

IOWA CITY VA Health Care System

Psychology Internship Training

Internship Program

The predoctoral psychology internship at the Iowa City VA Health Care System located in Coralville, Iowa is fully accredited by the Commission on Accreditation of the American Psychological Association. Our next site visit is scheduled for 2022.

The internship program utilizes the AAPI Online application forms that are available at the [APPIC website](#). At that website, full instructions are available for use of the APPIC Online. The APPIC website is an external link and is not associated with Department of Veterans Affairs. VA does not endorse and is not responsible for any material on external websites. **Each applicant is required to submit a complete set of application materials, including the following:**

- A completed AAPI application form, including the Academic Program's
- Verification of Internship Eligibility and Readiness.
- Curriculum Vitae.
- Three letters of evaluation from individuals familiar with recent academic and
- clinical performance.
- Official transcripts of all graduate training
- A writing sample.

An applicant must be a U.S. citizen in good standing with and recommended for internship by an APA approved PhD or PsyD program in clinical or counseling psychology. The applicant's pre-internship training must include completed coursework and formally supervised applied training in the provision of psychological services to include assessment and psychotherapy. The applicant must demonstrate interests and goals that are consistent with the internship program, the ability to apply assessment and intervention knowledge in clinical areas, appropriate ethical conduct, the interpersonal skills necessary for the professional practice of psychology, and sufficient research skills as evidenced, at a minimum, by dissertation progress.



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APPIC Match Numbers

General Psychology–207411
Neuropsychology - 207412

Applications Due

November 4

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Setting

Iowa City Veterans Affairs Health Care System (VAHCS)

The Iowa City Veterans Affairs Health Care System (VAHCS) is an affiliated teaching hospital and research center located in Iowa City, Iowa. This tertiary care Level I facility is classified as a VHA Level 1c medical center that serves a veteran population residing in 33 counties in eastern Iowa, 16 counties in western Illinois and one county in northern Missouri. In addition to psychology, specialty services include all internal medicine specialties, neurology, dermatology and psychiatry. Inpatient care is provided with 93 acute care beds (with 15 of these in an acute psychiatric inpatient unit). The IC VAHCS is one of five VA regional kidney transplant centers. Extended care and rehabilitation services include home-based primary care, contract community nursing homes, advanced care planning, amputee clinic, spinal cord injury, geriatrics, home telehealth, caregiver support, hospice/palliative care, pain management, and a polytrauma support clinic team. A therapeutic lifestyle clinic has been added, as well. The research program at the Iowa City VAHCS has consistently been one of the top VA facilities nationwide in terms of VA and non-VA research funding.

Psychology and Psychiatry make up the Mental Health Service Line and our outpatient services are housed in the Coralville Clinic that we share with one of the Primary Care outpatient clinics. The clinic in Coralville, which is located 2 miles west of the medical center, has a shuttle van that makes six trips per day to the main facility. The Mental Health Service Line is a large, interdisciplinary service made up of psychologists/neuropsychologists, psychiatrists, social workers, Ph.D.-level marriage and family therapists, outpatient substance abuse counselors, a psychometrician, and numerous support staff. In addition to the Coralville Clinic, which is an extension of the main medical center, there are service line clinical staff at all nine of our Community-Based Outpatient Clinics (CBOCs), serving our largely rural veteran population. In addition to the face-to-face outpatient services that we provide, we also frequently provide clinical services utilizing Telehealth technology to our veterans, both via each of our CBOCs and, most recently to Veteran homes.

Iowa City/Coralville

Iowa City offers small town charm, big city excitement, and a great quality of life. And that's not just our opinion: ask Money Magazine (Iowa City ranked #19 of 100 Best Places to Live in America), for example, and Sperling's Best Places, Forbes Magazine, AARP, and Outside Magazine. These and others consistently rank Iowa City high on such variables as best places to live and work, most educated population, best college towns, best places to retire, and most affordable. According to the most recent review from Livability.com, Iowa City earned the No. 4 spot out of the more than 1000 cities examined – "With a comfortable population just under 80,000, Iowa City is an easy place to live with fantastic amenities, rivaling those of its larger, metropolitan Midwestern cousins, Chicago, Minneapolis and Kansas City..." (2017).

Why the appeal? For one, the University of Iowa Hospital and Clinics, a general medical and surgical facility located in Iowa City (steps from the VA), is nationally ranked by U.S. News & World Report in a number of adult specialties as well pediatric specialties and is rated high performing in two adult specialties and four procedures and conditions among 5000 hospitals analyzed. Not only does the town boast a top-tier teaching hospital and public university, it is also known for its reasonable cost of living, low crime rate, and award-winning public schools. But wait, we've got extras to suit every taste. Foodies can explore flavors that span the globe with our creperies, gastropubs, microbreweries, and culinary hotspots like the Hamburg Inn, where visiting presidents and political candidates grab a burger and milkshake on their way to the caucus. From fresh falafel to vegan fare, you're sure to find a new favorite dish. For outdoorsy types, we offer a multicounty-spanning network of bike trails, multiple lakes ready for swimming or boating, wooded hiking trails, and even a Devonian fossil gorge, all mere minutes from the center of town. Whether walking, taking public transportation, or driving, many fresh residential developments make the average commute time less than 17 minutes. Sports fans can join up with a legion of enthusiastic Hawkeye football fans for BBQ and tailgating parties that last all day.

Lovers of the arts will feel at home in this UNESCO City of Literature, which has turned out writers such as Flannery O'Connor and T.C. Boyle. Enjoy events at our two Performing Arts Centers, including the Hancher Auditorium, a beautiful new facility which welcomes professional performers from all over the world. The town hosts weekend-long festivals in our pedestrian-friendly downtown including Jazz Festival, the Iowa Arts Festival, Friday Night Concert Series, Pride Fest and Parade, an annual Human Rights Awards Breakfast, among others. For beer lovers, Oktoberfest in the nearby historic Amana Colonies is not to be missed. Cinephiles can catch the latest indie at FilmScene, our local independent nonprofit cinema. And the historic Englert Theatre hosts everything from bands to vocalists, comedians to drag queens—stop in for Paula Poundstone one week and catch Wilco the next. We also have a well-known independent bookstore, fitness clubs, coffee shops galore, wine bars, and boutique shopping, all within walking distance to the VA hospital.

If that's not enough to keep you occupied, we're less than five hours drive from major metro areas such as Madison, Minneapolis, Chicago, Kansas City, and St. Louis. Come for an internship and you might just decide to stay. It's all you could want in a compact package: Midwest friendliness, East Coast amenities, and (when state fair time rolls around) butter-sculpture cows. What could be better?

For more information, you can check out Iowa City's official website: <http://www.icgov.org/default/?id=1359> (<http://www.icgov.org/default/?id=1359>) as well as <https://www.thinkiowacity.com/plan-your-trip/> (<https://www.thinkiowacity.com/plan-your-trip/>)

Program Overview

The Iowa City VA Medical Center has been a training site for graduate students from the University of Iowa's APA-accredited doctoral psychology training programs for many years. The Psychology Internship Program at the Iowa City VAHCS is accredited by the American Psychological Association, and has been since 2010. The program is also a member of the Association of Psychology Postdoctoral and Internship Centers (APPIC) and abides by its policies and procedures.

Accreditation

The doctoral internship program in Clinical Psychology at the Iowa City VAHCS is accredited by the Commission on Accreditation of the American Psychological Association. Our next site visit is scheduled for 2022.

Questions related to the program's accreditation status should be directed to the Commission on Accreditation:

Office of Program Consultation and Accreditation

American Psychological Association

750 1st Street, NE

Washington, DC 20002-4242

(202) 336-5979

APAACCRED@APA.COM

<http://www.apa.org/education/grad/program-accreditation.aspx>

Training Philosophy and Model

The philosophy of our program is based on the practitioner-scholar model, with the primary focus of training on direct clinical work. We endorse the view that good clinical practice is based on the science of psychology and, likewise, the science of psychology is enhanced by the experience of working with real patients. In all facets of their training, our interns are expected to apply scholarly inquiry and critical thinking to their work. And, while research is not required as part of the internship, we require that our interns learn about evidence-based practice and expect that they have an understanding of and appreciation for the relationship between science and practice and are able to incorporate empirical literature into their professional practice. Interns are, for example, encouraged to apply scholarly inquiry and critical thinking to all facets of their work, including the application of scientific inquiry to case conceptualizations, the formulation and testing of clinical hypotheses, the critical analysis of cases, and the development of thoughtful strategies to address mental health consultations and evaluating ethical dilemmas. At the same time, we acknowledge the complexity of real patients and the limitations of our empirical base. While implementing scientifically validated treatments, we respect the uniqueness of individual patients and base our clinical decisions on a sequence of hypothesis testing.

