

Psychology Internship Program



VA Medical Center
Mental Health Service (116A-4-LD)
1101 Veterans Drive
Lexington, Kentucky 40502

(859) 233-4511, extension 3236
<http://www.lexington.va.gov>

MATCH Number: 131211
Applications due: November 15, 2013

Accreditation Status

The pre-doctoral internship at the **Lexington VA Medical Center** is accredited by the Commission on Accreditation of the American Psychological Association. The next site visit will be during the academic year **2018**.

Application & Selection Procedures

Eligibility for VA Employment:

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 conducts drug screening exams on randomly selected personnel as well as new employees. Interns and Fellows 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.

Eligibility for Application to Internship Program:

1. Status as a doctoral student in an APA accredited counseling or clinical psychology program.
2. A minimum of 500 hours of documented, psychologist supervised direct client contact hours through a combination of therapy and assessment experience. These hours must be through practicum experience within an APA doctoral program in counseling or clinical psychology. This must be verified by the training director of the doctoral program.
3. Completion of comprehensive examinations by February 1, 2014. This must be verified by the Training Director of the doctoral program.
4. Written verification by the Training Director of the doctoral program that the individual is approved for internship status by the Department.
5. All coursework must be completed prior to beginning the Internship.
6. United States Citizenship.

The Lexington VAMC Pre-doctoral Internship is participating in the APPIC Uniform Application Process. You may access the online application from the internet (www.appic.org). Your Training Director will need to complete the online Verification of Internship Eligibility and Readiness form.

Additionally, we require through online submission:

1. Online AAPIC Application for Psychology Internship (AAPI) submitted through the APPIC
2. All graduate transcripts (including those which did not confer a degree)
3. Three letters of recommendation

All materials must be submitted through the online application process. No materials will be accepted through email or postal mail. Pictures will be taken of applicants during the interview process. These pictures will be solely used for identification purposes and will be destroyed following the successful matching of interns. Interns who are matched with the Lexington VA Medical Center will have to submit official transcripts of all undergraduate work.

Selection of Applicants

The Psychology Training Council seek to find applicants who appear to be a good fit to our program. Qualities that we seek include a high quality of education at both the undergraduate and graduate level, a wide variety of quality practicum experiences, strong letters of recommendation, and goals consistent with the practitioner-scholar model of internship training. Our internship program also places a strong emphasis in personality and cognitive assessment and integrated report writing. Finally, we seek applicants who are well-rounded both in their training in psychology as well as their outside interests and activities.

The internship adheres to nondiscriminatory policies and operating conditions. In accordance with the Federal Drug-Free Workplace Program, interns may be subject to random drug screenings as either part of their new employee physical or throughout the internship year.

Questions concerning the Internship Program may be sent to:

Director of Internship Training

Ashley Bechtel, Psy.D.
(859) 233-4511 extension 3236
Ashley.Becht@va.gov

Assistant Training Directors

Kourtni Badgett, Ph.D.
(859) 233-4511 extension 3161
Kourtni.Badgett@va.gov

Steven Hansel, Psy.D.
(859) 233-4511 extension 3219
Steve.Hansel@va.gov

The ***application deadline is November 15, 2013***. Once the applications are reviewed, those under consideration will receive invitations to attend one of two on-site open houses which will include individual interviews, group interviews, and a tour of the facility. These interviews will be held on January 10th and 17th 2014 from 8:00 am until 12:00 pm.

The Lexington VA Medical Center Pre-Doctoral Internship conforms to APPIC (Association of Psychology Postdoctoral and Internship Centers) uniform notification procedures.

To confirm APA-Accreditation status, you may contact the APA as shown below:

American Psychological Association

750 First Street, NE
Washington, DC 20002-4242
Telephone: (202) 336-5500

Psychology Setting

The Lexington VA Medical Center consists of two divisions, five miles apart, which are consolidated under one management. The Leestown Division and the Cooper Drive Division house beds for both psychiatric and non-psychiatric patients. The Leestown Division was completed in 1931 and is located in the northwest area of Lexington in a park-like setting of 135 acres. This older facility has been the recipient of numerous renovation projects in the past several years, and has recently been slated for major renovations and expansion for both inpatient and outpatient services. The Leestown Division houses the Mental Health Clinic, the Post-Traumatic Stress Disorder Clinical Team (PCT), the Outpatient Substance Abuse Treatment Program (SATP), the inpatient PTSD treatment program (PRRP), the inpatient substance abuse program (SARRTP), the Community Living Center (formerly known as the Nursing Home and Rehabilitation Units), and a program for homeless veterans. The Cooper Drive Division, dedicated in 1973, is physically connected to the University of Kentucky Medical Center in central Lexington. This Division provides general medical, surgical, neurological, and acute inpatient psychiatric services.

The Lexington VA Medical Center offers healthcare to approximately 94,000 veterans living in 36 counties in Central and Eastern Kentucky. Approximately 4,000 OEF/OIF veterans are seeking healthcare through the Lexington VA Medical Center. With regards to the veterans' ages, approximately 6% of the veterans served through the Lexington VA Medical Center are younger than 35; approximately 46% are between that ages of 36 and 65 and approximately 48% are over the age of 65. Approximately 95% of the veterans we serve are male; 5% are female. Most of the veterans served are Caucasian and indigenous to Appalachian regions of Kentucky.

Training Model and Program Philosophy

The Lexington VA Medical Center Internship utilizes the practitioner-scholar philosophy. The primary objective of the internship is to provide an integrated, flexible and balanced set of learning experiences necessary for interns to emerge as competent professional psychologists. These experiences are intended to provide the aspiring psychologist with opportunities to practice and expand on previously learned skills, to develop new skills and to experience personal and professional growth. Our belief is that these objectives can best be achieved through comprehensive training based upon the following three principles:

1. Training in a breadth of clinical skills central to the practice of psychology.
2. Training emphasizing content areas relevant to the intern's career goals.
3. Training in the ethical and professional standards central to the practice of psychology.

There is a general expectation that interns will require decreasing levels of supervision during the course of both a given rotation and the internship year. It is recognized that there will be differences among given interns based on past professional experiences as well as current professional development. By the end of the twelve months it is expected that interns will be able to practice independently with the knowledge that consultation should be sought out when needed. A supervision level system is used throughout the internship year to assess interns' needs within each of the six core competency areas. Supervisors rate interns at the beginning of a rotation, at a mid-point, and at the end. Levels of supervision are defined below:

Competency Level 1 = close supervision needed; intern needs very intensive supervision; the competency level does not meet the standards for an intern in training and the need for remediation is major; direct observation is required; restrictions may be placed on intern's clinical activities.

Level of responsibility is consistently "room"

Competency Level 2 = supervision needed; intern needs more intensive supervision; the level of competency indicates the need for clinical experience and may indicate the need for minor remediation; modeling and direct observation is frequently required. This is the expected entry level for incoming interns.

Level of responsibility is consistently "area" or "room"

Competency Level 3 = less supervision needed; intern requires regular supervision; the level of competency meets the standards of an intern in training; direct observation and modeling may be occasionally required.

Level of responsibility is consistently “available,” “area,” or “room”

Competency Level 4 = little supervision needed; intern requires less supervision; the level of competency achieved is that of an entry-level psychologist with continued supervision recommended. This is the minimum expected level of intern graduating from internship.

