ACCREDITATION STATUS

The doctoral internship at the Cheyenne VA Medical Center is fully accredited effective 10/19/2017 by the Commission on Accreditation (CoA) of the American Psychological Association (APA). We were awarded the maximum number of years (3 years) of accreditation for programs moving from “accredited, on contingency” to fully accredited status. Our next site review will be held in February of 2020.

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
Phone: (202) 336-5979
E-mail: apaaccred@apa.org
Web: www.apa.org/ed/accreditation
Internship Admissions, Support, and Initial Placement Data

Internship Program Admissions
Date Program Tables are updated: August 23, 2019

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

<table>
<thead>
<tr>
<th>Applicants must meet the following prerequisites to be considered for our program:</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Applicants must be enrolled and in good standing in an APA- or CPA- accredited clinical, counseling, or combined psychology program.</td>
</tr>
<tr>
<td>2. A minimum of 350 direct intervention and 50 direct assessment hours of supervised graduate level pre-internship experience.</td>
</tr>
<tr>
<td>3. Completion of comprehensive examination and proposal of their dissertation.</td>
</tr>
<tr>
<td>4. U.S. citizenship. VA is unable to consider applications from anyone who is not currently a U.S. citizen. Verification of citizenship is required following selection. All interns must complete a Certification of Citizenship in the United States prior to beginning VA training.</td>
</tr>
<tr>
<td>5. 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.</td>
</tr>
<tr>
<td>6. Matched interns are subject to fingerprinting and background checks. Match result and selection decisions are contingent on passing these screens. Please view the following link for additional information regarding the background check: <a href="http://www.archives.gov/federal-register/codification/executive-order/10450.html">http://www.archives.gov/federal-register/codification/executive-order/10450.html</a></td>
</tr>
<tr>
<td>7. VA conducts drug screening exams on randomly selected personnel as well as new employees. Interns are not required to be tested prior to beginning work, but once on staff they are subject to random selection for testing as are other employees.</td>
</tr>
</tbody>
</table>

Selection Process:
A selection committee comprised of psychologists reviews applications. Our selection criteria are based on “goodness-of-fit” with our scholar-practitioner model. Applicants will be evaluated individually on their clinical experiences, academic performance, scholarly background, and interests. The selection process may include information gained from internet and social media searches of applicants’ names. Preference will be given to applicants with interests in rural, generalist training with an emphasis on interprofessional treatment. As an equal opportunity training program, the internship welcomes and strongly encourages applications from qualified candidates, regardless of gender, age, racial, ethnic, sexual orientation, disability, or other minority status. Our internship emphasizes and promotes diversity; it is an essential component of our training program. We are committed to attracting diverse applicants and maintaining diversity within our
intern cohorts. Students from diverse backgrounds (e.g., ethnicity/race, lifestyle, disability) and historically disadvantaged groups, are strongly encouraged to apply. All things being equal, consideration is given to applicants who identify themselves as veterans; as members of historically underrepresented groups on the basis of racial or ethnic status; as representing diversity on the basis on sexual orientation; or as representing diversity on the basis of disability status. This agency provides reasonable accommodation to applicants with disabilities where appropriate. If you need reasonable accommodation for any part of the application and hiring process, please notify Rebecca Bailly, PhD by telephone (307-778-7550 x7215) or email (Rebecca.Bailly@va.gov).

<table>
<thead>
<tr>
<th>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:</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Total Direct Contact Intervention Hours</strong></td>
</tr>
<tr>
<td>□ No</td>
</tr>
<tr>
<td>☒ YES</td>
</tr>
<tr>
<td>Amount: 350</td>
</tr>
<tr>
<td><strong>Total Direct Contact Assessment Hours</strong></td>
</tr>
<tr>
<td>□ No</td>
</tr>
<tr>
<td>☒ YES</td>
</tr>
<tr>
<td>Amount: 50</td>
</tr>
</tbody>
</table>

Describe any other required minimum criteria used to screen applicants:

The program does not have addition screening criteria.

Please see next page for information regarding financial and other benefit support for the upcoming training year.
## Financial and Other Benefit Support for Upcoming Training Year*

<table>
<thead>
<tr>
<th>Benefit Support</th>
<th>Description</th>
<th>Value/Availability</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Annual Stipend/Salary for Full-time Interns</strong></td>
<td>$26,166</td>
<td></td>
</tr>
<tr>
<td><strong>Annual Stipend/Salary for Half-time Interns</strong></td>
<td>Not Applicable</td>
<td></td>
</tr>
<tr>
<td><strong>Program provides access to medical insurance for intern?</strong></td>
<td>☒ YES</td>
<td>No</td>
</tr>
<tr>
<td><strong>If access to medical insurance is provided:</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Trainee contribution to cost required?</td>
<td>☒ YES</td>
<td>No</td>
</tr>
<tr>
<td>Coverage of family member(s) available?</td>
<td>☒ YES</td>
<td>No</td>
</tr>
<tr>
<td>Coverage of legally married partner available?</td>
<td>☒ YES</td>
<td>No</td>
</tr>
<tr>
<td>Coverage of domestic partner available?</td>
<td>Yes</td>
<td>☒ No</td>
</tr>
<tr>
<td><strong>Hours of Annual Paid Personal Time Off (PTO and/or Vacation)</strong></td>
<td>4 hours every two weeks (96 to 104 hours)</td>
<td></td>
</tr>
<tr>
<td><strong>Hours of Annual Paid Sick Leave</strong></td>
<td>4 hours every two weeks (96 to 104 hours)</td>
<td></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**</td>
<td>No</td>
</tr>
<tr>
<td><strong>Other Benefits (please describe):</strong></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Note:** In the event of medical conditions and/or family needs that require extended leave, in certain circumstances at the discretion of the training program, interns may be allowed reasonable unpaid leave in excess of personal time off and sick leave. However, the training year may need to be extended to accrue the necessary hours for successful completion of the internship.