Our program embraces a generalist training approach and a developmental training model. We believe that interns are best trained by developing their generalist skills across a spectrum of clinical areas. This is accomplished through various didactic and professional seminars and deliberate case assignments that gradually expand interns' repertoire of skills. Interns are encouraged to choose training rotations that meet their individual training goals while also allowing them to become more broadly competent. Supervisors are identified as mentors and role models who are accomplished in the areas of emphasis selected by the interns. Over the course of the year, intern training moves from close supervision and mentoring to more autonomous functioning. The training model for the pre-doctoral training program at the Iowa City VAMC, therefore, has three key components: (1) empirically-supported practice, (2) self-guided learning through mentorship, (3) and, broad-based training with increasing depth. Interns are expected to be active participants in shaping their training experiences in a variety of ways. Interns are required to take responsibility for their own learning by identifying individualized training goals, by self-observations, self-evaluation, and participation in continuing education. Interns are also expected to participate in the development and improvement of the training program itself by providing feedback and evaluation of supervisors and training experiences.

Diversity

The Iowa City VA Psychology Internship is committed to helping to train psychologists who can practice with an awareness of the richness and variety within human experience. Our program places high value on increasing and/or maintaining an awareness of diversity issues throughout the training year. We strive to be sensitive to individual differences and diversity, including recognizing cultural and social factors as they influence a person's experience and world view. We believe that clinical practice is strengthened by understanding the perspective of others and responding with sensitivity to individual variations and differences. As a program, the Iowa City VA training team works to provide clinical and training opportunities for interns to deepen their cultural awareness, knowledge, and sensitivity. To this end, interns participate in a yearlong diversity focused didactic series that includes review of relevant research, experiential activities, group discussion, and reflective exercises. Additionally, the intern cohort is asked to select a handful of community events to attend that can help deepen their knowledge in a specific area of cultural diversity. The intern class also participates in group supervision where interns present cases that highlight diversity issues for interactive discussion with fellow interns as well as staff.

Evidence- and Measurement-Based Care

The Iowa City VA Psychology Internship prepares our trainees to enter postdoctoral and staff positions with knowledge, training, and experience in effective treatments and practices. Throughout the internship, there are opportunities for experience in learning and practicing evidence-based therapies. In addition to didactics exploring evidence-based practices, each rotation will provide opportunities to learn relevant evidence-based therapies and/or practice, e.g., the PTSD rotation offers training in prolonged

exposure therapy or cognitive processing therapy and the health psychology rotation offers training in psychosocial assessments for transplants.

Interns can elect to attend a VA national rollout for cognitive processing therapy. Interns who participate can complete all requirements, similar to staff attending the training, and earn a certificate of completion that will be recognized in future VA positions. We believe this is a great opportunity for interns going into VA therapy positions as most VAs will expect training in evidence-based therapies for PTSD.

In addition to evidence-based therapies, each rotation and the internship as a whole, is dedicated to the thoughtful and purposeful use of measurement-based care. In practice, measurement-based care involves gathering some form of feedback from patients to help plan treatment, determine progress or lack thereof, and make adjustments as appropriate. We frequently (but not exclusively) do this by getting repeated and frequent measures of mental health (often symptom inventories, such as the BDI-II or the PTSD Checklist (PCL)). When these measures are thoughtfully combined with clinical insights and experience, they can provide additional insights into the therapy process. These measures can be used in a variety of ways but some of the most common uses include assessment of current mental health, progress toward treatment goals, identification of worsening symptoms/functioning, and assistance in treatment planning. Given the emphasis in modern mental health services of providing evidence of patient improvement, this is a critical skill to have whether interns stay in the VA system or find opportunities elsewhere.

Training Competencies

1. Intervention - Interns will acquire the requisite knowledge and skills in psychotherapeutic interventions for a minimum of entry-level practice of professional psychology.
2. Assessment - Interns will acquire the requisite knowledge and skills in psychological assessment for a minimum of entry-level practice of professional psychology.
3. Individual and Cultural Diversity - Interns will acquire requisite knowledge of and respect for cultural and individual diversity for a minimum of entry-level practice of professional psychology.
4. Consultation and Interprofessional/Interdisciplinary Skills - Interns will acquire the requisite knowledge in consultation and demonstrate effective interpersonal/interdisciplinary skills for a minimum of intermediate level of competence.
5. Ethical and Legal Standards - Interns will acquire the requisite knowledge and conduct themselves according to professional, ethical, and legal standards for a minimum of entry-level practice of professional psychology.
6. Science of Psychology - Interns will demonstrate the ability to critically evaluate research and integrate empirical literature as it relates to discussion of clinically-relevant practice, presenting clinical cases, and application of evidence-based practice at a minimum of an intermediate level of competence.
7. Professional Values, Attitudes, and Behaviors - Interns will demonstrate attitudes and behaviors consistent with professional values and develop maturing professional identities as Psychologists at a minimum of an intermediate level of competence.

8. Supervision - Interns will acquire knowledge of theories and/or methods of supervision and apply this knowledge in supervising at least one case at a minimum of an intermediate level of competence.
9. Communication and Interpersonal Skills - Interns will demonstrate effective professional communication and interpersonal skills for a minimum of intermediate level of competence.

Supervision

We are committed to providing interns with access to multiple supervisors who are actively involved in the intern's training. Supervisors are available regularly to provide guidance or direct support with cases based on the intern's developmental and training needs. Having multiple supervisors concurrently and throughout the year provides interns with exposure to varied clinical skills and theoretical orientations. Interns receive two hours of individual supervision plus two hours of supervised activities (including case conference, group co-facilitation, etc.) per week. At any given time, each intern will have a Major Rotation Supervisor, a Minor Rotation Supervisor, and contact with the Director of Training. Interns are expected and encouraged to seek additional informal supervision and consultation as needed in addition to the formal scheduled supervision times. Interns are also made aware that clinical staff members are available to provide consultation and supervision on specific issues as the need arises and schedules allow.

Our training model is developmental. Interns move from close supervision, mentorship, and intensive instruction to relatively autonomous functioning over the course of each clinical rotation. We also anticipate that, within each rotation, supervision will be more intensive at the beginning and will become less intensive as the intern displays increasing knowledge and competence. Similarly, as the training year progresses, interns are expected to function with increasing autonomy as their skill and competence warrants and their supervisors deem appropriate.

Requirements for Completion

As the foundation for independent professional practice, and as measured by supervisor evaluations, interns should demonstrate competence in the following areas by the completion of the internship year:

Psychotherapeutic Intervention

Interns should work effectively with diverse populations, providing appropriate intervention in response to a range of presenting problems and treatment concerns. Interns should demonstrate competent psychotherapy skills in a variety of modalities (including group and individual).

Assessment

Interns should be able to competently assess patients with a broad variety of problems, utilizing a variety of evaluation methods (e.g., interviews and psychological inventories). Selection and use of assessment tools should be appropriate to the clinical needs of the patient and be responsive to the needs of referring professionals.

Awareness of ethical, legal, and cultural issues

Interns should demonstrate knowledge of ethical and legal principles bearing on psychological practice and awareness of these principles in their daily practice.

Interns should show an awareness of, and sensitivity to, cultural issues that impact patient lives and the practice of psychology.

Consultation and Communication

Interns should be able to conceptualize and clearly communicate their assessment strategies, results, opinions, and recommendations to other professionals, in verbal and written form. Clinical documentation should be timely, responsive to the needs of other professionals, and sensitive to issues of confidentiality and patient respect.

