# Mental Illness Research and Treatment (MIRT) Advanced Psychology Fellowship Program



Neuropsychology Specialty

W.G. (Bill) Hefner VA Healthcare System Salisbury, NC 28144

Directors: Holly M. Miskey, Ph.D., ABPP-CN & Robert D. Shura, Psy.D., ABPP-CN

## **Applications Due: December 17, 2023**

Thank you for your interest in the Advanced Psychology Fellowship Program at the W. G. (Bill) Hefner VA Health Care System (Hefner VAHCS) within the VISN 6 Mental Illness Research, Education and Clinical Center (MIRECC) in Salisbury, NC. This program is a neuropsychology specialty program. We anticipate two openings for a two-year Fellowship to begin around July/August 2024.

### **Overview**

The MIRECC Fellowship emphasizes advanced research and specialized clinical training in postdeployment mental health. The program adheres to the Houston Conference Guidelines for post-doctoral training in clinical neuropsychology. MIRECCs are nationally recognized Centers of Excellence dedicated to improving the long-term functional outcome of individuals with mental illness through innovative research, clinical care, and educational programs. The Fellowship program is designed to train allied health professionals with the goal of becoming outstanding clinical researchers in high priority areas of mental health. Individualized, mentored research and clinical training are combined with a state-of-the-art curriculum emphasizing research methods, statistics, epidemiology, mental health systems, quality improvement methods, education, and service delivery. Each MIRECC site has a specific area of focus for research and clinical training. The VA Mid-Atlantic (VISN 6) MIRECC focuses on post deployment mental health, and the Hefner VAHCS site specifically focuses on neuropsychology, neuroimaging, traumatic brain injury (TBI), blast exposure, sleep, and psychiatric conditions. Fellowship sites have national interaction and collaboration through weekly video conferencing of didactics. This site also provides weekly on-site didactics, including functional neuroanatomy and advanced neuropsychology seminars. Didactic opportunities at our academic affiliate, Wake Forest School of Medicine (WFSM), include Grand Rounds, Clinical and Translational Science Institute (CTSI) courses, and viewing brain cuttings. In addition, a nationwide network of academic and research resources is available, including meaningful interaction with nationally recognized experts.



Our research lab at the Hefner VAHCS has several active research protocols including multisite investigations of post-deployment mental health, neuroimaging, and neuropsychological functioning. In collaboration with WFSM, we are developing multimodal neuroimaging investigations (MEG, PET, MRI, DTI, fMRI) of common post-deployment conditions such as mild TBI and posttraumatic stress disorder (PTSD), with particular interest in translational applications. Possibilities for research collaboration exist with other on-site projects, intra-MIRECC interactions (Durham VAMC, Richmond VAMC), and WFSM faculty.

Supervised clinical activities are offered in our Neuropsychology Outpatient Clinic, Polytrauma Clinic, ADHD Clinic, Community Living Center (Geropsychology), and the Cognitive Rehab rotation which includes the Functional Adaptation and Cognitive reTraining (FACT) and SmartThink cognitive rehabilitation programs, as well as ADHD Group and individual cognitive rehab. Fellows may choose to arrange additional training experiences in conjunction with other programs including the Inpatient Psychiatric Unit, PTSD Residential Rehabilitation Treatment Program (PTSD-RRTP; currently closed due to construction), Behavioral Neurology Clinic, or WFSM. Although this Fellowship is research-focused, it is designed to meet clinical supervision and training requirements consistent with NC psychology licensure and with the Houston Conference Guidelines for Clinical Neuropsychology.

Fellows devote the majority of their time to clinical research and education, and approximately 25% to direct patient clinical care. In collaboration with their mentors, Fellows develop and implement research projects, publish and present findings, participate in grant writing, and utilize the latest technology for educational activities and clinical service delivery. Career development is also emphasized. With mentor support and guidance, Fellows are expected to develop a 2 to 5-year career trajectory beyond formal postdoctoral training.

