



MATCH Number: 126911
Applications Due: November 15

Psychology Internship Program

VA Illiana Healthcare System
1900 East Main Street (116)
Danville, IL 61832
(217) 554-5193
<http://www.danville.va.gov/>

Accreditation Status

The pre-doctoral internship at the VA Illiana Healthcare System is fully accredited by the Commission on Accreditation of the American Psychological Association. Our next site visit will be in 2018. Questions related to the program's accredited status should be directed to the Commission on Accreditation:

Office of Program Consultation and Accreditation
American Psychological Association
750 1st Street, NE, Washington, DC 2002 Phone: (202) 33-5979
Email: apaaccred@apa.org
Internet: <http://www.apa.org/ed/accreditation>

Psychology Setting

The VA Illiana Health Care System is an academic medical center affiliated with the University of Illinois, privileged to provide primary, secondary, medical and surgical care, acute psychiatric care, extended long-term care and skilled nursing home care, including Rehabilitation, Alzheimer's and Palliative Care to the men and women who have so proudly served our nation. The main facility located in Danville, Illinois, with a full-service outpatient clinic in Peoria IL and community-based outpatient clinics in Decatur, Mattoon, and Springfield Illinois.

In the early history of the Danville facility, the word "home" featured significantly. After the Civil War, the United States government decided that some type of "home" or "hospital" should be established for disabled Veterans of the Union Army. On March 3, 1865, an Act of Congress furthered this idea with the establishment of a "Military and Naval Asylum for Disabled Volunteer Soldiers." A later Act of Congress changed the name from "asylum" to "home" and the organization became known as the "National Home for Disabled Volunteer Soldiers." The Danville "home," one of several constructed under this act, was opened in 1898. The first "member" was admitted October 13 of that year, with a total of 31 admitted by December 31. At one time during the "home" days, the "membership" reached approximately 4,000.

Although the resident population of the facility has decreased appreciably since its "home" days, its services and physical plant have expanded and improved remarkably. During 1933 and 1934, steps were taken to convert the "home" into a neuropsychiatric hospital and on March 1, 1935, the facility was opened as a Veterans Administration Hospital. Major modernization and construction has been underway since that time. As the older buildings were vacated, they were made available to the Danville Area Community College, which has developed a fine campus adjacent to the VA facility. Since 1968, the hospital has developed a full range of medical and surgical services with some of the most modern technology in the United States. The change in name to "VA Illiana Health Care System" occurred in 2001.

The 215-acre Medical Center grounds are beautifully landscaped with wooded areas, spacious lawns, tennis courts, ball diamonds, and gardens. The nearly 3.6 miles of improved roads and 2.8 miles of concrete walks make all parts of the park-like grounds accessible to patients, staff and visitors. We also have an extensive library, a modern canteen/cafeteria, an attractive chapel, and professional bowling.

The VAIHCS also places considerable emphasis on the education and training of its employees, both professional and administrative, through workshops and seminars here and at other sites. Professional training is not only provided to psychology students but also to students of the following specialty areas: audiology and speech pathology, dietetics, medicine, nursing, occupational therapy, optometry, recreation/music therapy and social work.

Application and Selection Procedures

Eligibility for Acceptance: Any graduate student who (1) is an American citizen, (2) is a candidate in good standing for a doctorate in a clinical or counseling psychology program accredited by the American Psychological Association, and (3) will fulfill educational requirements or expectations through participation in a VA Training Program is eligible for acceptance. Prior practicum experience is also required (minimum of 300 Intervention and Assessment Hours combined and 1000 Grand Total Practicum Hours).

The VA Illiana Health Care System values diversity in our staff. As a Federal employer, the VAIHCS strictly follows EEOC policies on fair recruitment and personnel practices. As an equal opportunity training program, our internship welcomes and strongly encourages applications from qualified candidates from all backgrounds including age, color, ethnicity, gender, language, marital status, parental status, physical capacity, political affiliation, race, religion, sexual orientation, social economic status, and other minority status.

Selection Process: Applicants are required to create an application through the AAPI Online Applicant Portal that can be accessed at <http://www.appic.org>, click on AAPI/APPA on the white bar at the top of the page, then select AAPI Internship Application Information and then either AAPI Information or Applicant Portal and follow the directions.

Include the following in your application:

1. In your cover letter, please include a list from 1 to 3, the three placements you believe you would select for your internship year from the following Specialized Training Options: Behavioral Health Interdisciplinary Program (BHIP), Geropsychology, Health Psychology, Home Based Primary Care (HBPC), Inpatient Psychology, Neuropsychology, Outpatient PTSD, Substance Abuse Rehabilitation Program (SARP), Psychosocial Residential Rehabilitation Treatment Program (PRRTP), Decatur Community-Based Outpatient Clinic, and Peoria Community-Based Outpatient Clinic. (These choices are not binding and merely indicate preferences to be used solely for the purpose of arranging interviews.)
2. Regarding your three letters of recommendation, please submit at least two from clinical/counseling supervisors.
3. A treatment or case summary.
4. A psychological evaluation report.

All application materials should be sent via the AAPI Online portal by **November 15**. If you have any questions regarding our training program please contact Dr. Tressa Crook by email at tressa.crook@va.gov or by phone at (217) 554-5193.

We will invite top applicants to attend a half-day on-site interview. Interview notification date is **December 15**. There will be three days in January that performance based interviews are conducted, either morning or afternoon of each day. Multiple staff members will interview each intern, there will be an opportunity to hear about each rotation at a group presentation, and applicants will be given a tour with current interns. If an on-site interview is not possible, arrangements may be made for a telephone interview.

Selections are made on the basis of a match between our resources and the applicant's qualifications and training needs. The Association of Psychology Postdoctoral and Internship Centers (APPIC) Match Policies are followed in intern recruitment. We offer all of our internship positions through the APPIC Match program and adhere to the APPIC Match Policies. All applicants must be registered with National Matching Services, Inc. NMS Applicant Agreement packages can be obtained at www.natmatch.com/psychint. A review of these guidelines may be found on

the APPIC website <http://www.appic.org> This internship site agrees to abide by the APPIC policy that no person at this training facility will solicit, accept or use any ranking-related information from any intern applicant.

Effective Date of Appointment: Internships at the VA Illiana Health Care System begin on the last Monday in July. The effective date of appointment is the date the intern's pay begins. Appointments of paid interns are made on a temporary, full-time basis, not to exceed three years.

Director of Training:

Tressa H. Crook, Psy.D.
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Training Director
Psychology Training Program
VA Illiana Health Care System
1900 East Main Street #116
Danville, IL 61832

Tressa.Crook@va.gov
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Appointment Guidelines: Students considering an internship at VAIHCS must meet the criteria previously described (see paragraph V. A). In addition, consideration is given to the quality and quantity of past academic and clinical experience. Internship candidates should have acquired supervised experience in assessment and therapy through practicum placement. Their graduate course work should also be of sufficient breadth and depth in clinical and counseling activities to provide reasonable preparation for their work within this facility. All appointments are for a continuous period of 365 days. Interns may expect to be on duty during the regular workweek from 8:00 a.m. to 4:30 p.m. After training has started, it cannot be interrupted for more than two consecutive weeks during the internship year except in cases of emergency.

Per Annum Method of Payment: All employees, including Interns are required to participate in the DD/EFT (Direct Deposit of Net Salary Check to a Financial Institution) program. The rate of basic pay is just shy of \$11.53 per hour based on a per annum rate of \$23,974. Interns are not entitled to overtime pay or compensatory time for hours worked in excess of 8 hours in a day or 40 hours in a week. The maximum number of training hours allocated is 2080, including annual leave and excused holidays. Interns are encouraged to utilize their annual leave as it accrues, so that lump-sum annual leave payments are not required. No funds are provided by the Office of Academic Affairs to cover lump-sum annual leave payments; therefore, it is important to schedule as much annual leave as practical prior to termination.

Benefit Entitlement: Paid interns are entitled to the annual and sick leave benefits provided under 5 U.S.C., Chapter 63 (Absence and Leave). Leave arrangements must be approved for Interns by the responsible Supervisor in consideration of their schedule at the Department of Veterans Affairs Medical Center. All interns are covered by the injury compensation provisions of 5 U.S.C., Chapter 81 (Injury Compensation) which covers compensation and other rights and benefits for injury or work-related illness incurred in the performance of their duties. Outpatient emergency medical and dental care may be furnished to students without charge during a scheduled training assignment. Interns are also eligible to participate in the Federal group life and health insurance programs.

Intern Responsibility: Interns have the primary responsibility for seeing that they fulfill training requirements. In the exceptional and rare instances in which an intern does not secure the required number of supervised training hours of experience during a given pay period, he/she is required to make up these hours without receiving compensation (WOC).

Early Termination: If a participating school officially notifies the training facility that an intern is no longer a candidate for a doctorate in the area of his/her specialty, the intern may be terminated from the VA Psychology Training Program two weeks after notice is received. Also, the intern may be terminated or placed on probation if this Program determines that the intern is not progressing satisfactorily in his/her VA training assignment. Termination should occur no earlier than two weeks following the decision to terminate. The intern will receive no further compensation beyond the hours worked prior to his/her termination from the Program. Interns may elect to terminate prior to the end of the internship for personal reasons. Elective termination is effected by appropriate notice to the Training Director and approval of the Supervisory Psychologist.