Development of professional identity

Interns should demonstrate a growing sense of identity as psychologists over the course of the internship year. They should show an understanding of the unique contribution and perspective they bring as a psychologist and put this into practice by assuming an increasing level of professional responsibility.

Professional judgment

Interns should demonstrate sound professional judgment. In particular, they should be able to accurately interpret clinical information, make sound decisions, and take appropriate action. They should be able to recognize and respond appropriately in cases of severe psychopathology, potential for self-injury, and dangerousness to others.

Interpersonal skills

Interns should demonstrate an ability to interact appropriately and professionally with peers, professional staff, colleagues from other disciplines, and support staff. Interns should conduct themselves in an ethical manner consistent with the guidelines of the profession.

Openness to feedback

Interns should be receptive to feedback from supervisors, peers, and other professional colleagues. They should be able to examine feedback objectively and respond with appropriate behavior changes. Interns should also show the ability to self-monitor and to change their behavior in response to experience.

Awareness of strengths and limitations

Interns should be able to accurately recognize their strengths and limitations. They should practice within their capabilities and recognize when to seek supervision, consultation, or training in response to clinical situations beyond their capabilities. They should demonstrate a commitment to continued self-education and to their continued growth as professionals.

Stipend and Benefits

For the internship year 2020-2021, the total stipend will be \$26,166; interns are also eligible for federal health insurance. State and federal income tax and FICA (Social Security) are withheld from interns' paychecks. Interns are not covered by Civil Service retirement or leave and are not eligible for federal life insurance benefits. The United States Government covers interns for malpractice under the Federal Tort Claims Act.

Program Structure

The internship is full-time for one year beginning July 19, 2020; one year at full-time equals 2000 hours. Interns are entitled to 10 federal holidays and earn sick leave and vacation (annual leave) days at a rate of 4 hours for each two-week pay period (a total of 13 days each). Interns are encouraged to use all of their annual leave before completion of internship; unused sick leave may be applied to future federal employment. An additional five(5) days of approved absence may be granted to complete activities required by your university (e.g., dissertation defense). Additional days for post-doc/job interviews will be allowed as appropriate.

Internship Training Tracks

General Psychology Track: The General Psychology Track is intended for individuals who opt to choose from a variety of treatment-based major and minor rotations. In other words, this Track is designed for interns wishing to pursue careers as a generalist or in emphasis areas such as PTSD or Acute (Inpatient) Care, etc.), for example. Those who intend to pursue a postdoc/career in neuropsychology should not choose this Track. Major rotations in this Track include: Acute Care/Psychosocial Rehabilitation and Recovery Center, General Mental Health, Neuropsychology, and Post Traumatic Stress Disorder. Minor rotation offerings include: Health Psychology, Neuropsychology, Polytrauma, Primary Care Mental Health Integration, Substance Abuse/Dual Diagnosis, and Women's Health Clinic. All of the above rotations are of six months duration and interns are required to select both a major and a minor clinical rotation for each the first and the second six months of internship. We are accommodating of interns' choices and, with the exception of those pursuing the neuropsychology track, strongly encourage a training plan that favors a breadth clinical training. Those in the General Track who want to take the Neuropsychology major rotation must do so in the second six months (the first six months of that rotation are reserved for those choosing the Neuropsychology Track). The minor neuropsychology rotation may be available either six months assuming supervisor availability.

Neuropsychology Track: The Neuropsychology Track is designed for individuals who plan to pursue a formal post-doctoral fellowship and a future career in neuropsychology. This track seeks to keep the balance of providing generalist training with also allowing for specialized focus in the area of

neuropsychology. To this end, the Neuropsychology Track follows the same format as the General Track with two 6 month majors and two 6 month minors. The following rotations are required of individuals in the Neuropsychology Track: Neuropsychology for the first major rotation and Neuropsychology for the second minor rotation, each six months long. Interns in this Track are involved in all aspects of the neuropsychological evaluation. Rotations include assessment both in inpatient and outpatient settings from referrals throughout the VA. Interns are able to select from any of the other available rotations for their initial minor and second major rotation. Individuals who chose the Neuropsychology Track are also expected to attend and participate in a weekly neuropsychology-specific didactic run by Drs. Gehl and Hall. Participation in the University of Iowa Hospitals and Clinics educational experiences are also encouraged and incorporated as available. Of note, past neuropsychology interns have had good success obtaining competitive two-year post-doctoral fellowships in neuropsychology.

Training Schedule:

24 hrs./week for major rotations (each six months long)

8 hrs./week for minor rotations (each six months long)

4 hrs./week for research (including dissertation if applicable) and/or program development/program evaluation

1.5 hrs./weekly for clinical didactics (including diversity didactics on alternate weeks)

1 hr./weekly group supervision

+ miscellaneous (prep, notes/reports, informal consults, phone follow-ups, monthly

Meetings with the Director of Training, staff meetings, MHSL meetings, Training Team meetings)

Protected Time

General Description

Interns are given four hours of protected time weekly to work either on research, program development, or program evaluation. Interns may contribute to research, specifically, by using the protected time given them to work on completion of their dissertations and/or to participate with staff on research/program evaluation projects related to various aspects of mental health care for veterans.

Clinical Rotations

MAJOR

[\[Mental Health\] Acute Care and Psychosocial Rehabilitation and Recovery Center](#)

General Description

The Mental Health Acute Care unit at the Iowa City VAMC provides mental health treatment for adult Veterans in need of acute stabilization. Common diagnoses include psychotic disorders, mood disorders, anxiety and PTSD, and alcohol or substance use issues. Psychological services provided include multidisciplinary treatment planning and care coordination, provision of direct clinical care (individual and group psychotherapy, risk assessment, family education, behavioral treatment planning), and implementation of psychosocial programming on the unit. This rotation also includes the opportunity to provide group services in the Psychosocial Rehabilitation and Recovery Center (PRRC). The PRRC mission is to create an environment that supports Veterans in creating and actively pursuing their personal vision of wellness and recovery in a transitional educational center for Veterans with serious mental illness.

Training Opportunities

1. Participate in treatment rounds
2. Provide individual and group psychotherapy
3. Learn crisis intervention skills
4. Complete psychological testing and diagnostic interviewing as available
5. Develop curriculums for inpatient treatment groups as well as the PRRC

Training Goals

1. Interns will lead one psychotherapy group and provide two individual therapy sessions per week.
2. Gain knowledge of diagnosis, crisis intervention skills, and multidisciplinary team approach to treatment.
3. Develop and lead one psychotherapy group in the PRRC per week.
4. Gain a better understanding of flow from inpatient to outpatient services for Veterans with serious mental illness.
5. Gain knowledge of infusing recovery-oriented care for program development.

(Supervisor: K. Baker, Psy.D.; K. McKibben, Ph.D.)

General Mental Health

The general mental health rotation will help interns to improve their skills in psychotherapy, conceptualization, and treatment planning by working with veterans of diverse characteristics and mental health challenges. The largest patient demographic is Vietnam era veterans, but more and more we are seeing veterans from the Iraq and Afghanistan wars. The most common problems include major depression, PTSD, comorbid PTSD and substance abuse, generalized anxiety, and adjustment disorders. In addition to these types of problems, interns will see unique and interesting cases, for example, schizophrenia and other psychotic disorders, OCD/hoarding, grief from the death of a pet, social phobia, and various personality disorders. The majority of cases also have chronic medical issues, such as chronic pain, cardiac disease, stroke, or neurological conditions. Many veterans are also experiencing psychosocial challenges, such as unemployment and underemployment, poverty, social isolation,

homelessness, and divorce. The intern and I will build a caseload with many clinical presentations, some familiar and some new.