More information regarding VA stipends and benefits is available at [https://www.psychologytraining.va.gov/benefits.asp](https://www.psychologytraining.va.gov/benefits.asp)

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

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**Please see next page for data regarding prior interns' post-internship positions.**
## Initial Post-Internship Positions

(Provide an Aggregated Tally for the Preceding 3 Cohorts)

<table>
<thead>
<tr>
<th></th>
<th>2016-2019</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total # of interns who were in the 3 cohorts</td>
<td>8</td>
</tr>
<tr>
<td>Total # of interns who did not seek employment because they returned to their doctoral program/are completing doctoral degree</td>
<td>1</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Setting</th>
<th>PD</th>
<th>EP</th>
</tr>
</thead>
<tbody>
<tr>
<td>Community mental health center</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Federally qualified health center</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Independent primary care facility/clinic</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>University counseling center</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Veterans Affairs medical center</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>Military health center</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Academic health center</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>Other medical center or hospital</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Psychiatric hospital</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Academic university/department</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Community college or other teaching setting</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Independent research institution</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Correctional facility</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>School district/system</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Independent practice setting</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>Not currently employed</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Changed to another field</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Other</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Unknown</td>
<td>0</td>
<td>0</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.
FACILITY AND TRAINING SITES

The Cheyenne VAMC & off campus clinics provide health care and other supportive services to an estimated 71,611 Veterans living in Wyoming, western Nebraska, and northern Colorado. In order to reach Veterans across our vast catchment area, the Cheyenne VAMC has facilities/services located throughout three states. These include the following: 1) the VA Medical Center in Cheyenne, WY; 2) Community Based Outpatient Clinic (CBOC) in Loveland, CO and Multi-disciplinary Outpatient Clinic (MSOC) in Fort Collins, CO, and Sidney, NE; 3) a Primary Care Telehealth Outpatient Clinic (PCTOC) located in Rawlins, WY; 4) and Mobile Telehealth Clinics serving Laramie, Torrington, and Wheatland, WY, as well as Sterling, CO.

Cheyenne VAMC (CVAMC, Cheyenne, WY)
Primary and specialty outpatient medical services are provided at the Cheyenne VAMC campus (CVAMC) located at 2360 East Pershing Blvd. Cheyenne, WY 82001. Telephone number: 307-778-7550 or 1-888-483-9127. The CVAMC offers a multitude of mental health services on-site or via telementalhealth. On campus, there is a 32-bed Community Living Center (CLC) which provides rehabilitative care to Veterans who require assistance to return to living at home or who may require longer term residential care. Inpatient hospice and palliative care services are also available. There are also inpatient medical services available for acute medical needs. The newest addition to the CVAMC is a 10-bed Residential Rehabilitation Treatment Program (RRTP) which provides residential treatment for Substance Use Disorder and Post-Traumatic Stress Disorder.

Fort Collins MSOC (Fort Collins, CO)
The Fort Collins MSOC provides care to a large number of Veterans in Northern Colorado and is growing fast. The outpatient clinic provides a variety of services to patients including primary care, preventive care, mental health care, and some specialty services. In addition to primary care staff, the MSOC in Fort Collins is currently staffed by mental health providers in a variety of disciplines, including psychiatry, social work, mental health counseling, and nursing. The MSOC is located approximately 50 miles from the main campus of the Cheyenne VAMC at 2509 Research Blvd. Fort Collins, CO 80526-8108. Telephone number: 970-224-1550.

Loveland CBOC (Loveland, CO)
The Loveland CBOC provides care to Veteran in Northern Colorado, capturing many of our more rurally located Colorado counties. The outpatient clinic offers primary care, mental health, and some specialty services. The Loveland CBOC is staffed by mental health providers from a variety of disciplines, including psychology, psychiatry, social work, licensed professional counseling, clinical nurse specialist, and nursing. The CBOC is located approximately 55 miles from the main campus of the Cheyenne VAMC at 5200 Hahns Peak Drive Loveland, CO 80538. Telephone number: 970-962-4900. As this clinic replaced the facility in Greeley, CO, some assistance with transportation may be available between Greeley and Loveland by calling 307-433-3735.