Training Model and Program Philosophy

The Psychology Training Program has the goal of assisting interns in the development of the knowledge, skills and techniques necessary to function as professional psychologists. Ours is a practitioner / scientist program in that the emphasis is placed upon the various supervised activities an intern might perform. That is, patient care activities, such as assessment and intervention, are typically given a higher priority than more academic pursuits, such as research and teaching. This is not because we devalue the latter; rather, it is because we perceive our site better suited to providing training in patient care functions than university training programs, which seem better suited to providing training in research and teaching. With that bias, we look forward to helping our interns integrate these areas of their training so that each can inform and reinforce the other. The primary method used to achieve this goal is based on the tutorial- apprenticeship model. Interns work with their primary supervisor to design a clinical experience to meet their unique needs, participating directly in the work of

their primary supervisor. While it is possible to sketch the general character of the intern's involvement, the exact nature of the experience depends upon the intern-supervisor mix, for we try to individualize training as much as possible and use our resources to meet unique needs. The intern is expected to produce scholarly work products integrating scientific psychological literature in their assessment of and treatment planning for patients. Our tutorial-apprenticeship model is supplemented by a series of seminars, teleconferences, grand rounds, webinars, and consultant contacts.

The Psychology Staff enthusiastically supports The VAIHCS mission to honor America's Veterans by providing exceptional health care that improves their health and well-being. The Psychology Staff is comprised of 31 doctoral-level psychologists, as well as a number of psychology technicians, interns, and practicum students. The services of several consultants from the private sector and faculties of universities in the area augment the regular staff. Occasionally the services of volunteers are utilized for specific purposes.

The Supervisory Psychologist is responsible to the VAIHCS Mental Health Service Chief and then to the Chief of Staff. The Supervisory Psychologist organizes and uses the talents of staff members, interns, and consultants to produce the optimum balance in Psychology's basic functions of patient care services and training. The Supervisory Psychologist coordinates patient care service duties directly, appointing one staff member to coordinate training duties. Because Psychology works closely with other services and units, the Supervisory Psychologist also maintains close and harmonious relationships with Service Chiefs in order to facilitate the efforts of staff members.

Patient Care Functions: Most staff members are assigned primarily to specific units of the medical center where they provide a full range of psychological services to patients. Consultative service is provided to units that do not have a regularly assigned psychologist. Patient care functions encompass all the empirically accepted psychological diagnostic and treatment procedures. Diagnostic activities include the operations of information gathering that lead to a better understanding of the patient. Reviews of records, interviews of patients and significant others, psychological testing, observational data, and reports of personnel are typical sources of such information. Treatment activities promote independent functioning and include individual psychotherapy and group psychotherapy as well as such special modes as the following:

Acceptance and Commitment
Therapy
Anger Management
Anxiety Management
Assertion Training
Biofeedback
Brief Psychotherapy
Cognitive Processing Therapy
Cognitive Behavioral Therapy

Cognitive Behavioral Therapy-
Insomnia
Compensation & Pension
Evaluations
Contingency Management
Crisis Management
Depression Management
Detraumatization Techniques
Developmental Stage Therapy

EMDR	Problem Solving Skills Training
Family Therapy	Prolonged Exposure Therapy
Grief Therapy	Rational Emotive Behavior Therapy
Guided Imagery	Relapse Prevention
Hypnosis	Relaxation Training
Marital Therapy	Reminiscence Therapy
MOVE: Weight Management	Seeking Safety Treatment
Motivational Enhancement Therapy	Smoking Cessation
Motivational Interviewing	Social Skills Training
Neuropsychological Assessment	STAR-VA: Behavioral Interventions
Pain Management	Stress Management
PAIRS: Relationship Enhancement Therapy	Substance Abuse Rehabilitation
Patient Education	Telehealth
	Unified Protocol

Psychological services are provided directly to eligible inpatients and outpatients, including families and other collaterals when appropriate.

Program Goals & Objectives

In achieving individualized training **objectives**, our program requires that each intern demonstrate an intermediate to advanced level of professional psychological skills, abilities, proficiencies, competencies and knowledge in the areas of: a) theories/methods of assessment/ diagnosis and effective treatments/interventions; b) theories/ methods of consultation, evaluation, and supervision; c) strategies of scholarly inquiry; and d) issues of cultural/individual diversity relevant to the above. The goal of which is to produce entry-level graduates who can think critically about relevant theoretical and scientific literature and be able to apply this in their clinical and research work.

Program Structure

Training: Training functions are directed toward the education and training of graduate students who are candidates for doctorates in clinical or counseling psychology. The training orientation is student-centered rather than technique-centered, with focus on work experience which parallels that of staff psychologists and is supplemented by directed readings, seminars, webinars, teleconferences, grand rounds, as well as individual and group supervisory sessions.

Staff members are also actively improving their skills and keep abreast of new developments in psychology by reading; attending lectures and seminars, teleconferences, educational details, university colloquia and workshops; and conferring with consultants. Staff members are also active in the training of members of other disciplines, both informally through consultation and formally through seminars, classes and workshops. Several staff members have faculty appointments with area universities: University of Illinois and Purdue University.

The VAIHCS also has a practicum program for predoctoral psychology students with a variety of openings each year.

Typical tours of duty are 8-4:30 or 7:30-4 M-F and is dependent on agreement from the intern's primary supervisor each rotation.

Supervisory Assignments: As part of the orientation process, new interns spend time with individual members of the Psychology Training Staff during their first and second weeks of duty. The intent is to provide supervisors and interns with the opportunity to become directly acquainted with each other's background, skills, interests, resources and for the supervisors to become acquainted with each intern's goals, as well as providing new interns with an overview of the range of psychological activities within our health care system. At the end of the orientation period, the Training Director, in consultation with the interns and training staff, finalizes initial intern placements, taking into account staff resources along with intern needs and interests. The Training Staff reviews these assignments, so they may be changed; however, supervisory placements are usually decided during the second week of the new interns' tours of duty. There are no specific tracks within this internship but rotation preference is given to interns with expressed career goals (e.g. Neuropsychology rotations for those pursuing Neuropsychology postdoctoral fellowship).

Whatever the assignment, supervisors are charged with developing an awareness of the special abilities and interests of the individual intern and to provide the support and time for the development of those interests and skills.

Interns will be supervised by more than one member of the Training Staff. The number and character of the supervisory placements depends upon the background, needs, skills and goals of the individual intern. Therefore, the exact nature of these arrangements cannot be specified beforehand. A general guideline followed in making such arrangements is to provide the individual intern with the training and experience necessary to round out or complete the skills necessary for professional-level functioning. This is generally accomplished through three, four-month sequential placements in the specialized intramural training programs described in the next section. One secondary placement of up to one day a week that runs concurrently with the primary placements can also be arranged. It may be important to note that this program long ago adopted a "gaps before goals" model of training, and in-depth exposure to psychopathology is considered a prerequisite to more specialized training. Our philosophy is that without exposure to the many manifestations of psychopathology, a psychologist is woefully unprepared to function in any clinical setting. Consequently, assignment to Inpatient Psychiatry as a placement is almost routine to ensure that comprehensive generalist training is achieved unless an intern has had prior inpatient supervised experience that is equivalent.

A typical day for an intern at VAIHCS varies greatly depending on the rotation. However each rotation insures that time is allowed for attendance at didactics. The typical time commitment per week on site is 40 hours.

Supervision styles vary per rotation and per supervisor. Monitoring is completed throughout each rotation to insure that at least 2 hours of individual and four hours total of supervision is provided. Style of supervision typically is observation but some supervisors also use audio or audio/video recording as well.

Intern evaluations are conducted at the midpoint of each rotation as well as at the end of each rotation. This information is sent to the student's university once signed by appropriate staff and the Training Director.

Currently the VAIHCS does not have an IRB so research is not allowed with the VAIHCS patients. However, each year, interns successfully complete their dissertation during their internship through their graduate University. Interns *may be* allowed 250 hours for their own dissertation research. The same allowances are available to interns who are candidates for the Doctor of Psychology degree and need time to spend on their research paper and interns who have completed their doctoral research requirements and who desire to pursue additional research. Interns must be on the grounds of the facility while completing these research hours.

Training Experiences. An intern has the opportunity to gain valuable experience and training through the supervised rendering of psychological services to a wide variety of patients, including psychiatric, medical, surgical, geriatric, and neurological on both an inpatient and outpatient basis. These activities are performed under the direct supervision of the doctoral-level psychologists to whom the intern is assigned. While it is possible to present a broad outline of available experiences, the exact details depend upon intern needs and available resources. The training experiences may include (but are not limited to): individual psychotherapy, group psychotherapy, treatment planning, psychological evaluations, automated test administration, report writing, neuropsychological assessment, stress management, relaxation training, biofeedback, contingency management, educational and vocational counseling, case presentations, participation in staff meetings, supervision of lower-level trainees, use of audio and videotaping as an adjunct to psychotherapy, assertion training, social skills training, family therapy, program development, program administration and staff consultation (the latter two experiences are confined to the consultative and administrative skills expected of a staff psychologist).

Specialized Training Options: Usually an intern has three primary placements within the facility that last for four months and run sequentially. These primary placements involve a number of training options. These options typically involve, but are not limited to those that are listed below. In reviewing them, it should be kept in mind that these experiences have been constructed out of active patient care programs.

