique of assessment or consultation/psychological report writing, discussion of professional/ethical issues, progress in clinical skill development satisfy the two-hour individual supervision requirement.

Additional Required Supervision
In addition to the two hours of weekly required individual supervision described above, each intern must receive a minimum of two hours of supervision per week with a licensed psychologist or qualified mental health professional present in any combination of learning activities such as individual or group co-therapy, group therapy debriefing, individual supervision, group supervision, or case conferences or discussions involving cases in which the intern is actively involved. Supplemental required supervision is not satisfied by intern attendance at didactic seminars, workshops, presentations, etc.

Informal supervision is available as needed by the intern. Discussion sessions and coffee break discussions are readily available with most staff members.

Intern Meeting/Peer Supervision
One hour per week is set aside for interns to meet together as a group, in order to provide peer supervision, a forum for mutual professional support, and as an opportunity to learn about the development of collegial professional relationships. Interns are released from competing activities at this time.

Seminars
Seminars by internship faculty and guest presenters are held weekly for the benefit of interns. General topics, such as ethical and professional issues in the practice of psychology, diagnosis and management of mental disorders, interviewing techniques, psychological assessment, cross-cultural issues, model of supervision, rural ethics and many other specialty topics relevant to the professional practice of psychology are presented. Interns are free to suggest additional topics they would like to see addressed. In addition, interns are asked to evaluate the effectiveness of each seminar. At the beginning of the year and at the end of each trimester the interns are asked to make recommendations to the Clinical Training Committee for changes in the seminar schedule for the coming year. Attendance at seminars is required, although an intern may be excused by the Director of Clinical Training.

Other Educational Activities
The VA BHHCS is affiliated with the University of South Dakota School of Medicine. On a periodic basis, consultants in psychiatry or psychology from the Medical School visit the Medical Center to deliver lectures and to engage in case consultation. Grand Rounds are held
monthly and may include topics of special interest to staff and students. Interns are encouraged to take advantage of these and other educational opportunities which are given priority over routine rotation duties whenever possible. The South Dakota Psychological Association holds an annual conference, and interns are encouraged to attend. Interns are encouraged to present during special facility-wide and/or mental health service line education days on areas they identify as their specialty. Interns also participate in an interdisciplinary training experience with pharmacy students/residents. This training opportunity is held monthly (approximately) and involves a group discussion regarding where psychology interns and pharmacy students present on a specific diagnosis/diagnostic category from their professional perspective and aid in increasing the understanding and value each profession offers to patient care.

### 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 Director 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. 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.
Internship Program Admissions

The VA BHHCS Psychology Internship Program is designed to provide students with a broad range of experiences in a variety of service delivery modalities with diverse client/patient populations to prepared them to be competent generalist practitioners. Interns are provided with the educational and experiential opportunities necessary for them to develop the confidence and competence to engage in the independent practice of professional psychology. The training program, by nature, is strongest in providing experience focused on rural and frontier healthcare. Consistent with the Practitioner Model of training, VABHHCS Psychology Internship Program strives to help interns develop the knowledge and skills necessary to function responsibly and independently as clinicians in a range of institutional, private, and academic settings.

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

<table>
<thead>
<tr>
<th>Description</th>
<th>NO</th>
<th>YES</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Direct Contact Intervention Hours:</td>
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<td>XX</td>
<td>250</td>
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<tr>
<td>Total Direct Contact Assessment Hours:</td>
<td>N/A</td>
<td>XX</td>
<td>50</td>
</tr>
</tbody>
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Describe any other required minimum criteria used to screen applicants:

- U.S. citizenship
- Male applicants born after 12/31/1959 must have registered for the draft by age 26
- Matched interns are subject to fingerprinting and background checks. Match result and selection decision are contingent upon passing these screens
- As are other employees, matched interns are subject to random selection for drug screening exams once on staff
- Doctoral student in an American Psychological Association (APA) or Canadian Psychological Association (CPA) accredited Clinical or Counseling Psychology program, or in an APA or CPA approved re-specialization training program in Clinical or Counseling Psychology
- Approval for internship status by graduate program training director

Financial and Other Benefit Support for Upcoming Training Year*

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
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<tbody>
<tr>
<td>Annual Stipend/Salary for Full-time Interns:</td>
<td>$26,166</td>
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<td>Annual Stipend/Salary for Half-time Interns:</td>
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<tr>
<td>Program provides access to medical insurance for intern?</td>
<td>Yes</td>
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<tr>
<td>Trainee contribution to cost required?</td>
<td>Yes</td>
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<tr>
<td>Coverage of family member(s) available?</td>
<td>Yes</td>
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<tr>
<td>Coverage of legally married partner available?</td>
<td>Yes</td>
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<tr>
<td>Coverage of domestic partner available?</td>
<td>No</td>
</tr>
<tr>
<td>Hours of Annual Paid Personal Time Off (PTO and/or Vacation):</td>
<td>104; 4 hours per pay period</td>
</tr>
<tr>
<td>Hours of Annual Paid Sick Leave:</td>
<td>104; 4 hours per pay period</td>
</tr>
<tr>
<td>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?</td>
<td>Yes, in certain circumstances under the discretion of the training committee</td>
</tr>
<tr>
<td>Other Benefits (please describe):</td>
<td>N/A</td>
</tr>
</tbody>
</table>
Initial Post-Internship Positions