Training Opportunities

1. See veterans in individual therapy and these cases will cover a variety of issues, such as those noted above.
2. Conduct interviews and administer measures to gather psychosocial information and diagnose.
3. Conduct short and long-term therapy. If possible, interns can continue to see a patient from another rotation.
4. Co-lead a therapy group with me. Typically, interns and I co-lead a mindful cognitive-behavioral therapy (CBT) group. The mindful CBT group is a 10-week group that is experiential and psychoeducational. Veterans meditate, practice mindfulness in everyday life, and learn to be less reactive to their own thoughts and moods.
5. Participate in the DBT program (optional). This program follows the model of individual and group therapy set out by Marsha Linehan. This typically involves seeing a DBT patient weekly for individual therapy and attending DBT team meetings. There may be opportunities to co-lead a DBT skills group but this is not guaranteed; time for this activity will come out of this rotation, meaning this would not create extra work for you in this rotation.
6. Co-lead a therapy group with another provider. You are free to co-lead a therapy group with any other staff member. This might include anger management, Trauma and Spirituality (a moral injury group), PTSD support group, CBT for insomnia, CBT for depression, or any other group you can arrange to co-lead; time for this activity will come out of this rotation, meaning this would not create extra work in your rotation.
7. Marital therapy.

Training Goals

1. Assess and diagnose patients suffering from a variety of conditions. Effectively rule out and differentially diagnose patients.
2. Conduct efficient and well-tailored psychosocial assessments.
3. Develop clear and thorough case conceptualizations that take into account personal, social, cultural, ethnic, and other factors.
4. Learn an evidence-based therapy. Interns can select from a variety of treatments, but, most opt to learn an EBP for PTSD.
5. Further develop your own therapeutic style and strengthen your own theoretical orientation.
6. Learn to conceptualize and treat cases using a clear theoretical orientation.
7. Learn to work with cases using a more flexible approach, responding to the patient's in-the-moment behaviors and needs.
8. Learn how to effectively lead a therapy group and carry out therapeutic interventions.
9. Become skilled in managing therapy group dynamics in order to effectively utilize the time, facilitate participation, and develop group cohesiveness.
10. Effectively use measurement-based care in psychotherapy.

Additional Information

It is probably easiest to understand my supervisory style if you understand my own perspectives on

psychotherapy. I conceptualize cases from a cultural/common factors model of psychotherapy. This model emphasizes commonalities in what makes therapy effective, such as providing a rationale for why the patient is experiencing mental health problems and presenting treatment interventions that are consistent with that rationale. This process can ameliorate suffering in many ways: developing a sense of agency in confronting one's problems, inspiring hope that one's current problems are not insurmountable, experiencing acceptance and compassion from another person, receiving social support, and inspiring confidence life can improve by working with a mental health expert.

To explore this point of view in supervision, I ask broad questions about treatment, such as, why did this veteran seek therapy at this point in time? Are the veteran's goals to improve mental health or to get some other benefit, such as simply having someone to talk to? What is the veteran's understanding of how therapy works and how is that similar or different from what you as the therapist think? Outside of the mental health domain, how is the person functioning: connections with friends and family, community involvement, everyday activities, purposeful activity, physical health. I don't expect you to adopt my style of psychotherapy, but I do want you to sharpen your skills and become more thoughtful about the assumptions that underlie mental health treatment.

I also try to build on your existing skills as a therapist and teach you new interventions. I am comfortable supervising students of a variety of psychotherapy models, from acceptance and commitment therapy to gestalt. One area I want every intern to leave with is exposure to evidence-based therapies. I would like every student to learn cognitive behavioral (my original training and typical mode of therapy), mindfulness interventions, and motivational interviewing. For PTSD treatment, students will learn components of cognitive processing therapy and prolonged exposure therapy. I also serve as a trainer for a smoking cessation program developed in the VA called integrated care and expect interns to practice these skills as well. Interns in this rotation often use components of these models and rarely follow an entire treatment manual.

In describing their experiences in this rotation, past interns have said it has helped them to work with complex patients, has made them more self-aware as therapists, and has given them a boost of confidence in their abilities to practice independently. I'm sure if we work together, you will find this rotation challenging, sometimes frustrating, but ultimately rewarding.

(Supervisor: J. Drwal, Ph.D.)

Neuropsychology

General Description

The Neuropsychology service provides primarily outpatient consultation to other VA departments including: Inpatient medicine, Neurology, Neurosurgery, Polytrauma Support Clinic, Primary Care, Psychiatry, and Vocational Rehabilitation. Typical referrals include assessment for dementia syndromes (e.g., Alzheimer's disease, vascular dementia, frontotemporal dementia, Lewy body dementia, and Parkinson-plus syndromes), traumatic brain injury of varying severity, cerebrovascular accident, multiple

sclerosis, psychiatric disorders (e.g., depression and PTSD), learning disability, Attention Deficit/Hyperactivity Disorder, etc. Personality assessment is also a component of neuropsychological assessment given mood and personality changes can occur in various neurologic conditions. Neuropsychology service is also consulted to perform inpatient evaluations primarily when there are concerns about capacity and ability to function independently.

The Neuropsychology Major Rotation meets APA Division 40 Standards for predoctoral internship training and postdoctoral fellowship and career. is tailored toward individuals who wish to pursue a Neuropsychology postdoctoral fellowship and career. Interns in the Neuropsychology Track will complete this rotation for the first 6 months of their internship. Individuals in the General Track may select this rotation for their final 6 months of the internship if it meets their training goals.

Training Opportunities

1. Select, administer, score, and interpret a range of neuropsychological tests using a flexible battery approach.
2. Write comprehensive neuropsychological reports that include detailed recommendations for patient care.
3. Participate in feedback sessions regarding test results and recommendations with patients and their families.
4. Attend weekly Iowa City VA Neuropsychology Didactics. Neurology, Neurosurgery, and Psychiatry Grand Rounds are also available at the University of Iowa.
5. Conduct psychotherapy with individuals with neurocognitive disorders when available.

Training Goals

1. Interns will complete two supervised neuropsychological assessments each week.
2. Gain knowledge of functional neuroanatomy and neurological conditions through weekly didactics.
3. Meet all clinical and didactic requirements to apply for a Neuropsychology postdoctoral fellowship.

(Supervisors: C. Gehl, Ph.D., ABBP; M. Hall, Ph.D.)

Posttraumatic Stress Disorder (PTSD)

General Description

During your internship PTSD rotation under the supervision of Dr. Rosebrook, she can offer you training in Prolonged Exposure for PTSD, CBT for Chronic Pain, and IPT for Depression, while also practicing CPT for PTSD (she is not trained officially in CPT but is familiar with it- you can choose to take the official CPT training roll-out and will have a training consultant for this). Dr. Rosebrook can also provide you with some psychoeducation about EMDR and you may be able to sit in on some of her

EMDR sessions (with veteran permission). She also leads the Anger Management Group and you will have the option of co-leading the group with her. There are other groups offered here that you could also consider co-leading including CPT, CBT for depression, as well as others. You could also receive training in CBT for Insomnia with help and support from one of the other staff members. Dr. Rosebrook will make every effort to have diversity in your caseload in terms of diagnoses and potential treatment modalities that you might be able to offer your patients based on your clinical interests and areas in which you want to further develop your clinical skills and knowledge. She will also encourage you to continue building on your training skills and modalities with which you are already familiar.

Training Opportunities

PTSD Assessment: Interns will conduct initial diagnostic interviews with veterans who have both acute and chronic trauma-related symptoms. The training goal is to help interns recognize PTSD, make reliable differential diagnoses between PTSD and similar disorders, as well as to identify and address comorbid diagnoses. Interns will use structured interview and standardized self-report measures to improve their diagnostic skills. Some complex cases may require MMPI-2 assessment and/or referral to neuropsychology and review of that data.

Other Training Opportunities: This summary represents some of the core PTSD rotation experiences. Other optional opportunities on the PTSD rotation include consultation to psychiatry residents, conducting a PTSD Orientation Class for veterans, outreach events and offering telehealth-based therapy.

(Supervisors: J. Rosebrook, Ph.D.)

MINOR

Clinical Leadership

1.Key Questions:

What are the emerging trends in health care, across settings and professional disciplines?

What are the key directions in VA health care?

How is, and how will, mental health care be delivered in the VA?

Psychology will change at least once in your career. How can you be prepared as a psychologist, now and for the future.

Paradigms: Reactive, passive, sometimes even resistant OR Proactive, invested and involved.

Strategic initiatives: Evidence Based Treatment. Measurement Based Care. Episodes of Care.

2. Clinical Components:

What is unique to VA mental health care? Excellence in assessment. World-wide leader in Best Practices and EBPs.