1) Behavioral Health Interdisciplinary Program (BHIP): In this placement, an Intern becomes a member of a BHIP team in the Outpatient Mental Health Clinic. Each BHIP team is a multidisciplinary team of health care professionals and administrative staff that provides comprehensive and Veteran-centered mental health services to a diverse Veteran population who present with a variety of problems in living. The Intern will have the opportunity to work with Veterans and their families in both short- and longer-term interventions depending on their needs and goals. Supervision will be provided for a variety of therapeutic approaches including Evidence-Based or Evidence-Supported techniques such as Cognitive Behavior Therapies including Acceptance & Commitment Therapy for anxiety, depression and insomnia. Interns will be encouraged to develop their own integrative style, incorporating the most appropriate techniques for the person or persons with whom they are working. Interns will have opportunity to work with traumatized Veterans and to learn Evidence-Based treatments including Prolonged Exposure Therapy and Cognitive Processing Therapy. Interns will be able to lead both outpatient psychotherapy and psycho-educational groups during this placement. As a member of the Mental Health Clinic the Intern will work closely with other members of the team of providers dedicated to providing quality care to our Veterans so that they can recover and go on to enjoy the kinds of lives they deserve.

2) Geropsychology: The geropsychology placement offers interns training opportunities in geriatrics working with both inpatients and outpatients receiving care through the Geriatrics and Extended Care Service (GEC). Interns will have the opportunity to work with a variety of residents receiving care in our Community Living Center (CLC). Our CLC has multiple specialty units including dementia care, palliative care, geropsychiatric, physical rehabilitation, and long-term care. In addition, interns will be involved in providing care to veterans being seen in our outpatient multidisciplinary Geriatric Clinic.

Interns will receive training in conducting psychological evaluations with the elderly. This can include general evaluations as well as capacity and dementia exams as needed. Interns will also receive training in STAR-VA and behavior management techniques with individuals with dementia. There are training opportunities with providing short-term psychotherapy as well as providing staff education.

3) Health Psychology: Focusing primarily on medical or surgical patients, interns in this placement learn to rapidly assess and develop interventions for the psychological components of various disorders, using such modalities as individual, group, marital and family psychotherapy, biofeedback, pain/stress management, hypnosis, and relaxation training. Developing the skills to coordinate psychological interventions with medical treatment and family resources is a major focus.

4) Home Based Primary Care (HBPC): This placement is located within the Home Based Primary Care program providing psychological services to Veterans who are essentially home bound due to medical conditions. At Illiana, the population served ranges in age from the fifties through end of life, primarily within rural settings. The clinical needs vary greatly with a predominance of adjustment, anxiety disorders, mood disorders, and cognitive disorders. The intern is expected to function within a multidisciplinary team and can expect close interaction with the members of the HBPC team. Working with the HBPC Psychologist, the intern will conduct brief psychological evaluations for mood, cognition, and adjustment, more comprehensive assessments when indicated, and may develop a small therapy caseload. Working with our team and within the Veterans' homes is very rewarding, clinically challenging, and an experience unlike office-based clinical practice.

5) Inpatient Psychology: Psychologists in Inpatient Psychiatry function as independent members of interdisciplinary treatment teams that include psychologists, psychiatrists, social workers, nurses, and auxiliary therapists from specialized services. Veterans on the inpatient psychiatric unit have a variety of mental health concerns, including severe and persistent mental illness (schizophrenia ...), major depressive episodes, and substance abuse disorders. As interdisciplinary team members, interns develop the skills to make contributions to their patients' individualized treatment plans and take responsibility for providing the psychodiagnostic, psychotherapeutic, and case management services necessary for patients' discharge and maintenance in the community. Differential diagnosis and assessment skills will be used widely in this rotation.

6) Neuropsychology: The Neuropsychology Clinic provides screening and comprehensive evaluations of psychological functions affected by brain damage as well as remediation planning and follow-up services to Veterans and their families. Working from both flexible and fixed battery approaches, Interns learn to administer and score many standard neuropsychological tests, to design individual test batteries, and to write interpretive reports. Resources in the area are extensive enough to support two training options: an introductory experience emphasizing assessment issues to help interns develop the skills necessary to recognize brain syndromes as well as make intelligent use of neuropsychological resources, and an advanced experience that combines supervised assessment experience with training

in intervention and case management. Previous coursework and practica in assessment are needed. The neuropsychology-advanced experience is designed to provide clinical experiences consistent with INS/Society for Clinical Neuropsychology, Division 40 guidelines for internship.

7) Outpatient PTSD: In the Outpatient PTSD Clinic, interns will learn to evaluate referrals to the clinic using interviewing and psychodiagnostic skills. Interns become full-time members of the PTSD Clinical Team (PCT) accruing a caseload and providing a full range of services to Veterans and their families on an outpatient basis. Treatment modalities in the PTSD Clinic include individual, group, marital, and family therapy. Providing PTSD education to Veterans and their families is also an important component of treatment. In addition, interns have the opportunity to strengthen skills with particular techniques for relaxation, stress management, etc., by developing and facilitating special focus groups. An important training goal for interns will be the ability to acquire and implement a conceptual model for understanding and treating trauma that effectively addresses the biological, psychological, affective, and moral/spiritual injuries sustained from exposure to trauma. Special emphasis is given to evidence-based treatment modalities including Prolonged Exposure Therapy, Cognitive Processing Therapy (individual and group), Acceptance and Commitment Therapy, and Motivational Interviewing. Based on interest, interns will be given the option of training in Cognitive Behavioral Therapy for Insomnia. Interns will have the option to participate in the specialized assessment and treatment of dually-diagnosed Veterans suffering from PTSD and substance use disorders. The PTSD/SUD specialty area utilizes an interdisciplinary treatment collaboration between PTSD and SARP, with a focus on safe coping skills and relapse prevention. Interns will also have the option of co-facilitating a Seeking Safety Group. Training in Military Sexual Trauma and some of the unique issues involved in treatment is also available. The PTSD clinic utilizes a team approach to training and interns will be provided the opportunity to gain experience with each staff member, as well as attend specialized, interdisciplinary meetings to address issues such as: care for polytrauma victims and the seamless transition of Veteran's care from active duty to the civilian sector.

8) Substance Abuse Rehabilitation Program (SARP): While SARP is, by definition, considered a substance abuse rehabilitation program with a Rational Emotive Behavior Therapy (REBT) orientation, we prefer to think of the program as primarily an REBT program that happens to focus largely, though not exclusively, on substance use disorders. The full program is a 6-week, intensive outpatient program, staffed by a psychologist/program coordinator and four addictions therapists. Veterans participating in SARP either commute from home on a daily basis, reside in our PRRTTP, or stay at the Salvation Army in Champaign and get bussed back and forth every day. We also offer alternative schedules for those who are unable to commit to the full program.

During a rotation in SARP, interns will become familiar with Rational Emotive Behavior Therapy, conduct comprehensive intake interviews, facilitate and/or co-facilitate various groups and classes (e.g., anger management, self-esteem, cravings management, cue exposure, daily lecture, Seeking Safety), provide individual therapy, and gain some familiarity with basics of program management.

Outpatient Mental Health Community-Based Outpatient Clinic (CBOC) Options:

9) Decatur Community-Based Outpatient Clinic (CBOC): In this CBOC, interns will have the opportunity to work with a diverse, outpatient Veteran population in individual and group therapy.

10) Peoria Community-Based Outpatient Clinic (CBOC): Located in Illinois' 2nd largest city, this interdisciplinary clinic offers an opportunity for interns to gain experience in a wide range of psychological disorders. Interns will gain experience in embodying the role of the psychologist in an outpatient community setting while collaborating with primary care providers, social workers and other disciplines. Here, there are unique opportunities to work closely with the Home Based Primary Care Psychologist and also learn about the practice of evidenced based psychotherapies such as Edna Foa's Prolonged Exposure for PTSD, David Barlow's Unified Protocol for emotional disorders and Stanford University's pain management protocol.

Example Intern Training Schedule:

Intern – Student 1

First Rotation – Neuropsychology

Second Rotation – Inpatient Psychology

Third Rotation – Geropsychology – Neuropsychology (Secondary)

Intern – Student 2

First Rotation – PTSD

Second Rotation – Inpatient Psychology

Third Rotation – BHIP

Intern – Student 3

First Rotation – PTSD

Second Rotation – SARP

Third Rotation – Inpatient Psychology

Intern – Student 4

First Rotation – Neuropsychology

Second Rotation – Geropsychology

Third Rotation – HPBC/Health Psych – Neuropsychology (Secondary)

Example Practicum Training Schedule:

Intern Student 1

Fall – BHIP (2 days)

Spring – CBOC and Inpatient Psychology (1 day each)

Intern Student 2

Fall – SARP (2 days)

Spring – BHIP(2 days)

Intern Student 3

Fall – PR RTP (2 days)

Spring – PR RTP (2 days)

Intern Student 4

Fall – SARP (2 days)

Spring – Inpatient (2 days)

ADDITIONAL TRAINING EXPERIENCES: The training experience obtained through the supervised provision of psychological services is augmented by regularly scheduled seminars. Topics are selected on the basis of the needs and interests of interns, staff, and trainees. Every effort is made to focus on areas of special interest. Members of the psychology staff, consultants, and other hospital personnel conduct the seminars. They cover a number of areas, such as use and interpretation of major psychodiagnostic techniques, innovative psychotherapeutic approaches, psychoactive agents, psychopathology, ethical and professional issues, and issues of individual/cultural diversity. The specific areas vary from year to year as the needs and interests of the interns/trainees and staff change. Occasionally outside experts make special presentations on topics of particular interest.

In addition to regularly scheduled seminars, study groups may be organized on a periodic or regular basis. The study group format allows deeper penetration into areas of particular interest so study group participants, as a rule, are expected to be more actively involved than seminar participants. The participation can be experiential as well as didactic. Study groups in the Rorschach, Hypnosis, and Eye-Movement Desensitization Reprocessing were active in previous years.

