

Central Arkansas Veterans Healthcare System

United States Department of Veterans Affairs – Veterans Health Administration



Psychology Postdoctoral & Interprofessional Fellowship 2019 - 2020



Accreditation Status and Contact Information

The Psychology Postdoctoral and Interprofessional Fellowship (with major areas of training in Psychosocial Rehabilitation, Post-Traumatic Stress Disorders, and Neuropsychology) is fully accredited by the Commission on Accreditation of the American Psychological Association as a Postdoctoral Residency in Clinical Psychology. The next site visit for these programs is anticipated in 2020.

The Fellowship is currently in the process of transitioning the Neuropsychology track from a major training area of Clinical Psychology to a separate specialty practice area of Clinical Neuropsychology. Currently the program is not separately accredited, though the Fellowship is in the process of seeking this separate specialty accreditation from the American Psychological Association; and anticipates submission of self-study and initial application for accreditation during the 2018-2019 training cycle.

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 20002
Phone: (202) 336-5979 / E-mail: apaaccred@apa.org
Web: www.apa.org/ed/accreditation*

All other questions about the program should be directed to:

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Psychology Postdoctoral & Interprofessional Fellowship

Central Arkansas Veterans
Healthcare System

Introduction

Thank You for your interest in the Psychology Post-Doctoral and Interprofessional Fellowship program at the Central Arkansas Veterans Healthcare System. At CAVHS, we take great pride in the services and care we provide to our Veterans; and in the training programs we have put together to equip the next generation of clinicians in meeting the future challenges of mental health treatment and recovery. Fellows in our program are our junior colleagues. We not only invest heavily in each Fellow's training, we also respect that each is likely to be practicing independently as one of our peers in the very near future, and so we value the diverse and unique contributions each brings to our program as well. We have worked hard to create and maintain a culture that respects every individual, and that fosters every individual's personal and professional growth. This necessarily requires that those coming into our program are individuals with a solid foundation on which they can build, who regularly seek opportunities for growth, and who are willing to be personally and professionally challenged. If this type of program sounds like a good fit for you, we encourage you to read the enclosed materials and consider applying. We look forward to hearing from you!

Courtney P. Crutchfield, PhD
Director of Training

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Asst. Director of Training

Our Mission

To train psychologists and healthcare professionals who meet general advanced practice competencies in their field and can function effectively in a broad range of multidisciplinary settings

Overview

The CAVHS Psychology Postdoctoral and Interprofessional Fellowship focuses on supervised clinical training and features tracks with Major Areas of Training in Psychosocial Rehabilitation/Serious Mental Illness (PSR), Post-Traumatic Stress Disorder (PTSD), and Neuropsychology. All tracks strive to provide a strong training in evidence-based practices and to promote a recovery orientation to all services provided. The PTSD track recruits a single PTSD postdoctoral psychologist each year and provides clinical training and experience focusing on service to Veterans and their families where PTSD is the primary diagnosis. The Neuropsychology track, which is a two-year postdoctoral position, recruits 2 fellows on alternating years and provides clinical training in clinical neuropsychology. The PSR track recruits 4-6 Fellows per year from the following disciplines: psychology, social work, occupational therapy, and vocational rehabilitation counseling. Psychology Fellows are trained in advanced practice of Clinical Psychology, and PSR Fellows in other disciplines are provided with training that develops advanced practice in the fellow's specific discipline. Emphasis for the PSR track is on developing clinical skills utilizing a recovery-oriented service approach within a psychosocial rehabilitation framework. The Fellowship also participates, along with other psychology programs and supervisors, in providing clinical training to advanced research fellows (research Fellows generally spend 25% of their two-year Fellowship in supervised clinical experiences).

Mission of the Fellowship

The mission of the CAVHS Clinical Psychology Postdoctoral and Interprofessional Psychosocial Rehabilitation Fellowship is to train psychologists and healthcare professionals who meet general advanced practice competencies in their field and can function effectively as professional psychologists and healthcare professionals in a broad range of multidisciplinary settings. The CAVHS Fellowship focuses on clinical training and features tracks with Major Areas of Training in Psychosocial Rehabilitation and Recovery (PSR), Post-traumatic Stress Disorder (PTSD), and Neuropsychology.

The mission, vision and values of CAVHS's Mental Health Service

Mission: To provide a comprehensive range of exemplary mental health services to Veterans and their families in a timely manner, with emphasis on a continuum of care, multidisciplinary treatment, patient and stakeholder satisfaction, and commitment to the care and improvement of human life.

Vision: We will be a center of excellence for research and education, provide innovative and patient focused care, and be known as the provider and employer of choice in the Mental Health Community.

Values: We value trust, respect, commitment, compassion, and excellence in those with whom we work; we value honesty, integrity and fairness in the way we conduct our business; and we value stakeholder input and use it to improve services. We recognize and affirm the unique and intrinsic worth of each individual, whether patient or colleague and pledge to treat each one with respect and dignity."

Training Philosophy

Our philosophy of training reflects a basic belief that education and training for the fellowship is primarily experiential in nature and for the principle purpose of learning through service delivery under the supervision of staff providing similar services. The philosophy is consistent with the CAVHS mission ("Honor America's Veterans by providing exceptional health care that improves

their health and well-being.”). The philosophy of the program includes a commitment to a recovery-oriented, Veteran-focused approach to all services. *We strive to provide a supportive environment for fellows, and we seek applicants whose desirable qualities include strong clinical and scholarly training and experience, combined with strong interpersonal skills and sound character. We especially seek fellows who are flexible and adaptive team players and self-starters.*

Training Culture

Our training program strives to be one where all staff and Fellows consistently treat each other with courtesy and respect, engaging wherever possible in collaborative interactions. We seek to provide a supportive environment for learning for the fellow and training program such that Fellows and the training staff find it a rewarding experience. These training values and those of our parent facility guide our ongoing decisions. In addition, we always keep in mind that although training is an important mission of our program, the Veterans Healthcare Administration and our facility exist first and foremost to render assistance to Veterans. When in doubt, we do what is right and in the best interest of the Veteran, guided by the words of Omar Bradley (US General of the Army) “We are dealing with Veterans, not procedures; with their problems, not ours.”

Training Model and Goals

In line with our mission, our training program is committed to the practitioner-scholar model of training. The program emphasizes in all aspects of its training that the best practice must be solidly based in science. While we recognize the valid application of the “art” of psychotherapy and the practitioner’s clinical judgment in using various appropriate skills and intervention techniques, we believe that the important hands-on experiential aspects of Fellowship training are grounded in the scientific literature. Fellows are challenged to systematically measure their assessment and intervention practices against an established knowledge base. Where possible, we advocate following the model of evidence-based practice, which combines use of scientifically supported approaches with the Veteran’s preferences and culture, all of which are integrated by the clinician using sound ethical and clinical judgment in the context of collaborative decision-making involving the Veteran.

Fellows are expected to utilize current literature in planning and delivering services, and simultaneously are expected to participate in research or educational projects with direct clinical implications that can potentially serve to expand knowledge and quality of care. Fellowship supervisors emphasize the importance to Fellows of consulting the scientific literature when working with a new area such as specific population or interventions. In support of the Fellow’s development as a competent consumer of the scientific literature, training staff utilize individual supervision, training (which may be for all Fellows or specific to the track’s emphasis), reading assignments, as well as online availability of medical and psychological journals, textbooks and reference materials, accessible from each Fellow’s personal computer.

Primary Fellowship Objectives

1. The development and refinement of a broad range of professional skills necessary to function effectively as psychologists and healthcare professionals within an interdisciplinary context, the broader system of health-care, and the community.
2. The training of psychologists and healthcare professionals in the delivery of quality, recovery-oriented health care within both general and specific emphasis areas, with a particular appreciation of the special needs of the VA population and the nature of service in the public sector.

Program Structure

Our training program offers the opportunity to work in a professional and scholarly community to establish a more integrated professional identity, consistent with a multidisciplinary environment. Throughout all aspects of the program, an emphasis is placed on ethical and legal considerations, individual and cultural diversity, and professionalism. Considerable attention is paid to the professional development of the Fellow (where appropriate, depending on discipline and area of focus) as a clinician, consultant, clinical scholar, supervisor, educator, program innovator and evaluator, interdisciplinary team member and consumer advocate.

We offer a substantive training program that includes a variety of opportunities for supervised experience in both the delivery of direct clinical services (e.g. assessment, intervention, case management) as well as other professional services that are part of the expected skill set of a competent health professional (e.g. teaching, training, research, scholarly presentations, professional consultation, conducting supervision, outreach and advocacy, program development and evaluation, etc.). It is the fellowship's expectation that each fellow will have at least 25-50% of their time devoted to provision of clinical services; with remaining time devoted to support activities, other aspects of training, and professional development.

Psychology postdoctoral fellowship training at CAVHS is offered in Clinical Psychology via three tracks, with Major Areas of Training in PSR, PTSD, and Neuropsychology. The PSR track also invites applicants from a variety of mental health disciplines outside of psychology as well. Each Fellow will have opportunities to gain experience in a variety of areas. However, the specific structure and expectations for the training experiences will depend on the track designated by the Fellow, with primary training focusing on the major area of training for that track, along with some room for elective options based on the individual's interest, training needs, and program requirements.