Level of responsibility is consistently “available” or “area”

Competency Level 5 = almost no supervision needed; intern is ready for autonomous practice, the level of competency attained is at an entry-level psychologist;

Level of responsibility is consistently rated as “available.”

These levels of supervision should be assessed regarding the six core competencies through each of the following means:

1. The supervisor’s initial assessment of the intern’s level of competence.
2. The intern’s self-assessment at the beginning of each rotation.
3. The mutually agreed upon rotation training plan developed within the first few weeks of the rotation.
4. The supervisor’s mid-rotation evaluation of the intern.
5. The supervisor’s final rotation evaluation of the intern.
6. The intern’s evaluation of the rotation at the completion of the rotation.

Program Goals & Objectives

The primary objective of the Lexington, Kentucky VA Psychology Internship Training Program is to provide interns at the predoctoral level an integrated, flexible, and balanced set of learning experiences necessary for the emergence of a competent professional psychologist. Such experiences are intended to serve the psychology intern with opportunities to practice and expand upon previously learned skills, to develop new skills, and to experience personal and professional growth. Our belief is that these objectives can best be achieved through a competency based training model which emphasizes six core areas. These include:

1. Ethical and Professional Issues - This refers to a broad range of issues, concepts, situations, and behaviors that have been determined to be central to the profession of psychologists. Many do not fit easily into well defined categories. Interns are required to become knowledgeable of ethical and professional issues and to be able to put this into practice in regard to the delivery of clinical services. Some examples which pertain to this competency area include: knowledge of, and observance of, the American Psychological Association’s ethical principles and code of conduct, the ability to operate within an interdisciplinary treatment team in an effective manner, demonstration of professional demeanor consistent with the practice of psychology, knowledge of one’s personal and professional strengths and limitations along with the recognition of the need to seek out supervision and/or consultation, the ability to utilize supervision in a productive manner, an awareness of the nature of one’s professional behavior, the appreciation and appropriate use of power inherent in one’s position relative to others, and time management.

2. Assessment: Psychological assessment is a key component of the practice of psychology. Interns are expected to demonstrate competence with the types of psychological assessments that are included in a given rotation. It is understood that the specific psychological testing done will vary from rotation to rotation. These may include: personality testing, intelligence testing, mental status examinations, and neuropsychological screening. A number of issues are relevant to psychological assessment and interns are expected to become proficient in each of the following: understanding and responding to referral questions, selecting appropriate psychological instruments for a given referral, clinical interviewing, test administration and scoring, interpretation of psychological testing data, written reports, the identification of

appropriate treatment recommendations, and providing psychological testing feedback to both patients and multi-disciplinary treatment team members.

3. Interventions: Psychologists engage in a variety of psychological interventions in working with patients, and interns are expected to demonstrate competence with the types of interventions required for a given rotation. Examples of interventions might include: individual psychotherapy, couples therapy, group therapy, family therapy, meditation, psycho-educational classes, and vocational counseling. The utilization of psychological interventions involves a number of related activities and within a given rotation interns are expected to become competent with each of the following: conceptualizing a patient's presenting problem, articulating a theoretical approach and implementing it into practice, creating and/or contributing to individualized treatment planning, on-going assessment of patient progress in meeting treatment goals, termination, and referral.

4. Documentation: The ability to document one's work clearly and concisely is vital to the practice of psychology. As such, interns are expected to demonstrate competence in terms of writing progress notes which accurately reflect their treatment with patients, writing psychological assessment reports which emphasize patients' relative strengths, weaknesses, and goals for treatment, and developing treatment plans when appropriate. It is expected that each of these will vary somewhat in terms of length, form, etc. across rotations. The VA system has a modern and comprehensive electronic medical records system, and interns will be expected to become proficient at the utilization and creation of electronic records during internship.

5. Diversity: Each intern is expected to demonstrate competence in providing various psychological services to individuals from diverse backgrounds. The categories of diversity will be defined by the type of patients who are being treated within a given rotation. Examples of diversity include, but are not necessarily limited to age, gender, sexual orientation, culture, race, ethnicity, disability status, psychiatric diagnosis, educational level, and intellectual functioning level. Given the location of our internship site, there is particular emphasis placed on the Appalachian culture.

6. Science in Practice (Use of Research): Although our internship training program emphasizes clinical practice, we acknowledge and appreciate the fact that research and practice mutually influence one another. Therefore, it is expected that each intern will demonstrate competence in terms of the ability to access research findings and apply them to the practice of psychology within a given rotation. This can be demonstrated in a variety of ways such as completing a literature review on a specific subject and applying the knowledge during a rotation through various interventions and/or assessments, reading current literature on a specific subject and applying the knowledge during a rotation through various interventions and/or assessments, and integrating research into therapeutic and diagnostic case conferences. The use of published research is an integral part of each rotation.

Program Structure

The internship program requires interns to commit to a full-time 12-month program beginning the first full week in July. Interns work 40-hour weeks, standard tour of duty being 8:00 AM to 4:30 PM, Monday through Friday. Interns are granted 10 paid federal holidays. Interns accrue 4 hours Annual Leave (personal vacation) and 4 hours Sick Leave per biweekly pay period for a total of 13 days Annual Leave and 13 days Sick Leave over the course of the year.

Interns spend three days per week performing duties associated with their major rotations, one day per week performing duties associated with their minor rotations, and Fridays in training-related activities, including one hour Group Supervision, two 1.5 hour Didactic Seminars, and two hours Peer Supervision/Intern Bonding time. Activities and roles associated with major and minor rotations vary, but generally include individual and/or group psychotherapy, psychological assessment, documentation, and report writing, training, and supervision. Interns are required to obtain at least 1.5 hours individual face-to-face supervision per week on their major rotations and at least 0.5 hours individual face-to-face supervision per week on their minor rotations. An additional hour on their minor and major rotations through additional individual face-to-face supervision, multidisciplinary team activities, and/or supervision

3. Acute Inpatient Psychiatry & Behavioral Health

This rotation provides experiences on the Acute Inpatient Psychiatry Unit and the outpatient Behavioral Health clinic at the Cooper Drive Division of the VA. The intern's days will consist of staffing the current psychiatric inpatients within a multidisciplinary treatment team meeting, co-facilitating group therapy with patients, providing individual therapy and completing psychological assessments. Interns will be exposed to a full spectrum of psychological disorders and may be asked to provide comprehensive evaluations in order to assist the team with differential diagnosis and treatment. Daily group therapy with an emphasis on coping skills training will be tailored to the diverse group of patients seen within the inpatient psychiatric setting. Opportunities for acute individual therapy are present. Interns may perform organ transplant, infectious disease and surgery evaluations in order to assess factors that require remediation in order to encourage a successful procedure. The intern may provide behavioral health strategies to help patients with chronic pain. There are opportunities for cognitive screenings in the assessment of dementia and traumatic brain injury. Finally, the intern may co-facilitate groups in the MOVE Weight Management Program. As interns gain experiences and efficacy, they are encouraged to provide input as to improvements/modifications to existing rotational components in order to improve patient care.

Staff:

Edward Marshall, Ph.D.