Again, topics for study groups vary from year to year as interests and needs shift.

While the seminars and study groups sometimes involve the use of case material, formal case presentations are scheduled periodically. Illustrative of particular problems/techniques or arranged for consultation on difficult problems, the case presentations involve thorough preparations of background information, assessment data and therapy response. The presentations may involve members of other disciplines depending upon the nature of the case and the presentation's purpose. Psychology consultants and consultants to other disciplines may also be involved.

Psychology staff and interns are periodically invited to the training experiences organized by other disciplines, the entire facility, or outside agencies. The experience could be a lecture, workshop or visit to another agency. Sometimes they involve presenters with nationwide reputations. Presentations worthy of note to psychologists have included Albert

Ellis on Rational-Emotive Therapy, Edwin Shneidman on Suicide, Carl Whittaker on Family Therapy, Gordon Paul on Treatment Approaches for Chronic Patients, Madeline Kuhn on Aging, Domeena Renshaw on Sexuality, Francine Shapiro on Eye Movement Desensitization and Reprocessing, Yossef Ben-Porath on MMPI-2, Paul Arbisi on MMPI2-RF, Elisabeth Kübler Ross on Death and Dying, Nadya Fouad on Multicultural Competency Guidelines, Paul Hauck on Overcoming Depression and Anxiety, and Carol Falender on Competency Based Supervision. Interns may receive leave to attend special training opportunities at other sites. Psychology maintains selected educational materials (audio, and video), important reprints and useful books for staff members and interns. Psychology staff and interns also have access to the facility's professional library whose collection of tapes, journals, and books is extensive. Our library routinely purchases the most up-to-date Psychology Licensing Exam Review Program to assist interns' preparation for licensure available for loan. The association of our library with the libraries of universities and other Medical Centers permits the acquisition of materials on any topics that are not included in the facility's collection. Computerized bibliographic searches are also available through our Medical Center Library.

PSYCHOLOGY SECTION TRAINING SCHEDULE 2014-2015

(*Indicates Consultants)

Weekly	Neuropsychology Lunchtime Seminars - Every Tuesday through December (Mandatory for Neuropsychology Interns, Optional for
Weekly	Intern Seminars - Every Friday (except January)
Bi-Weekly	Grand Rounds - Every Second and Fourth Wednesday of the Month (Optional)
Monthly	Ombudsperson Meeting - 3rd Wednesday of every Month - Interns and Dr. Stanley Hogsett
Monthly	MST Teleconference - 1 st Thursday of the Month (Optional)
Monthly	Journal Club - 1 st Friday of the Month (Optional)
Monthly	Supervision Committee Meeting - Every 2 nd Monday (February- July)
Monthly	Post Deployment Integrated Care Initiative (PDICI) Community of Practice (COP) Call - 2 nd Friday of the Month (Optional)
Monthly	Difficult Case Review - 2 nd Friday of the Month - Dr. Sari Aronson
Monthly	PTSD Live Meeting Series Conference - 3 rd Tuesday of the Month (Optional)
Monthly	PTSD Monthly Lecture - 3 rd Wednesday of the Month (Optional)
Monthly	Training Staff Meeting - 3 rd Friday of the Month (Training Staff Only)
Monthly	DCoE Monthly Webinar - 3 rd Thursday of the Month (Optional)

Monthly	Intern-Training Director Lunch Meeting - TBD each Rotation
Monthly	Celebrate Report Out - 4 th Thursday of the Month (Optional)
Monthly	Pain PACT Community of Practice (COP) Call - 4 th Friday of every Month (Optional)
Monthly	Mental Health Educational Series (Optional)
Bi-Monthly	Mental Health Service Meeting - 4 th Friday of odd months
Bi-Monthly	Psychology Staff Meeting - 4 th Friday of even months
Quarterly	Quarterly Town Hall Meeting (Optional)
08/01/14	Journal Club - Medications & Sexual and Dysfunction - Tracy Poston, P.A.
08/06/14	WAIS-IV (All-Day Training) - Sherry Sanford, M.S., LPC, Neuropsychology Technician, and Dr. Julie Fitzgerald
08/07/14	MST Teleconference: Addressing the Sex & Intimacy Concerns of Sexual Trauma Survivors - Wendy Maltz, LICSW, DST
08/08/14	Training Staff Meeting – Dr. Tressa Crook
08/08/14	DSM-5: Personality Disorders - Sari Aronson, M.D.
08/08/14	Post-Deployment Integrated Care Initiative (PDICI) Community of Practice (COP): TBI Educational Resources for PACT Providers - Linda M. Picon, MCD, CCC-SLP
08/13/14	Grand Rounds: Ethical Pain Management - Dr. Craig Elliott
08/14/14	DcoE Monthly Webinar - Breaking the Code: ICD-9-Clinical Modification Diagnosis Coding for Traumatic Brain Injury
08/15/14	Orientation to the Medical Record and Understanding Lab Results - Dr. Julie Fitzgerald Smith
08/20/14	PTSD Monthly Lecture - TBA
08/22/14	Suicide Prevention Guidelines - Dr. Bridget Tribout
08/22/14	Pain PACT COP (Community of Practice) Bright Spots and Pain Care Transformation Update - Ryan Mancari, MBA
08/27/14	Grand Rounds: What is Forensic Podiatry? - Dr. Esmailie
08/27/14	Timing and Clinical Decision-Making in Acceptance and Commitment Therapy - Myvehucampus
08/28/14	DcoE Monthly Webinar: A Population Approach to Treatment Engagement in Behavioral Health Care - Michael C. Freed,
08/28/14	Celebrate Report Out
08/29/14	WAIS-IV Proficiency in Administration and Scoring - Sherry Sanford, M.S., LPC, Neuropsychology Technician, and Dr. Julie Fitzgerald Smith
09/04/14	MST Teleconference - Cancelled

09/05/14	Journal Club: High-Dose Baclofen for Treatment-Resistant Alcohol Dependence - Dr. Isaki Afolabi
09/05/14	Conducting Compensation and Pension Evaluations - Dr. Michael
09/11/14	Grand Rounds: Sleep Disorders in Parkinson's Disease - TMS
09/12/14	Geriatrics and Extended Care Core Palliative Care: Integrating Spirituality Into the Whole Person Treatment and Care Plans -
09/12/14	Post-Deployment Integrated Care Initiative (PDICI) Community of Practice (COP) The Veteran's Health Care Experience American Legion Survey Jeff Greenberg, Ph.D.
09/12/14	Difficult Case Review: Disruptive Patient - Sari Aronson, M.D.
09/12/14	Loss, Grief & Mourning: Beyond Kübler Ross - Dr. Heather Servaty-
09/16/14	PTSD Live Meeting Series TBA
09/17/14	Dementia Education Fair - Dr. Bridget Tribout
09/17/14	PTSD Monthly Lecture: Assessment and Management of Posttraumatic Headaches by Ronald Riechers, II, M.D.
09/17/14	Ombudsperson Meeting - Interns and Dr. Stan Hogsett
09/17/14	Grand Rounds: Pain Care Day - VAIHCS Dementia Committee
09/19/14	Training Staff Meeting – Dr. Tressa Crook
09/19/14	Intern-Training Director Monthly Lunch Meeting - Interns and Dr. Tressa Crook
09/19/14	Psychotherapeutic Interventions in Chronic Illness: Integrating Relaxation and Stress Management Strategies to Enhance Quality of Life -
09/19/14	Quarterly Town Hall Meeting
09/22/14	Supervision Committee - Dr. Edward O. Brown
09/23/14	MMPI-2-RF All-Day Training - Paul A. Arbisi, Ph.D. ABAP, ABPP, L.P.
09/24/14	Grand Rounds: Multidisciplinary Approach to Dementia Care - Dr. Craig Elliot and Dr. Bridget Tribout
09/25/14	DCoE Monthly Webinar - Suicide in Military and Veteran Populations: Implications for Chaplains, Health Care Providers
09/25/14	Celebrate Report Out
09/26/14	Geriatrics and Extended Care Core Palliative Care: Education in Palliative and End-of-Life Care for Veterans – TMS
09/26/14	Mental Health Service Meeting - Dr. Michael Clayton
09/26/14	Military Culture: Mental Health Impact of Service - Jeff Romig, MPAS, PA-C
09/26/14	Pain PACT COP (Community of Practice): VA - The Emerging Medical Home for Pain Care - Brian L. Lewis, Ph.D., ABPP, Clinical Psychologist