VITAL (Veterans Integration to Academic Leadership) Program
The VITAL Program is staffed by a Cheyenne VAMC psychologist and medication providers who serve several different university/college campuses in the northern Colorado and Wyoming areas. The program launched in January 2014 in effort to increase access to care for OEF/OIF/OND veterans and other University veterans and has quickly become the top-performing VITAL program in the country.
PSYCHOLOGY SETTING

Cheyenne VA psychologists hold a number of leadership roles. Dr. Charles Drebing is the Acting Chief of the Mental Health Service Line and Dr. Scott Sandstedt is the Deputy Chief of Mental Health for the Northern Colorado Clinics. Dr. Rebecca Bailly is the Psychology Discipline Executive, Program Manager of the Residential Treatment Program, and Interim Training Director. She is also the Team Lead for Dialectical Behavior Therapy (DBT) and a national training consultant for Prolonged Exposure Therapy. Dr. Rodney Haug is the Fort Collins Mental Health Service Line Program Manager. Dr. Laura Eaton serves as a national training consultant for Cognitive Behavioral Therapy for Depression and is involved with the annual planning of the VA Psychology Leadership Association conference. Dr. Tamara Morris is spearheading the role out of “Own the Moment”, a VA Central Office initiative to improve staff and patient experience. Dr. Delia Sosa is the chair of the Mental Health Service Line Diversity Workgroup. Psychologists at the Cheyenne VA are embedded within various settings at the main facility, outpatient clinics, and college campuses. Psychologists maintain close interprofessional relationships, working alongside licensed professional counselors, licensed marriage and family therapists, social workers, psychiatric nurses, clinical nurse specialists, psychiatrists, and medical providers in a variety of clinics.

TRAINING MODEL AND PROGRAM PHILOSOPHY

The Cheyenne VAMC Psychology Internship Program is based on the Scholar-Practitioner training model. The training program’s goal is to create a supportive, collegial atmosphere that is committed to training future psychologists in the scientific practice of psychology. Over the course of the internship year, the program’s aim will be to prepare interns to be strong generalist practitioners with an emphasis on evidence-based psychotherapies.

The Cheyenne VA internship training program follows the professional developmental model, in which trainees will gradually progress from close supervision to more independent functioning over the course of each rotation and throughout the year. The competencies were developed to be sequential, cumulative, and graded in complexity. It is expected that interns demonstrate growth during the training year in the identified competencies as they receive clinical supervision and ongoing feedback regarding their progress. Furthermore, interns are expected to learn to function as professional psychologists in close collaboration with other disciplines in a VA medical facility and outpatient clinics. Interns completing the program should be fully prepared for further postdoctoral training or entry-level professional positions working with adult and older adult patient populations with a variety of mental health concerns.

Profession-Wide Competencies

Our program incorporates experiential and didactic training in the following profession-wide competencies:
1) **Research** – Interns will demonstrate critical thinking, and be able to integrate scientific knowledge with clinical practice. Interns will be able to apply the current scientific literature to evaluate their practices, interventions, and/or programs.

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 show an awareness of these principles and apply them in their daily practice.

3) **Individual and cultural diversity** - Interns will demonstrate knowledge of self and others as cultural beings in the context of dimensions of diversity in assessment, treatment, and consultation. Interns should show an awareness of, sensitivity to, and skill in working professionally with diverse individuals, groups, and communities who represent various cultural and personal backgrounds and characteristics.

4) **Professional values, attitudes, and behaviors** - Interns will demonstrate sound professional judgment and responsibility with progressive independence to resolve challenging situations throughout the training year. They will conduct themselves in a professional manner across settings and contexts. Interns will demonstrate the ability to manage work load and administrative tasks, as well as complete timely documentation. Interns will develop a professional identity over the course of the internship training year, and learn how to function as a psychologist within an interprofessional team.

5) **Communication and interpersonal skills** – Interns will communicate effectively verbally, nonverbally, and in writing. These communications will be informative, articulate, succinct, and well-integrated with consideration given to the recipient of the information (e.g., patient / family, other members of the interprofessional team, etc.). Interns will demonstrate presentation skills by effectively communicating psychological principles, procedures, and/or data to colleagues, additional trainees, and other professions.

6) **Assessment** - Interns will be able to assess patients with a broad range of problems using a variety of psychological assessment instruments. Interns will gain proficiency in selecting assessment tools, conducting intake interviews, and integrating multiple sources of information (i.e., biopsychosocial history and test data) with consideration of diversity. Interns will develop case conceptualization skills and offer concrete, useful recommendations tailored to answer the referral questions.

7) **Intervention** - Interns will demonstrate the ability to provide professional entry-level skills in response to a range of presenting problems and treatment concerns, with particular attention to identifying treatment goals and providing evidence-based psychotherapies. Interns will be able to develop case conceptualizations relevant to the patient with the ability to adapt an evidence-based intervention if appropriate. Interns will be able to identify and manage crisis needs and/or unexpected or difficult 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 understand the ethical and legal issues of the supervisor role. Interns will develop knowledge of supervision models and apply this knowledge in direct or simulated practice. Interns will provide effective supervised supervision to less advanced students, peers, or other service providers in typical cases appropriate to the service setting.

9) **Consultation and interprofessional / interdisciplinary skills** – Interns will understand their role as a consultant and shift roles to meet presenting needs. Interns will gather appropriate data in order to answer the consultation need.