4. Outpatient Family Therapy:

On this rotation interns will provide outpatient services to veterans & family within a family therapy theoretical model. This will include utilization of the following modalities: Brief Family Consultation, Couples Therapy, and evidenced based Family Psychoeducation (Behavioral Family Therapy). The intern functions as a full member within the family therapy program gaining skills via independent supervised practice and co-therapy with Dr. Hansel.

Staff:

Steven Hansel, Psy.D.

5. Mental Health Residential Rehabilitation Treatment Program (MHR RTP)

Located at the Leestown Division, the MHR RTP is the lowest level of inpatient care offered by the Veterans Health Administration. The Lexington program is a 30 bed all inclusive, structured, residential program specializing in the treatment of PTSD and Substance Abuse/Dependence. The MHR RTP accepts veterans with additional challenges such as homelessness, or other serious mental illness, such as Bipolar Disorder, depression, and stable psychoses. The intern will function as part of an interdisciplinary treatment team and will engage in screenings, psychological assessments, group psychoeducation, process groups and individual psychotherapy. Exposure to evidence-based psychotherapies for PTSD and Substance Use will be an important element of this rotation.

Staff:

Jennifer Kinder, Ph.D.

Larson Maggard, Ph.D.

Minor Rotations:

1. Mental Health Residential Rehabilitation Treatment Program (MHR RTP)

In addition to the full 6-month rotation, this rotation is offered as a minor rotation. See above for more information.

Staff:

Jennifer Kinder, Ph.D.

Larson Maggard, Ph.D.

2. Rural Outreach (Outpatient PTSD Clinic)

Interns who are doing a major rotation in the Outpatient PTSD Clinic (PCT) will have an opportunity to provide outreach services to rural Appalachian Kentucky on a weekly basis. On this day, the intern will travel with PCT staff to London, Kentucky and provide group treatment to veterans.

Staff:

Cynthia Dunn, Ph.D.

Molly Dye, Psy.D.

3. Outpatient Family Therapy

In addition to the full 6-month rotation, this rotation is offered as a minor rotation. See above for more information.

Staff:

Steven Hansel, Psy.D.

4. Home-Based Primary Care

The VA Home-Based Primary Care (HBPC) service provides comprehensive, in-home, interdisciplinary primary care for veterans with complex and chronic, disabling disease. In addition to primary care interventions, HBPC provides palliative care, rehabilitation, disease management, hospice and care coordination services. In this elective rotation, interns are involved in screening, assessment, diagnosis and treatment for psychiatric and cognitive disorders. Behavior management planning and caregiver support are important components of the HBPC rotation.

Staff:

Ashley Bechtel, Psy.D.

Joshua Phillips, Ph.D.

5. Telemental Health-EBT for PTSD

The TMH-EBT for PTSD program provides Evidenced Based Treatments for trauma processing utilizing video conferencing technology. The therapist, who is located at Leestown Division, will provide either Prolonged Exposure (PE) or Cognitive Processing Therapy (CPT) protocols to veterans located at one of the four Community Based Outpatient Clinics. The intern will be involved in initial screens and assessment, as well as learning the treatment then facilitating the therapy protocol. The intern may also have the opportunity for exposure to CBT-I (Insomnia EBT protocol). Treatment may be in the form of individual or group psychotherapy.

Staff:

Shari Harwell, Psy.D.

6. Compensation & Pension (C&P) /Forensics

Veterans with mental illness may receive financial compensation and benefits if it is determined that their mental disability was the result of their military service. Compensation & Pension psychologists work specifically as forensic evaluators and do not provide treatment to the veterans, but rather play a neutral, unbiased role in assessing the veteran for disability purposes. In this minor rotation interns perform disability examinations under the direct supervision of licensed psychologists. Clinical interviewing, psychological assessment, and psychopathology diagnosis and report writing are the main components of this forensic rotation. Solid preparation for future employment within the VA system or private sector.

Staff:

Stephanie Hyberger, Psy.D.

Craig Cabezas, Ph.D.

Gary Dunn, Ph.D.

7. Polytrauma

The Polytrauma Clinic at the Lexington VA Medical Center is one of only 23 in the nation, specializing in the evaluation and care coordination of newly returning Veterans with significant physiological, neurological and psychological injuries related to their military service, which results in physical, cognitive, psychological, or psychosocial impairments and functional disability. Some examples are: Traumatic Brain Injury (TBI), Hearing Loss, Amputations, Fractures, Burns, and Visual Impairment. The intern assigned to this rotation will be functioning as a Rehabilitation Psychologist, focused on assisting veterans and their family support systems cope with, and adapt to, the effects of their injuries. Interns will be an active partner in the rehabilitation process, working with an interdisciplinary team of professionals to facilitate maximal individual functioning as well as participation in social relationships and activities, education, employment, and successful return to the community in general.

Staff:

Donald Crowe, Ph.D.

8. Psychology Administration

Interns who chose this minor rotation will be involved in a number of administrative experiences including internship selection process, training committee, and assorted mental health committees. Emphasis on long term planning, documentation and vision for the future of psychology training in VA.

Staff:

Ashley Bechtel, Psy.D.

Autum McCane, Ph.D.

9. Long-term Psychotherapy

All interns will be given the opportunity on this rotation to follow 2 or 3 veterans throughout their internship year. This will allow for greater depth a breadth of psychotherapy. This rotation is in addition to other minor rotations, and every intern is anticipated to participate.

Staff: Various staff members

LIST OF PSYCHOLOGY SECTION DIDACTIC PRESENTATIONS

The following is a current listing of the morning didactic schedule for the 2013-2014 academic year.

Lexington VA Medical Center 2013-2014 Psychology Didactic Series

9:30-11:00 AM

<u>Date</u>	<u>Topic</u>	<u>Presenter</u>
7/5/2013	APA Ethics Code & KY State Law	Kourtnei S. Badgett, Ph.D.
7/12/2013	Documentation	Cynthia Dunn, Ph.D.
7/19/2013	Military Lingo & Culture	James Watts, LCSW
7/26/2013	Service Connection/C&Ps	Stephanie Hyberger, Ph.D.
8/2/2013	Behavioral Health Intervention(s)	Brad Benedict, Psy.D.
8/19/2013	Psychosocial Oncology	Jamie Studts, PhD
8/16/2013	Intimate Partner Violence	LeTonia Jones, LCSW
8/23/2013	Preparing for a Psychology Career	Ashley Bechtel, Psy.D.
8/30/2013	Appalachian Culture	Cynthia Dunn, Ph.D.
9/6/2013	Psychopharmacology	Courtney Eatmon, PharmD
9/13/2013	OIF/OEF readjustment issues & resources	Sean Bell, LCSW, C-SWHC
9/20/2013	Evaluating Applicants/Interns	Ashley Bechtel, Psy.D.
9/27/2013	Custody Evaluations	Jennifer Cebe, Psy.D.
10/4/2013	Biopsychosocial Readjustment OIF/OND	Barbara Slatter, ARNP
10/11/2013	Overview of Forensic Psych	Stephanie Hyberger, PhD
10/18/2013	Existential Issues in PTSD	Cynthia Dunn, Ph.D.
10/25/2013	Ethics in Research & Clinical Practice	Bill Stoops, Ph.D.
11/1/2013	College Counseling	Lynda Fereday, Ph.D.
11/8/2013	Integration of Behavioral Health	Elizabeth Scheu, Psy.D.
11/15/2013	Forensic Testimony	Karen Lenhoff, Ph.D.
11/22/2013	Spirituality and Mental Health	Kourtnei Badgett, Ph.D.
11/29/2013	NO DIDACTIC	THANKSGIVING BREAK
12/6/2013	PAI Research & Interpretation	Karen Lenhoff, Ph.D.
12/13/2013	Prolonged Exposure Therapy	Jennifer Broach, Ph.D.
12/20/2013	Military Sexual Trauma	Leeann Hayslett, LCSW
12/27/2013	NO DIDACTIC	CHRISTMAS BREAK
1/3/2014	NO DIDACTIC	INTERNSHIP INTERVIEWS
1/10/2014	NO DIDACTIC	INTERNSHIP INTERVIEWS
1/17/2014	Intern Assessment Presentation	Intern A
1/24/2014	Intern Assessment Presentation	Intern B
1/31/2014	Intern Assessment Presentation	Intern C
2/7/2014	Intern Assessment Presentation	Intern D