	Rutherford, NP, Cathy Collins, RN, Pain Care Coordinator
9/30/14	Do Ask, Do Tell: Assessing Sexual Health of Lesbian, Gay, Bisexual and Transgender Veterans (and Everyone Else) - Myvehucampus
10/1/15	Hispanic American Month Lunch & Learn: The Hispanic Diaspora - VAIHCS Diversity and Inclusion
10/2/14	MST Teleconference: Treatment of PTSD and other Posttraumatic Disorders when SUD is Present -Sonya
10/3/14	Overview of Cultural Sensitivity - Dr. Michele Boyer
10/3/14	Journal Club: Secondary Traumatic Stress in Military Primary and Mental Health Care Providers - Amber Ellis, PAC
10/8/14	Grand Rounds: A Multidisciplinary Approach to Diabetes - Dr. Anu
10/9/14	DCoE Monthly Webinar: Gender Issues and Sport-related Concussion - Tracy Covassin, Ph.D., ATC
10/10/14	Difficult Case Review - Cancelled
10/10/14	Practicing in a Medical Setting - Dr. Howard Gartland
10/10/14	Post-Deployment Integrated Care Initiative (PDICI) Our VBA Partners in Post-Deployment Care C&P, Claims Process, DBQ's, Benefits: It's all about Veterans Health - Nancy Lansing RN, BSN, MS (and Navy
10/13-15/14	Indian Health Service Tele-Behavioral Health Center for Excellence Series - Myvehucampus
10/10/14	Mental Health and Sexual Health - Tracy Poston, P.A.
10/15/14	Ombudsperson Meeting - Interns and Dr. Stan Hogsett
10/15/14	PTSD Monthly Lecture: PTSD and Dissociation: Clinical and Neurobiological Perspectives - Ruth Lanius, MD,
10/16/14	ReIntegration of a Virtual Hope Box Mobile Application into Clinical Care - Myvehucampus
10/17/14	Training Staff Meeting – Dr. Tressa Crook
10/17/14	Intercultural Development Inventory (IDI): Individual Feedback – Dr. Michele Boyer
10/21/14	Peer Support Roles in VHA - Myvehucampus
10/22/14	Grand Rounds: Robotic Surgery - Dr. Kakarla
10/23/14	DCoE Monthly Webinar: Psychological Health Issues Affecting Women Service Members and Veterans - Elspeth Cameron Ritchie,
10/23/14	Celebrate Report Out - Task Force Leadership
10/24/14	Intern-Training Director Monthly Lunch Meeting - Interns and Dr. Tressa Crook
10/24/14	Intercultural Development Plans and Applications - Dr. Michele Boyer
10/24/14	Pain PACT COP (Community of Practice) Call: Acupuncture – The Bridge to Pain Care Transformation - Michael Senger, M.D., F.A.C.P.
10/27/14	Culturally Specific Approaches to Trauma and Domestic Violence - Myvehucampus

Monthly	Intern-Training Director Lunch Meeting - TBD each Rotation
10/28/14	Overview of Neuroanatomy - Dr. Jessica Kinkela
10/31/14	Psychopharmacology: Clinical Applications, Part I - Treating Depression - Dr. Farahnaz Jahangirian, Clinical Pharmacist
11/04/14	Military TBI: Facts, Screening & Treatment - Dr. Dongwook Lee
11/05/14	Grand Rounds: Ebola Virus Disease Education
11/07/14	Journal Club: Sleep Disturbances as the Hallmark of PTSD: Where Are We Now? - Julie Haggerty
11/07/14	VA/Defense and Veterans Brain Injury Center TBI Clinical Grand Rounds: It's Complicated – Traumatic Brain Injury and Sexuality -
11/07/14	Therapeutic and Self-Care Applications of Mindfulness Practices and Other Meditation Approaches - Dr. John Jones
11/13/14	Technology Interventions for Traumatic Brain Injury - Dr. David C.
11/14/14	Training Staff Meeting – Dr. Tressa Crook
11/14/14	Difficult Case Review - Sari Aronson, M.D. - Cancelled
11/14/14	Post-Deployment Integrated Care Initiative (PDICI) Community of Practice (COP): Airborne Hazards (Burn Pit) Registry
11/14/14	Addressing Psychological Concerns at the End of Life - Dr. Suzanne Harris
11/18/14	TIA/Stroke and Rehabilitation - Dr. Richard Bowles
11/19/14	PTSD Monthly Lecture : Applications of Motivational Interviewing in Veterans with PTSD - Dr. Michelle Drapkin
11/19/14	Ombudsperson Meeting - Interns and Dr. Stan Hogsett
11/20/14	DCoE Monthly Webinar: Integrating Technology into DoD Efforts to Promote Psychological Health - Dr. Don Workman
11/20/14	Celebrate Report Out - Task Force Leadership
11/20/14	Special Town Hall Meeting
11/21/14	Intern-Training Director Monthly Lunch Meeting - Interns and Dr. Tressa Crook
11/21/14	White Privilege and Other Sources of Privilege - Dr. Charity Tabol
11/25/14	Dementia - Dr. Julie Fitzgerald Smith
11/28/14	Mental Health Service Meeting - Dr. Michael Clayton
12/02/14	Performance Based Interviewing - Dr. Stephanie Holt
12/02/14	Anxiety Disorders and Cognitive Function - Dr. Jeremy Bottoms
12/05/14	Training Staff Meeting – Dr. Tressa Crook
12/05/14	Emotional Intelligence for Leaders

Monthly	Intern-Training Director Lunch Meeting - TBD each Rotation
12/09/14	Medications and Cognitive Functioning - Stephanie Johnson, M.S., Psychology Intern
12/12/14	Post-Deployment Integrated Care Initiative (PDICI) Community of Practice (COP): Honoring Veterans and their Families: Daniel
12/12/14	Difficult Case Review - Sari Aronson, M.D.
12/12/14	Resolving Extramarital Triangles: Healing After an Affair - Drs. Judy Juhala and Joanne King
12/16/14	Seizure Disorders - Dr. Julie Fitzgerald Smith
12/17/14	DCoE Monthly Webinar: Evidence Base for Using Technology Solutions in Behavioral Health Care - Dr. Nancy A. Skopp
12/17/14	Ombudsperson Meeting - Interns and Dr. Stan Hogsett
12/19/14	Intern-Training Director Monthly Lunch Meeting - Interns and Dr. Tressa Crook
12/19/14	The Mental Status Exam for Psychology Interns - Dr. Julie Fitzgerald Smith
12/30/14	The Challenges of Comorbid TBI and PTSD - Dr. Peter Keenan
1/8/15	DCoE Monthly Webinar: The Role of Sleep, Activity, and Nutrition in the Treatment and Recovery of Traumatic Brain Injury (TBI) - Dr.
1/9/15	Post-Deployment Integrated Care Initiative (PDICI) Community of Practice (COP): Putting the OSI Toolkit to work for Veterans with
1/14/15	Grand Rounds: Auriculotherapy: Utilizing Ear Acupuncture for Pain Control - Dr. Donald Owens
1/8/15	DCoE Monthly Webinar: Application of Behavioral Health Technology Tools in the Clinical Care of Mild Traumatic Brain Injury - Dr. David Cooper
1/09/15	Difficult Case Review - Sari Aronson, M.D. - Cancelled
1/16/15	Training Staff Meeting – Dr. Tressa Crook
1/21/15	Ombudsperson Meeting - Interns and Dr. Stan Hogsett
1/23/15	Mental Health Service Meeting - Dr. Michael Clayton
2/06/15	Brief Treatment of Anxiety Disorders - Dr. Edward Brown
2/09/15	Supervision Committee: Integrative Developmental Model - Pamella Howard, M.S., Psychology Intern
2/13/15	Difficult Case Review - Sari Aronson, M.D.
2/13/15	Testimony and Strategies to Survive Testimony Without Loss of Life, Limb, Liberty, or Excessive Dignity - Dr. James Mason
2/18/15	Ombudsperson Meeting - Interns and Dr. Stan Hogsett
2/20/15	Training Staff Meeting – Dr. Tressa Crook
2/20/15	Intern-Training Director Monthly Lunch Meeting - Interns and Dr. Tressa Crook

Monthly	Intern-Training Director Lunch Meeting - TBD each Rotation
2/20/15	Competence to Consent to Treatment - Dr. David Williams
2/27/15	One Therapy that Works for ALL Emotional Disorders: the Unified Protocol Group - Dr. David Weidner
3/03/15	Diversity Committee: American Indian Rituals: Promoting Healing from PTSD - Pamela Howard, M.S., Psychology Intern
3/06/15	Therapist Self Care: Developing Strategies that Enhance Professional and Personal Performance and Well-Being - Dr. Suzanne Harris
3/09/15	Supervision Committee: Falender's Competency Based Supervision Model - Katie Keil, M.A., Psychology Intern
3/13/15	Difficult Case Review: Medications for Agitation and Aggressive States (Isaki Afolabi, M.D.) - Sari Aronson, M.D.
3/13/15	Acceptance and Commitment Therapy, ACT I: An Introduction - Dr. Edward Brown
3/18/15	Ombudsperson Meeting - Interns and Dr. Stan Hogsett
3/20/15	Training Staff Meeting – Dr. Tressa Crook
3/20/15	Performance Enhancement with Athletes - Dr. Michael Urban
3/24/15	Rehabilitation Neuropsychology: Current Conceptualization of Evaluations for the Blind - Dr. Jon T. Gallagher
3/27/15	Mental Health Service Meeting - Dr. Michael Clayton
3/31/15	Motivational Interviewing - Dr. Stephanie Holt
4/07/15	Diversity Committee: Asian American Veterans - - Katie Keil, M.A., Psychology Intern
4/10/15	Difficult Case Review: Management of Bipolar Disorder (Isaki Afolabi, M.D.) - Sari Aronson, M.D.
4/10/15	Zeitgeist, Cultural / Historical Effects Upon a Generation and its Relevance to Understanding the Veteran - Dr.
4/13/15	Supervision Committee: The Discrimination Model of Supervision - Stephanie Johnson, M.S., Psychology Intern
4/15/15	Ombudsperson Meeting - Interns and Dr. Stan Hogsett
4/17/15	Training Staff Meeting – Dr. Tressa Crook
4/24/15	Psychology Staff Meeting - Dr. Steven J. O'Connell
4/24/15	The Placebo Effect - John Park, M.A., Psychology Intern
5/01/15	Pain Management: Assessment and Treatment Planning - Dr. Suzanne Harris
5/08/15	Difficult Case Review - Sari Aronson, M.D.
5/08/15	Ethical Decision-Making Principles and Tips for Avoiding Malpractice - Dr. Judith Juhala