Fellows will develop an individualized learning plan for the training year with the goal of meeting specific knowledge and practice competencies across various training sites, educational dissemination projects and clinical training projects of specific interest. The training year begins with orientation to the various VA and community settings where Veterans are served. Doing so will aid the development of individualized learning plans. Across the course of the year, Fellows also participate in didactic seminars, group supervision and regularly scheduled meetings with track Assistant Directors of Training (ADTs), the Director of Training (DT) and the Training Committee. Fellows will also have opportunities to attend additional training seminars and professional conferences, as well as engage in teaching and learning experiences. Supervision, mentoring and support resources are provided for all Fellows.



The strength of this fellowship lies in the diversity of experiences available, the priority placed on teaching and training, the strong interdisciplinary opportunities and the rich clinical environment. Those completing the fellowship will have a solid foundation of knowledge and experience on which to anchor pursuit of their career goals. By expanding the directions of professional interest and practice through advanced training and education, fellows should have the necessary tools to proceed competently and responsibly in a wide range of diagnostic, treatment, and rehabilitation settings.

Supervision & Mentoring

Supervision: Direct supervision of Fellows is provided by doctoral-level, licensed psychologists who are credentialed to practice within the VA system, who are members of the Medical Staff, who have made a commitment to Fellowship Training, and who are actively involved in providing direct clinical services. Other disciplines also provide training and supervision for several experiences, but all psychology Fellows will have their training overseen by a psychologist supervisor. Fellows in non-psychology disciplines have a primary supervisor credentialed in their discipline and where possible, receive much of their training from supervisors in their discipline. The amount of supervision provided for Fellows typically exceeds 4 hours a week, of which at least two hours are face-to-face individual supervision, along with two hours of group/other supervision per week.

Mentoring: At the start of the training year, the ADT will match each Fellow with a Mentor. This individual will be a professional (typically of the same professional discipline of the Fellow) with experience in areas of interest to the Fellow, and who does not serve in a direct supervisory / evaluative role over the Fellow (allowing more open discussion as the need arises). Fellows will meet with their mentors weekly, and these meetings will focus primarily on professional development and other matters as chosen by the Fellow and Mentor.

Training in Providing Supervision: Supervision training and experiences involving fellows, interns, and training staff are valued by the CAVHS psychology service and its associated training programs; and we seek to provide maximum opportunities for training in this area, including support by training faculty. Fellows may have the opportunity to provide vertical supervision to interns or practicum students who are rotating in a placement where a fellow is present. These vertical supervision experiences are not legal supervision, and do not substitute for primary supervision by staff member. Rather, we provide training in skills associated with supervision through a variety of didactic and experiential means.

Didactics, Seminars, & Other Professional Development

Fellows will participate in a number of seminars throughout the year to enhance their training experiences and professional development. These include, for example:

- Psychology Community Meetings (bi-monthly)
- Professional Development Seminars (bi-monthly)
- Fellowship Development Seminars (monthly)
- Multi-site Seminars conducted via Video Teleconferencing (monthly, PSR Track only)
- Fellowship Training Committee Meetings (monthly)
- Recovery Journal Club (bi-monthly)
- Cultural Awareness & Self-Exploration Seminars (bi-monthly)

Examples of Additional Opportunities Include (but are not limited to):

- Research Seminars
- UAMS Psychiatric Grand Rounds
- Internship Training Committee Meetings
- Internship Development Seminars
- VA-sponsored continuing education seminars (usually live teleconferences)

Bi-Directional Evaluation

Evaluation is a mutual process among Fellows, supervisors, and the training program as a whole. It serves important and necessary functions to ensure both optimal training as well as achievement of expected competencies.

It is expected that all supervisors will provide Fellows with timely and ongoing verbal feedback over the course of the training experience, and additional formal or written evaluations as appropriate. Fellows complete an initial, baseline assessment at the start of the Fellowship year on all competencies on which they are to be trained throughout the year. Behavioral objectives in specific areas of professional competency are then clearly defined by primary supervisors at the beginning of each training experience with input from the Fellow. At the conclusion of each training experience, the Fellow is evaluated on the degree to which the identified objectives were met, via a formal rating and narrative evaluation targeting training competency objectives, completed by the primary supervisor and incorporating feedback from any secondary supervisors. These evaluations are discussed with the Fellow and the Fellowship Training Committee; and are stored by the Director of Training in a designated and secure location.

Just as we care about Fellows receiving appropriate evaluation, it is equally important that Fellows evaluate their supervisors, training sites and the training program. Ongoing feedback from Fellows has regularly shaped the program's policies, procedures, and training opportunities. Fellows and staff are expected to exchange feedback routinely and informally as a part of the supervisory process, but we also include formal evaluations in this process to allow the Fellowship to evaluate its progress in providing a quality training experience that successfully trains fellows in identified competencies. Identified strengths and deficiencies of specific training experiences are closely examined in order to implement necessary program changes. We also want to be sure that our training staff is consistent with our program philosophy of treating Fellows with courtesy and respect and engaging wherever possible in collaborative interactions as part of the training program.

To better facilitate ongoing bi-directional communication between the Fellow and the training program, each Fellow will have a monthly individual meeting with the Assistant Training Director and/or Director of Training to discuss the Fellow's ongoing progress and experiences.

Employment & Benefits

Fellows are appointed to occupy temporary employment positions with the Department of Veterans Affairs for a period of one year. Once formally hired, Fellows are full-fledged, if temporary, employees, and are also trainees who require supervision and support consistent with VA policy on all trainees. Each fellow must complete 40 hours per week over a minimum of 365 days, totaling 2080 hours of training, to successfully complete Fellowship training. The standard tour of duty for Fellows will be M-F 8:00 AM – 4:30 PM. Adjusted tours-of-duty can also sometimes be considered on an individual basis at the Fellow's request, subject to the availability of adequate supervision, and depending on the extent to which an adjusted tour would better meet the training needs of the Fellow while still meeting clinical needs of the facility. The Fellowship places high value on work-life balance for our trainees and professional staff alike. Fellows will be strongly encouraged to leave work on-time each day at the conclusion of their tours-of-duty, and to not work more than the required 40 hours per week.

The recruitment process for the Fellowship is very much like that for any other setting, emphasizing academic and experiential qualifications. The annual stipends for VA Fellows (and all temporary training appointments) vary by year and professional discipline, and are set nationally by the Office of Academic Affiliations with pay distributed every two weeks. Additional employment benefits include 13 days paid vacation, up to 13 days of sick leave, 10 paid federal holidays, and the potential for additional authorized leave of absence (up to 40 hours per year, if approved) for selected conferences. Fellows will also be able to obtain Health, Dental, Vision, and Life Insurance, and will have access to other amenities such as an employee fitness center and professional libraries.



Leadership



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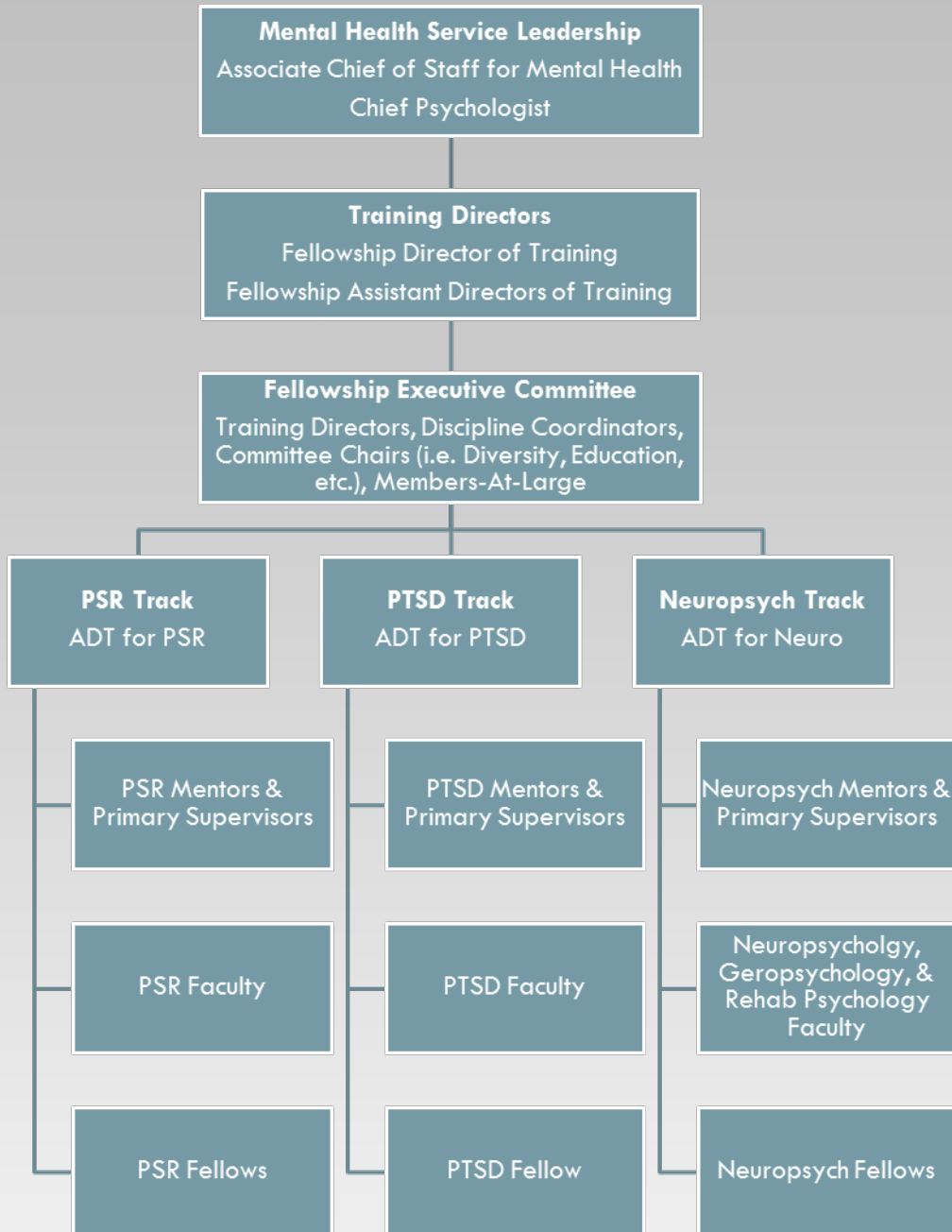
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Organizational Structure