- a. Direct experience in structured intake interviews, including assessment, Measurement Based Care, and Motivational Interviewing. Flexible on days and times.
- b. Seeking Safety Group Therapy, with specialized components on Group Therapy as Treatment, PTSD and Suicide, and Positive Psychology and the Psychology of Resilience.

3. Leadership Components:

- a. One-to-one meeting with key VA leaders.
- b. Participate in key meetings:
 - b.1. Wednesday 12:00 Psychology Providers Transformation Work Group.
 - b.2. Wednesday 2:00 SAIL (Strategic Analytics to Improve Learning) / Systems Redesign Meeting.
 - b.3. Fourth Tuesday 1:00 Disruptive Behavior Committee.
 - b.4. Tuesday 1:00 Mental Health Leaders Meeting may also be an option.
- c. Involvement in a Clinical Leadership Project. Past examples include: structured surveys, data analytics, organizational changes, clinical strategic planning.
- d. Weekly meetings with Dr. Zerwic.
 - d.1. Initial assessment of needs.
 - d.2. Structured readings.
 - d.3. Ongoing discussions about Clinical Leadership Project.

4. Hybrid Structure of Minor rotation:

- a. Can be Clinical Components, Leadership Components, or both.
- b. Can be in combination with Dr. Drwal's Outpatient Mental Health Rotation.
- c. Applies to General Track and Neuropsychology Track.
- d. Opportunities to work together even if you don't select the Clinical Leadership Rotation.

(Supervisor: Mark J. Zerwic, Ph.D.)

Health Psychology

General Description

This rotation focuses on the integration of physical and mental health treatments and the utilization of psychological approaches to, for example, assist patients with management of chronic pain and with adjustment to/coping with acute, disabling, as well as other chronic medical conditions. Interdisciplinary team work is an important aspect of this rotation. Among the medicine clinics in which we

participate as part of an interdisciplinary team are Audiology, Pain, Transplant (Renal, Hematology/Oncology, Liver, Cardiology, Pulmonary), and ALS Clinic. Many of the requests for consults come from Primary Care as well as from Psychiatry. Much of the clinical care in this rotation is provided face-to-face on an outpatient basis or with occasional requests for inpatient services. Interns in this rotation also have opportunities to work with patients via Telehealth connections to any of our nine Community-Based Outpatient Clinics (CBOCS). Interns also participate in psychoeducational groups, currently including a 5-week Tinnitus Group in coordination with Audiology and a 5-week Pain Management Group..

Training Opportunities

1. Provide individual psychotherapy services (including for insomnia, persistent pain, chronic health conditions, and life-threatening illnesses).
2. Participate in organ recipient transplant psychosocial evaluations and kidney donor candidate evaluations.
3. Complete psychosocial evaluations for veteran candidates for spinal cord stimulator implants.
4. Conduct initial consultation diagnostic interviews for health psychology referrals.
5. Attend and co-facilitate Progressive Tinnitus Management groups.
6. Participate in ALS Clinic and follow-up team case discussions.

Training Goals

1. Complete 8 hours/week in this rotation, including five clinical hours, of which 1-2 will be new consultations and the remaining return/follow-up patient appointments and psychosocial evaluations.
2. Become proficient in applying a biopsychosocial approach to diagnostic assessment and making follow-up recommendations.
3. Demonstrate ability to conceptualize and intervene utilizing varying approaches to psychotherapy, including at least one evidence-based therapy.
4. Demonstrate competence in working collaboratively with health professionals from diverse disciplines in providing coordinated patient care.

(Supervisor: D. Stormoen, Ph.D.)

Neuropsychology

General Description

For interns in the Neuropsychology Track, this rotation will be completed during the final six months of their internship. The Neuropsychology minor rotation may also be completed (either during the initial or final six months of the internship) by interns in the General Track. While these individuals are not likely interested in the independent practice of neuropsychological assessment, this rotation may be useful to gain a better understanding of brain-

behavior relationships and how they may impact their patients. Interns will also learn when to refer for neuropsychological evaluation and will obtain a general understanding of neuropsychological reports.

Training Opportunities

1. Obtain experience with test administration, scoring, normative standards, and report writing.
2. Weekly Neuropsychology and Psychiatry didactics are available at the Iowa City VA and University of Iowa.
3. Co-lead a cognitive skills training group.

Training Goals

1. Interns will assist with one neuropsychological evaluation per week with the level of involvement contingent on prior assessment experience.
2. Conduct brief cognitive screenings.
3. Attend weekly Neuropsychology didactics to obtain knowledge of functional neuroanatomy and neurological conditions.

(Supervisors: C. Gehl, Ph.D., ABPP; M. Hall, Ph.D.)

Polytrauma

General Description

Interns work as a member of an interdisciplinary team in our Polytrauma Clinical Support Team. Veterans are generally referred to this clinic due to concerns regarding the presence of a traumatic brain injury; however, the focus of the clinic is to provide support to Veterans who have sustained multiple traumas, including psychological trauma, while combat deployed. Members of the Polytrauma Support team include a physiatrist, neuropsychologist, speech pathologist, social worker, and primary care physician. The psychologist/intern serves in a consultative role providing brief assessment of symptoms and functioning, providing psychoeducation regarding mental health and mTBI, and making recommendations. Veterans served in this clinic have most commonly served in the OIF/OEF/OND conflicts, sustained a mild traumatic brain injury, and have mental health, chronic pain, and/or sleep concerns.

Training Opportunities

1. Interns will have the opportunity to provide brief assessment of current symptoms and functioning, provide psychoeducation, and make recommendations for Veterans seen in this clinic.
2. Interns will have the opportunity to interact with, provide information to, and discuss treatment plans with members of the interdisciplinary team.
3. Interns will obtain didactic training on traumatic brain injury, particularly with regard to mild traumatic brain injury in our Veteran population.

Training Goals

1. Interns will participate in and serve a consultative role in two polytrauma clinics per week with increasing autonomy as the rotation progresses.
2. Interns will complete and discuss readings regarding traumatic brain injury.

(Supervisor: C. Gehl, Ph.D.,ABPP)

Primary Care Mental Health Integration (PCMHI)

General Description

The PC-MHI service provides mental health primary care services to primary care patient's throughout the Iowa City VAHCS and Iowa City specialty clinics. We are a team of interdisciplinary providers who work as part of the primary care team to help support the entire primary care population and their health needs. Our Veterans present with a range of complex psychological and physical health concerns. Chronic pain syndromes, coping with chronic illness, childhood and/or military sexual trauma, PTSD, adjustment disorders, depression, anxiety disorders, compliance issues, sleep difficulty, and substance use are common presenting problems in this population.

Training Opportunities

1. Offering same-day clinical care to patients and consultation to primary care team members.
2. Conduct brief screening and assessment measures to help guide treatment decision-making.
3. Provide a variety of EBT therapy services to meet a wide range of mental health and physical health needs.
4. Participate with other multidisciplinary team, particularly primary care providers, to coordinate patient care.
5. Attend primary care mental health integration team meetings, and other clinic meetings where able.

Training Goals

1. Be in clinic at least 1 day a week to be available for same-day access for initial consultation visits while also balancing scheduled follow-up visits with an limited panel of patients.
2. Develop proficiency utilizing a battery of screening tools to help guide patient care.
3. Obtain competency utilizing brief interviewing skills to conduct targeted, focused assessments appropriate to the primary care setting.
4. Demonstrate proficiency in brief interventions appropriate to the primary care setting.
5. Develop a stronger knowledge of medical disorders, psychotropic medications, and other chronic health factors that impact mental health.

(Supervisor: B. Jensen, Ph.D.)

Substance Abuse/Dual Diagnosis

General Description

The Outpatient Substance Abuse Treatment Program (OSATP) provides outpatient substance abuse/dual diagnosis counseling to Veterans in all service eras for a multitude of addictions with the most prevalent addiction treatment focusing on Alcohol Use Disorders, Opioid Use Disorders and Cannabis Use Disorders. Interns may also have the opportunity to work with gambling disorders. This rotation is primarily located at the Coralville Outpatient Mental Health Clinic with some additional training opportunities available on the acute psychiatric unit at the main VA Hospital. Interns will focus on providing individual and group therapy in an outpatient or intensive outpatient setting as well as substance abuse assessments in an acute setting. Motivational Interviewing, Motivational Enhancement Therapy and Cognitive Behavioral Therapy are the primary focus of intervention.