**PROGRAM STRUCTURE**

This doctoral internship program includes three 12-month full-time internship positions each of which is divided into two 6-month rotations. Interns will choose from the following major 6-month rotations based on availability: 1) General Mental Health, 2) Psychosocial Residential Rehabilitation Treatment Program (PRRTP) for PTSD and/or SUD, 3) Primary Care Mental Health Integration and 4) Geropsychology. All training experiences are based primarily at the Cheyenne VAMC in Cheyenne, WY with opportunities for some training at the northern Colorado clinics. Other major rotations may be available pending licensed supervisor availability. Trainees also are required to participate in psychological assessment throughout the year, conducting full psychological assessments (as determined appropriate by supervising psychologist) as part of their rotations or in addition to rotations. Finally, interns will complete required telehealth training with the opportunity to deliver telehealth therapy as needed on rotations.

Interns also will choose 6-month adjunctive training experiences based upon the Training Director’s recommendations, as well as the trainee’s past experience, interests, professional goals, and identified areas of growth.

Interns are expected to commit a minimum of 40 hours per week to the internship training experience. Interns can anticipate at least four hours (3 hours of individual; 1 hour of group) of supervision a week. It is expected that each intern attend all scheduled didactic presentations, individual and group supervision, and assessment and intervention (A&I) presentations. In addition, interns are encouraged to participate in other educational training opportunities that become available.

**Major Rotations (6 months, 3 days/week):**

**General Mental Health** – Interns will provide a full range of mental health treatment to Veterans diagnosed with a variety of mental health disorders. Interns will conduct intake assessments, offer individual and group psychotherapy, and participate on interdisciplinary teams. Evidence-based treatments will be emphasized and may include cognitive behavioral treatment protocols for depression, anxiety, and obsessive-compulsive disorders; Integrated Behavioral Couples Therapy (IBCT); Cognitive Behavioral Therapy for Depression (CBT-D); Acceptance and Commitment Therapy (ACT); Mindfulness Based Stress Reduction (MBSR); Cognitive Behavioral Therapy for Insomnia (CBT-I) and Dialectical Behavior Therapy (DBT). Opportunities also will include observation and participation with Suicide Prevention Program and
Mental Health Intensive Case Management (MHICM). Formal psychological assessments will be conducted when findings would be helpful to inform treatment.

**Psychosocial Residential Rehabilitation Treatment Programs (PRRTP)** - Interns have the opportunity to work in a 10-bed residential setting for Veterans with PTSD and / or Substance Use Disorder. Treatments include Cognitive Processing Therapy (CPT) and Prolonged Exposure (PE) as well as evidence-based substance use disorder treatments (CBT-SUD and Matrix). Training will include emphasis on PTSD assessment as well as participation on an interdisciplinary team.

**Primary Care-Mental Health Integration (PCMHI)** – Interns will collaborate with primary care providers in treating Veterans with a variety of needs or issues related to lifestyle and behavioral difficulties, such as medical compliance and health promoting practices, coping with illness or chronic diseases, crisis situations, coordination of care, and brief treatment of mental health concerns. PCMHI offers individual assessment and brief intervention, as well as group psychoeducation.

**Geropsychology** – Interns will collaborate actively on an interdisciplinary team in treating older veterans. Trainees will strengthen their assessment and therapy skills and learn the role that psychology plays as part of an interdisciplinary team providing care to older adults and their families. Interns on this rotation will also participate in geriatric assessments involving dementia or decisional capacity evaluations. These activities may occur in the context of the Community Living Center, which includes long-term care, rehabilitation, and palliative care/hospice beds or may occur in Home-Based Primary Care (HBPC) setting. During this rotation interns may have the opportunity to implement at least one of the following evidence-based treatments: STAR-VA, Peaceful Mind, STOP Worry, Behavioral Activation, Memory Skills Group, and Caregiver Support.

**Yearlong Assessment (4-8 hours/week):**

**Psychological Assessment** - Interns will conduct psychological assessments, which may include personality, cognitive, neurocognitive, and intellectual measures, as determined appropriate by the supervising psychologist. Interns will be expected to complete a minimum of six psychological assessments throughout the year as part of their rotations (e.g., General Mental Health, RRTP, or PCMHI) or as a separate experience depending on the rotation.

**Adjunctive Training Experiences (approx. 4-8 hours/week)*:**

A strength of this internship program is our efforts to create an individualized training experience for each of our interns based on current skills, areas of growth, and long-term goals. The following adjunctive experiences are a sample of those completed by prior interns but does not preclude the possibility an unique adjunctive experience could be created in collaboration and support of the training committee.

**Telemental Health (required)** – Interns will receive formalized tele-health training in the delivery of evidence-based individual and/or group psychotherapy to rural and highly rural Veterans.
Evidence-Based Psychotherapy Emphasis – Interns have the opportunity to receive focused training in one of the evidence-based treatments outside of a major rotation. Examples include Motivational Interviewing (MI), Cognitive Behavioral Therapy for Depression (CBT-D), Problem Solving Therapy (PST), Cognitive Processing Therapy (CPT), and Dialectical Behavioral Therapy (DBT).