The CAVHS Psychology Postdoctoral and Interprofessional Psychosocial Rehabilitation Fellowship is part of a strong training history within the CAVHS programs. Leadership and direction for the Fellowship and its tracks is provided by a Director of Training (DOT), Assistant Directors of Training (ADT), by primary supervisors within each track, and by the Fellowship Executive Committee (ExCom). In each case, the Fellowship DT (subject to or in consultation with the chief of psychology) and the Assistant Directors of Training (subject to or in consultation with the Training Director) are able to make additional decisions as needed for appropriate functioning of the training program.



Facilities



Located in beautiful central Arkansas, one of the country's best-kept secrets for a high quality of living, Central Arkansas Veterans Healthcare System (CAVHS) is a large and comprehensive VA medical complex within the Department of Veterans Affairs (VA). The medical center is located in a metropolitan area of over 725,000 people and draws from a primary service area of 275,000 veterans. CAVHS providers also serve active duty and National Guard personnel, as well as family members.

Accredited by both the Joint Commission of Accreditation of Healthcare Organizations (JACHO) and the Commission on Accreditation of Rehabilitation Facilities (CARF) during the most recent accreditation reviews, CAVHS is a Category 1A flagship healthcare provider and one of the largest and busiest VA medical centers in the country. Its two consolidated campuses, located in Little Rock and North Little Rock, anchor a broad spectrum of inpatient and outpatient healthcare services, ranging from disease prevention to primary care, complex surgical procedures and extended rehabilitative care. Comprehensive healthcare is provided through primary, tertiary, and long-term care in areas of medicine, surgery, mental health, physical medicine and rehabilitation, neurology, dentistry, ophthalmology, geriatrics and extended care, women's health, and others. Across its two main campuses, CAVHS has 280 operating hospital beds as well as a 119-bed Residential Rehabilitation Treatment Unit that provides long-term rehabilitative care and a 152-bed Community Living Center (formerly Nursing Home Care Unit). CAVHS also reaches out to Veterans across Central Arkansas through its eight Community-Based Outpatient Clinics (CBOCs). A Day Treatment Center and Vet Center are also located in the Little Rock Metro Area. Fellows in our program will have potential opportunities to complete training in both hospital campuses and the Vet Center, and may have opportunities to provide remote services to the CBOCs using advanced telemedicine technology.

CAVHS also serves as a teaching facility for more than 1,500 students and residents enrolled in more than 65 educational programs; its principal affiliate is the University of Arkansas for Medical Sciences (UAMS). The history of CAVHS includes training for the field of psychology since the 1950's. The Psychology Internship Program was included in the American Psychological Association's (APA) Accreditation of the VA for many years and has been fully accredited by APA since 1979. The postdoctoral fellowship program, begun in 2008, became fully accredited by the APA Commission on Accreditation in May 2013.

CAVHS's Psychology Post-Doctoral and Interprofessional Fellowship Program is fully accredited by the American Psychological Association, with our next site visit anticipated in 2020. Our Neuropsychology Track will be applying for initial accreditation as a separate specialty training area in 2018. Please see the inside front cover of this brochure for details on accreditation status and contact information.



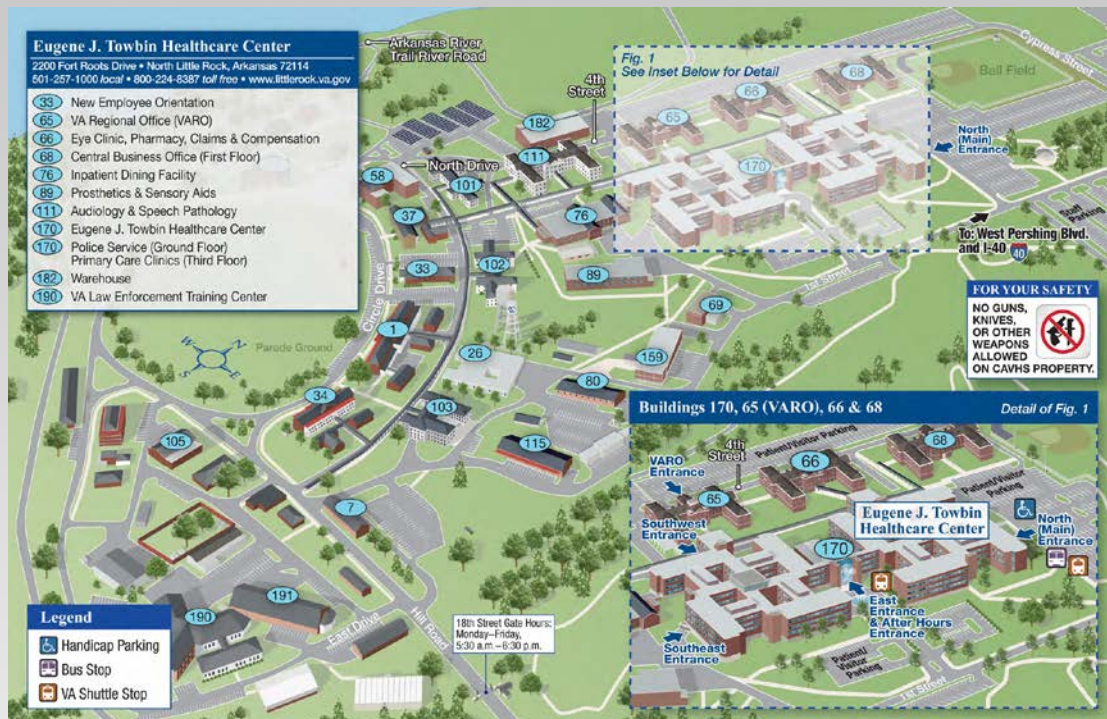
Upper: Satellite Image of CAVHS North Little Rock Campus (Fort Roots) captured by GoogleEarth™

Lower: A view from the Bluffs of the North Little Rock Campus (Fort Roots)

North Little Rock Division

Situated atop scenic bluffs overlooking the Arkansas River and the Little Rock Metropolitan skyline, our North Little Rock campus occupies the late-19th century Fort Roots military installation, originally commissioned for the US Army Cavalry prior to World War I and now a functioning hospital complex and National Historic Site. Located on the North Little Rock campus, the Eugene J. Towbin Healthcare Center is a large four-story building, which was constructed in 1983. It houses all of this division's outpatient programs, residential rehabilitation programs, and inpatient beds. This building also contains a cafeteria, canteen store, medical library, bowling alley, barber shop, and indoor walking trail. The grounds of the North Little Rock campus are large and contain two small fishing lakes, an employee fitness center (available to staff and interns on a 24 hour basis), a fitness trail, a softball field, a newly constructed State Veterans Home, and numerous historic buildings operating as administrative offices for the VA. Also co-located on the North Little Rock Campus are the VISN 16 Mental Illness Research, Education, and Clinical Center (MIRECC, which operates the Health Research & Development Fellowship), and the VA's Federal Law Enforcement Training Center (FLETC) which trains the entire federal VA police force.

The North Little Rock campus contains the medical center's Primary Care Clinics, Outpatient Mental Health Clinic, Outpatient and Residential Substance Use Treatment Clinics, Outpatient and Residential PTSD Clinics, Intermediate Medicine, Neuropsychology, Rehabilitation, Domiciliary, Community Living Center (nursing home), and the Psychosocial Rehabilitation and Recovery Center. The North Little Rock division, serves as the primary setting for most rotations in the Clinical Psychology and Interprofessional Fellowship program.