2/14/2014	Family Therapy	Steven Hansel, Psy.D
2/21/2014	Treating Women Veterans	Janice Durham, LCSW
2/28/2014	Mindfulness in Therapy	Edward Marshall, Ph.D
3/7/2014	EBT & Pain	Jennifer Schaeffer, PhD
3/14/2014	Humanistic Psychotherapies	Kourtnei Badgett, Ph.D.
3/21/2014	Acceptance & Commitment Therapy	Ruth Baer, Ph.D.
3/28/2014	Neuroimaging	Edward Kasarskis, M.D
4/4/2014	Psychosocial Factors in Combat	Autum McCane, Ph.D.
4/11/2014	Intern Therapy Presentation	Intern B
4/18/2014	Intern Therapy Presentation	Intern C
4/25/2014	Intern Therapy Presentation	Intern D
5/2/2014	Intern Therapy Presentation	Intern A
5/9/2014	Personality Disorders	Tom Widiger, Ph.D.
5/16/2014	Cognitive Processing Therapy	Karen Lenhoff, Ph.D.
5/23/2014	Cognitive-Behavioral Therapy	Edward Marshall, Ph.D.
5/30/2014	Mechanisms of Change in Therapy	Emily Wetter, Ph.D.
6/6/2014	Therapy in the Federal Prison	Margaret Cowles, Ph.D.
6/13/2014	VJO Issues with Veterans	Janis Durham, LCSW
6/20/2014	Mental Inquest Warrants	Steven Hansel, Psy.D.
6/28/2014	Internship Exit Interviews	Ashley Bechtel, Psy.D.

1:00-2:30 PM

<u>Date</u>	<u>Topic</u>	<u>Presenter</u>
7/5/2013	Introduction to Assessment	Ashley Bechtel, Psy.D.
7/12/2013	General Cognitive Assessment	Ashley Bechtel, Psy.D.
7/19/2013	Assessment of Specific Cognitive Function	Ashley Bechtel, Psy.D.
7/26/2013	Suicide Prevention	Sandra Roe, MSN
8/2/2013	Military Conflicts 101	Molly Dye, Psy.D.
8/9/2013	Time Out/In - Couples Engagement	Steven Hansel, PsyD
8/16/2013	Malingering & Deception	Gary Dunn, Ph.D.
8/23/2013	Transition to Early Career Psychologist	Ashley Bechtel, Psy.D.
8/30/2013	Motivational Interviewing	Karen Lenhoff, Ph.D.
9/6/2013	Multiculturalism / Ethnicity in practice	Craig Cabezas, PhD
9/13/2013	Local Resources for Veterans	Jennifer Howell, LCSW
9/20/2013	Rorschach Research and Administration	Aaron Upton, Ph.D.
9/27/2013	Intern Prep for Interviewing	Ashley Bechtel, Psy.sD.
10/4/2013	Issues of Older Adulthood	Ashley Bechtel, Psy.D.
10/11/2013	Topic being updated	James Anderson, Ph.D.
10/18/2013	Veteran needs & healthcare directions	Tom Miller, Ph.D.
10/25/2013	Outcome Informed Therapy	C. Hobie Dotson, Psy.D.
11/1/2013	Spirituality & War	Chaplain James Rayburn
11/8/2013	Cognitive & Capacity Evaluations	Edward Marshall, Ph.D.
11/15/2013	Racial and Ethnic Factors in Psychotherapy	DanelleStevensWatkinsPh.D.
11/22/2013	Integrative Report Writing	Molly Dye, Psy.D.
11/29/2013	NO DIDACTIC	THANKSGIVING BREAK
12/6/2013	Cognitive Behavioral Therapy for Insomnia	Cynthia Dunn, Ph.D.
12/13/2013	Same Sex Discrimination in military	Melinda Moore, PhD
12/20/2013	Tumors of the Central Nervous System	Ashley Bechtel, Psy.D.
12/27/2013	NO DIDACTIC	CHRISTMAS BREAK

1/3/2014	NO DIDACTIC	INTERNSHIP INTERVIEWS
1/10/2014	NO DIDACTIC	INTERNSHIP INTERVIEWS
1/17/2014	Assessment of Trauma	Jennifer Broach, PhD
1/24/2014	Assessment of Substance Abuse	Gary Dunn, Ph.D.
1/31/2014	Therapeutic Communities in Drug Treatment	Tamara Klein, Ph.D.
2/7/2014	Sex Therapy	Steven Hansel, PsyD
2/14/2014	Intern Lecture Presentation	Intern C
2/21/2014	Intern Lecture Presentation	Intern D
2/28/2014	Intern Lecture Presentation	Intern A
3/7/2014	Intern Lecture Presentation	Intern B
3/14/2014	Dialectical Behavior Therapy	Martha Wetter, Ph.D.
3/21/2014	Interpersonal Therapy	David Susman, Ph.D.
3/28/2014	PTSD / SUD	Karen Lenhoff, Ph.D.
4/4/2014	CMHC Practice	Michelle Maegly, Ph.D.
4/11/2014	Traumatic Brain Injury	Marilyn Wagner, Ph.D.
4/18/2014	Attachment Theory	Pat Pernicano, Ph.D.
4/25/2014	Integrated Primary Healthcare	Bradley Benedict, Ph.D.
5/2/2014	Therapist Self-care and Burnout	Lynda Fereday, Ph. D.
5/9/2014	Sleep Disorders	Sarah Honaker, Ph.D.
5/16/2014	Supervision and Consultation	Brenda Nash, Ph.D.
5/23/2014	Case Conference: Integrating a Battery	Molly Dye, Psy.D.
5/30/2014	Neurobiology of Trauma	Pat Pernicano, Ph.D.
6/6/2014	Privilege & Oppression in Multiculturalism	Barbara Beauchamp, Ph.D.
6/13/2014	Vietnam History	Molly Dye, Psy.D.
6/20/2014	Buddhism and Mental Health	Gary Dunn, Ph.D.
6/27/2014	Internship Exit Interviews	Ashley Bechtel, Psy.D.