Training Opportunities

1. Administer and score the American Society of Addiction Medicine (ASAM) Placement Criteria to help determine appropriate level of care for substance abuse patients.
2. Complete comprehensive biopsychosocial assessments with treatment recommendations for voluntary, hospitalized, and court mandated patients
3. Developing comprehensive treatment plans in coordination with the patient.
4. Individual and group therapy in an outpatient and intensive outpatient treatment setting
5. Utilize Motivational Interviewing and CBT techniques for Substance Use Disorders in individual and group settings.
6. Brief intervention with patients in an acute psychiatric setting.
7. Participate in multi-disciplinary team meetings for both outpatient and inpatient programs
8. Learn evidenced-based treatment for smoking cessation

Training Goals

1. Develop knowledge in diagnosing Substance Use Disorders and implementing treatment modalities specific to SUD, including Motivational Interviewing and Motivational Enhancement Therapy.
2. Establish a caseload of outpatient clients within the Outpatient Substance Abuse Treatment Program.
3. Developing assessment skills and brief interventions in an acute psychiatric setting.

(Supervisor: E. McCandless, LISW, ACSW, CADC)

Women's Health Clinic

General Description

The Women's Health Center at the Iowa City VA is a multidisciplinary clinic that provides comprehensive medical and mental health care for female veterans. Clinic staff includes psychology, psychiatry, social work, primary care, nursing, gynecology, reproductive endocrinology, and breast health. Patient presenting MH concerns are varied, with a high prevalence of PTSD (secondary to military sexual, combat support, and civilian sexual traumas), mood disorders, and relational problems. Interns would complete initial psychological assessments, including standard collection of a comprehensive history, psychodiagnostic interview, and brief symptom inventories, with additional personality testing as clinically indicated. Interns would be supervised primarily in CBT-based treatments, including, but not limited to, VA-identified Evidence-Based Psychotherapies of CPT and PE for PTSD and CBT for depression. Group therapy at the WHC is time-limited, structured, and dependent upon clinic needs; common group topics are psychoeducation on effects of MST, CBT for depression, and coping with chronic pain and medical disorders. The rotation may also accommodate training interests unique to this population, such as post-partum depression and anxiety as well as gender dysphoria.

Location: Main hospital

(Supervisor: H. Downing, Ph.D.)

Staff

Kathryn Baker, Psy.D.

Dr. Baker joined the Iowa City VA in 2013 where she serves as the Inpatient Psychologist. Her clinical interests include serious and persistent mental illness, personality disorders, motivational interviewing, strengths-based treatment, trauma-informed care, and mindfulness. Dr. Baker received her Psy.D. from the Washington, DC campus of Argosy University in 2008. She completed her doctoral internship at a large community mental health center, Human Services, Inc., in Oakdale, Minnesota, with clinical rotations in DBT and Intensive Outpatient Treatment. More recently she was employed through State Operated Forensic Services in St. Peter, Minnesota, providing therapy and assessment to individuals civilly committed as Mentally Ill and Dangerous. Kathryn finds joy in spending time with her family and drinking pumpkin spice coffee. She manages stress through aromatherapy and meditation. She is also a proud University of Iowa alumna and loves cheering on Hawkeye football!

Angela Benavides, Ph.D.

Dr. Angela Benavides joined the Iowa City VA in 2018 and serves as the clinical psychologist in the Pain Clinic. Her interests include chronic pain management, chronic disease management, health promotion, and biofeedback training for stress and pain management. She relies on CBT- and ACT-based protocols and techniques with heavy integration of mindfulness and relaxation training. She enjoys biofeedback assessment and training, which she integrates into psychotherapy sessions. She works as part of an interdisciplinary team, often consulting with and referring to other team members over the plan of care. She is the proud owner of a geriatric cat, of whom Angela often speaks and integrates into presentations when even remotely feasible. Her jokes are often corny, but she enjoys making herself and others laugh. She also enjoys weight lifting, exploring outdoors, and making annual journeys with her spouse to someplace new.

Deborah Betsworth, Ph.D.

Dr. Betsworth joined the VA in 2016 as the Health Behavior Coordinator. This position has a health psychology emphasis with both clinical and consulting responsibilities including working with Veterans individually and in groups on behavioral health change, consulting with medical staff on motivational interviewing and health behavior coaching, and developing and providing health and wellness programs. Dr. Betsworth received her Ph.D. in counseling psychology from the University of Minnesota, with an additional focus in vocational psychology (i.e. career development-enhancement). Prior to shifting to her role in the VA, she had 25 years of experience in higher education including 18 years as director of a counseling center. She has expertise in several areas, including teaching (psychology and counseling courses at the graduate and undergraduate levels), counseling individuals (using brief therapy approaches), developing and facilitating psychoeducational programs, consulting for a college community, and addressing wellness behaviors (e.g., stress management, eating and exercise habits, alcohol and drug use, smoking, etc.). Dr. Betsworth is a health nut, and enjoys cycling, weightlifting and yoga. She frequents the farmer's market and spends much time perusing recipes and cooking. She also likes to travel to destinations near and far.

Charles Crow, Psychometrician

Charles W. Crow (or William to his friends) has worked for the VA since 2008 in both Maryland and Iowa. He currently works as a psychometrician providing testing for IC's team of neuropsychologists and support to the Training Team. Back on the East Coast, William provided telephone monitoring and treatment services to veterans with MDD, PTSD, and substance use disorders, while additionally serving as the mental health team's go-to guy for computer problems, performance measures and clinical reminder issues. William received his master's degree in clinical psychology from the University of Missouri-Columbia, where his research specialty was risky adolescent sexual behavior. Though originally from the Arkansas Ozarks, William has yet to find anywhere quite as special as the Midwest; thus, he

lives here in a 'garden level' with his two cats. His hobbies include baking, reading, hiking, cinema (aka Netflix and chill) and photography. He is also a proud, card-carrying member of the ICVA Walking Club.

Haley Downing, Ph.D.

Dr. Downing is the staff psychologist with the Women's Clinic and MST Coordinator at the Iowa City VAMC. She earned her Ph.D. in counseling psychology at the University of Akron in 2012, and has been practicing at the VA since internship. She completed intensive training in DBT during her time as a staff psychologist at the Dallas VA, and serves as co-chair of the DBT consultation team here at Iowa City. Her clinical interests include treatment of PTSD and other sequelae of interpersonal violence; the role of intersectionality in adverse outcomes of trauma; and phase of life transitions. Her theoretical orientation is primarily cognitive-behavioral and constructivist. Outside of work, she enjoys playing with her kids, reading, rowing, and exploring the Iowa City area.

Jason Drwal, Ph.D.

Dr. Drwal has been a member of the Psychology Clinic since 2009. He received his Ph.D. in clinical psychology from the University of Connecticut. His treatment specialties included cognitive-behavioral therapy, mindful cognitive-behavioral therapy, mindfulness interventions, short-term psychodynamic therapy, hypnosis, health psychology, motivational interviewing, and self-help interventions. In addition to supervision, he is the PTSD Clinic Team (PCT) Coordinator. He is actively involved in providing PTSD treatment as well as individual, group, and couples therapy. Outside of work, he is the proud parent of a handsome and energetic son, a beautiful and tireless daughter, an avid (but unaccomplished) cook, a Food Network addict who refuses to get help, professional coffee snob, and dedicated runner, and imperfect mindfulness practitioner.

Carissa Gehl, Ph.D.

Dr. Gehl joined the Iowa City VAMC in 2009 as a staff neuropsychologist. Her primary interests involve neuropsychology and rehabilitation psychology. She completes inpatient and outpatient neuropsychological evaluations, provides individual psychotherapy, and staffs the Polytrauma Clinic. Dr. Gehl obtained her PhD from the University of Iowa and completed her internship at the Missouri Health Sciences Consortium in Columbia, MO. She then completed a two-year post-doctoral fellowship in Neuropsychology & Rehabilitation Psychology at the Mayo Clinic in Rochester, MN. Outside of work, she enjoys spending time with her husband and two young sons as well as finding time to create with yarn and fabric.