Little Rock Division

Approximately eight miles (15 minutes) away from the North Little Rock Division, and conveniently situated in the heart of Midtown Little Rock, the John L. McClellan Memorial Veterans Hospital is our Little Rock campus. It is adjacent to, and physically connected to, the University of Arkansas for Medical Sciences. This medical center houses inpatient wards including acute medicine, oncology, cardiology, surgery, neurology, neurosurgery, and intensive care units, as well as serving hemodialysis patients and many medical and surgical outpatient clinics, a women's clinic, and an active emergency room. A cafeteria, canteen store, and medical library are also available at this campus.



Fellowship Resources

Both campuses have adequate office space and all fellows are provided office space equipped with appropriate furniture, telephone with private voicemail, and a computer which allows access to medical records including progress notes, consult reports, laboratory findings, imaging films and reports, as well as access to remote data from other VA facilities across the nation. Email access, internet access, and a virtual library for literature searches are also available on each computer. Both campuses house medical libraries and fellows can gain access to the UAMS library located beside the Little Rock campus if needed. If a book or article cannot be found via the onsite libraries or virtual libraries, an online inter-library loan request can be made. Fellows have free parking at both campuses and the VA shuttle bus is available for travel between divisions, leaving each campus once per hour.

Psychosocial Rehabilitation & Recovery (PSR) Track

Training Emphasis: The emphasis of the PSR Track is to promote the development of clinician leaders and educators capable of providing state-of-the-art, interdisciplinary psychosocial rehabilitation (PSR) care that is recovery-oriented and meets standards developed by PRA, JCAHO and CARF. The aim of the Fellowship is to expand knowledge and skills, as well as to implement evidence-based practice to work with people who experience serious mental illness (SMI) so that they may recover meaningful roles of their choice. The Fellowship also will assist clinicians across Central Arkansas Veterans Healthcare System (CAVHS) in developing and implementing recovery-oriented practice.

Clinical Settings: Fellows have the opportunity to learn PSR knowledge and practice through placements in a variety of settings which support the Fellow in applying recovery-oriented practice principles with Veterans and their families. Specific sites within CAVHS that offer the most support for these experiences vary over time, but typically include both outpatient and inpatient clinics as well as community-based involvement. Descriptions of representative training rotations are included in this brochure to better describe the range of training experiences typically available.

Didactics: PSR Fellows participate in seminars throughout the year to broaden their professional experiences. These didactic experiences are led by VA staff and representatives of community organizations; and include learning objectives as well as recommended references regarding the specific topic. Fellows in the PSR track will participate both in local trainings as well as inter-facility trainings, engaging with PSR fellows at other sites as well. Seminars include: Psychology Community Meetings, Professional Development Seminars, Fellowship Development Seminars, Fellowship Training Committee Meetings, PSR Multi-site Seminars, Recovery Journal Club, Case Conferences, Cultural Awareness & Self-Exploration Seminars, and others. Fellows attend additional seminars/conferences and have opportunities to engage in teaching and learning experiences with colleagues. They also have access to research resources to assist their development as practitioners.

Scholarly Project: One aim of the PSR Fellowship is to increase awareness and utilization of PSR both within the VA and externally as well. In service of that aim, national funders of our PSR Fellowship require that Fellows complete educational dissemination projects during their Fellowship year. We require each PSR fellow to complete both internal (within CAVHS) and external (outside CAVHS such as at professional conferences or other agencies) professional presentations that help to promote and educate mental health practitioners in principles of recovery-oriented services. Through these projects, Fellows consolidate their understanding of recovery, PSR principles, and practice; and gain experience assisting other clinicians in PSR implementation.

Individualized Learning Plans: Fellows develop individualized learning plans for the training year, defining learning experiences through various sites, educational dissemination projects, and professional seminars with the goal of meeting specific knowledge and practice competencies. Each Fellow will complete a core rotation (24 hours/week) and elective rotation (8 hours/week) during each 6 month cycle. Each will also have 4 hours/week allocated to didactics and other seminars, and 4 hours/week of protected professional development time for activities of the Fellow's choosing. PSR fellows will generally be required to complete a minimum of one core or two elective rotations in areas with a clear SMI/PSR focus; and will be permitted to take a maximum of one core or two elective rotations in any other single specific emphasis area.

Approximate Distribution of Weekly Training Activities:

- **65%:** Clinical activities to include: Psychotherapy, Assessment/diagnosis, documentation, consultation, teaching, supervision of other trainees, outreach, program development, etc.
- **20%:** Didactics & Professional Development
- **10%:** Supervision and Mentoring activities
- **5%:** Scholarly Project.

Post-Traumatic Stress Disorders (PTSD) Track

Training Emphasis: Fellows in the PTSD track will acquire and refine skills in the practice of clinical psychology generally, and in the Major Area of Study for PTSD specifically. Within this Major Area of Training, experiences throughout the year will focus on developing increasing levels of proficiency in the clinical practice and supervision of evidence-based treatments for PTSD: Prolonged Exposure (PE) or Cognitive Processing Therapy (CPT); while also providing opportunities to learn supplemental assessment and treatment approaches (e.g. Acceptance and Commitment Therapy, Seeking Safety, Dialectical Behavior Therapy, Moral Injury, Whole Health Interventions, and more). The fellow will choose which EBT will be primarily emphasized in the training plan. Within the selected area of focus, the following three components will be systematically addressed: clinical practice of the EBT; (2) supervision of others, using the EBT whenever possible; and (3) a clinical demonstration project, related to the same EBT whenever possible. In consultation with the ADT, Fellows may also choose to select additional treatment modalities for secondary emphasis, as noted above.

Clinical Settings: Most training experiences will occur within the PTSD Clinical Team (see Rotation Descriptions for more detailed explanations of training opportunities in this setting). However, in order to broaden the fellows training experience, the PTSD fellow will also be expected to participate in a training experience that serves a population (or populations) presenting with primary diagnoses other than PTSD. The fellow will work with their primary supervisor and ADT to develop this experience which could reasonably be implemented in a variety of supervised settings throughout the medical center.

Didactics: Focused PTSD didactics will be available on a periodic basis, and will consist of one-on-one or small group trainings/discussions with faculty who have subject-matter expertise in areas of specific interest to the Fellow. The PTSD Fellow will also have opportunities to participate in Professional Development Seminars available to all staff, general fellowship didactics, and as time allows, other scholarly activities of her/his choosing, such as UAMS Psychiatry Grand Rounds, CAVHS's Recovery Journal Club, and others. The Fellow also has 4 hours of protected time each week for professional development activities of her/his choosing.

Scholarly Project: Integrating scholarship with clinical practice, the PTSD Fellow will complete a clinical demonstration project as part of the training experience. This project typically consists of reviewing current literature to explore areas where PTSD treatment could potentially be improved; and then developing and implementing a clinical protocol applying a novel or adapted treatment approach to explore the feasibility of such an improvement. The Fellow will present on the process and outcomes at a Professional Development Seminar after the project is concluded.

Individualized Learning Plans: Fellows within the PTSD track have considerable flexibility in developing and modifying their learning plans throughout the year to meet ongoing training needs. Core rotations (24 hours/week) will occur in the PTSD specialty clinics. Fellows may supplement their training with six month elective rotations (8 hours/week) in other clinical areas consistent with their expressed professional interests and fit with the Fellow's overall training objectives.

Approximate Distribution of Weekly Training Activities:

- **65%:** Clinical activities to include: Psychotherapy, Assessment/diagnosis, documentation, consultation, teaching, supervision of other trainees, outreach, program development, etc. (Direct, face to face, clinical care should comprise no less than 25% and no more than 50% of the fellow's total time – i.e. 10 – 20 hours per week).
- **10%:** Supervision and Mentoring activities
- **10%:** Didactics & Seminars
- **10%** Professional Development & Protected Scholarly Time
- **5%:** Clinical demonstration project

Neuropsychology (Neuro) Track

Training Emphasis: The neuropsychology training program is designed to prepare the fellow for employment as a licensed independent psychologist through supervised experience in neuropsychological assessment and intervention in accordance with Houston Conference Guidelines. This fellowship is designed to meet eligibility requirements for the American Board of Professional Psychology (ABPP) Diploma in Clinical Neuropsychology through the American Board of Clinical Neuropsychology. Emphasis is placed on fellows learning a variety of neuropsychological assessment, intervention, and research techniques within a multidisciplinary medical center, with further emphasis on individualized training plans that meets the fellow's specific training goals.

Clinical Settings: Clinical training will be driven by empirically based assessments and treatments and informed by the scientific literature. Training will be primarily experiential in nature with ample opportunities to gain experience with a broad range of patient populations including patients with traumatic brain injury, stroke, movement disorders, dementias, substance abuse disorders, various cancers, learning and attention disorders, medical disorders affecting the CNS, and psychiatric disorders which may impact cognitive functioning. Fellows will be involved in both inpatient and outpatient clinical care including rotations in outpatient neuropsychology, geriatric neuropsychology, polytrauma clinic, inpatient rehabilitation, transplant service, consultation and liaison for medical units, and community living centers

Administration: The development of professional skills associated with the administrative aspects of running a clinic are emphasized throughout the program as the fellow takes an active role in the day-to-day functioning of an active service. Furthermore, professional skills are developed through socialization with other clinical and research fellows at CAVHS and interactions with staff on a junior colleague level. There are also opportunities for the Fellow to supervise pre-doctoral neuropsychology interns.