Requirements for Completion

The internship is a one-year placement experience requiring 40 hours per week. The intern is required to complete a minimum of 2,000 hours. Each intern is expected to devote 25% of his/her time to direct patient contact which includes "face-to-face" contact with patients for any type of group or individual therapy, psychological testing, rounds or patient education. Successful completion of the internship requires a minimum of 500 hours of direct patient contact.

Interns are required to present a minimum of one diagnostic and one therapy conference. The diagnostic/therapy conferences are designed to evaluate an intern's level of competency as related to basic diagnostic assessment and psychotherapy. Additional conferences are scheduled as deemed necessary. Staff evaluates the presentations through therapy/diagnostic conference evaluation guides.

Interns are required to complete a diversity project. This project is intended as a training exercise to increase awareness of, and attention to, diversity issues in the practice of psychology. To successfully complete the diversity project, the intern must identify an issue or problem related to diversity within the Lexington VA Medical Center, learn about the background of the issue, and carry out a plan to address the issue.

Finally, interns are required to give a 90-minute lecture presentation on a psychological topic of their choosing. The purpose of the lecture presentation is to prepare interns for potential job-talks, teaching positions or future roles in training institutions.

Interns will receive formal, written evaluations at the middle and end of each rotation from the major and minor rotation supervisor. Additionally, interns will be asked to provide written and oral feedback regarding their internship experiences at the end of the year to the Training Director.

Interns will provide the Training Director the following minimum documentation for the records (with patient identification removed): 5 progress notes, 2 psychological assessments, diversity project materials, and diagnostic, and therapy conference written materials.

Facility and Training Resources

Each intern is provided with an office with an individual computer, desk and office supplies. Clerical support is provided by each internship rotation. The VA medical record is electronic and all patient documentation is done via the computer system. Concerning library access, interns have the use of the Lexington VA Medical Center library, University of Kentucky Medical School library, University of Kentucky library system, and the Fayette County library system. The Lexington VA Medical Center has full access to a number of online databases, including EBSCO. The psychology staff has access to a psychological testing laboratory including the MMPI2-RF, PAI, Rorschach, BNCE, TOMM, RBANS, DRS-2 and the WAIS-IV. Additionally, interns have access to electronic calendars, copying services, audio/video tapes, and medical treatment for on-the-job injuries.

Administrative Policies and Procedures

Our policy is clear: we will collect no personal information about you when you visit our website. We do not require our interns to self-disclose.

Only students with U.S. citizenship, who are enrolled in APA-accredited clinical or counseling graduate psychology programs and are actively pursuing the Ph.D. or Psy.D. degree, are eligible for training at this Psychology Internship Training Program. Prior to beginning the internship, the interns must have completed all course work and successfully passed qualifying examinations. It is strongly recommended that intern applicants have their dissertation proposals accepted prior to the start of the internship year. Presently, four compensated positions are offered. For the 2014-2015 training year, the stipend is \$23,974. The intern receives ten paid federal holidays and thirteen days of leave for vacation and/or professional development. Additionally, interns are offered full health and life insurance benefits, including optional dental and vision insurance. However, these benefits will not be extended to same-sex couples, regardless of marital status. In accordance with the Federal Drug-Free Workplace Program, interns may be subject to random drug screenings as either part of their new employee physical or throughout the internship year.

Due Process Statement:

1. Intern's Grievance/Correction Process.

There may be times when an intern feels that changes may be needed in his/her training goals, supervisor assignments, or evaluation. There may be many reasons why such changes would benefit the intern and his/her training program. Interns are expected to utilize the appropriate channels for pursuing change by speaking first to the rotation supervisor, followed by the Director of Training, and then the Training Committee. In the rare instance when the situation has still not been resolved to everyone's satisfaction, the intern has the option of meeting with a special committee consisting of the Chief of Mental Health Service, the Chief of Education, and the Psychology Training Director.

2. Remedial Action.

When any concern about an intern's progress or behavior is brought to the attention of the Director of Training, the importance of this concern and the need for related action will be assessed by the Psychology Training Committee. The Training Committee will develop an action plan as needed. The Training Committee will appoint a psychologist to implement the action plan with the intern. Weekly written progress reports by the rotation supervisor and the psychologist appointed by the Training Committee will be prepared and presented to the Director of Training by close of business each Friday. The report will address specific, objective components of the action plan. The intern has three working days to place his/her objections to the action plan in writing to the Training Director. If deemed necessary, a special committee, consisting of the Chief of Mental Health Service, the Chief of Education,

and the Psychology Training Director will make a final decision regarding the grievance. If the intern does not make satisfactory progress toward meeting the requirements of the action plan, the Training Director may recommend to the Special Committee that the plan be altered or that the training relationship with the intern be terminated. The Special Committee will then determine if there is cause for revision of the action plan or cause for termination.

3. Termination.

Failure of the intern to adhere to such a plan as determined by the Training Committee and ultimately the Special Committee constitutes grounds for discontinuation of the internship. It is extremely rare that termination becomes an issue. It is necessary, however, to have specific procedures in place when this course of action is indicated. These procedures are outlined below:

a. Due Process. A recommendation to terminate an intern must receive a majority vote of the psychologists on the Internship Training Committee and the Special Committee. The intern will be provided an opportunity to present arguments against termination at that meeting. Direct participation by the Director of Training or other designee from the intern's graduate program shall be sought. If he or she is unable to attend personally, arrangements shall be made for some means of communication (i.e., a conference call.)

Concerns of sufficient magnitude to warrant termination include but are not limited to: 1) incompetence to perform typical psychological services in this setting and inability to attain competence during the course of the internship; 2) violation of the ethical standards of psychologists; 3) failure to meet minimum standards for patient contact; 4) behaviors which are judged as currently unsuitable and which hamper the intern's professional performance; and 5) violation of hospital and/or federal employee policy.

b. Appeal. Should the Psychology Training Committee recommend termination, the intern may appeal. The Training Director shall call a meeting of the Special Committee which includes the Training Director, the Chief of Mental Health Service, and the Chief of Education. A representative of the District Council Office shall be available to consult with the panel concerning due process issues. The Director of Training shall present the position of the Psychology Training Committee, and the intern, together with any representation he or she may choose, shall present the appeal. The Training Director shall abide by the judgment of the appeal panel if they recommend termination, and direct Human Resource Management Service to suspend the intern's appointment. The Training staff shall abide by the panel's judgment if they recommend continuation, and the Director of Training and the intern are responsible for negotiating an acceptable training plan for the balance of the training year.

Training Staff

James Anderson, Ph.D. – Compensation and Pension Dr. Anderson is a full time psychologist performing Compensation and Pension disability examinations under the Administrative Medicine service. He earned his Ph.D. in Counseling Psychology from the University of Louisville in 2006. Dr. Anderson completed his pre-doctoral internship at the Federal Bureau of Prisons Medical Center in Lexington, KY and his post-doctoral training in forensic evaluation was completed at the Kentucky Correctional Psychiatric Center. Prior to arriving at the VA, he worked for the Kentucky Department of Corrections and in community mental health. Dr. Anderson has also been in private practice since 2009. Areas of clinical interest include psychological assessment and construct validity. On a personal note, Dr. Anderson has always had a passion for the martial arts. In addition to earning a black belt in Kenpo and a brown belt in Shaolin-Ryu, he studied Systema for 10 years. What he enjoys most is spending time with his wife and two sons, doing whatever or nothing at all.