# **Guiding Principles**

The structure and activities of the Fellowship program are designed to meet the guidelines established by the American Psychological Association, the Houston Conference Guidelines, and the VA Guidelines for Postdoctoral Programs. More information about the MIRECC Advanced Fellowship Program can be found at <a href="https://www.mirecc.va.gov/mirecc\_fellowship.asp">https://www.mirecc.va.gov/mirecc\_fellowship.asp</a> and in the following article:

O'Hara, R., et al. (2010). Increasing the Ranks of Academic Researchers in Mental Health: A Multisite Approach to Postdoctoral Fellowship Training. *Academic Medicine*, 85, 41–47.

# **Training Setting**

The Hefner VAHCS in Salisbury, North Carolina provides inpatient and outpatient medical and psychiatric care. We house a 35-bed Substance Abuse Residential Rehabilitation Treatment Program (SARRTP) and a 23-bed PTSD-RRTP (currently closed). The 120-bed Community Living Center (CLC), comprised of short-term rehabilitation units, long-term care units, and a Hospice unit, recently received a 5-star rating. We are a designated Center of Excellence for Mental Health as well as for Geriatrics. We have maintained an academic affiliation with Wake Forest School of Medicine (WFSM) since 1995. In 2006, the medical center also affiliated with the Edward Via College of Osteopathic Medicine (VCOM) at Virginia Tech University.

Additionally, the Hefner VAHCS catchment area includes two new Healthcare Centers (HCCs) in Charlotte and Kernersville, as well as one Community-Based Outpatient Clinic (CBOC) in Charlotte.



The Hefner VAHCS has been consistently ranked as one of the top five growing VAs in the nation. Between 2000 and 2018, the number of total Veterans seen by the medical center increased from 31,515 to 104,000. In FY 2021, the medical center provided over 800,000 outpatient visits to over 90,000 unique Veterans. This is a 21% increase in the number of outpatient visits and greater than 10% increase in number of unique Veterans from the prior year. Patient demographics are reflective of the areas served. North Carolina Census data (2017) reveal that the approximate population diversity by race is 21 percent African American/Black, 1 percent American Indian, 2 percent Asian, 8 percent Hispanic or Latinx, and 68 percent White. Our current Veteran demographics reveal that the population served is approximately 30 percent African American/Black, 0.4 percent American Indian, 0.3 percent Asian, 0.4 percent Pacific Islander/ Hawaiian, 6 percent unknown/declined and 63 percent White. The majority of Veterans served are male, but the female patient population is growing rapidly at 11% of new enrollees.

The Mental Health and Behavioral Sciences (MH&BS) service line has over 250 staff in multiple disciplines including nurses, psychologists, psychiatrists, social workers, licensed therapists, and peer support specialists, among others. Psychology has over 70 doctoral-level psychologists, two psychometrists, and several administrative assistants. Seven psychologists are credentialed in neuropsychology, and three are currently board certified (two through ABPP and one through ABN). MH&BS also offers a one-year APA-accredited Clinical Psychology Residency Program (two positions), an APA accredited internship with six positions (including a neuropsych track), and several psychology practicum student rotations. The MIRECC is housed in the Research and Academic Affairs (R&AA) service line, which offers one additional MIRECC medical Fellowship position. In previous years, this position has been held by neurology or pharmacology. We additionally host medical residents (psychiatry, pharmacology, neurology, etc) and trainees from programs including WFSM and VCOM.

# **Training Goals and Activities**

#### **Evaluation**

At the beginning of the first year, Fellows complete a written Self-Assessment which guides the training plan. The Self-Assessment allows Fellows to tailor their learning experiences to best meet their individual This document may contain links to sites external to Department of Veterans Affairs.

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training needs, while also providing sufficient structure to ensure successful completion of training goals. Together with one of the co-Directors, Fellows will develop an Individual Development Plan (IDP) that will be updated throughout the two-year program, which guides individual training needs and goals.