Didactics: Fellows are expected to attend a number of didactic experiences and are given protected time to complete such activities. Didactics include a variety of topics and are often interdisciplinary and may include Brain Dissection & Neuroanatomy, Tumor Board, Neurology Grand Rounds, Psychiatry Grand Rounds, Neurosurgery Grand Rounds, Neuroradiology Didactics, Neuroanatomy Didactics, Movement Disorder Video Rounds, Deep Brain Stimulation (DBS) Conference, Epilepsy Surgery Conference, and Neuropsychology Case Conference. Didactics will be presented as part of the VA and the University of Arkansas Medical Science Center.

Scholarly Project: The fellows are expected to develop or participate in a research project from the beginning of fellowship which will culminate in a scholarly activity, e.g., submission of a study or literature review for publication, presentation, submission of a grant proposal or outcome assessment prior to the end of the fellowship. The fellow will be required to present their project at a scholarly venue (i.e. poster or presentation at a regional or national conference). Additionally, the fellow will be required to present at other didactical events (i.e. case conference, grand rounds, intern development series). A minimum of two presentations per year are required and in many cases the fellows may present more frequently.

Individualized Learning Plans: The fellow will meet with the Assistant Training Director for Neuropsychology during the orientation week to discuss training goals and develop an individualized learning plan. The Fellow's learning plan may be modified during the training year in consultation with the training committee, but in the absence of unforeseen or compelling developments, it is expected that the fellow will continue the primary emphasis area commitments. A quarterly review of the learning plan will be conducted by the Neuropsychology Training Committee at its scheduled meetings.

Fellowship Training for Social Work

The PSR fellowship puts newly graduated social workers in a position to gain an extra year of training beyond their degree. It is an opportunity to sharpen skills, build on strengths, and pursue many interests in the mental health field. The fellowship provides a firm foundation to build on throughout a career. Included are opportunities for:

- Creating your own learning plan among many choices

- Certification in Social Skills Training for SMI (an evidenced based practice)

- Presenting at the national Psychiatric Rehab Association (PRA) conference

- Learning cognitive behavior therapy and other orientations from psychologists and social workers which includes taping sessions and listening to your tapes in supervision

- Immersing yourself in recovery oriented services which align with social work principles/values

- Choosing a research elective (if desired)

- Working on multi-disciplinary teams

- Providing vertical supervision to social work interns (when available)

- Supervision for licensure

- Didactics from experts in the fields

Social workers who become PSR Fellows show potential employers they are willing learners who go above and beyond what is required of them. Employers recognize that Fellows are well trained workers who are able to step forward confidently into positions of trust and responsibility.

Fellowship Training for Occupational Therapy

The Interprofessional Fellowship at CAVHS will provide Occupational Therapy Fellows many unique opportunities for further growth, learning, and skill development that will better prepare them and make them more competitive to enter the professional workforce. The OT staff at CAVHS is one of the largest in the region, providing a number of unique services with high quality and access to care for Veterans experiencing mental illnesses of varying severity and complexity.

Fellows in OT for Mental Health here at CAVHS will work with Veterans who may be experiencing any number of mental health disorders including: Post-Traumatic Stress Disorder (PTSD), Chronic Mental Illness (Bipolar, Schizophrenia, Major Depression, etc.), Substance Abuse, Adjustment Disorder, and others. They can also work with Veterans in geriatric settings, homeless programs, and dual-diagnosis programs. Fellows can gain proficiency with a number of therapeutic tools, including but not limited to: Standardized Safety Evaluations, Return to Work Evaluations, Alpha-Stimulators, and various media (crafts, musical instruments, cameras, 1:1 therapy, and group teachings).

Some of the training opportunities a Fellow in OT will experience at CAVHS include:

1. Therapeutic Media Lab
 - a craft lab that uses the crafts as a media to address life skills such as:

Coping skills	Motivation
Self-Esteem	Communication/Social Skills
Anger Management	Goal Completion
Time Management	Leisure activities/Hobbies
2. Creative Expression Class
 - a class that uses photography, painting, creative writing, and poetry to facilitate:

Communication/Social skills	Coping Skills
Leisure activities/Hobbies	Motivation
Self-Esteem	
3. Community Re-entry
4. Community based assistance
5. Outpatient CMI classes and outreach around clinics
6. Sensory Integration
7. Alpha-Stim Therapy
8. Equestrian Therapy for outpatient CMI
9. Music Therapy
10. Horticulture Therapy
11. Home evaluations
12. Various other education groups addressing Life Skills, ADLs, and iADLs

Fellows will interact with peers from other disciplines, including psychology, social work, and others. The breadth and depth of practical training experiences available in this program makes this a unique opportunity to jump start your professional future in OT.

Representative Training Rotations available to most Fellows

Fellows will have the opportunity to receive training through a variety of rotations which they will select with the assistance of the Training Directors at the start of their Fellowship year. Rotations are typically structured as either core (24 hours per week) or elective (8 hours per week). Provided below are brief descriptions of some of our representative rotations. Additional rotations may also be available depending on available staff and the training interests of the Fellows. *Note that the rotation structure and offerings for Fellows in the Neuropsychology Track will differ from that which is described here. Please refer to the sections specific to each track to better understand how the training plans for each track will be developed and the types of training experiences that may be included in those plans.

Psychosocial Rehabilitation and Recovery Center

Supervisors: Sherry Clements, LCSW; Stephanie Riedmueller, MS, OTR/L, Kristen Viverito, PsyD

PRRC is an outpatient transitional learning center that provides a person-centered and empowering environment to support the recovery of Veterans living with serious mental illness (SMI). The program aims to support Veterans progress in their recovery so that they develop skills and resources that enhance their success in the community and decrease the need for psychiatric hospitalization. Fellows who choose this rotation will apply psychosocial rehabilitation principles with a strong recovery focus in the provision of services to Veterans who have received a diagnosis of serious mental illness (SMI; schizophrenia, psychotic symptoms, bipolar disorder, major depression and severe PTSD). Recovery-focused psychosocial rehabilitation approaches emphasize providing support and training so that individuals can transcend limits imposed by mental illness, social barriers, and stigma; thus, achieving personal goals. Supervised experiences will include screening, psychosocial assessments, recovery coaching, individual therapy, program development/evaluation, and group and family services. Fellows will gain knowledge of the value and role of peer support specialists by co-facilitating groups and working with them to help Veterans increase community participation. In addition, Fellows will gain experience with evidence-based interventions such as Illness Management and Recovery (IMR) and Social Skills Training (Bellack approach).

Acute Inpatient Psychiatry

Supervisor: Amy Ashcraft, LCSW ; Kristen Viverito, PsyD

The Acute Inpatient Psychiatry Unit at CAVHS is a 26 bed unit located on unit 3K in North Little Rock. Specific training activities will vary depending on each fellow's interests and needs; however, all fellows will have the opportunity to: attend morning interdisciplinary meetings; facilitate and/or co-facilitate groups; meet with Veterans individually for time-limited therapy, safety planning, or discharge planning; complete thorough chart reviews; develop and implement staff education/training; work with the multidisciplinary team as well as outpatient providers to coordinate care; develop and implement new programming for the unit. Fellows may also have the opportunity to follow Veterans as they transition to the less acute units of 1H (Serious Mental Illness Inpatient Unit) and 3H (Dual Diagnosis Residential Unit), as well as to engage in vertical supervision of an intern on the rotation.

Mental Health Intensive Case Management (MHICM)

Supervisor: Melissa O'Dell, LCSW

The MHICM Program offers mental health and intensive case management services to an outpatient population of Veterans with serious mental illness (SMI), their families, and significant others. Services provided by the program are based upon acuity of the Veteran, the Veteran's needs, and the availability of resources. Fellows who choose this training option would be provided clinical experiences that encompass both clinic visits and home / residence / community visits (Visits limited to a 50-mile radius). Fellows would provide services with an eye toward incorporating the recovery approach and Psychiatric Rehabilitation (PSR) concepts and practices. Veterans enrolled in MHICM have 2-3 contacts a week with MHICM staff, including a variety of services such as medication management, supportive therapy/intervention, crisis intervention, problem solving therapy/intervention, group therapy (social skills training/support), referral/liaison within VA/community for identified needs, telephone triage, patient/family/caregiver education, 24-hour staff availability, case management and smoking cessation classes. Fellows will also participate in Interdisciplinary Team meetings.