5/11/15	Supervision Committee: Psychodynamic and Psychoanalytic Supervision - John Park, M.A., Psychology Intern
5/12/15	Diversity Committee: Cultural Issues in the Clinical Treatment of Latinos/ Latino Americans - John Park, M.A., Psychology Intern
5/15/15	Training Staff Meeting – Dr. Tressa Crook
5/15/15	Interpersonal Violence in Military Populations - Pamella Howard, M.S., Psychology Intern
5/20/15	Ombudsperson Meeting - Interns and Dr. Stan Hogsett
5/22/15	Mental Health Service Meeting - Dr. Michael Clayton
5/22/15	Sexuality & Aging: Fact v. Fiction - Dr. Patricia Smithmyer
5/29/15	Intern-TD Monthly Lunch Meeting - Interns and Dr. Tressa Crook
5/29/15	Integrative Behavioral Couples Therapy - Katie Keil, M.A., Psychology Intern
6/02/15	Diversity Committee: Cultural Diversity in Psychological Practice - Considerations for the African American Culture - Stephanie Johnson, M.S., Psychology Intern
6/05/15	Behavior Management and Dementia - Dr. Bridget Tribout
6/12/15	Difficult Case Review - Sari Aronson, M.D. Cancelled
6/12/15	Multiple Sclerosis - Stephanie Johnson, M.S., Psychology Intern
6/17/15	Ombudsperson Meeting - Interns and Dr. Stan Hogsett
6/19/15	Training Staff Meeting – Dr. Tressa Crook
6/19/15	Intern-TD Monthly Lunch Meeting - Interns and Dr. Tressa Crook
6/19/15	Recognizing and Healing Compassion Fatigue -Dr. Judith Juhala
6/26/15	Psychology Staff Meeting - Dr. Steven J. O'Connell
6/26/15	Moral Injury - Dr. Charity Tabol
6/30/15	Coping with Disabilities - Dr. Stephanie Holt
7/10/15	Difficult Case Review - Sari Aronson, M.D.
7/10/15	Gender as Culture - Dr. Michele Boyer
7/15/15	Ombudsperson Meeting - Interns and Dr. Shannon Sisco
7/17/15	Training Staff Meeting – Dr. Tressa Crook
7/17/15	Licensure Preparation - Dr. Shannon Sisco and Dr. Patricia Smithmyer

Requirements for Completion

It is expected that throughout the internship and upon completion of the program all interns will maintain good standing by demonstrating competence in the following sixteen general domains:

1. Professionalism
2. Ethical Legal Standards and Policy
3. Reflective Practice/Self-Assessment/Self-Care
4. Relationships
5. Scientific Knowledge and Methods
6. Research/Evaluation
7. Evidence-Based Practice
8. Assessment/Diagnosis
9. Intervention
10. Consultation
11. Teaching
12. Supervision
13. Interdisciplinary Systems
14. Management-Administration
15. Advocacy

Facility and Training Resources

Interns are provided with office space and secure networked computers necessary for patient care and administrative responsibilities. Each rotation has a varied level of clinical support and the Training Direction has direct program support. The most current psychological testing material is also available through the computerized record and various clinics. The VAIHCS Library provides medical center employees and trainees with a variety of general, patient education and medical resources. In addition to our traditional library with printed resources, desktop access to electronic resources is available 24-hours a day, via the VHA National Desktop Library. Services provided by the Library staff include reference/computer searches, instruction on electronic databases and other reference materials, photocopying and interlibrary loans for material not accessible. Additionally, the Library recently purchased the Examination for Professional Practice in Psychology (EPPP) Study Materials.

Administrative Policies and Procedures

The VA Illiana Healthcare System's policy on Authorized Leave is consistent with the national standard. You are welcome to discuss this with the Director of Training.

Due Process: All trainees are afforded the right to due process in matters of problematic behavior and grievances. An 8-page due process document is distributed to every intern during orientation and reviewed with them during orientation. A copy of our due process policy is available on request.

Privacy policy: We collect no personal information from you when you visit our web site.

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 an intern's performance and such information is necessary to address these difficulties.

Training Staff

DR. MARK L. BLODGETT (Inpatient Psychologist)

Florida Institute of Technology, Psy.D., Clinical, 1986

Clinical Interests: Inpatient Psychotherapy, Cognitive and Behavioral Interventions, Stress Management, Detraumatization Techniques, Crisis Intervention, PTSD, Substance Abuse, Psychosis; Compensation Issues

Research Interests: Negative Effects of Positive Reinforcement, Learned Helplessness, Psychopharmacology

Current Population: Inpatient Psychology

License/Certification: Illinois

Academic Affiliation: University of Illinois School of Medicine, Adjunct Clinical Instructor

DR. RICHARD L. BOWLES (Neuropsychologist)

Graduate Program: Indiana State University, Psy.D., Clinical, 1987

Internship: Fairfield Hills Hospital, Newtown, CT

Postdoctoral Fellowship: Henry Ford Medical Center, Detroit, MI

Clinical Interests: Neuropsychological evaluation of and rehabilitation planning for individuals who have sustained brain injuries, strokes, brain tumors, etc.; evaluation of dementia patients; assessment of issues related to neurotoxicity; and assessment of capacity for performing basic and instrumental activities of daily living

Experience: Psychologist in the community mental health setting (IN, IL); Assistant Professor (Clinical), Department of Psychiatry and Behavioral

Neuroscience, Wayne State University; Neuropsychologist, Immanuel Rehabilitation Center; Neuropsychologist, VA Illiana Health Care System

Research Interests: Acquired brain injury rehabilitation, ecological validity of psychological and neuropsychological tests, neuropsychological aspects of neurotoxicity and neuropsychological presentation of mental illness

Current Populations: Ambulatory and hospitalized Veterans who have acquired brain damage, aging related problems, chronic medical problems or chronic psychiatric difficulties that compromise day-to-day, occupational or educational functioning

License: Nebraska, ABN

Member: National Academy of Neuropsychology
American College of Professional Neuropsychology

DR. SUSAN BRANDT (Home Based Primary Care Psychologist)

Kent State University, Ph.D., Clinical, 1980.

Clinical Interests: Psychodiagnostics, Brief Psychotherapeutic Interventions, EMDR

Research Interests: Theory and Application of Objective Personality Assessment, Psychotherapy Outcome

Current Population: Primary Care Psychiatry with emphasis on combat-exposed veterans and SMI

License/Certification: Illinois

DR. EDWARD O. BROWN (Behavioral Health Interdisciplinary Program Psychologist)

University of Maryland, Ph.D., Clinical-Community Psychology, 1981

Clinical Interests: Evidence Based Psychotherapy Practices & their dissemination & adaptation in the VA; Narrative Therapy; Supervision

Research Interests: Ambulatory monitoring of psychosocial and physiological variables “in the wild” so as to establish base-rates across populations of persons diagnosed with anxiety and/or depressive disorders; Perceived climates of organizations as a function of role “inhabitation” and performance

Scholarly Interests: Theoretical and philosophical psychology as applied to psychotherapy

Current Population: Outpatient Veterans

License: Washington State

DR. MICHAEL COURTER (Outpatient PTSD Psychologist)

Northwestern University, Ph.D., Counseling, 1999

Veteran, United States Air Force, 75th Medical Group, Hill AFB 2002-2005

Clinical Interests: Treating complex PTSD

Research Interests: Risk and resiliency factors in the development/avoidance of PTSD

Current Population: Outpatient PTSD. Population primarily includes Vietnam, Gulf War, and OIF/OEF era Veterans

License/Certification: Illinois

DR. TRESSA H. CROOK (Training Director / Outpatient Psychologist)

Florida Institute of Technology, Psy.D., Clinical, 1985

Clinical Interests: Training and Supervision; Sexual Abuse and Combat-related PTSD; Child, Adolescent and Family Therapy; Couples Therapy; Social Reinforcement of Unconscious Processes; Substance Abuse Treatment; Guided Imagery

Research Interests: Negative Effects of Positive Reinforcement, Posttraumatic Stress Disorder, Eye Movement Desensitization and Reprocessing

Current Population: Outpatient Adults with Acute and Chronic Psychiatric Problems and Training Director for Psychology Training Program

License/Certification: Illinois

Academic Affiliation: University of Illinois, Department of Educational Psychology, Adjunct Clinical Associate Professor; Purdue University, Adjunct Professor of Psychological Sciences

DR. JEFFREY B. DEBORD (Substance Abuse Rehabilitation Program Coordinator)

University of Kansas, Ph.D., Counseling, 1991

Clinical Interests: Cognitive-Behavioral Therapy, Brief Therapy

Research Interests: Efficacy of Substance Abuse Treatment

Current Population: Substance Abuse

License/Certification: Illinois

DR. STEPHANIE ERICKSEN (OEF/OIF/OND Psychologist / VISN 11 CPT Trainer and Consultant)

University of North Texas, Ph.D., Clinical Psychology, 2010

Clinical Interests: Treating trauma, evidenced based therapies, assessment

Research Interests: Re-victimization in childhood trauma survivors, moral injury, post traumatic growth

Current Population: Outpatient PTSD, with an emphasis on combat-exposed Veterans and survivors of sexual trauma. Population includes: primarily OEF/OIF/OND Veterans

License/Certification: Illinois

DR. JAMES H. FALK (Inpatient Psychologist)

Purdue University, Ph.D., Clinical, 1980

Clinical Interests: Cognitive-Behavioral Therapy, Paradoxical Techniques in Psychotherapy, PTSD