Michael Hall, Ph.D.

Dr. Michael Hall is a staff neuropsychologist at the Iowa City VA Health Care System and an adjunct faculty member in the Psychiatry Department at the Carver College of Medicine, University of Iowa. He completed a master's and doctoral degree in clinical psychology at Kent State University, a pre-doctoral internship at the University of Massachusetts Medical School, and a fellowship in clinical neuropsychology at Harvard Medical School. His current clinical work includes neuropsychological and psychological assessment, and psychotherapy for those with and without neurologic/cognitive deficits. His research focus and program development have mostly centered around co-occurring post-deployment issues with a particular focus on posttraumatic stress disorder and traumatic brain injury. Program development and clinical work often involve rehabilitation components with a focus on return to higher levels of functioning including returning to employment when possible. Dr. Hall is a member of the Training Team and he supervises both the Major and Minor Neuropsychology Rotation as well as psychological assessment as a part of the major General Mental Health Rotation.

Bryan Jensen, Ph.D.

Dr. Bryan Jensen joined the Iowa City VA in 2017 where he serves as the Primary Care-Mental Health Integration Psychologist. His clinical interests include chronic disease management, transplant, chronic pain management, insomnia, cognitive disorders, and trauma. He utilizes a variety of evidence-based methods of assessment and intervention to meet clinical needs; however, he draws heavily from an ACT and mindfulness framework in his patient care. Dr. Jensen received his PhD from Virginia Commonwealth University in 2016. He started working in primary care and medical settings during his first year of graduate training and has not stopped since. He completed his doctoral internship and postdoctoral training at the Salt Lake City VA. Throughout training, Dr. Jensen has worked in primary care, acute rehab units, transplant centers, substance use clinics, and on geriatric interdisciplinary teams. Outside of work, Dr. Jensen will steal any time he can to flee into the mountains; he enjoys hiking, biking, and any form of outdoor adventure. Most of his time is spent enjoying cooking and playing with his family.

Erin McCandless, LISW, CADC

Erin received her MSW from the School of Social Work at the University of Iowa. She is a clinical social worker for the Iowa City VA Health Care System specializing in dual diagnosis treatment and participating in the Outpatient Substance Abuse Treatment Program (OSATP). Erin is the OSATP liaison to the Psychology Service and provides dual diagnosis counseling services to patients with addiction problems referred to psychology. While her clinical focus is primarily counseling for substance abuse and dual diagnosis patients, she also has a clinical interest in working with patients diagnosed with eating disorders and bereavement. Outside of work, Erin loves spending time with family, taking pictures, and traveling.

Michael McIntosh

Dr. McIntosh joined the Iowa City VAHCS in 2019 as a PTSD specialist in the PTSD Clinical Team (PCT). He received his Psy.D. in clinical psychology from the Illinois School of Professional Psychology at Argosy University – Chicago in 2009. He completed his APA-accredited doctoral internship with the University of Iowa's University Counseling Service. After internship Dr. McIntosh went on to become the training director in Western Carolina University's Counseling and Psychological Services. His VA career started in 2012 at the Fayetteville VAMC, where he was part of the PCT and Vet Center. He is a listed VA provider of Problem Solving Training, Prolonged Exposure for PTSD, and Cognitive Processing Therapy for PTSD. Dr. McIntosh values spending time with family and friends, exercise, and gaming.

Kayla McKibben, Ph.D.

Dr. McKibben is a staff psychologist and the program manager for the Psychosocial Rehabilitation and Recovery Center. The PRRC is focused on helping Veterans with serious mental illness meet their recovery goals and integrate into their communities to lead more satisfying lives. She also serves as the Evidence-Based Psychotherapy Coordinator for the Mental Health Service Line by promoting awareness and effective use of EBPs and organizing trainings to promote psychotherapy services. She received her master's and Ph.D. degrees from the counseling psychology program at Southern Illinois University. She completed her internship at the Zablocki VAMC in Milwaukee, WI, before joining the Iowa City staff in 2010. Her clinical interests include serious mental illness, geropsychology, and working with individuals with chronic conditions (physical and mental health). She primarily utilizes cognitive-behavioral therapies, acceptance and commitment therapy, motivational interviewing, and strength-based approaches. She also serves as an adjunct assistant professor through the Rehabilitation and Counselor Education program at the University of Iowa. When not working, she enjoys her family, feeding ducks, drinking COFFEE, cooking (and eating!), watching documentaries, and the farmer's market.

Tim Mullaney, Ph.D., L.M.F.T.

Dr. Mullaney received his M.S.W. from Washington University, with special focus on Marital and Family Therapy before completing a Ph.D. specializing in marital and family therapy at Iowa State University. His work experiences include a family therapy agency, chemical dependency treatment, juvenile justice (court family treatment unit), being a senior consultant in an international employee assistance company, therapist and managed care representative, private practice, hospital-based outpatient psychology, and university student counseling. He has a special interest in mindfulness training and its applications in mental health, and is leading and developing a mindfulness training group at the Iowa City VA. He is currently a part of a multi-year teaching transmission on Mahamudra meditation taking place in India, in support of his clinical group at the VA, among other reasons.

Julie Rosebrook, Ph. D.

Dr. Julie Rosebrook began her work at the Iowa City VA in June of 2011 as the Health Behavior Coordinator. She received her Bachelors' Degree in Psychology from Stanford University in 1984 and her Ph.D. from the University of North Texas in 1992 with an emphasis in Clinical Psychology and Behavioral Medicine. Dr. Rosebrook transitioned from her role as Health Behavior Coordinator to her current role as Staff Psychologist at the Coralville VA Clinic in June of 2014. She is now working with patients using EMDR (her primary treatment approach for PTSD), CBT for Chronic Pain, Interpersonal Psychotherapy for Depression, Anger Management group, and other modalities of treatment as well. She is also trained in Prolonged Exposure for PTSD treatment. Outside of work, Dr. Rosebrook enjoys spending time with family and friends, exercising, walking the family pug, watching mysteries, gardening, and reading when she is not fulfilling one of her other "mom" roles.

Anne G. Sadler, R.N., Ph.D.

Dr. Sadler is a health services researcher at the Comprehensive Access & Delivery Research and Evaluation (CADRE) COIN at the Iowa City VA Health Care System, and an associate professor in the Department of Psychiatry at The University of Iowa Hospitals and Clinics. Dr. Sadler also serves as the VA Women's Practice Based Research Network post-deployment health site lead. She was selected for this position given her work as PI of 5 grants funded by VA HSR&D, QUERI, and The Department of Defense (DoD) to investigate the health, safety, and post-deployment adjustment of Reserve, National Guard, and Regular military service women returning from Iraq/Afghanistan. In addition, Dr. Sadler completed a Nursing Research Initiative (NRI) study investigating reproductive health outcomes associated with women veteran's lifespan sexual violence exposures. Dr. Sadler is PI on one of the grants comprising the Evidence Based Treatment for PTSD CREATE, leading a study that uses internet based approaches to improve post-deployment mental health education and access to VA care for OEF/OIF Reserve and National Guard service women following their return from deployment to combat areas. Dr. Sadler is generative with mentoring new women's health researchers, including Career Development Award (CDA) applicants. She is also a panel member for the CDA study section. Dr. Sadler is a licensed Marital & Family Therapist and works clinically with women and families impacted by trauma, including gender-based and domestic violence, as well as combat.

Regan Slater, Ph.D.

Dr. Regan Slater joined the Psychology Clinic in 2019. She earned her Ph.D. in clinical psychology from the University of Mississippi in 2014. She completed her predoctoral internship at the VA Sierra Nevada HCS and postdoctoral fellowship at the Memphis VAMC. Her theoretical orientation is cognitive-behavioral and her clinical interests include acceptance and commitment therapy and mindfulness.

Outside of work, she enjoys coffee, spending time with her nephews and niece, traveling, movies, and reading.

Doris J. Stormoen, Ph.D.