Homeless Residential Rehabilitation Treatment Program

Supervisor: TBD

Primary experiences are obtained within the Homeless domiciliary (DRRTP), a thirteen week residential program with emphasis on providing opportunities for Veterans to achieve and maintain their highest level of independent community integration. Other experiences within PTSD or Substance Use Disorder RRTTP programs may also be included as available. RRTTP training experiences are accomplished through the provision of residential services designed to improve functional status, sustaining rehabilitation gains, disability management, recovery, and breaking the cycle of recidivism. The DRRTP works to provide these opportunities by helping the Veteran in developing life and work-hardening skills and increasing awareness. The DRRTP also works from a recovery-oriented model helping the Veteran to identify and manage self-defeating behaviors and improving quality of life. Fellows choosing this placement will be actively involved in the delivery of treatment that includes elements of cognitive behavioral therapy and mindfulness. In addition to participating in program groups, fellows will also be exposed to issues common to program development and gain increased understanding of the role of an interdisciplinary team. Although most therapeutic activities are group-oriented, there is the possibility of structured, brief individual psychotherapy. Fellows may participate in the following group therapies: Seeking Safety, F.E.A.R or Face Everything and Recover (designed to help Veterans acknowledge and learn coping skills to deal with apprehensions or fears they may have with reintegrating into society), Acceptance and Commitment Therapy (ACT) and Cognitive Processing Therapy (individual therapy for appropriate patients). Fellows may also be provided the opportunity to co-facilitate groups with other interdisciplinary team members (i.e. Conflict Management, Social Skills Training, Discharge Planning, and Community Reintegration). Fellows will participate in the admission process including interview and screens for mental status, depression, and quality of life.

PTSD Clinical Team

Supervisors: Nathaniel Cooney, PhD; Kevin Reeder, PhD; Linda Brewer, PhD; Vince Roca, PhD; Laura Gambone, PhD; Jon Ray, PhD; Mary Horne, LCSW

The PTSD Clinical Team (PCT) accepts referrals from across the hospital system (in addition to interfacility requests) for Veterans and Active Duty Service members who have been diagnosed with PTSD related to military service. Veterans may receive services either on an Outpatient basis or through a 28-bed (8-week) PTSD Residential Rehabilitation Treatment Program. All clinical services within the PCT are provided within a recovery framework and emphasize a whole-health approach to treatment, built upon a foundation of evidence-based practice and trauma-informed care. Within this framework, the focus of treatment extends beyond mere symptom reduction to also include improved overall quality of life and wellness. Our services are delivered by an interdisciplinary team comprised primarily of psychologists, social workers, graduate and post-graduate trainees, and support staff. Team members also regularly collaborate with medical staff (psychiatrists, advanced practice nurses, and pharmacists), and work with other allied health providers (including occupational therapists, nutritionists, social service assistants, while coordinating care for our Veterans.

Fellows on this rotation will improve their understanding of factors that contribute to the development and maintenance of PTSD; as well as how to effectively intervene with individuals living with this disorder. The overarching goal is to provide trainees with both breadth and depth of experiences, commensurate with their level of prior experience, current training needs, and future career goals. Experiences will include exposure to multiple treatment modalities (psychoeducation, evidence-based treatments, and supplemental approaches), multiple formats for intervention (group vs individual; face-to-face vs. tele-health; and outpatient vs. residential), assessment and measurement-based care, diversity of clients (with respect to cultural background, military service era, type of trauma, etc.), and more. Consistent with graduated levels of responsibility, trainees will be given greater levels of autonomy as competence and mastery of skills are demonstrated. Whenever possible, Fellows who have demonstrated competence with particular PTSD interventions may be given the opportunity to be trained in providing vertical supervision to interns or other trainees with less experience in that area.

Representative Treatments currently utilized in the clinic, and which may be available as training opportunities include: Prolonged Exposure (PE)*, Cognitive Processing Therapy (CPT)*, Acceptance & Commitment Therapy (ACT); Seeking Safety; Couples Therapy (CBCT, IBCT); Dialectical Behavior Therapy; Expressive Arts Therapy; Whole Health Coaching; Mind & Body Wellness (ActiVets); Mindfulness & Relaxation; Moral Injury Group; PTSD Orientation / Treatment Selection Group; Self-Defeating Behaviors; Student Veterans Group; Transitions (Re-adjustment services); Treatment for trauma-related sleep disturbances and nightmares; Yoga for PTSD; and others.

Research

Supervisors: Michael Cucciare, PhD

Fellows will work on at least one research project that involves a review of literature of interventions to empower persons with mental illness and improve self-esteem. Fellows will learn about research methods, models of stigma and related constructs, instruments to measure these constructs and existing interventions.

Military Sexual Trauma Recovery Program

Supervisors: Nathaniel Cooney, PhD; Linda Brewer, PhD; Mary Horne, LCSW, LeeAnn Welsh, LCSW

The Military Sexual Trauma Recovery Program offers specialized services to survivors of military sexual trauma (MST), as well as survivors of non-military sexual trauma. Program participants undergo a sexual trauma assessment, during which appropriate treatment options are discussed. Veterans may elect to participate in MST-specific treatment options or request services available through other programs at CAVHS. MSTRP staff are members of the medical center's MST Committee, promoting MST awareness and best clinical practices related to MST. Supervised training activities available for Fellows include screening and sexual trauma assessment; MST psycho-educational group sessions; learning an evidence-based model for treatment of PTSD resulting from sexual trauma, Cognitive Processing Therapy (CPT) and facilitating CPT for MST group sessions; MST aftercare group sessions; individual supportive therapy sessions; case management; case consultations; using clinical judgment to make appropriate consults; participating in program development and evaluation, as well as providing educational outreach to Veterans and VA staff. Fellows may also elect to participate on the medical center's MST Committee and/or MST Committee workgroups: Veteran Outreach, Sexual Assault Awareness Month, Staff Training, and Sexual Assault Awareness Month Women's Conference.

Outpatient Mental Health Clinic

Supervisors: Courtney Crutchfield, PhD; James McAuley, LMFT; John Milwee, PhD

The Mental Health Clinic (MHC) rotation will consist of individual therapy, group psychotherapy, and psychological/personality evaluations of psychiatric outpatients. The clinic is comprised of an interdisciplinary team of more than 40 providers (i.e., psychologists, pharmacists, psychiatrists, social workers, and nursing staff) in addition to support personnel staff. An essential part of the rotation will be collaboration with other treatment providers, including providing feedback on psychological assessments to various disciplines of referring providers.

The MHC serves a diverse patient population, not only in terms of ethnicity, but also in terms of socioeconomic status, gender, age, and educational and occupational backgrounds. Diagnoses of outpatients range from relatively mild problems (e.g., adjustment disorder) to more severe psychopathology such as schizophrenia, personality disorders, and dual diagnoses. Fellows will be expected to gain experience in at least two evidence-based psychotherapies during their time on the rotation. Therapeutic approaches include, but are not limited to, Cognitive Behavioral Therapy, Cognitive Behavioral Treatment for Insomnia, Dialectical Behavior Therapy, and Interpersonal Psychotherapy.

Weekly supervision provides ongoing feedback on performance. Fellows are evaluated on competencies in therapy and assessment through direct observation, supervision, audio recording, review of progress notes, and review of assessment reports. The rotation is designed to be flexible in meeting the training needs and interests of Fellows.

Outpatient Substance Use Disorders

Supervisor: Dave Hoffpauir, LCSW; Gabrielle Pugliese, PhD; Miranda Watkins, LCSW

The Substance Use Disorder treatment program consists of a full spectrum of treatment including Detoxification, Intensive Outpatient Program, Outpatient treatment and long term supportive programming. Treatment teams are interdisciplinary and provide opportunities to work with a range of professionals, including peer support. Fellows choosing this placement will be actively involved in assessment, treatment planning, and delivery of treatment to a wide spectrum of Veterans with SUD issues. Examples of treatment programming include Seeking Safety, Motivational Interviewing, Relapse Prevention, psychoeducational groups, and process groups focused on reinforcing fundamentals of recovery and strengthening community support. Treatment is presented primarily in group format, but opportunities for individual therapy are also present. The SUD program is a recovery-based approach of shared responsibility for treatment with final responsibility for their future life and well-being clearly resting on the Veteran. The Fellow will learn this philosophy of care and will engage in developing and applying recovery-based approaches.

Health Promotion / Disease Prevention

Supervisors: Marie Mesidor, PhD

A fellow on this rotation will have the opportunity to be involved in providing health interventions to Veterans, staff training, program development, and program evaluation. On the HPDP rotation, fellows will be involved in the training of primary care staff in the use of behavioral interventions such as clinician and patient health coaching and motivational interviewing. There is also the opportunity to be involved in both individual and group interventions focusing on health promotion and disease prevention with a variety of medical patients. These may include weight management, tobacco use cessation, and shared medical appointments (i.e. hypertension, diabetes, COPD, HF). There will be an opportunity for fellows to conduct pre-bariatric surgery psychological assessments and psychosocial evaluations for the inpatient blind rehabilitation program. In addition, fellows will have the opportunity to develop new programs and initiatives at CAVHS to address the health needs of Veterans and the training needs of staff.