Kourtni S. Badgett, Ph.D.- Outpatient PTSD Clinic Originally from North Carolina, Dr. Badgett is a graduate of The University of Memphis with a Ph.D. in Counseling Psychology in 2008. After completing her internship at the Lexington VA Medical Center, she accepted a full-time position as a staff

psychologist in the Mental Health Clinic. She is now providing therapeutic and assessment services to Veterans in the Post Traumatic Stress Disorder Clinical Team. Dr. Badgett's clinical interests include PTSD, stress and relaxation, and incorporating spirituality into mental health treatment. She also serves as the Internship Assistant Training Director and Chairperson for the Psychology Subcommittee on Diversity Training. Dr. Badgett is an avid North Carolina Tar Heel fan and enjoys playing sports, travel, spending time with family and friends, and watching old episodes of Frasier and Scooby-Doo.

Ashley J. Bechtel, Psy.D. – Home Based Primary Care Dr. Bechtel has served as Psychology Training Director since 2012 after four years as Assistant Training Director. She earned her Psy.D. in Clinical Psychology from the University of Hartford Graduate Institute of Professional Psychology in 2007 and completed her pre-doctoral internship at the Greater Hartford Clinical Psychology Consortium. She joined the Lexington VA Medical Center's Home-Based Primary Care service to provide mental health treatment for home-bound veterans struggling with physical and mental illness. She is involved in the Lexington VAMC Palliative Care Consult Team and is chair of the Dementia Committee. Dr. Bechtel's clinical and research interests lie primarily in healthy aging, disorders of older adulthood, death and dying, and stigma surrounding mental illness in older adults. Dr. Bechtel is also a classical pianist and violinist who spends her free time training her Newfoundland, re-reading Harry Potter, and lamenting the Nebraska Cornhuskers' recent performance. She is on a quest to find the world's best ice cream.

Jennifer L. Broach, Ph.D. – Outpatient PTSD Clinic. Originally a native of northeast Tennessee, Dr. Broach earned her Ph.D. in Clinical Psychology from the University of Arkansas in 2004. She completed her internship through the University of Rochester School of Medicine in upstate New York in 2001. Following her internship, she worked as a clinical research coordinator for the University of Rochester Medical Center's Center for the Study and Prevention of Suicide, and taught as an adjunct faculty member at a nearby college. In 2005, Dr. Broach completed a Postdoctoral Fellowship at the National Center for PTSD, Pacific Islands Division. She joined the Lexington VA's PTSD Clinical Team (PCT) in 2005 and has been working hard ever since to meet the needs of returning Iraqi and Afghan veterans. Outside of work, she indulges an unabashed enjoyment of "pulp" fantasy and murder mystery books. She also enjoys traveling, and plans brief escapes whenever time and budget allow.

Craig Cabezas, Ph.D. – Mental Health Clinic Dr. Cabezas has been a licensed psychologist since 1993. He received his doctoral degree from the University of Colorado at Boulder focusing on clinical psychology and multicultural issues. At Boulder, his training included treating children, adolescents and adults primarily from a psychodynamic perspective. He subsequently completed internship at Washington State University Counseling Services in Pullman, Washington. He subsequently completed a post doc at a state psychiatric facility on a forensic ward, served as a generalist providing therapy at a community mental health center and most recently had a private practice. As a new staff member at the Lexington VA in 2012, Dr. Cabezas provides group and individual psychotherapy services. During his free time he is an outdoor enthusiast and love riding his mountain bike, swimming and playing tennis. He is currently pursuing an interest in training his dogs in order to become a registered pet therapist through the WAGS program in Louisville.

Mindy L. Craft, Psy.D. –Mental Health Clinic/Compensation and Pension Dr. Craft earned her Psy.D. from Florida Institute of Technology in 2006 and completed her pre-doctoral internship at Quinco Behavioral Health Systems (now known as Centerstone) in Columbus, Indiana. She worked for six years in community mental health before joining the Lexington VA Medical Center in September 2012. As a new staff member, Dr. Craft will be providing individual therapy as well as performing Compensation and Pension disability examinations. Dr. Craft's clinical interests include personality disorders, healthy aging and issues of older adulthood, and perinatal mood disorders. In her personal time, she stays busy raising her young sons, Drew and Dillon, and spending time with her husband, Dave. She enjoys watching college sports, exercise, shopping for good bargains, baking and reading.

Cynthia E. Dunn, Ph.D. – Outpatient PTSD Clinic Dr. Dunn earned her Ph.D. in Counseling Psychology at the University of Kansas in 1994 and completed her internship at the VA Medical Center, Topeka, Kansas. She has served as the Clinical Coordinator of the Post Traumatic Stress Disorder Clinical Team (PCT) for seventeen years, having designed and implemented the program from its infancy. Dr. Dunn

provides both local VA treatment for veterans with PTSD as well as running a clinic in the Appalachian region of southeastern Kentucky. Her interests reside strongly in the aftereffects of traumatic exposure as well as comorbid conditions such as substance abuse and personality disorders. Growing interests are the existential and spiritual dimensions related the traumatic experiences. Most recently, she has received extensive training from Dr. Edna Foa and the National Center for PTSD is providing Prolonged Exposure Therapy. Dr. Dunn is certified in both Prolonged Exposure and Cognitive Behavioral Therapy for Insomnia. Dr. Dunn is also interested in the interface of treatment with administrative demands. Outside of work, she likes riding her bicycle, working out at the gym, hiking, whitewater rafting, traveling, and planting flowers.

Gary E. Dunn, Ph.D. – Outpatient Mental Health Clinic/Compensation & Pension Dr. Dunn is the former Training Director for the internship program. He earned his Ph.D. in Counseling Psychology at the University of Kansas in 1988 and completed his doctoral level internship at the VA Medical Center, Minneapolis, Minnesota. Prior to coming to the Lexington VA Medical Center in October, 1994, he served as Clinical Coordinator of the Substance Abuse Unit at the Dwight D. Eisenhower VA Medical Center in Leavenworth, Kansas for three and a half years. Dr. Dunn currently provides therapeutic and assessment services to veterans in the Outpatient Mental Health Clinic. He has fifteen publications to date, the majority of which are in the areas of substance use disorders and dissociation. Dr. Dunn serves as a Site Visitor for the American Psychological Association. He is currently preparing for his second career, in the distant future, as a professional poker player. He cashed in the Main Event of the 2012 World Series of Poker.

Molly S. Dye, Psy.D. – Outpatient PTSD Clinic Dr. Dye is a former Internship Training Director and currently is a Staff Psychologist with the PTSD Clinical Team. She earned her doctorate in Clinical Psychology from Indiana State University in 2002. She joined the staff at the Lexington VA in 2002 following completion of her internship at this facility. As part of the PCT, she provides a variety of patient services including psychoeducational groups, individual psychotherapy and rural outreach. Dr. Dye's interests beyond PTSD include psychological assessment and issues associated with adult adoptees. In her personal time, Dr. Dye enjoys knitting, reading, traveling and raising her certifiably crazy dogs. She is working on a love of exercise, but right now it is only at the "mild like" stage.