Veteran Integration to Academic Leadership Initiative (VITAL) program – Interns will work closely with a VA psychologist placed on college campuses. This innovative program has been designed to meet the unique needs of University veterans. Interns will be involved in ongoing program development and evaluation, outreach, and the provision of psychotherapy.

Committees/Other Experiences – Interns have the opportunity to take an active part in several committees and other training experiences around the hospital. These experiences vary over the year according to current need and projects. Examples include: Cheyenne VAMC Diversity Committee and the Cheyenne VAMC Dementia Committee. Time dedicated to these experiences varies and may not require 8 hours a week.

*Major rotations above may be available as adjunctive experience pending availability of supervisor

Intern Seminar Series (2-3 hours weekly requirement)

Didactic Series - These didactics include presentations covering various topics related to clinical and professional development. Didactics will be held face-to-face, as well as over video-conference with presenters from across the VA Healthcare System. Core topics will include the following: Assessment, Intervention, Diversity, Law/Ethics, Evidence-Based Psychotherapies, Program Development and Evaluation, Consultation, and Professional Development. Interns also will be assigned rotation-specific articles to promote the implementation of theory, research, and critical thought in their case conceptualizations.

Assessment and Intervention (A&I) Seminar - Each intern will present one assessment case and one intervention case to other trainees and invited staff.

Grand Rounds Presentation - Each intern will present on a topic of their choosing to the Cheyenne VAMC medical staff at Grand Rounds in the spring. This is experience is designed to showcase their expertise and provide an avenue for accruing a professional presentation during their training year. Past interns have elected to present on a portion of their dissertation (applying the topic to Veterans' Health) or to present on another topic related to Veteran Healthcare.
TRAINING RESOURCES

Psychology interns have assigned office space with computer and telephone access at their primary rotation site. Each intern has administrative and program support for training and consultation with electronic medical record management, telemental health, clinical applications, data management related to clinical workload, and program and facility performance improvement programs. Video-teleconferencing technologies are available to support didactics and clinical case conferences. Interns have computers available in their office space and online access to journals.

METHOD AND FREQUENCY OF EVALUATION

The Cheyenne VA Psychology Internship Training Program employs a multidimensional approach to program evaluation using both internal and external outcome measures. Interns receive ongoing verbal feedback regarding performance and progress, beginning with observations of baseline competencies during orientation week. Additionally, interns receive formal, written evaluations throughout the training year (2 months, 4 months, 6 months, 9 months, 12 months). The evaluations assess specific competencies required of all trainees.

At the same intervals, interns complete an evaluation of the quality of their experience of supervision. Interns also provide an overall evaluation of his/her internship experience at the end of the year. Further, interns complete an evaluation of their weekly didactic presentations. Both interim and final evaluations provided by the interns assist the program in its self-assessment and improvement processes.

REQUIREMENTS FOR COMPLETION OF INTERNSHIP

Program completion requires 2080 hours of internship training activities under clinical supervision (four hours weekly). Trainees should be on duty and involved in training activities for at least 90% of these hours (1872 hours), with a minimum of 520 hours in direct patient care activities. Performance evaluation of and feedback to interns by clinical supervisors and other internship faculty is continuous; however, more formal evaluations are completed at established intervals throughout the training year. To maintain good standing in the program, interns will demonstrate ongoing progress and not be found to have engaged in any significant ethical wrongdoing. Remediation may be necessary if an intern performs at a level “1”. To successfully complete the program, interns must complete the required supervised activities/hours, attend the required didactics and experiential diversity activity, complete a minimum of 6 psychological assessments, not be found to have engaged in any significant ethical wrongdoing, submit required work samples, and receive a minimum level “4” rating across all competency items.
OUTSIDE EMPLOYMENT

The internship year is busy and demanding. Since the Psychology Service is responsible for interns' clinical training and supervision, outside paid employment for clinical activities such as therapy or psychological assessment is prohibited. Requests for other non-clinical professional activities such as teaching, research, or non-psychological paid employment outside of normal duty hours may be considered on a case-by-case basis. Interns should not commit to any outside employment or volunteer activities before getting the approval from the Director of Training. Human Resources and, possibly the Ethics Committee or Office of the Inspector General (OIG), also may be consulted to consider any possible conflicts of interest.

TRAINING STIPEND AND BENEFITS

Current stipend is anticipated to be $26,166 divided into 26 pay periods for the year. State and federal income tax and FICA (Social Security) are withheld from interns' checks. The United States Government covers interns for malpractice under the Federal Tort Claims Act. Fringe benefits include health and life insurance at government rates, federal holidays (10 days), vacation (13 days), and sick leave (13 days). In the event of medical conditions and/or family needs that require extended leave, in certain circumstances at the discretion of the training program, interns may be allowed reasonable unpaid leave in excess of personal time off and sick leave. However, in order to successfully complete the program, a trainee will likely be required to extend the appointment to accrue the required training hours.