## **Program's Evaluation of Fellow**

Supervisors and Fellows are expected to exchange feedback routinely as a normal part of their daily interactions. On a semester basis (six months), each Fellow receives a written evaluation of their performance in the Fellowship; quarterly evaluations (approximately three months) are provided in verbal form. The written feedback is structured to match the individualized learning goals and objectives and includes written feedback from clinical supervisors and the research mentor(s). Feedback is expected to be as specific as possible and communicated in a respectful manner. The Training Director and Fellow discuss the formal evaluation, and both sign it before it is placed in the Fellow's training file. The Training Director and the Fellow meet and collaboratively assess progress toward achieving goals and objectives in the next semester and revise or remediate as needed. If a Fellow is at risk of not meeting training requirements for program completion, or performs below expectations on any given skill, a Performance Improvement Plan will be designed with specific and measurable goals and will be re-evaluated at set timepoints. Fellows receive a copy of the Fellowship Training Manual which provides additional detail about evaluation including due process procedures for problem identification and resolution (e.g., probation for unethical behavior). Additionally, each Fellow meets with one training Director for an hour each week to discuss progress through the program, administrative issues, and any topics relevant to progress in clinical and research goals; this is beyond regular clinical supervision and research mentor meetings.

### **Fellow's Evaluation of Program**

A formal system of evaluation is used for Fellows to provide feedback on their clinical, supervisory, mentorship, and overall Fellowship program experience. The Fellows complete formal rating scales of their experience in clinical rotations and in the overall Fellowship every semester (6 months) and at the end of the training program to rate their satisfaction with the training experiences, outcomes, quality of supervision provided, didactic experiences, research involvement, and facilities and resources available. The Fellow and clinical supervisor meet to discuss and sign evaluations of both the supervisor and Fellow prior to being submitted to the Training Directors. A copy is provided to the Training Directors as a means of monitoring program quality. The Training Directors and Fellow will review the Fellow's ratings and work collaboratively to address any areas of concern. Fellows are encouraged to provide informal input and feedback as a routine part of the supervision process, in their weekly meetings with their research mentor(s), and in weekly meetings with the Training Directors. In addition, Fellows complete evaluations after each seminar (Functional Neuroanatomy and Advanced Neuropsychology).

# **Research Training**

Fellows devote a substantial amount of time to research-related activities. This includes educational activities (didactics and seminars) and administrative activities (required meetings), although at least 25% of this time is expected to be devoted to research. Fellows are expected to participate in ongoing research activities at the Hefner VAHCS, MA-MIRECC, and WFSM. To successfully complete the program, Fellows are required to:

- 1. Submit a minimum of four publications (two as first author) using existing or new datasets,
- 2. Submit a grant application (typically for a small pilot study),
- 3. Actively participate in existing, ongoing data collection and research activities, including running an average of one research participant weekly,

- 4. Present research findings to psychologists, psychiatrists, social workers, and nurses at the Hefner VAHCS Mental Health Grand Rounds in July of each year, and
- 5. Present at national meetings and/or seminars.

There is also ample opportunity to present within the internship didactic program, as well as at other local events (Mental Health Grand Rounds, Mortality and Morbidity meetings, etc.). Fellows additionally have the opportunity to design, develop, and conduct their own research projects.

#### **Research Training Activities**

Research mentorship provides Fellows the opportunity to learn from established local investigators and investigators from the local research community, the network of VISN-6 MIRECC investigators, or VA investigators across the nation. Both the Hefner VAHCS and WFSM offer the opportunity to participate in local and broadcast lectures on state-of-the-art research methods. The MIRECC Advanced Fellowship program's video teleconferencing system provides opportunities for weekly didactics including seminars on grant writing, biostatistics, bioethics, and career development.

The Hefner VAHCS has excellent research infrastructure including an on-site institutional review board (IRB) and the Salisbury Foundation for Research and Education, a non-profit organization that supports grant management and other research activities. There are opportunities to collaborate with other VA and WFSM investigators who focus on specific domains of post-deployment health such as TBI and PTSD, innovative technology-based approaches to training clinical expertise, and application of advanced neuroimaging techniques in the study of mild TBI or blast exposure. Fellows gain access to VA Informatics and Computing Infrastructure (VINCI) which provides access to analytic software (SAS, R, etc.). MIRECC-specific resources include statistical consultation and access to multiple archival data sets. Fellows apply for an academic appointment at our affiliate, WFSM. This provides the opportunity to audit select classes, access library resources and electronic articles, attend brain cuttings, and the potential for research collaborations.