(Provide an Aggregated Tally for the Preceding 3 Cohorts)  

<table>
<thead>
<tr>
<th></th>
<th>2015-2018</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Total # of interns who were in the 3 cohorts:</strong></td>
<td>9</td>
</tr>
<tr>
<td><strong>Total # of interns who did not seek employment because they returned to their doctoral program/are completing doctoral degree</strong></td>
<td>1</td>
</tr>
<tr>
<td>PD</td>
<td>EP</td>
</tr>
<tr>
<td>Community mental health center</td>
<td>0</td>
</tr>
<tr>
<td>Federally qualified health center</td>
<td>0</td>
</tr>
<tr>
<td>Independent primary care facility/clinic</td>
<td>0</td>
</tr>
<tr>
<td>University counseling center</td>
<td>0</td>
</tr>
<tr>
<td>Veterans Affairs medical center</td>
<td>1</td>
</tr>
<tr>
<td>Military health center</td>
<td>0</td>
</tr>
<tr>
<td>Academic health center</td>
<td>0</td>
</tr>
<tr>
<td>Other medical center or hospital</td>
<td>1</td>
</tr>
<tr>
<td>Psychiatric hospital</td>
<td>1</td>
</tr>
<tr>
<td>Academic university/department</td>
<td>0</td>
</tr>
<tr>
<td>Community college or other teaching setting</td>
<td>0</td>
</tr>
<tr>
<td>Independent research institution</td>
<td>0</td>
</tr>
<tr>
<td>Correctional facility</td>
<td>0</td>
</tr>
<tr>
<td>School district/system</td>
<td>0</td>
</tr>
<tr>
<td>Independent practice setting</td>
<td>0</td>
</tr>
<tr>
<td>Not currently employed</td>
<td>0</td>
</tr>
<tr>
<td>Changed to another field</td>
<td>0</td>
</tr>
<tr>
<td>Other</td>
<td>0</td>
</tr>
<tr>
<td>Unknown</td>
<td></td>
</tr>
</tbody>
</table>

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

**Dr. Melissa Boyer**
Psy.D. Clinical Psychology, Argosy University-Twin Cities, 2007
Dr. Boyer is a Primary Care Mental Health Integration Psychologist co-located in Primary Care. As a PCMHI psychologist she works with a Veteran’s primary care treatment teams to help assess and meet the mental health needs of the Veteran. Common concerns addressed in a primary care setting include stress, anxiety, feeling down, irritability, and trouble sleeping. Behavioral and motivational interventions are also provided to help support tobacco cessation, weight loss, and adjustment to chronic illness. Dr. Boyer is a national trainer for the VA PCMHI program.

**Dr. Thomas Curtin**
Ph.D. Counseling Psychology, University of Notre Dame, 1992
Dr. Curtin is currently the psychologist on the Behavioral Recovery Outreach (BRO) and STAR-VA geriatric teams. These teams serve the CLC units with long term care, hospice, and short term rehab services. The BRO team serves the wider community in assisting veterans to be successful in their placements and training nursing homes and assistant living facilities in behavioral management principles. The BRO and STAR-VA teams utilize behavioral intervention programs as well as Cognitive/Behavioral strategies. Dr. Curtin also has a Masters of Divinity degree (University of Notre Dame, 1986), and brings psychospiritual counseling strategies to hospice care and end of life issues in long term care.

**Dr. Jeff Ellison**
Psy.D. Neuropsychology, School of Professional Psychology at Forest Institute, 2009
Dr. Ellison is a psychologist in the neuropsychology clinic at the VA Black Hills Health Care System (VABHHCS). After his internship at the Topeka VA, he worked for the Sioux Falls VAHCS for 10-years as a neuropsychologist, compensation and pension examiner, and MH service line director before relocating to the VA in Fort Meade, SD. His primary responsibilities are completing outpatient and inpatient neuropsychological evaluations. He previously provided coordination for and supervision of University of South Dakota practicums in neuropsychological assessment at the Sioux Falls VA as an adjunct faculty member. Dr. Ellison was also appointed by the governor to the South Dakota board of Psychology Examiners where he continues to hold a position. Prior to earning his doctorate in clinical psychology, Dr. Ellison served on active duty in the US Army until he retired from military service in 2005. In his free time, he enjoys a number of outdoor hunting activities and spending time with his family.