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 at the Cheyenne VAMC. 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.
LOCAL INFORMATION

Cheyenne is located in the southeastern corner of Wyoming and is the state capital and largest city in Wyoming with a population of around 62,500. Cheyenne is home to F.E. Warren Air Force Base with the 20th Air Force Command, 90th Missile Wing, and 30th Airlift Squadron as well as the Wyoming National Guard. Our ‘claim to fame’ is the annual Cheyenne Frontier Days rodeo and concert event known as ‘The Daddy Of ‘Em All’, going strong for nearly 120 years. The University of Wyoming, located on the high Laramie Plains, is in close proximity with the opportunity to attend local football games. The area offers a wealth of recreational activities including hiking, fishing, camping, cycling, golfing, rock-climbing, cross-country and downhill skiing, snowboarding and snowshoeing. The South Dakota Black Hills with Mt Rushmore and Jackson Hole with Teton and Yellowstone National Parks are within an easy day’s drive. The collegiate front-range cities of Fort Collins and Greeley, Colorado are within commuting distance with easy access for hiking, cycling, rock climbing, white water rafting, skiing, and snowboarding. Denver and Boulder, Colorado are an easy two-hour drive away. Denver is home to the Colorado Rockies, Avalanche hockey team, and Broncos Super Bowl champions. Red Rocks Park and Amphitheatre, a well-known outdoor music venue set in a rock structure, is also within driving distance for concertgoers.

For more information about Cheyenne, please visit the following websites:

www.cheyenne.org
www.cheyennechamber.org
www.cfdrodeo.com

For further information about northern Colorado, please see the following web sites:

**Fort Collins, CO:**
www.fcgov.com/
www.visitftcollins.com/

**Greeley, CO:**
www.greeleygov.com
www.greeleydowntown.com

**Loveland, CO:**
http://www.cityofloveland.org/
http://www.visitlovelandco.org/
APPLICATION PROCESS

To apply, submit the following materials electronically through the on-line APPIC Application for Psychology Internships:

- APPIC Application for Psychology Internship (AAPI)
- Detailed Curriculum Vitae – to be submitted as part of AAPI
- Three letters of recommendation – to be submitted as part of AAPI
- Graduate school transcripts – to be submitted as part of AAPI
- Academic Program Verification of Internship Eligibility and Readiness form – to be submitted by your Director of Clinical Training as part of AAPI
- Cover letter (no longer than 2 pages) addressing how your experiences to date and current career goals make you a good fit for the training offered at the Cheyenne VA Medical Center – to be submitted as part of AAPI

Any written inquiries can be submitted to:

Dr. Rebecca Bailly
Psychology Service (116B)
Cheyenne VA Medical Center
2360 East Pershing Blvd.
Cheyenne, WY  82001
307-778-7550 x7215
Rebecca.Bailly@va.gov

Important Information / Deadlines

<table>
<thead>
<tr>
<th>Match Number:</th>
<th>230211</th>
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<tbody>
<tr>
<td>Application Deadline:</td>
<td>November 12, 2019</td>
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<tr>
<td>Interview Notification:</td>
<td>December 16, 2019</td>
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</tbody>
</table>

Please read all relevant instructions carefully to ensure that transcripts, letters of recommendation, and the Academic Program Verification of Internship Eligibility and Readiness forms are submitted in a timely manner. Applications that are not completed by 11:59pm MST on 11/12/2019 will not be considered, even if portions of the application have been submitted prior to that date and time.

This training program follows all APPIC policies for the Intern selection process. This Internship site strictly abides by the APPIC policy that no person at this training facility will solicit, accept, or use any ranking-related information from any intern applicant. You are encouraged to read or download the complete text of their regulations governing program membership and the match process from APPIC’s web site. Additionally, the training program is committed to creating a supportive learning environment for individuals of diverse backgrounds, and as a federal agency, the program abides by the US government EEO and Reasonable Accommodation policies.
CHEYENNE VA PSYCHOLOGY STAFF

Rebecca Bailly, Ph.D., PTSD and Substance Use Disorder Specialist, Psychology Discipline Executive and Interim Training Director: Dr. Bailly received her Ph.D. in Clinical Psychology from the University of Wyoming in 1993 and completed her doctoral internship at Connecticut Valley Hospital in Middletown, Connecticut. She has been in private practice and taught for several years in the Clinical Psychology graduate program at the University of Wyoming. She has also worked as a civilian psychologist with the Air Force at F.E. Warren AFB. There she became familiar with military culture and evidence-based treatments for PTSD (including PE, CPT and SIT) and served as the Program Manager for the Alcohol and Drug Awareness Prevention and Treatment program. At the Cheyenne VAMC, Dr. Bailly participates on the PTSD Recovery and DBT Clinical Teams and serves as a national training consultant for PE. She works in both outpatient and residential mental health programs. Dr. Bailly’s interests include evidence-based psychotherapies for PTSD, co-occurring disorders, and other complex mental health concerns; supervision and professional development; program development and evaluation; and military psychology.

