**Clinical Psychology Training Programs at Brown: A Consortium of the Providence VA Medical Center, Lifespan, and Care New England**

**Postdoctoral Fellowship Training Program**

**Postdoctoral Fellowship Description: CLINICAL FOCUS**

<table>
<thead>
<tr>
<th>Title:</th>
<th>APA Accredited Postdoctoral Fellowship in Interprofessional Care with Post-Deployment and Readjustment Program (PDRP) and Trauma Recovery Services (TRS)</th>
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</thead>
<tbody>
<tr>
<td>APA-accredited:</td>
<td><em>X</em> Yes ____No</td>
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<tr>
<td>Site:</td>
<td>Providence VA Medical Center (PVAMC), Providence, RI</td>
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<td>Primary Supervisor:</td>
<td>Jennifer F. Lambert, Ph.D.</td>
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<td>Additional Supervisor(s):</td>
<td>Clinical: Nancy Brand, Ph.D., Amy Cameron, Ph.D., Samantha Collum, Ph.D., Stephen Correia, Ph.D., and/or Megan Spencer, Ph.D. (based on specialized trainings opportunity selected, see below)</td>
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<td>Research: TBD depending upon research interests</td>
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**Description of Site:** The Post-Deployment and Readjustment Program (PDRP) is located in the Trauma and Readjustment Clinic at the Providence VA Medical Center. The PDRP is co-located with the Trauma Recovery Services and the programs work very closely with each other. The mission of the PDRP involves providing high quality, accessible, behavioral health care to Veterans who have recently deployed (Post 9-11) and/or recently discharged from the military. We provide both individual and group therapy to address a variety of presenting problems including readjustment to civilian life, education/employment, sleep difficulties, anger/irritability, anxiety/stress, depression, relationship problems, substance use disorders, and PTSD. The Fellow also works with our Primary Care Providers and Transition Care Managers as the behavioral health representative in the Post Deployment Clinic, which is an open access primary care clinic for Post 9-11 Veterans.

**Fellowship Aims:**

1. To provide the Fellow with broad post-doctoral training in the treatment of Veterans returning from recent combat deployments. This will include specialized training in the treatment of Posttraumatic Stress Disorder and other common mental health and readjustments issues following deployments. The Fellow also will gain experience working as a member of an interprofessional team.

2. To provide the Fellow with clinical training in psychological assessment, diagnostic evaluation, individual and group therapy, and consultation.

3. To increase the Fellow’s knowledge and competencies with clinical research. This may include conducting research (e.g., analyzing data and preparing manuscripts on existing data sets and other involvement in ongoing research projects), conducting pilot studies, serving as a therapist in clinical trials, grant writing, and/or attendance at research meetings.
**Fellowship Timeline**
This is a one-year Fellowship. The Fellowship will initiate approximately September 1, 2019 and conclude August 31, 2020.

**Clinical Activity Plan (70%) (28 hours per week)**
Seventy percent of the Fellow’s time will be devoted to clinically-related activities. The Fellow’s clinical activity will involve spending 4 days per week at the PVAMC Post-Deployment and Readjustment Program (PDRP) and the Trauma Recovery Services (TRS), working primarily with Veterans returning from deployments to Iraq and Afghanistan. Time at the PVAMC also will include participation in our Post-Deployment Clinic. Several additional specialized training opportunities will be offered (see below) and the trainee will work with the primary supervisor to determine the final training experience.

In order to ensure that a high level of clinical training is provided, the following activities will be required:

**Clinical Assessment (up to 4 hours/week, depending upon referrals):** The Fellow will conduct diagnostic evaluations and/or psychological assessments of Veterans referred for Mental Health treatment. This will include: (a) diagnostic assessment using DSM-5 criteria; (b) the selection, administration, scoring, and interpretation of psychological tests; (c) integrating data and preparing written reports; and (d) presentation of findings to the Veteran and relevant parties (e.g., treatment team, involved family members, etc.).