**Dr. Mindy Hedlund**
Ph.D. Clinical and Community Psychology, University of Maryland-College Park, 1994
Dr. Hedlund is currently the Assistant Chief of Psychology for VA Black Hills and assists with some supervision of the Inpatient/Outpatient major rotation. She has worked for over 20 years in private practice providing outpatient mental health services that included individual, couples, family and group psychotherapy, therapeutic evaluations, forensic evaluations as well as
consultation to a wide variety of agencies. She has received VA Evidence Based Training in Cognitive Processing Therapy and for the Strength At Home program (for veterans who engage in intimate partner violence). She has also participated in training for Prolonged Exposure for PTSD, Cognitive Behavior Therapy for Insomnia, and Mindfulness Based Stress Reduction. Her therapeutic orientation is somewhat eclectic, combining elements of a psychodynamic theory with cognitive behavioral, mindfulness and process oriented approaches.

**Dr. Patrick J. Keohane**  
**Ph.D. Clinical Psychology, University of Maine, 1995**  
Dr. Keohane is a clinical psychologist who provides outpatient psychological services at the Rapid City VA Clinic and serves as the primary clinical supervisor for the Independent Mental Health Clinic Experience offered at the Rapid City clinic. He is interested in cognitive behavioral and humanistic approaches to psychotherapy.

**Dr. Hilary Kindsfater**  
**Ph.D. Clinical Psychology, University of South Dakota, 2008**  
Dr. Kindsfater is currently the assistant training director for the doctoral psychology internship in health service psychology. She is a clinical psychologist currently working with the Multidisciplinary Pain Team. She has received specialized training through the VA Evidence Based Therapy Training Initiative in the following therapies: Cognitive Behavioral Therapy for Chronic Pain (CBT-CP); Prolonged Exposure Therapy (PE) for PTSD; Cognitive Processing Therapy (CPT) for PTSD; Interpersonal Psychotherapy for Depression (IPT); and Integrated Care for Smoking Cessation. She is a National Training Consultant for the Interpersonal Psychotherapy for Depression (IPT) training program. She utilizes cognitive behavioral themes in individual and group therapy.

**Dr. Scott Krebs**  
**Ph.D. Clinical Psychology, University of North Dakota, 1994**  
Dr. Krebs is a clinical psychologist associated with the PTSD Clinical Team (PCT) in the Rapid City CBOC and also conducts an outreach clinic serving Veterans at the Pine Ridge Reservation. Dr. Krebs has served as an active duty military psychologist for over 21 years, working with service members in war zones/deployed settings and stateside locations. He utilizes a cognitive behavioral approach in treating PTSD and associated trauma related conditions.

**Dr. Kyle Lythgoe**  
**Training Director**  
**Psy.D. Clinical Psychology, California School of Professional Psychology-LA, 1997**  
Dr. Lythgoe is currently the training director for the doctoral psychology internship in health service psychology. He is a clinical psychologist currently supervising the Inpatient/Outpatient rotation. Dr. Lythgoe has received specialized training through the VA Evidence Based Therapy Training Initiative in the following therapies: Cognitive Behavioral Therapy for Insomnia (CBT-
I); Prolonged Exposure Therapy (PE) for PTSD; Cognitive Processing Therapy (CPT) for PTSD; Cognitive Behavioral Conjoint therapy for PTSD. He also received training in Prolonged Exposure Therapy (PE) for PTSD with the United States Army. Dr. Lythgoe has provided care in multiple settings, including private practice, private hospital inpatient and outpatient, and within the VA. Dr. Lythgoe has served in the Nebraska Army National Guard as a clinical psychologist since 2007. He practices as a generalist utilizing mostly cognitive behavioral orientation but with years of experience with other modalities.

**Dr. Adam Sumner**  
**Ph.D. Counseling Psychology, University of Minnesota-Twin Cities, 2013.**  
Dr. Sumner is a counseling psychologist currently working in primary care mental health integration (PCMHI) at the Rapid City CBOC. Dr. Sumner works from a generalist perspective while also having special interest and training in Dialectical Behavior Therapy (DBT), Process Experiential Therapy, Men’s Issues, Sexual Identity Development, Multicultural Counseling, and Supervision. Dr. Sumner is a registered Health Services Psychologist with previous experience in university mental health and rural home-based family therapy.
The VA BHHCS is located in a region encompassing the historic and beautiful Black Hills of Western South Dakota. The Fort Meade campus was originally established as a frontier cavalry post, named after General George Meade, leader of the Union Forces at the Battle of Gettysburg. The first troops were the remnants of General Custer’s command following his defeat in the Battle of the Little Big Horn. Most of the post’s approximately 89 original buildings are fully restored and serve as administrative offices for the Medical Center, and as on-station housing for Medical Center employees. Many of the buildings are on the Historical Register. Fort Meade was deactivated as an Army Post in 1945 and the facilities transferred to the Veterans Administration, now the Department of Veterans Affairs. The Hot Springs Campus was originally constructed in 1907, as the Battle Mountain Sanatorium. The hospital and sanatorium were later transferred to the Veterans Administration. It too has the distinction of being placed on the National Register of Historic Places.