Dr. Stormoen has been a staff psychologist at the Iowa City VAHCS for over 19 years. She has served as Director of Training the past thirteen years, working to integrate training into the mission of our clinic. Dr. Stormoen received her Master's and Ph.D. degrees from the University of Wisconsin-Madison; her dissertation examined the emotional well-being of women following long-term adjustment to divorce and she maintains an interest in loss/grief issues from a biopsychosocial perspective. Dr. Stormoen's professional career includes four years as a clinical staff member at the University of Iowa Counseling Service and five years as a Health Psychologist in the Department of OB/GYN at the University of Iowa Hospitals and Clinics before joining the VAMC Psychology staff in 2000. Her clinical focus at the VA has been in the area of health psychology, which includes the full spectrum of comorbid medical and psychological problems seen within the veteran patient population. Specific areas of focus include acute, chronic, and/or terminal conditions – e.g., pain, tinnitus, amyotrophic lateral sclerosis (ALS), spinal cord injuries - as well as lifestyle and treatment adherence issues. She also provides psychosocial evaluations related, for example, to organ transplant, and spinal cord stimulator implants and serves as an independent donor advocate for kidney transplantation. Her personal passion is adventure travel and she particularly enjoys cycling, and hiking, and any time spent with family (by birth and by choice) and friends. While once known for speed-walking, Dr. Stormoen has spent much of her leisure time over the past few years glued to the news.

Mark J. Zerwic, Ph.D.

Dr. Mark J. Zerwic received his undergraduate degree from the University of Michigan, and earned his master's and doctoral degrees from the Illinois Institute of Technology. Currently, he is the Deputy Director of the Mental Health Service Line and Chief of Psychology at the Iowa City VA Health Care System, providing comprehensive mental health and addiction services to 50,000 individuals in eastern Iowa, western Illinois and northern Missouri. Previously he served for 17 years as the Chief of Psychology at the Jesse Brown VA Medical Center in Chicago that provided the full spectrum of inpatient, outpatient and rehabilitation services to 62,000 veterans. Dr. Zerwic has supervised psychologists, social workers, nurses, licensed professional counselors, marriage and family therapists, vocational counselors, addiction therapists, mental health technicians and support staff. In addition to being a Deputy Director of Mental Health and Chief of Psychology, Dr. Zerwic has been an Acting Chief of Addictions, program founder of an Addictions Intake Clinic, program manager of a Dual Diagnosis Program, established a Vocational Rehabilitation Program, began a Psychosocial Recovery Program for individuals with Serious Mental Illness, and started a Suicide Prevention Program. Dr. Zerwic's accomplishments as a mental health leader are based on his experience in providing psychological assessment, and individual, group,

martial and family therapy. Dr. Zerwic also is Adjunct Clinical Professor in the Department of Psychiatry at the University of Iowa Carver College of Medicine. He lives with his wife, Dr. Julie Zerwic, the Dean of the College of Nursing at the University of Iowa, and their three children in Iowa City.

Application Process

ELIGIBILITY REQUIREMENTS FOR ALL PROGRAMS

- 1.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.
- 2.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.
- 3.Interns and Fellows are subject to fingerprinting and background checks. Match result and selection decisions are contingent on passing these screens.
- 4.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.

ADDITIONAL ELIGIBILITY CRITERIA FOR INTERNSHIP

- 1.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.
2. Approved for internship status by graduate program training director.

ADDITIONAL ELIGIBILITY CRITERIA

- 1.Doctoral student in an APA-accredited Clinical, Counseling Psychology, Professional Psychology program or in an APA-approved respecialization training program in Clinical or Counseling Psychology
2. Approval for internship status by graduate program training director
3. A minimum of 400 direct intervention and 100 direct assessment hours of supervised graduate level pre-internship practicum experience

ELIGIBILITY FOR VA EMPLOYMENT

To be eligible for employment as a VA Psychologist, a person must be a U.S. citizen and must have completed an APA, or CPA accredited graduate program in Clinical, Counseling, or Combined psychology or PCSAS accredited Clinical Science program AND must have completed an APA or CPA accredited internship in Psychology, with the emphasis area of the degree consistent with the assignment for which the applicant is to be employed. The only exception is for those who complete a new VA internship that is not yet accredited.

Selection Process

Initial Screening

A selection of committee members from our Training Team will review applications. Applications not meeting the eligibility requirements will not be considered. We seek applicants who have a sound clinical and scientific knowledge base from their academic program, who have strong basic skills in standard assessment and intervention and who have the personal characteristics necessary to function well in our internship setting (i.e., who share a positive approach to teamwork). Our selection criteria are based on both the applicant's match with our practitioner-scholar model and the fit of our training program offerings with applicant goals.

Our training program as well as the Iowa City VA Health Care System is committed to Equal Opportunity in Employment. As an equal opportunity training program, the internship welcomes and strongly encourages applications from all qualified candidates, regardless of race, ethnicity, religion, sexual orientation, disability, or other minority status.

Interviews

Interviews will be required (i.e., face-to-face or telephone) of all applicants who make the final selection and will involve at least two training staff members; this may include discussion of a clinical vignette presented by the interviewers.

Match Policies

The Iowa City VAMC is a member of the Association of Psychology Postdoctoral and Internship Centers (APPIC) and follows APPIC guidelines and policy that no person at this training facility will solicit, accept, or use any ranking-related information from any intern applicant.

Application Procedures

Applications are due by November 4, 2019. Application materials should be submitted to Doris J. Stormoen, Ph.D. utilizing AAPI online (www.appic.org).

Please submit the following:

1. Cover letter
2. Curriculum Vitae

3. APPIC Application for Psychology Internship (AAPI online) including:
 - (a) Certification of Readiness for Internship by academic program Training Director;
 - (b) all graduate transcripts;
 - (c) three letters of recommendation.
4. A clinical writing sample (i.e., clinical history/conceptualization or report of a neuropsychological assessment), attached via the AAPI online supplemental section.

The above materials will be used to screen potential applicants for follow-up interviews.

In accordance with the Federal Drug-Free Workplace Program, interns accepted here may be asked to submit a urine specimen at the beginning of the training year. In addition, the Office of Personnel Management requires a criminal background check of all prospective interns.

Statement of nondiscrimination

We do not discriminate in the recruitment of interns who are eligible for our program based on any non-merit factors, including race, national origin, color, religion, sex, sexual orientation, gender identity, disability, age, or status as a parent.

We also highly value cultural diversity and encourage applicants from all backgrounds to apply.

Contact Information

Further information regarding the Iowa City VAHCS Psychology Internship Program may be obtained by e-mail or telephone from Doris J. Stormoen, Ph.D., Director of Psychology Training.

Iowa City VA Health Care System (IC VAHCS)

Coralville Outpatient Clinic (116/CC)

520 10th Avenue

Coralville, Iowa 52241

(319) 688-3333

e-mail: doris.stormoen@va.gov

The Iowa City VA Health Care System, Coralville Clinic, welcomes your interest in our psychology internship training program.

Websites for Further Reference

American Psychological Association

750 First Street, NE
Washington, DC 20002-4242
(202) 336-5500
(202) 336-6123 TDD
Web: www.apa.org

Commission on Accreditation (CoA), American Psychological Association

750 First Street, NE
Washington, DC 20002-4242
202-336-5979
Web: www.apa.org/ed/accreditation/index.aspx

APPIC – Association of Psychology Postdoctoral and Internship Centers

17225 El Camino Real
Onyx One - Suite 170
Houston, TX 77058
(202) 347-0022
Web: www.appic.org

National Matching Services Inc.

20 Holly Street, Suite 301
Toronto, Ontario
Canada, M4S 3B1
Telephone: (800) 461-6322
Fax: (844) 977-0555
Web: www.natmatch.com/psychint/

Iowa Board of Psychology

Bureau of Professional Licensure
Lucas State Office Building
321 E. 12th Street
Des Moines, IA 50319-0075
Telephone: (515) 281-7689
Fax: (515) 281-3121
Web: <http://www.idph.state.ia.us/licensure/Meetings.aspx?board=Psychology>

Iowa Psychological Association

IPA Central Office
Executive Director Suzanne Hull
37 Liberty Bell Blvd.
Pleasant Hill, IA 50327
Telephone: (515) 250-6366
Web: <http://www.iowapsychology.org>