Research Interests: Personality Disorders, Forensics

Current Population: Psychiatric Patients with a Full Range of Disorders

License/Certification: Illinois

DR. JULIE FITZGERALD SMITH (Neuropsychologist)

University of North Dakota, Ph.D., Clinical, 2003

Clinical Interests: Neuropsychological Assessment, Diagnosis and Treatment Planning, Geriatrics, Dementia, Movement Disorders, Epilepsy, TBI

Research Interests: Dementia, Multiple Sclerosis, Movement Disorders (particularly Parkinson's Disease), OEF/OIF TBI effects, and Factors affecting Neuropsychological performance

Current Population: Ambulatory care and hospitalized Veterans whose adjustment is compromised by neurological disorders, brain trauma, aging, chronic medical problems and chronic psychiatric difficulties

License/Certification: Michigan, ABPP-CN

DR. KYLE FOSKETT (PSYCHOLOGY STAFF)

Illinois School of Professional Psychology, Psy.D., 2014

Clinical Interests: PTSD, OCD, Addiction

Research Interests: Common Factor Theory

Current Population: Adult Outpatient

License/Certification: Illinois In Progress

DR. STEPHANIE L. HOLT (Health Behavior Coordinator)

Ball State University, Ph.D., Counseling Psychology, 2007

Clinical Interests: Rehabilitation Psychology, Health Psychology, Solution-Focused Therapy, Assessment and Evidence-based treatments (PE, CPT, CBT for depression and CBT for insomnia), Motivational Interviewing, Clinical Coaching

Research Interests: Coping with illness, Promoting advocacy within individuals with disabilities, Effects of disability on family members, Outcome measures of psychotherapy

Current Population: Outpatient Veterans

License/Certification: Illinois license and Certified Rehabilitation Counselor - Commission on Rehabilitation Counselor Certification (CRCC)

DR. JUDITH L. JUHALA (Outpatient PTSD Psychologist)

University of North Dakota: Ph.D., Counseling and Guidance, 1980

Hamline University of Law School of Law: J.D., 1985

Indiana State University: Ph.D., Counseling Psychology, 1994

Clinical Interests: Treatment of PTSD with evidence-based therapies (PE, CPT, EMDR), Marriage and Family Therapy, Couples counseling, Cognitive Behavioral Therapy for Insomnia

Research Interests: Mediation, Ethics in supervisory relationships, Sex-role stereotyping and career development

Current Population: Veterans, with military-related post traumatic stress disorder, primarily OEF/OIF/OND veterans

Licenses: Indiana

DR. KATIE KEIL (PTSD Psychology Staff; Military Sexual Trauma Coordinator)

University of Kansas, Ph.D., Clinical, 2015

Clinical Interests: Providing mental health services to survivors of Military Sexual Trauma; VA and community outreach related to MST; assessment and treatment of PTSD related to military service; group and individual outpatient therapy; couples therapy; use of evidence-based treatments (i.e., CPT, PE, DBT, and ACT).

Research Interests: Efficacy of exposure-based treatments for PTSD; lifestyle-based treatments for depressive disorders; the impact of PTSD and MST on intimate relationships.

Current Population: Outpatient MST and PTSD, with an emphasis on survivors of sexual and combat trauma. Population includes both female and male veterans of Vietnam, Persian Gulf, and OEF/OIF/OND eras.

License/Certification: In progress

DR. JOANNE KING (PTSD/SUD Psychologist)

Indiana State University, Ph.D., Counseling, 1993

Clinical interests: Assessment and treatment of co-occurring PTSD and substance use disorders in trauma survivors, OEF/OIF Veterans, Relationship therapy, Military psychology, Cognitive-Behavioral Therapy for Insomnia, Intimacy skills training

Research Interests: The impact of early intervention and non-traditional treatment modalities in decreasing symptoms of PTSD and substance use disorders after combat exposure

Current Population: Outpatient PTSD, with an emphasis on combat-exposed Veterans and survivors of sexual trauma who have concurrent substance use disorders. Population includes: OEF/OIF, Persian Gulf War, and Vietnam Veterans

License/Certification: Indiana

DR. HOWARD LEVINE (Mattoon Community Based Outpatient Clinic Psychologist)

Southern Illinois University – Carbondale, Ph.D., Clinical Psychology, 1987

Clinical Interests: PTSD, Major Depression, Sexual dysfunction and or disorders, Substance Abuse, Marital conflict

Research Interests: PTSD, Sexual Offending

Current Populations: Community based outpatient Veterans

Licensure: Illinois

DR. SHERYL LEYTHAM (Pain Psychologist)

St. Louis University, Ph.D., Clinical Psychology, 1983

Clinical Interests: Health Psychology, Chronic Pain, Trauma and Vulnerability to Illness, Post Traumatic Stress Disorder, Intersection of Mood and Healing

Current Populations: Ambulatory care and hospitalized Veterans with chronic pain

License/Certification: Iowa license as psychologist; Iowa license as health service provider; National Register

DR. JAMES L. MASON (Home Based Primary Care Psychologist)

Indiana State University, Ph.D., Counseling Psychology, 1988

Clinical Interests: Cognitive behavior therapy / dialectical behavior therapy

Research Interests: Anxiety management, forensic psychology (civil and criminal)

Current Population: Home Based Primary Care

License/Certification: Illinois

DR. ELIZABETH MERRILL (Decatur Community Based Outpatient Clinic Psychologist)

The Wright Institute, Psy.D., Clinical Psychology, 2007

Clinical Interests: Group Psychotherapy, Psychoanalysis, Animal Assisted Psychotherapy, Supervision, Multicultural Psychology, Couples Therapy

Research Interests: Animal Assisted Psychotherapy, Treatment of PTSD

Current Population: Outpatients at the Decatur CBOC, with emphasis on combat trauma, post deployment readjustment and reintegration, chronic post-traumatic stress disorder, sexual trauma, grief/loss, interpersonal difficulties, depression/mood disorders

License/Certification: New York

DR. STEVEN J. O'CONNELL (Health Psychologist / Supervisory Psychologist)

University of Southern Mississippi, Ph.D., Counseling, 1983

Clinical Interests: Health Psychology, Cognitive-Behavioral Therapy, Biofeedback

Research Interests: Health and Social Supports, Pain Management

Current Population: Acute/Chronic Medical Inpatient and Outpatient Veterans

License/Certification: Illinois

Academic Affiliations: University of Illinois College of Medicine, Clinical Instructor

DR. STEPHANIE RODRIGUES (Psychosocial Residential Rehabilitation Treatment Program Psychologist)

Hofstra University, Ph.D., Combined Clinical/School Psychology, 2010

Clinical Interests: Stigma Reduction, Recovery-Oriented Care, Co-Occurring Mental Health and Substance Abuse Disorders, Homelessness, Depression

Research Interests: Treatment of severe mental illness and co-occurring mental health and substance use disorders among general, veteran and homeless populations; Role of stigma in the treatment engagement stigmatized populations; Implementation and evaluation of treatment programs that target stigma reduction in order to promote recovery

Current Population: Outpatients at the Decatur CBOC, with emphasis on post-deployment readjustment and reintegration, trauma, grief/loss, interpersonal difficulties, and depression/mood disorders

License/Certification: Massachusetts & Rhode Island

DR. SHANNON SISCO (Primary Care-Mental Health Integration Psychologist)

University of Florida, Ph.D., Clinical and Health Psychology, 2012

Clinical Interests: Primary Care Psychology, Brief Evidence-Based Interventions, Geriatrics, Neuropsychology, Long Term Care Psychology

Research Interests: Cognitive aging, neighborhood effects, social disparities in aging, lifespan development

Current Population: Ambulatory care veterans presenting to outpatient clinics with a broad range of mental health issues, including adjustment disorder, depression, anxiety, substance use, PTSD, cognitive impairment, and suicidal/homicidal ideation.

License/Certification: Illinois

DR. PATRICIA J. SMITHMYER (Geropsychology Staff)

Xavier University, Psy.D., Clinical Psychology, 2014

Clinical Interests: Geriatric Psychology, Dementia Care, Behavior Management Planning, Neuropsychology, Severe Mental Illness

Research Interests: Dementia, Caregiver burnout, Stigma with mental illness, Assessment and evidence based treatments (Dialectical Behavior Therapy, Behavior Management, Cognitive Enhancement Therapy)

Current Population: Inpatient Geriatric and Extended Care veterans within the Community Living Center (CLC) and Green Houses; Outpatient Geriatric Clinic

License/Certification: In Progress

DR. THERESE A. STASIK (Local Evidenced Based Therapy Coordinator/ C&P Evaluator/CPT Regional Trainer and Consultant/)

Illinois School of Professional Psychology (NKA Argosy University): 1994.
[Also DePaul University and Purdue University]

Clinical interests: Trauma, PTSD, MST, Recovery Oriented and Evidenced Based Therapy, Prevention

Research interests: Systems influence on the development and maintenance of symptoms. Recovery from PTSD with inherent improvement variables, such as reduction in substance use as a direct effect of successfully completing an evidenced based protocol, or, similarly iatrogenic behavioral activation.

Current Population: Veterans applying for Compensation and Pension.

License: Illinois

DR. CHARITY TABOL (Behavioral Health Interdisciplinary Program Psychologist)

Northeastern University, Ph.D., Counseling Psychology, 2009

Clinical Interests: Integrative treatment of PTSD; Prevention of chronic PTSD; Exposure therapy;
Feminist therapy and examination of privileged identities; Moral injury;
Confronting emotional avoidance to facilitate healing.