**Research Team Meetings:** The research team includes research neuropsychologists, a neuroscientist, psychometrists, research assistants, clinician-researchers, and Fellows. Active studies meetings are held to update on procedural aspects of ongoing studies, and Writing meetings are held regularly for updates on publication and grant drafting processes. During Writing meetings, team members plan new manuscripts, propose new manuscript ideas, and solicit help on issues with writing.

**Professional Meetings:** Fellows are encouraged to attend professional meetings and conventions of their choice as a means of participating in the larger professional world, and of pursuing individual professional interests. Fellows are also expected to present research data (e.g., poster, oral presentation, symposia) at national or international professional meetings or conferences. The Fellowship program provides a stipend of \$1000 for authorized travel to professional meetings annually, though in many cases we are able to fully fund travel. Authorized absence may be granted for such activities in an amount comparable to other Psychology staff. Absences for such meetings must be negotiated with the supervisor and submitted for approval.

## **Clinical Training**

Fellows spend approximately 25% of their time in supervised direct patient clinical care. Primary goals include:

Employ current evidence-based assessment and/or treatment to enhance patient care,
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- 2. Provide education and training to more junior psychology trainees through in-service lectures, Grand Round presentations, and direct clinical supervision,
- 3. Receive training in complex ethical and medicolegal issues unique to VA clinical work and research, and
- 4. Meet eligibility criteria for ABPP Board Certification in Clinical Neuropsychology.

### **Clinical Training Activities**

Fellows complete six-month rotations and are permitted to repeat rotations, provided the experience will result in additional growth and skill development. Fellows identify one particular area of interest under the umbrella of Neuropsychology and complete clinical rotations reflective of their clinical and research interests, and learning needs as determined by the Fellowship Directors and mentor team. Often, clinical-research activities also apply toward state licensure residency requirements.

Fellows receive at least two hours per week of individual, face-to-face, or video supervision, conducted by licensed psychologists with expertise in the areas being supervised. Fellows receive supervision from at least two psychologists during each training year. Supervision provided is relevant to the actual clinical services rendered by the Fellow. Fellows take responsibility for tracking aggregate clinical hours towards licensure. If licensure in a state other than North Carolina is desired, applicants are encouraged to ensure that the supervision offered at Hefner is sufficient for licensure prior to application. Fellows may choose to apply for licensure in their preferred state and are strongly encouraged to begin the application process during their fellowship.

**Staff Meetings:** Fellows attend the monthly Salisbury All Staff Meeting (4th Tuesday of each month, 8:00 am to 9:00 am), Psychology Service staff meetings (2nd Friday of each month, 11:00 am to 12 noon), Research & Academic Affairs staff meetings (2nd Tuesday of each month, 2:00 pm to 3:00 pm), the Mid-Atlantic Translational Science Meeting (3rd Thursday of the month, 3:00pm to 4:00 pm), various MIRECC writing meetings, and the unit(s) or services on which they work.

**Instruction and Supervision of Other Trainees:** Fellows frequently provide neuropsychological consultation to other providers in Psychology or Psychiatry. Fellows present two teaching case presentations per year for the intern didactic series, intended to educate interns on neuropsychological conditions. Fellows may also engage in additional intern didactics based on Fellow interests. Additionally, there may be opportunities for Fellows to clinically supervise interns rotating on the neuropsychology or geropsychology rotation, in a structured manner and under the guidance of the supervisor. This usually occurs during the second year.