Primary Care Mental Health Integration

Supervisors: Amanda McCorkindale, PsyD

Primary Care Mental Health Integration (PCHMI) seeks to bridge the gap between medical and mental health care outside of a specialty mental health clinic in order to improve access to behavioral health services within the primary care treatment environment. This rotation provides opportunities to work closely with PACT (Patient Aligned Care Teams) providers, various specialty medical services, and psychiatry in order to coordinate care and provide problem-focused mental health/behavioral medicine interventions. The goal is to enhance the delivery of holistic health services in primary care and to develop skills to address behavior change needs. The focus is on conducting brief assessments and problem-focused, solution-oriented individual and group interventions to address mild to moderate psychiatric conditions and behavioral health issues/medical issues - including but not limited to: depression, anxiety, PTSD, pain, insomnia, stress management, tobacco use, weight management, treatment adherence and substance use disorders in a patient-centered environment. Also, a Whole Health approach and motivational enhancement strategies are used to improve Veterans' follow through with more intensive medical or mental health treatment and/or to make healthy lifestyle changes within the primary care setting.

Hospice & Palliative Care

Supervisors: Jennifer Wilson, PsyD

Trainees who take the Psychological Palliative Care rotation will primarily work as a member of the interdisciplinary palliative care team providing services to inpatient and outpatient Veterans. Most direct clinical care will be with medical patients who may be experiencing adjustment problems/psychological distress related to their medical condition(s) or issues surrounding end of life. Fellows will conduct intake assessments and psychotherapy and these services will be provided to both Veterans and their family members. Training opportunities will likely include collaborating with an interdisciplinary palliative care team, responding to palliative care consults when psychology is requested, rounding on the inpatient unit with team physicians, attending family meetings on the unit, participating in a monthly integrative medicine clinic for chronic pain, and conducting brief outpatient/inpatient psychotherapy to Veterans and their family members. Attention will be paid to exposing fellows to patients who have serious mental illness and understanding the interaction of these patients with the medical system. Fellows will have the opportunity to play an active role on these teams providing psychological services. This rotation includes opportunities to work closely with staff physicians, as well as the medical fellows and residents who rotate with the palliative care team. Thus, it offers fellows additional training in treatment/diagnosis of medical conditions.

There are multiple training opportunities in which to get involved on this rotation. Fellows who have prior experience and/or are interested, may have the opportunity to receive training and experience in conducting mental health evaluations for bone marrow transplant, organ transplant candidates, and assessing and monitoring patients with hepatitis C who are receiving interferon treatment.

Life in Central Arkansas

Here are just a few of the many reasons to consider a move to Central Arkansas for your Fellowship training year:



Many of our current psychologists on staff (about 1 out of 3, most of whom were not originally from Arkansas) was previously an Intern or Fellow at CAVHS. They liked it so much, they either stayed after completing their training, or returned when an opening later became available. Not only does this demonstrate that Arkansas is a great place to live, it also says a great deal about the training culture at CAVHS, and the high quality of training that both the facility and former trainees believe was provided in our programs. Regardless of whether Arkansas becomes a temporary or permanent home for you, we are confident you will find much to appreciate about our state and its culture, as well as our training program and its culture.



Central Arkansas is rich in History and Culture...



...includes some of the very best of the Great Outdoors



Is home to a vibrant and growing Metropolitan Area...



...and has no shortage of Entertainment opportunities!

General Application Information (ALL APPLICANTS)

ELIGIBILITY REQUIREMENTS FOR ALL PROGRAMS

The Department of Veterans Affairs (VA) adheres to all Equal Employment Opportunity and Affirmative Action policies. As a Veterans Health Administration (VHA) Health Professions Trainee (HPT), you will receive a Federal appointment, and the following requirements will apply prior to that appointment

1. **U.S. Citizenship.** HPTs who receive a direct stipend (pay) must be U.S. citizens. Trainees who are not VA paid (without compensation-WOC) who are not U.S. citizens may be appointed and must provide current immigrant, non-immigrant or exchange visitor documents.
2. **U.S. Social Security Number.** All VA appointees must have a U.S. social security number (SSN) prior to beginning the pre-employment, on-boarding process at the VA.
3. **Selective Service Registration.** Male applicants born after 12/31/1959 must have registered for the Selective Service by age 26 to be eligible for U.S. government employment, including selection as a paid or WOC VA trainee. For additional information about the Selective Service System, and to register or to check your registration status visit <https://www.sss.gov/>. Anyone who was required to register but did not register before the age of 26 will need to apply for a Status Information Letter (SIL) and request a waiver. Waivers are rare and requests will be reviewed on a case by case basis by the VA Office of Human Resources Management. This process can take up to six months for a verdict.
4. **Fingerprint Screening and Background Investigation.** All HPTs will be fingerprinted and undergo screenings and background investigations. Additional details about the required background checks can be found at the following website: <http://www.archives.gov/federal-register/codification/executive-order/10450.html>.
5. **Drug Testing.** Per Executive Order 12564, the VA strives to be a Drug-Free Workplace. HPTs are not drug-tested prior to appointment, however are subject to random drug testing throughout the entire VA appointment period. You will be asked to sign an acknowledgement form stating you are aware of this practice. See item 8 below.
6. **Affiliation Agreement.** To ensure shared responsibility between an academic program and the VA there must be a current and fully executed Academic Affiliation Agreement on file with the VHA Office of Academic Affiliations (OAA). The affiliation agreement delineates the duties of VA and the affiliated institution. Most APA-accredited doctoral programs have an agreement on file. More information about this document can be found at <https://www.va.gov/oa/agreements.asp> (see section on psychology internships). Post-degree programs typically will not have an affiliation agreement, as the HPT is no longer enrolled in an academic program and the program is VA sponsored.

7. **TQCVL.** To streamline on-boarding of HPTs, VHA Office of Academic Affiliations requires completion of a Trainee Qualifications and Credentials Verification Letter (TQCVL). An Educational Official at the Affiliate must complete and sign this letter. For post-graduate programs where an affiliate is not the program sponsor, this process must be completed by the VA Training Director. Your VA appointment cannot happen until the TQCVL is submitted and signed by senior leadership from the VA facility. For more information about this document, please visit <https://www.va.gov/OAA/TQCVL.asp>
- a. **Health Requirements.** Among other things, the TQCVL confirms that you, the trainee, are fit to perform the essential functions (physical and mental) of the training program and immunized following current Center for Disease Control (CDC) guidelines and VHA policy. This protects you, other employees and patients while working in a healthcare facility. Required are annual tuberculosis screening, Hepatitis B vaccine as well as annual influenza vaccine. *Declinations are EXTREMELY rare.* If you decline the flu vaccine you will be required to wear a mask while in patient care areas of the VA.
 - b. **Primary source verification of all prior education and training** is certified via the TQCVL. Training and Program Directors will be contacting the appropriate institutions to ensure you have the appropriate qualifications and credentials as required by the admission criteria of the training program in which you are enrolled.
8. **Additional On-boarding Forms.** Additional pre-employment forms include the Application for Health Professions Trainees (VA 10-2850D) and the Declaration for Federal Employment (OF 306). These documents and others are available online for review at <https://www.va.gov/oaapp-forms.asp>. Falsifying any answer on these required Federal documents will result in the inability to appoint or immediate dismissal from the training program.
9. **Proof of Identity per VA.** VA on-boarding requires presentation of two source documents (IDs). Documents must be unexpired and names on both documents must match. For more information visit: https://www.oit.va.gov/programs/piv/_media/docs/IDMatrix.pdf

Additional information regarding eligibility requirements for appointment as a psychology HPT can be found at the end of this brochure.

Additional information regarding eligibility requirements (with hyperlinks)

- Trainees receive term employee appointments and must meet eligibility requirements for appointment as outlined in VA Handbook 5005 Staffing, Part II, Section B. Appointment Requirements and Determinations. https://www.va.gov/vapubs/viewPublication.asp?Pub_ID=646&FTtype=2
- Selective Service website where the requirements, benefits and penalties of registering vs. not registering are outlined: <https://www.sss.gov/Registration/Why-Register/Benefits-and-Penalties>

Additional information specific suitability information from Title 5 (referenced in VHA Handbook 5005 – hyperlinks included):

(b) Specific factors. In determining whether a person is suitable for Federal employment, only the following factors will be considered a basis for finding a person unsuitable and taking a suitability action:

- (1) Misconduct or negligence in employment;
- (2) Criminal or dishonest conduct;
- (3) **Material**, intentional false statement, or deception or fraud in examination or appointment;
- (4) Refusal to furnish testimony as required by § 5.4 of this chapter;
- (5) Alcohol abuse, without evidence of substantial rehabilitation, of a nature and duration that suggests that the **applicant** or **appointee** would be prevented from performing the duties of the position in question, or would constitute a direct threat to the property or safety of the **applicant** or **appointee** or others;
- (6) Illegal use of narcotics, drugs, or other controlled substances without evidence of substantial rehabilitation;
- (7) Knowing and willful engagement in acts or activities designed to overthrow the U.S. Government by force; and
- (8) Any statutory or regulatory bar which prevents the lawful employment of the person involved in the position in question.

(c) Additional considerations. OPM and agencies must consider any of the following **additional considerations** to the extent OPM or the relevant **agency**, in its sole discretion, deems any of them pertinent to the individual case:

- (1) The nature of the position for which the person is applying or in which the person is employed;
- (2) The nature and seriousness of the conduct;
- (3) The circumstances surrounding the conduct;
- (4) The recency of the conduct;
- (5) The age of the person involved at the time of the conduct;
- (6) Contributing societal conditions; and
- (7) The absence or presence of rehabilitation or efforts toward rehabilitation.