**Membership in Interprofessional Treatment Teams at the PVAMC/Consultation (3-7 hours per week):**
The Fellow will demonstrate the ability to function as an independent clinician within the context of an interprofessional team and the broader general medical hospital setting. His/her interactions with other providers will demonstrate an understanding of the responsibilities and limitations of a psychologist in a general medical and psychiatric setting. Fellows will have the ability to make appropriate referrals for ongoing care or for additional assessment from other specialty providers and to use the results to guide diagnostic formulation and treatment planning and implementation; discuss relevant aspects of patients’ diagnosis; and make follow-up contacts with Veterans and their families. Specific experiences are as follows:

- **Post-Deployment Clinic:** This is a 12-month rotation. Clinic runs Wednesdays 2-6pm (fellow usually covers a 2-hour block). This involves conducting brief behavioral health screens for Returning (OEF/OIF/OND) Veterans first presenting for care at the PVAMC. Purpose of screening is to assess behavioral health needs in non-treatment seeking population, normalize adjustment reactions, provide brief education when appropriate, and triage (often scheduling follow-up with self to reduce transitions in care). Under the supervision of Dr. Lambert.
- **Polytrauma/TBI:** This is a 6-month rotation (Tuesdays 12:30-4:30pm) that involves completing a semi-structured interview with Veterans who had positive screens for possible TBI during deployment. Includes assessment of current symptoms, differential diagnosis between post-concussion syndrome versus anxiety/depression/sleep deprivation or other MH issues, and treatment recommendations. No prior experience necessary. Supervisors: Drs. Stephen Correia and Megan Spencer.
- **Participating in treatment team meetings (1 hour per week).** Depending on the week, this may include the PDRP or TRS team meeting, Polytrauma/tbi team meeting, or the OEF/OIF/OND Interdisciplinary team meeting.

**Treatment Services (17+ hours per week):** The Fellow will provide individual and group psychotherapy services to Veterans within PDRP and TRS. Families are encouraged to be involved in the Veterans’ care. Although a large proportion (40+%) of treatment will involve addressing PTSD, the Fellow will
demonstrate competence in evidence-based cognitive-behavioral therapies to treat a range of anxiety, mood, and co-occurring substance use disorders as well as mild readjustment difficulties. Specific interventions may include Cognitive-Behavioral Therapy for Insomnia (CBT-I), Interpersonal Psychotherapy for Depression (IPT), Acceptance and Commitment Therapy (ACT), CBT and Behavioral Activation for depression, Prolonged Exposure (PE) and/or Cognitive Processing Therapy (CPT) for PTSD, and evidence-informed treatments for other disorders. The Fellow will demonstrate competency in developing evidence-based treatment plans that specify measurable benchmarks for treatment success and that reflect working knowledge of several different theoretical models. The Fellow will actively participate in the development and implementation of strategies for analyzing treatment effectiveness. The fellow will spend a minimum of 12 hours per week providing individual or group therapy within these programs. In addition, the following specialized training opportunities will be available to the fellow throughout the training year (to be determined based on Fellows interests and schedule):

- **Cognitive-Behavioral Therapy for Insomnia (CBT-I):** A 6-month rotation that includes training in CBT-I (1 hour per week of supervision plus 3-4 cases over the course of the rotation). Supervisor: Nancy Brand, Ph.D.
- **Cognitive Processing Therapy (CPT):** Fellows may attend a 2-day CPT training at the PVAMC and participate in the 6-month telephone consultation program (1 hour per week), with a regional CPT trainer in order to obtain provider status upon licensure. Opportunities are also available to get trained in Prolonged Exposure therapy though not through the formal VA training program. Clinical supervision of these cases will be provided by primary supervisor.
- **Couples Counseling:** For fellows interested in gaining experience in couple’s counseling, training and supervision in Integrated Behavioral Couples Therapy as well as Conjoint Behavioral Couples Therapy (which involves treating PTSD symptoms in the context of couples counseling) are available. This will include 1 hour/week of supervision and 1-2 hours per week seeing clients, with length of rotation depending on availability of cases. Supervisor: Amy Y. Cameron, Ph.D.
- **Intensive Outpatient Program for PTSD:** This is a 4-week, PTSD treatment program led by members of TRS and PDRP, that is run 2x/year. The program runs from 9am-2:30pm each day and involves multiple groups per day, in vivo exposure assignments and “field trips” in the community (e.g. may include trip to Veterans cemetery, movie, grocery store, volunteering, attending a yoga class, etc.), a family day, etc. The fellow may have the opportunity to co-lead some groups and participate in at least one of the community outings. Supervisor: Amy Y. Cameron, Ph.D.
- **Partner Communication & Respect Program (PCRP):** This is a 4-month rotation (2 hours/week). PCRP is group therapy program for Male Veterans with relational anger directed toward an intimate partner. Includes training in an evidence-based treatment for relational anger, group psychotherapy experience, conducting intake assessments for relational anger, and experience working with court-mandated treatment referrals for domestic violence. Supervisor: Samantha Collum, Ph.D.