Caitilin Barrett, Ph.D., Licensed Clinical Psychologist, Cheyenne BHIP Psychologist: Dr. Barrett earned her Ph.D. in Clinical Psychology from the University of Wyoming in 2018. She completed her pre-doctoral internship at the Cheyenne VAMC in 2018. Dr. Barrett has a background in trauma psychology, especially in the areas of intimate partner violence and sexual assault. In April 2019, Dr. Barrett joined the CVAMC as a BHIP psychologist providing services on one of the two BHIP outpatient clinical teams. As a BHIP psychologist, Dr. Barrett is a generalist and provides treatment for a wide-array of problems including PTSD, Personality Disorders, Depression, and Anxiety utilizing a variety of treatment modalities including CBT, DBT, PE, CPT, and Exposure with Response Prevention. In addition to individual therapy, Dr. Barrett runs a number of outpatient groups including DBT Skills, CBT-D, and Trauma Symptom Management. In addition to providing psychotherapy outpatient services, Dr. Barrett also conduct psychological assessment.

Cynthia Merritt Brooks, PsyD, Clinical Psychologist, Fort Collins PCMHI: Dr. Brooks completed her PsyD in Clinical Psychology at Florida Institute of Technology in 2001 after completing her predoctoral internship at the Missouri Health Sciences Consortium in Columbia, Missouri. She has worked in a variety of clinical settings over her career including forensics with serious mental illness, a large health care system with specialty medicine and primary care, inpatient psychiatric units, and private practice. Most recently she has worked with active duty Army in both specialty and primary care settings, overseas and stateside. She works currently works in PCMHI in Fort Collins and has supervised a major rotation at that location.
Charles Drebing, Ph.D., Acting Chief of Mental Health; Licensed Psychologist with Specialization in Psychosocial Rehabilitation. Dr. Drebing obtained his Ph.D. in Clinical Psychology (with an emphasis on aging) from The Fuller Theological Seminar in 1990. He completed his pre-doctoral internship at the West Los Angeles VA, and a 2-year post-doctoral fellowship in neuropsychiatry at the UCLA School of Medicine – Neuropsychiatric Institute. He has worked in the VA for the past 27 years, and has been an active researcher in the area of psychosocial interventions. Dr. Drebing has broad experience as a clinician and administrator in a variety of outpatient, inpatient and residential settings within the VA Healthcare System. His primary interests are community reintegration, vocational interventions, social support, and program development.

Laura Eaton, Ph.D., Licensed Clinical Psychologist, HBPC: Dr. Eaton obtained her masters in Clinical Psychology from The University of Colorado at Colorado Springs in 2002, and earned her Ph.D. in Clinical Psychology (with an emphasis on aging) from The University of Alabama in 2007. She completed her pre-doctoral internship at the Pittsburgh VA Healthcare System. Her post-doctoral training was at the South Central MIRECC where she focused on evidence-based interventions for anxiety and depression (primarily geriatric) in primary care and rural health settings. Dr. Eaton has broad experience as a clinician and administrator in a variety of outpatient, inpatient and residential settings within the VA Healthcare System. She primarily utilizes a cognitive-behavioral orientation and has completed VA trainings in STAR-VA, CPT, PE, CBT-I and is a CBT-D national training consultant. She joined the Cheyenne VA system in 2017, and has worked in the Community Living Center (Nursing Home), Hospice, and Palliative Care settings. Her primary interests are interdisciplinary teams, geropsychology, suicide prevention, quality of care for Veterans and helping Veterans and their families successfully navigate later life. Currently she is the Home Based Primary Care (HBPC) psychologist for Northern Colorado and serves as the supervisor for the HBPC minor rotation in Northern Colorado.

Kirsten Ging, Psy.D., Licensed Clinical Psychologist, BHIP CVAMC: Kirsten Ging graduated with a PsyD in clinical psychology from the University of Denver (DU) in 2009. She spent eight years at the DU Health and Counseling Center (spanning internship, post-doc, and staff psychologist) providing therapy services to undergrad and grad students. Her general area of specialty is with the LGBTiQ population, with a focus on transgender health and mental health. She has assisted numerous trans-identified clients with identity development/integration, as well as performed Medical Readiness Evaluations for those wishing to pursue medical interventions (i.e., gender affirming hormone therapy and top/bottom surgery) as instructed by the World Professional Association for Transgender Health (WPATH) Standards of Care. From 2016 to 2018, Dr. Ging worked at the Fort Hood, Texas Medical Evaluation Board (MEB) before joining the Cheyenne VAMC BHIP team in January 2019.

Rodney Haug, Ph.D., Licensed Clinical Psychologist (Colorado and Wyoming), Supervisory Psychologist/Fort Collins MSOC Program Manager: Dr. Haug earned his doctoral degree in Clinical Psychology with an emphasis in psychoneuroendocrinology from the University of North Dakota in 1984. He completed his doctoral internship at the Minneapolis MN Veterans Hospital. In addition to his recent arrival at the Ft. Collins MSOC he has worked in a variety of settings including VA Vet Centers, private practice, Dept. of Indian Affairs, and the Dept. of Social Services. Areas of clinical experience and interest include trauma treatment, supervision and professional development, and most recently, Primary Care Mental Health Integration. Dr. Haug’s theoretical
orientation may be best described as eclectic influenced by psychodynamic training, cognitive behavioral paradigms, and life experience.