Steven Hansel, Psy.D. – Family Therapy Program Dr. Hansel grew up in West Virginia and graduated with his Master's Degree from Marshall University in clinical psychology. Then in 2007, he graduated from Spalding University with a Psy.D. in clinical psychology with a health psychology emphasis. He completed his internship at the Honolulu VAMC and returned to Kentucky where he finished his postdoctoral year working for a rural community mental health center. His current interest areas include couples and family psychotherapy and he is the lead member of the Family Therapy Program at the Lexington VAMC. He is also working on building a couples therapy telemedicine clinic to better serve the rural veterans in Appalachia. He has enjoyed completing the following evidenced based trainings within the VAMC: Integrative Couples Behavioral Therapy, Behavioral Couples Therapy for SUD, Multifamily Group Therapy, and Social Skills Training. This past year he has additionally taken on the role of Assistant Training Director of the internship program. He is active in his faith community and enjoys being outdoors with his dog, cycling, and going to the theater with his spouse.

Shari Harwell, Psy.D. – Telemental Health Dr. Harwell graduated from Florida Institute of Technology in 2003 with a doctorate in Clinical Psychology. She completed her APA approved Internship through the Bay Pines VAMC, focusing on Residential Treatment Programs (Combat, MST, and Substance Abuse), as well as Behavioral & Gero Psychology. She went on to become a Staff Psychologist for two years at Fayetteville VAMC working in the newly merging Psychology in Primary Care setting, providing stress management, behavioral health, and crisis intervention. Dr. Harwell then transferred to the Tennessee Valley Health Care System at Nashville VAMC to assist in the start up of their PTSD Residential Program and went on to develop the role of psychology in the OEF/OIF Transition Clinic in which she was working for the past 6 years prior to recently coming to Lexington VA. Dr. Harwell's role at Lexington involves the start up of the Telemental Health-EBT PTSD program, providing Prolonged Exposure and Cognitive Processing Therapy to combat veterans. Dr. Harwell is also a consultant for the nationwide VA P.E.

Initiative providing consultation to clinicians subsequent to VA Prolonged Exposure training. Dr. Harwell is a country girl at heart and loves gardening and baking and is a predominant supporter of Nascar.

Stephanie R. Hyberger, Ph.D. - Compensation & Pension Stephanie Hyberger is a full time psychologist performing Compensation and Pension disability examinations under the Administrative Medicine service. She was born and raised in Louisville, KY. Dr. Hyberger earned an undergraduate degree in psychology from the University of Louisville and completed graduate degrees in counseling psychology at Indiana University and the University of Kentucky. Prior to arriving at the VA, she worked in community mental health and for the Kentucky Department of Corrections. She completed internship at the Federal Bureau of Prisons Medical Center in Lexington, KY. Areas of clinical interest include forensic psychology, disability assessment, and dual diagnosis. Her personal interests include spending time with her husband Tony, daughter Lily, and son Brady. Other interests include swimming, watching college sports, and planning vacations for herself and others...If she didn't make it as a psychologist Dr. Hyberger would have made a great travel agent!

Jennifer Kinder, Ph.D. – Mental Health Residential Rehabilitation Treatment Program Dr. Kinder earned her Ph.D. in Clinical Psychology from the University of Kentucky. She currently works in both the residential PTSD and substance abuse programs. She has a special interest in conducting emotional, cognitive, and interpersonal process groups, as well as working with Veterans who are diagnostically complex. She has specialized training in DBT, ACT, and CPT and feels it is important to use internship as an opportunity to begin to mold who you are as a clinician by hearing as many different perspectives as possible. She dreams for the day when her baby sleeps continuously through the night. So, please don't feel offended if she falls asleep when you are talking...you're not boring- she's just that tired.

Karen Lenhoff, Ph.D. – Outpatient PTSD program Dr. Lenhoff graduated from the University of Kentucky in 1996 with a Ph.D. in Counseling Psychology. While at UK, she completed a certificate program in medical behavioral science and still has interests in health psychology. She completed her internship at the New Orleans VA Medical Center. She worked in private practice for several years and then at Central State Hospital, with adults with severe mental illness. She now is currently employed in the outpatient PTSD clinic, treating veterans with dual diagnosis issues. She previously worked in the residential PTSD and substance abuse treatment programs at the Lexington VA. When not working, she likes to play with her three dogs, read novels, and work in her garden.

Larson B. Maggard, Ph.D. – Mental Health Residential Rehabilitation Treatment Program Dr. Maggard joined the staff at the Lexington VA Medical Center in September 2012. She is an SUD/PTSD specialist in the MHRRT, treating veterans with dual diagnosis issues. Dr. Maggard earned her Ph.D. in Counseling Psychology from the University of Kentucky in 2011. She completed her pre-doctoral internship at the Federal Bureau of Prisons Medical Center in Lexington, KY (FMC Lexington). In addition to substance abuse and PTSD treatment, her clinical interests include behavioral health. Originally from Alabama, Dr. Maggard earned her bachelor and master's degrees from Auburn University. Outside of work, she enjoys spending time with her husband and daughter. She always looks forward to visits with extended family. Dr. Maggard also enjoys shopping, running, and canoeing.

Edward Marshall, Ph.D. – Acute Inpatient Psychiatry and Behavioral Health Dr. Marshall joined the staff at the VAMC Lexington in October 2007 as the inpatient/behavioral health psychologist. He is a graduate of the University of Kentucky Counseling Psychology program where he specialized in Behavioral Science and Gerontology for his doctoral research. His dissertation examined what factors predict subjective well-being among elderly adults. Prior to his current assignment at the VA, Dr. Marshall served as a staff psychologist at Comprehensive Care and as the Director of the Student Wellness Center and Counseling Center of Georgetown College in Georgetown, KY. Dr. Marshall completed his internship here at the VAMC in Lexington, KY in 2000. Dr. Marshall is a member of the VAMC's Wellness Is Now (WIN) committee which is dedicated to enhancing employee wellness. He is an avid sailor, and he takes his kayak out with his family and friends whenever possible.

Autum McCane, Ph.D. – Assistant Chief of Mental Health Service Dr. McCane is a graduate of the University of Louisville, Ph.D. Counseling Psychology program. She completed her internship from

Jefferson Co (Seven Counties) Consortium in 2007. She became a staff psychologist for the residential PTSD unit in 2009 at the Lexington VA. Dr. McCane was promoted to Assistant Chief of Mental Health in 2012. In her free time, she enjoys teaching part-time at a local university, exercising, watching poorly scripted Reality TV, and finding new and adventurous activities to try (skydiving, zip lining, stage diving). Her next adventure is go white water rafting despite the fact her best swim technique is the doggy paddle.