The town of Sturgis is located one mile from Fort Meade and has a population of approximately 6,800 people. Bear Butte State Park, located just outside of Sturgis, is a lone mountain that is considered sacred by many Native American tribes. A small bison herd roams the base of the mountain. Sturgis is also the home of one of the most popular motorcycle rallies worldwide. During the second week in August, the rally draws thousands of bikers for a first class motorcycle rally.

Rapid City, located approximately 30 miles south-east of Sturgis via interstate 90, with a population of approximately 75,000 people provides large shopping centers, parks, and recreational facilities, and offers live theater, a symphony orchestra, and other cultural events and entertainment, and some excellent dining. Ellsworth Air Force Base, just east of Rapid City, is a major military installation.

Black Hills area educational facilities include elementary and secondary schools in Sturgis, Rapid City, Spearfish, and Hot Springs. Additional educational facilities include one area Vocational Technical School, Black Hills State University in nearby Spearfish, South Dakota State University extension graduate degree programs, South Dakota School of Mines and Technology, South Dakota State University School of Nursing, and National American University in Rapid City.

Agriculture, ranching, tourism, and logging are primary area industries, but mining and other mineral technologies are major contributors to the economy. The Homestake Mine in nearby Lead was the largest operating gold mine in the Western Hemisphere and shut down operations in the early 2000s. It is now the Sanford Underground Research Facility and is a physics
landmark site. It functions as a national underground physics laboratory conducting research on subatomic particles.

Gold, gambling and gunpowder were the three ingredients that combined in explosive proportions in 1876 to create two of the most notorious towns in the Black Hills – the sister cities of Deadwood and Lead in the Northern Black Hills. The area is in the heart of controversy and reconciliation inherited over the past 100 years between the White settlers and the Sioux Nation. This conflict historically brings to mind the names of George A. Custer, Sitting Bull, Crazy Horse, Wild Bill Hickok, Calamity Jane, and places like the Little Big Horn and Wounded Knee. The area continues to search for reconciliation through the courts, the arts, the schools, provision of health services, and economic development. The cultures of the Great Plains are easily explored and savored through literature, art, rodeos, pow-wows, traditional practices, and touring. Many aspects of the Great Plains culture are incorporated into treatment modalities; these include extensive outreach opportunities to area reservations as well as ongoing efforts to bring the dimension of spirituality into health care.

The greater Black Hills area offers a variety of year-round outdoor activities, including hunting and fishing, water and snow skiing, snowmobiling, golfing, camping, horseback riding, gaming, gold panning, mountain biking, and sightseeing. The VA BHHCS is within 100 miles of Mount Rushmore National Memorial, the Badlands National Park, Wind Cave National Park, Jewel Cave National Monument, Devil’s Tower National Monument, Crazy Horse Monument, Custer and Bear Butte State Parks, and the Big Horn Mountains.

The area has churches of most denominations. A small Jewish community in Rapid City holds biweekly services at Ellsworth Air Force Base. Daily and weekly newspapers, four network TV stations, national public television and radio, cable TV, and numerous radio stations serve the area. Most areas are served by fiber-optic cable permitting fast Internet access.

Climate in the Black Hills region tends to be temperate. Midsummer daytime temperatures can be quite warm but comfortable due to low humidity. Evenings are pleasantly cool as a result of light breezes from the cooler higher hills. Winter temperatures overall are moderate, although the mercury occasionally dips to zero and below. Cold days are often tempered by warm Chinook winds, which earn the area the distinction of being known as the “Banana Belt of the Midwest." January temperatures of 60° F occur frequently.

## Housing and Community

Moderately priced housing is available in Rapid City, Sturgis, and Spearfish. Rapid City offers a variety of apartment styles, locations, and homes for rent. Although greater effort is required to locate optimal living quarters in Sturgis, many past interns have been satisfied by these efforts. Commuting time between Rapid City or Spearfish and the Fort Meade Campus is between 30-40 minutes. At times, carpooling with other interns and/or staff is available via the coordination of the intern. The entire area has seen steady moderate growth, which has spurred recent development of housing units in Rapid City, Sturgis, and Spearfish.