Research Interests: Enhancing social support as a buffer against chronic PTSD;
Quality of life; Media presentations of PTSD

Current Population: Outpatients in the Mental Health Clinic

License/Certification: Massachusetts, Indiana

DR. BRIDGET TRIBOUT (Geropsychologist/Central Office STAR-VA Consultant)

Saint Louis University, Ph.D., Clinical Psychology, 2007

Clinical Interests: Geropsychology, Palliative Care, Dementia Care/behavior management

Current Population: Geriatric and extended care patients & Palliative Care

License/Certification: Arkansas

DR. DAVID WEIDNER (Peoria Community Based Outpatient Clinic Psychologist)

Wheaton College, Psy.D., Clinical Psychology, 2005

Clinical Interests: Evidenced-Based Psychotherapies (Prolonged Exposure for PTSD, Unified Protocol for Transdiagnostic Treatment of Emotional Disorders, Stanford University's pain management protocol)

Research Interests: Bringing Evidenced Based Groups to the VA: Implementing prolonged exposure therapy and the unified protocol in a group format (presented at the 2015 VA Psychology Leadership Conference)

Current Population: Outpatients with PTSD and/or other emotional disorders at the Peoria CBOC

License/Certification: Illinois

PSYCHOLOGY CONSULTANTS

DR. MICHELE BOYER

Professor and Chairperson Emerita, Department of Communication Disorders and Counseling, School, and Educational Psychology, Indiana State University, Terre Haute, IN

Interests & Expertise: Multi-Cultural Issues in Counseling, Counseling Training & Supervision, Ethics and Regulation in Psychology Practice, Religion and Spirituality in Psychology

Research Interests: Counselor Development, Professional Development, Supervisor Training, Feminist Therapy, Crisis Intervention

DR. AMBER CADICK

Indiana State University, Counseling, 2006

Clinical interests: Health Promotion Disease Prevention, Motivational Interviewing, Chronic Disease Management, Patient Centered Care, Weight-loss/Weight Management, Lean Systems

Research Interests: The impact of chronic illness/injury on family functioning, Health Promotion Disease Prevention

DR. JAN EGMEN

Indiana State University, Counseling Psychology, 1983

Founder and EVP, Digonex Technologies, Indianapolis, IN

Interests & Expertise: Individual Counseling, Professional Issues, Medical Psychology, Neuropsychology, Psychology and the Internet Issues, Behavioral Principles Applied to Business

License/Certification: Indiana, HSPP, ABPP

DR. HOWARD GARTLAND

Staff Psychologist, Mercy Health System, Janesville, Wisconsin

Clinical Interests: Pain Assessment and Management, Emotional Aspects of Acute and Chronic Illness, Mind-Body Expressions of Emotions, Hypnosis, Systems Therapy

DR. SUZANNE HARRIS

Private Practice, Urbana, IL

Clinical Interests and Expertise: Individual and Couple Therapy; Clinical Aspects of Health Psychology: Adjustment to Chronic and Terminal Illness, Rehabilitation, Pain and Stress Management, Hospice and Bereavement; Geropsychology; PTSD and Trauma; Hypnosis; Alternative Therapies

DR. ANITA HUND

Clinical Assistant Professor, Division of Counseling Psychology, University of Illinois at Urbana-Champaign
Private Practice, Champaign, IL

Clinical Interests and Expertise: Individual and Couples Therapy; Trauma; Sexual Orientation and Gender Identity; Identity Development; Long-Term and Time-Limited Psychodynamic Therapy; Group Therapy; and Outreach/Prevention.

DR. JOHN JONES

Private Practice, Champaign, IL

Clinical Interests and Expertise: Individual and Couple Therapy; Long-Term and Time-Limited Psychodynamic Therapy; Analytical (Jungian) Psychotherapy; Integration of Eastern and Western Approaches to Well-Being; Therapeutic Applications of Mindfulness Practices and Other Meditation Approaches; Men's Issues; AOD Concerns and the Treatment of Addictive Behaviors; Grief and Loss; Trauma; EMDR

DR. HEATHER L. SERVATY-SEIB

Professor, Purdue University, Counseling Psychology

Interests and Expertise: Social Support and Grief, Adolescent and Young Adult Experience of Grief, and Using a Loss/Gain Model for Assessing the Impact of Life Events

DR. MICHAEL URBAN

Murphy, Urban & Associates Psychological Services, Terre Haute, IN, Clinical Psychology and Consultant to Union Hospital Family Practice Clinic with the Medical Residents

Interests & Expertise: Medical Psychology, Pain Management, Group Psychotherapy and Managed Care in Private Practice Sector, Psychology and Primary Care

DR. DAVID P. WILLIAMS

University of Georgia, Clinical Social Work, 1975; Indiana State University, Counseling Psychology, 1984

Clinical Interests: The Psychology of Long Term Care. Psychology and Information Science. Legal Competence

Current Population: Retired from VA Illiana in 2010

License/Certification: Illinois

Trainees

Class of 2015-2016

Kathleen Bain

University of North Texas, Clinical Ph.D.

April Reupke

University of Memphis, Counseling Ph.D.

Stephanie Schaefer
Psy.D.

Wisconsin School of Prof Psych, Clinical

Bethanie Stephens

Florida Institute of Technology, Clinical Psy.D.

Class of 2014-2015

Pamella Howard

Pacific University, Clinical Psy.D.

Stephanie Johnson

University of North Texas, Clinical Ph.D.

Katie Keil

University of Kansas, Clinical Ph.D.

John Park

Loma Linda University, Clinical, Ph.D.

Class of 2013-2014

Jennifer Bailey

Illinois Institute of Technology, Clinical Ph.D.

Peter Kennan

University of Saint Thomas, Counseling

Psy.D.

Dominic Letizia

University of Indianapolis, Clinical Psy.D

Patricia J. Smithmyer

Xavier University, Clinical Psy.D

Class of 2012-2013

Scott Emsley

Spalding University, Louisville, Clinical Psy.D

Kara Shaneyfelt

University of Indianapolis, Clinical Psy.D.

Carolyn Sherer

University of Indianapolis, Clinical Psy.D.

Kristi White

University of South Florida, Clinical Ph.D.

Class of 2011-2012

Lindsay Anderson

University of Colorado, Clinical Ph.D.

Lauren James

Xavier University, Clinical Psy.D.

Virginia (Ginny) Kleman

Pacific University, Clinical Psy.D.

Sara Long

University of Indianapolis, Clinical Psy.D.

Class of 2010-2011

Sarah Jenkins
Chaz Mailey
Stephen Roeckeman

Ball State University, Clinical Ph.D.
Indiana State University, Clinical Ph.D.
Wheaton College, Counseling Ph.D.

Class of 2009-2010

Stephanie Ericksen
Daniel Fass
Noëlle Liwski
Sarah Sass

University of North Texas, Clinical Ph.D.
Indiana State University, Counseling Ph.D.
Purdue University, Counseling Ph.D.
University of Illinois, Clinical Ph.D.

Local Information

The City of Danville is located in a rich farming area of East Central Illinois, one mile west of the Indiana State line, 132 miles south of Chicago, 90 miles northwest of Indianapolis, and 198 miles northeast of St. Louis. The main campus of the University of Illinois is 30 miles west in Urbana-Champaign; the main campus of Purdue University is 56 miles northeast in West Lafayette; and Indiana State University is 57 miles south in Terre Haute. An excellent network of highways facilitates transportation. The city is on Interstate 74, US 136 and 150, and State Route 1.

Danville is a diversified, industrial city with a population of approximately 33,027, the major retail center in a county with a population of about 81,625. The racial makeup of the city is approximately 70.19% White, 24.37% African American, 4.57% Hispanic or Latino, 1.2% Asian, 0.21% Native American, 0.03% Pacific Islander, 2.09% other races, and 1.92% from two or more races.

Families in Danville can choose from a variety of schools for their children ranging from public schools to parochial schools of Baptist, Catholic and Lutheran faiths. The Danville Area Community College offers about 1500 courses to approximately 3225 students on its 75-acre campus immediately adjacent to the Danville VAMC.

Danville is proud of its community symphony, theater, light opera guild, choral societies, art league, and baseball, basketball, and hockey teams. A civic center hosts performances by performers with national reputations. Other cultural opportunities of the highest caliber abound within easy driving distance of Danville: Indianapolis, Chicago, and St. Louis. All have major symphonies, art museums, theaters, opera and dance companies, as well as professional football, basketball and baseball teams. The Krannert Center for Performing Arts at the University of Illinois in Urbana and the Assembly Hall at the University of Illinois in Champaign provide the settings for performances by a variety of companies of international caliber. Big Ten sports of all kinds are available at the University of Illinois.

The city of Danville maintains 8 parks and recreation areas. Three county parks and a state recreation area provide campgrounds, picnic sites, fishponds, hiking trails, scenic views and other attractions for the entire east-central Illinois area.

As there is an ample supply of rental units, including 5,046 apartment units in 3,545 structures, interns and trainees from distant points have had little difficulty finding housing. Rents vary a great deal but the last available typical rental rates were \$400-430 for studio units, \$460-545 for one-bedroom units and \$570-760 for two bedroom units. Rates are usually cheaper for comparable units in surrounding areas. Students from the University of Illinois, Indiana State University and Purdue University are within commuting distance and usually form car pools to make the 35 to 40 minute trip from Urbana-Champaign or the 60 to 65 minute trip from West Lafayette or Terre Haute.

Updated: 10/2015

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