Kevin Pernicano, Ph.D., ABPP– Chief of Mental Health Service Dr. Pernicano earned his PhD in Counseling Psychology from the University of Notre Dame in 1981 and is a Diplomat in Counseling Psychology (American Board of Professional Psychology). He is licensed to practice in KY and is a member of both APA and KPA. He has been gainfully employed in VA health care for over 32 years, where his experiences began as a VA Trainee, and later as a VA Intern. Dr. Pernicano has worked at a total of seven VA Medical Centers and military bases in a wide range of practice areas. He has taught at the graduate level in psychotherapy, assessment, ethics, substance abuse and statistics, and has a private practice in Louisville. Dr. Pernicano enjoys supervision, psychological assessment and complex individual, family and group therapy cases, applying interpersonal and behavioral approaches to problem-solving. When not practicing psychology, Dr. Pernicano savors musical concerts, 3D-Photography, RV travel, whitewater rafting and serpentine roller coasters of great declivity. Ever striving to be diplomatic, he claims no allegiance to either Red or Blue, but prefers the Fighting Irish instead.

Carlie Phillips, Psy.D. – Telemental Health Dr. Phillips joined the staff at the Lexington VA Medical Center in July 2013. She earned her Psy.D. in Clinical Psychology from Spalding University in 2013 after completing her pre-doctoral internship at this facility. She specializes in evidence-based treatment of PTSD via Telemental Health and has completed VA provider training and consultation requirements for Cognitive Processing Therapy. Her clinical interests include trauma, anxiety disorders, and post-deployment readjustment in OEF/OIF/OND veterans. In her free time, Dr. Phillips enjoys spending time with her husband Nick, exploring remote areas of the country, and sipping on a nice glass of cabernet sauvignon.

Joshua Phillips, Ph.D., - Home Based Primary Care Dr. Phillips joined the staff at the Lexington VA Medical Center in Home Based Primary Care in August 2012. He earned his Ph.D. in Clinical Psychology from the University of Kentucky in 2011 and completed his pre-doctoral internship at the Mountain Home, VA Medical Center. His clinical interests include Behavioral Medicine, Geropsychology, and chronic severe mental illnesses. In his free time, Dr. Phillips enjoys spending time with his daughter, reading, and napping.

Rachel Thompson, Ph.D., - Mental Health Clinic Dr. Thompson earned her Ph.D. in 2012 from the University of Cincinnati and completed her pre-doctoral internship at the Missouri Health Sciences Psychology Consortium. She recently joined the Lexington VA Medical Center's Mental Health Clinic, providing outpatient individual and group psychotherapy services to veterans. Dr. Thompson's clinical interests include anxiety/stress and trauma, mood disorders, substance abuse, and health psychology. Her clinical practice and orientation is primarily from a cognitive-behavioral theoretical framework, which she integrates with motivational interviewing and community reinforcement approaches. She has authored several research publications, book chapters and presentations related to clinical comorbidity, including mental health-substance abuse and mental health-physical illness. In her personal life, you can find Dr. Thompson getting physical outdoors or in the dojo: she loves to run, practice yoga, and is a second degree black belt in Shaolin-Do Kung Fu.

Other Psychology Staff:

Bradley Benedict, Psy.D. – Primary Care Mental Health Integration

Kelly Gauble, Ph.D., - Mental Health Clinic

Betsy Kopitzke, Ph.D., - Mental Health Residential Rehabilitation Treatment Program

Jennifer Schaeffer, Ph.D. – Chronic Pain Clinic

Local Information

Lexington, a city of approximately 300,000, is located in the heart of the Kentucky Bluegrass region. The city, surrounded by more than 300 thoroughbred and standard bred horse farms, is a world center for the equine industry. In the area around Lexington you will find stately groves of trees, pre-Civil War stone fences, acres of lush, verdant pastures, and horses. The city also serves as a regional center for health care, education, agriculture, and finance. Lexington has a rather moderate climate. There are four distinct seasons with no prolonged periods of cold, rain, wind, or snow. The annual mean temperature is 55 degrees; spring to fall 64 degrees; fall to spring 46 degrees.

Lexington is the home of the University of Kentucky, the state's land-grant institution. The University includes leading research centers in the physical and biological sciences. The UK Chandler Medical Center is a major source for research and education in medicine, nursing, and the allied health sciences. The University maintains twelve separate libraries, including a national repository for federal documents and a medical library. The library holdings of the University are available to VA Psychology Interns. One division of the Lexington VA is physically joined to the UK Chandler Medical Center and is located on the UK campus. Additionally, UK's Division I athletics program boasts the Kentucky Wildcat Basketball team, perennial March Madness and Final Four attendees.

Transportation: The city is easily accessible by air and ground transportation. Lexington is located at the intersections of I-64 and I-75, the Bluegrass Parkway, and the Mountain Parkway. The Bluegrass Airport is served by six major airlines. Traffic hassles associated with larger cities are not a problem in Lexington, and all areas of the city including the VA are easily accessible from the interstate or in town highways. Public transportation is available and serves all areas of the city.

Educational Facilities: There are numerous public and private institutions of higher learning within easy commuting distance of Lexington, including the University of Kentucky, Transylvania University, Eastern Kentucky University, Georgetown College, Centre College, Lexington Theological Seminary, Kentucky State University, and Lexington Community College. The local system of public schools receives high marks on the state level. The system includes magnet schools and special programs for gifted and developmentally challenged students. There are several private secular and parochial primary and secondary schools located in different parts of the city. Lexington maintains a comprehensive public library system with multiple branch locations.

Housing: Housing in Lexington is both abundant and diverse. Choices range from ante-bellum homes in the center of the city to apartments, condominiums, and single family homes in newly developed suburban areas. Rental costs are considered moderate relative to major metropolitan areas of the country.

Recreational Opportunities: There are many recreational opportunities in Lexington. Being a university center, Lexingtonians are avid fans of college sports. Lexington is also home to the Lexington Legends, a minor league baseball team. The city maintains a system of well planned public parks, playgrounds, swimming pools, tennis courts, golf courses, and a nature preserve. Lexington's proximity to the Appalachian mountain range and its numerous rivers and lakes makes it an excellent place for those who enjoy boating, fishing, hiking, camping, mountain climbing, and cycling. The state of Kentucky has a nationally renowned system of state parks that offer low cost outdoor recreation. Local equestrian events include a horse show in July, thoroughbred races at Keeneland in April and October, and trotting races at Red Mile in June and September.

Cultural Activities: Lexington is blessed with an unusually rich cultural life for a city its size. The Lexington Philharmonic, Central Kentucky Youth Orchestra, and the Lexington Singers present classical and popular concerts throughout the year. The city government sponsors classical, jazz, blues, and pop music concerts in local parks during the summer. The restored 19th Century Opera House offers the annual "Broadway Live!" series bringing musical theater companies to Lexington. Theater groups sponsored by the University and the city government offer a variety of traditional and experimental presentations. The visual arts are represented at the Headley-Whitney and University of Kentucky

museums, numerous private galleries, and periodic showings by the Lexington Arts League. A comedy club features many well-established comedians. Locally owned restaurants are diverse and delicious, offering wide ranges of cuisine from the classic to the exotic in all price ranges. Two large shopping malls are located in Lexington, including a newly refurbished Fayette Mall with 200 stores including 4 department stores. Finally, popular and traditional forms of music are readily available through multiple venues, ranging from taverns that feature local bands to Rupp Arena, a 23,000 seat auditorium which features major artists.

Lexington is a comfortable city in which to live and work. It is noted for its low crime rate, cleanliness, friendly people, and a Southern pace and hospitality. It is a city that offers a full array of services for both singles and families. It accommodates a wide variety of personal tastes and lifestyles.