Recruiting Statements: The Psychology Post-Doctoral & Interprofessional Fellowship training program at CAVHS is committed to providing a supportive learning environment in which we actively seek and value diversity among our trainees and staff. We consider diversity as including various cultures, values, and experiences of trainees and faculty, as well as different theoretical models, research paradigms, and ways of professional practice. Our training program strives to maintain a collegial and supportive environment where trainees and staff enjoy working together and are valued for their individual contributions to the group. Biopsychosocial and recovery-oriented approaches that incorporate elements of diversity and multiculturalism are especially valued in our training programs. We highly encourage applicants from diverse backgrounds to apply.

This program meets criteria of Equal Employment Opportunity (EEO). CAVHS and its training programs are committed to providing access for all people with disabilities and will provide reasonable accommodations. We ask only that any who may require accommodations to provide us a reasonable amount of advance notice.

Discipline-Specific Application Procedure for: **PSYCHOLOGY**

ADDITIONAL ELIGIBILITY CRITERIA FOR THE PSYCHOLOGY POSTDOCTORAL FELLOWSHIP

Postdoctoral fellowship applicants also must meet the following criteria to be considered for any VA Psychology Postdoctoral Program:

1. Have received a Doctorate from an APA-accredited graduate program in Clinical or Counseling Psychology. Persons with a doctorate in another area of psychology who meet the APA criteria for re-specialization training in Clinical or Counseling Psychology are also eligible
2. Have completed an internship program accredited by the APA Commission on Accreditation or have completed a VA-sponsored internship.

To apply, the following materials are required:

- Letter of interest that identifies the track(s) to which you are applying, describes how you envision this training would further your professional development as a clinical psychologist, your theoretical orientation, your prior training or exposure to the area(s) of emphasis to which you are applying, and your professional interests.
- Current Curriculum Vita that includes a description of your internship rotations and anticipated graduation date.
- Graduate transcripts (official copy)
- Letter of reference from your internship director, describing your training, experience, overall performance during your internship and anticipated completion date.
- Letter of reference from your dissertation or program chair, describing your progress toward completion of the doctoral degree and anticipated date of completion.
- Letter of reference from a supervisor familiar with your work in the special emphasis area(s) for which you are applying, or from another supervisor familiar with your clinical work.

We will be using the [APPA CAS Application System](#) for Psychology postdoctoral applicants this year. Please upload all documents through the CAVHS Postdoctoral portal. If you are not using the APPA CAS system, please email all application materials to Dr. Courtney Crutchfield at courtney.crutchfield@va.gov. Letters of reference sent via email should be sent directly from the supervisor's work email address.

IMPORTANT DATES FOR PSYCHOLOGY

Applications Due:

Friday 01/04/2019

Interview Invites By:

We will notify applicants of their status as quickly as possible, and hope to complete notifications by 01/18/2019, if at all possible.

In-Person Interviews

(by invitation only):

Friday 02/01/2019

Friday 02/08/2019

Uniform Notification:

Monday 02/25/2019

Additional applications will be accepted until all slots are filled at the discretion of the Director of Training.

IMPORTANT DATES FOR ALL DISCIPLINES OTHER THAN PSYCHOLOGY

Applications Due:

Friday 02/15/2019

Interview Invites By:

We will notify applicants of their status as quickly as possible, and hope to complete notifications by 02/28/2019, if at all possible.

In-Person Interviews

(by invitation only):

Thursday 03/14/2019

Friday 03/15/2019

Notification of Offers on:

Thursday 03/21/2019

Response to Offers by:

Monday 03/25/2019

Additional applications will be accepted until all slots are filled at the discretion of the Director of Training.

Discipline-Specific Application Procedure for: **ALL DISCIPLINES OTHER THAN PSYCHOLOGY**

To apply, the following are required:

- Letter of interest that specifies how you envision this training would further your professional development in your field. Include a description of your prior training, including any exposure to psychosocial rehabilitation or recovery-oriented services, your professional interests, and how your skills would be a good match for this fellowship.
- Current Curriculum Vita that includes a description of your internship or field placements and any other professional or work experiences and anticipated graduation date.
 - Graduate transcripts (official copy)
 - Completed "Application/Summary of Clinical Experiences" Form included in this brochure.
- Letter of reference from your internship director (if applicable), describing your training, experience, overall performance during your internship and anticipated completion date
- Letter of reference from your program chair, describing your progress toward completion of the graduate degree and anticipated date of completion.
- Letter of reference from a supervisor familiar with your work in the special emphasis area(s) for which you are applying or another supervisor familiar with your clinical work.
- Prior to start date, Social Work Fellows must have an earned Master of Social Work (MSW) degree from a clinical social work program accredited by the Council on Social Work Education (CSWE) that included a clinical internship must have been obtained. Occupational Therapy Fellows must possess an earned Masters or Doctorate degree in Occupational Therapy.

If positions are not filled on March 21, 2019, additional applications will be considered until all positions are filled.

Applicants, please email your required application materials in electronic form to Dr. Courtney Crutchfield at courtney.crutchfield@va.gov. Letters of reference sent via email should be sent from the supervisor's work email address.



CENTRAL ARKANSAS VETERANS HEALTHCARE SYSTEM
 PSYCHOLOGY POSTDOCTORAL AND INTERPROFESSIONAL FELLOWSHIP

APPLICATION / SUMMARY OF CLINICAL EXPERIENCES

CONTACT INFORMATION	
Name	
Preferred email address	
Phone number	
Mailing address	
Graduate program	
Professional Discipline	
Actual/expected graduation (month/year)	

INSTRUCTIONS: This Summary of Clinical Experiences will serve as a supplement for your fellowship application. This form was developed to be used with multiple healthcare disciplines, so it is very likely that several of the experiences listed will not directly apply to the training you have received so far. Please complete as much of the form as possible, but do not worry if your prior experiences do not neatly fit into this summary. *NONE* of the experiences listed is required in order to apply for the fellowship, and most candidates will NOT have all of the experiences listed. The Fellowship Committee will consider your *WHOLE* application, including your cover letter, cv, references, transcripts, and any other relevant supporting documents. These other documents are a great place to highlight any experiences you have (whether or not they are listed here) that make you a good candidate for an advanced training fellowship.

For purposes of this form, clinical hours or clinical experiences may only be counted if they occurred face-to-face with a client/patient; AND if those services were provided in or through an organization or agency where regular clinical supervision was provided (i.e. practicum, field placement, internship, training clinic, etc.).

Please indicate if and where you have had any of the following experiences

	Clinical experience	Training setting(s)
<input type="checkbox"/>	Working with an SMI population	
<input type="checkbox"/>	Working in a VA	
<input type="checkbox"/>	Working in an interdisciplinary setting	
<input type="checkbox"/>	Utilizing the Recovery Model for Mental Illness	

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Selection & Notification:

PSYCHOLOGY: As a member of the Association of Psychology Postdoctoral and Internship Centers (APPIC), the Central Arkansas Veterans Healthcare System Psychology Fellowship program adheres to the APPIC policy regarding recruitment, offers and acceptances of positions for training. Our program will review applications received by the deadline of January 4, 2019 and quickly contact applicants concerning the status of their application. Those invited to interview for the position will be given additional information at that time concerning the interview process. Our fellowship training committee will meet in early February to make selections and rank candidates. **We will be following the APPIC Notification Guidelines and make Psychology offers on February 25, 2019.**

SOCIAL WORK: For the Recruitment year 2019-2020, the six PSR Fellowship Sites, agree to adhere to a common date to make first offers to social work fellow candidates. This date will be **Thursday, March 21, 2019**. No site will initiate an offer to a social work candidate prior to this date. Each site may make offers to candidates after this date. Sites making offers on Thursday, March 21st, 2019 will expect candidates to respond with their decision no later than close of business, Monday, March 25th.

ALL OTHER DISCIPLINES: Offers will be made on a rolling basis as soon as discipline-specific interviews are completed, until all positions are filled.

FOR ALL CANDIDATES: Applicants who are no longer under consideration for a fellowship position will be notified as soon as possible, usually by email. The final decision concerning extending offers will be made by the Director of Postdoctoral Training. Once selections have been made, those agreeing to accept a position as fellows at CAVHS will be sent a formal letter of selection that will outline procedures for preparing for the start of the fellowship year. Fellowship cannot begin until all requirements for completion of the graduate degree and other requirements are completed, and documentation will be required for this. Selectees will also be subject to pre-employment drug testing, as well as random drug testing during the fellowship, which is routine for any clinical VA position.

Questions regarding application materials should be directed to:

*Courtney Crutchfield, Ph.D.
Director of Psychology Postdoctoral & Interprofessional Fellowship
Central Arkansas Veterans Healthcare System
2200 Fort Roots Drive (116/NLR)
Building 170, Room 2N-101
North Little Rock, AR 72114
courtney.crutchfield@va.gov or 501-257-3471
Fax: 501-257-3110*