**Janine S. Kreft, Psy.D., Licensed Clinical Psychologist, Telehealth Provider:** Janine Kreft graduated with a PsyD in clinical psychology from the American School of Professional Psychology, Orange County. She completed her internship with us at the Cheyenne VAMC during the inaugural intern year and was directly hired on to complete post-doc hours here as well. She currently is still with us since 2014 as a full-time telehealth psychologist working remotely in Austin, TX. She successfully completed consultation in CPT and MI, in addition to being trained in ACT, DBT, CBT-I, CBT-D, and PE. Dr. Kreft is passionate about all things holistic and assists our Veterans with incorporating a mind-body approach. Along with EBP’s, Dr. Kreft incorporates modalities from the Whole Health model including: breathwork, Emotion Freedom Technique (EFT) tapping, Neuro-linguistic Programming (NLP), and Hypnosis/mindfulness techniques.

**Tamara L. Morris, Psy.D., Licensed Psychologist at the Loveland Clinic:** Dr. Morris received her Psy.D. in Clinical Psychology from the Wisconsin School of Professional Psychology after completing her doctoral internship at the Cheyenne VA Medical Center in 2016. Dr. Morris is a generalist with specialized training in Cognitive Processing Therapy. She currently works with the PTSD recovery team, specialty mental health clinic, and provides a wide range of psychological and cognitive assessments. Dr. Morris participates on the DBT consultation team, Mental Health Staffing Pillar, and Mental Health Interdisciplinary Team. She has trained in a variety of settings including the VA Medical Center, community outpatient mental health, inpatient mental health, forensics, and with Primary Care Mental Health Integration (PCMH). Dr. Morris currently offers a minor assessment rotation at the Loveland VA Clinic.

**Scott D. Sandstedt, Ph.D., Supervisory Psychologist/Northern Colorado MSOC Program Manager:** Dr. Sandstedt earned his doctoral degree in Counseling Psychology from the University of Missouri in 2004. He completed his doctoral internship at the Harry S. Truman Memorial Veterans Hospital in Columbia, MO, where he also served as a staff psychologist, internship supervisor, and Clinical Manager for the Behavioral Health Service. Areas of clinical experience include Substance Misuse treatment and Primary Care Mental Health Integration. Dr. Sandstedt’s theoretical orientation is integrated, informed primarily by both psychodynamic and cognitive behavioral paradigms.

**Delia Sosa, PsyD, Graduate Psychologist, VITAL Program Coordinator:** Dr. Sosa earned a PsyD in Clinical Psychology from Pacific University School of Graduate Psychology in 2016. She completed her doctoral internship and post-doctoral training at the Cheyenne VA Medical Center. Dr. Sosa offers a minor rotation in the VITAL (Veterans Integration to Academic Leadership) Program, focused on bringing VA mental health services in the form of evidence-based practices, outreach, and staff/faculty training opportunities to five different colleges/universities in Wyoming and Northern Colorado- with plans to expand to two additional schools this academic year. Dr. Sosa’s interests and areas of specialized training include: PTSD, VA certification in Cognitive Processing Therapy (CPT), multicultural therapy, and working with the Latinx/Spanish-speaking population. She completed her master’s thesis and doctoral dissertation research on PTSD in post-9/11 Latinx veterans.
Sarah B. Staats, Ph.D., PC-MHI Psychologist at the Loveland VA Clinic: Dr. Staats received her doctoral degree in Clinical & Community Psychology from Wichita State University in Wichita, Kansas. She went on to complete a PC-MHI specialty track internship with Denver VAMC, followed by a postdoctoral fellowship in PC-MHI at the Golden VA CBOC. She served as a PC-MHI Psychologist at the Wichita VAMC before coming onboard in Loveland. She has the greatest training and experience with primary care psychology and integrated, team-based care; health psychology and behavioral medicine (esp. pain, sleep, weight and health behaviors, tobacco use cessation); exposure-based approaches to anxiety; and utilizing ACT, CBT, MI, & DBT from a holistic and humanistic framework.

Thomas L. Wykes, Ph.D., Licensed Clinical Psychologist, Health Behavior Coordinator: Dr. Wykes earned his Ph.D. in Clinical Psychology from the University of Wyoming in 2016. He completed his pre-doctoral internship in the Serious Mental Illness (SMI) specialty track at the VA Maryland Healthcare System / University of Maryland School of Medicine Psychology Internship Consortium in 2015. Dr. Wykes has experience conducting academic research in the areas of health psychology and SMI, with an emphasis on diabetes self-management in the context of SMI. Dr. Wykes serves as the Health Behavior Coordinator at the Cheyenne VAMC, with assigned duties primarily in Primary Care – Mental Health Integration (PC-MHI). Within this role, Dr. Wykes serves as a content expert on health coaching, motivational interviewing, patient self-management, and health behavior change. He also provides training, clinician coaching, and consultation regarding health behavior change issues to providers in the Primary Care clinic. He serves as the co-chair of the Health Promotion and Disease Prevention (HPDP) committee at the Cheyenne VAMC.

**The information in this brochure is updated annually and current as of August 29, 2019.**