Clinical Documentation: The Fellow will have the ability to maintain accurate records and to document case formulations, assessment results, treatment plans, and progress notes in a timely, concise, and clear manner.

Supervision: The Fellow will gain skills in provision of supervision. Opportunities include providing co-supervision in CBT to psychiatry residents with Dr. Nancy Brand (1.5 hours per week for 10 months). May also provide assessment and/or group therapy supervision to the Psychology Intern working in the Trauma Recovery Services and/or social work interns at the PVAMC.
**Didactic Training Activity Plan (10%) (average of 4 hours per week)**

1. The fellow will participate in monthly MHBSS colloquia that promote evidence-based practices and often involve guest presenters from allied disciplines, and during the first 2 months of the Post-Doc, the Fellow will attend a mandatory seminar for all VA Clinical Postdoctoral fellows for training on issues specific to Veterans (Mondays 8-9:30am). Finally, the Fellow will be encouraged to attend relevant colloquia in other services, particularly, the Primary Care Service (up to 1 hour per week).

2. The fellow will be required to participate in the following post-doctoral seminars through the Brown Post-Doctoral Training Program:
   - Core Seminar (2nd Tuesday of month, 5:30 to 7:00 p.m., 1.5 hours)
   - DPHB Academic Grand Rounds (1st Wednesday of month, 11:00 to noon, 1.0 hour)
   - Clinical Ethics Seminars (1st Wednesday of month, 10:00 to 11:00 a.m., 1.0 hour)

3. The following seminars are optional:
   - Postdoctoral Training Program Grantsmanship seminars (1 hour per week)
   - Postdoctoral Training Program Special Topics in Statistics and Research Methods (1 hour per week)

**Research (20%) (8 hours per week)**

Twenty percent of the Fellow’s time will be devoted to research. The Fellow will work with a research mentor toward producing a traditional scientific product in a content area to be determined based on Fellow's research interests. This may include the following:

- Initiating and collaborating on manuscript preparation and submission of journal articles, and panel/poster submissions at a regional or national conference. Fellows may use existing data that has been collected and archived (e.g., by the supervisor or the Fellow’s dissertation).
- Conducting program development/evaluation. In past years, Fellows have started a pain assessment clinic for Veterans on chronic opiates, a walk-in sleep clinic during our Post-Deployment Clinic, a Storytelling Group culminating in a public Memorial Day event, and an LGBTQ Wellness Group. Fellows are encouraged to collect outcome data to be presented at national meetings and/or submitted for publication in a peer-reviewed journal.

Fellows may also become involved in ongoing research projects, including serving as a study therapist in an ongoing RCT, conducting assessments for an RCT, etc. Fellows interested in learning about writing a grant, seminars and mentoring opportunities are available with senior psychologists within the Department of Psychiatry (see above under Didactics). Finally, for Fellows interested in learning about the editorial review process of manuscripts submitted to refereed journals, ad hoc reviewing opportunities may be made available with his/her research mentors.

**Supervision and Evaluation**

Clinical supervision will be provided in the form of one-hour weekly face-to-face individual supervision blocks with licensed clinical psychologists on site (minimum of 2 hours individual, face-to-face supervision weekly) as well as two additional hours of groups and/or individual supervision per week. An additional hourly block of individual, face-to-face supervision will be offered for academic/research supervision. The Fellow also will have access to several additional forums for direct and indirect supervision through optional participation in regularly scheduled rounds and treatment teams with members of the interprofessional teams.

The Fellow and supervisors will develop fellowship goals and learning objectives early on in the first year. At the midpoint and conclusion of the Fellowship, the Fellow and supervisors will provide formal performance evaluations of one another.

**Path toward licensure:** YES __ X ___ NO _____
**Resource Requirements**
The Fellow will be provided with the following resources:

1. Office space at the PVAMC
2. Telephone
3. A personal desktop computer with internet access
4. Access to copying equipment
5. For CPP and CNSP fellows, individual office space is provided.

Postdoctoral Track Coordinator

Director, Clinical Psychology Program

Director, Postdoctoral Fellowship Training Program