#### **Available Clinical Rotations**

Neuropsychology Rotation: The Neuropsychology Rotation is the principal rotation for Fellows. It includes general outpatient assessment clinics, the Polytrauma Clinic, and the Behavioral Neurology Clinic. If a Fellow plans to pursue board certification in neuropsychology, this rotation is repeated and individualized over the 2 years of Fellowship by focusing on different populations, different theoretical approaches to assessment, and mentorship by different neuropsychologists. The Neuropsychology Clinic is an outpatient consult service, although participation in team-based treament planning, bedside assessment on our medical floor, and assessment on the psychiatric inpatient unit are also possible. Cases include a wide range of CNS disorders, health conditions, and injuries, and patients range from newly discharged Iraq and Afghanistan-era Veterans to elderly Veterans. At a minimum, Fellows administer and score instruments, interpret test data, write reports, and conduct feedback sessions. Ample opportunity exists to

interface with other disciplines (such as Psychiatry, Neurology, or Psychopharmacology). There is oppurtunity to develop individual foci, especially during the second year, based on interest. For example, past Fellows have incorporated teleneuropsychology and disability evaluations based on career goals. Fellows are expected to work towards assuming the role of "expert," and to proivde consultation to other Psychology staff.

Cognitive Rehabilitation: On this outpatient rotation, fellows implement cognitive rehabilitation techniques with Veterans in individual and group formats. Cognitive Rehabilitation focuses on teaching and implementing compensatory strategies to improve daily functioning. Groups are designed to provide psychoeducation about cognition, instruction on compensatory strategies, and homework to reinforce skills. Individual session focus on tailoring strategies and techniques to target weaknesses. Veterans range in age and present with a variety of conditions including mild/major neurocognitive disorder, TBI/PTSD, and ADHD, and older Veterans who would like to learn more about the cognitive aging process and strategies for successful aging. Available experiences include FACT, SmartThink, a Managing ADHD in Adulthood group, and individual cognitive rehab. The FACT (Functional Adaptation and Cognitive re-Training) program is a multidisciplinary team intervention designed for Veterans with a mild/moderate brain injury or other acquired brain injury who continue to have cognitive complaints. Small groups focus on compensatory strategies, psychoeducation, social comprehension and skill development, and vocational skills. The second FACT program is SmartThink. It is a large group available to any Veteran who would like to improve brain health, sleep, memory, attention, or other cognitive function. It covers 6 modules including Healthy Brain, Sleep, Attention, How Memory Works, How to Improve Memory, and Problem Solving.

Geropsychology and Home Based Primary Care: In the inpatient Community Living Center (CLC) setting, Fellows have the opportunity to complete cognitive and capacity evaluations for veterans rehabilitating from illness, stroke, surgery, injury, or hospitalization. Alternatively, Fellows can provide brief therapy to Veterans in Hospice (e.g., end-of-life issues), long term care (e.g., depression, behavioral disturbances), or rehabilitation (e.g., adjusting to amputation/diagnosis, motivational interviewing for healthful behaviors). They work in multidisiciplinary teams, provide education, develop behavior modification plans through the STAR-VA program, and develop recommendations for treatment or discharge planning. They may also choose to become involved with the facility's Dementia Steering Committee. This is a fast-paced environment that fosters skill development in brief bedside assessment, concise report writing, a fast turnaround, a team approach, and presentation of results to other disciplines. For those wishing to pursue board certification in neuropsychology, this is a recommended rotation and can be tailored specifically towards neuropsychological evaluations.





Outpatient geropsychology training is also available through the Home Based Primary Care (HBPC) program. Fellows provide assessment or psychological services to elderly and disabled Veterans and their caregivers in their homes. This unique opportunity will allow the Fellow to function as part of an interdisciplinary team and to make in-home visits with the HBPC staff psychologist.

**Acute Psychiatry:** An inpatient psychiatric unit totaling 46 beds provides short-term inpatient treatment for a variety of mental health conditions. Fellows attend interdisciplinary treatment team meetings and provide consultation. Fellows will primarily provide psychological or brief cognitive evaluations (e.g., diagnostic, cognitive screening, capacity, etc), though there is opportunity for group therapy and psychoeducation classes.

Other Rotations: Other clinical rotations are available based on the Fellow's training goals, such as in the Outpatient Mental Health Clinic, Posttramuatic Stress Disorder Clinical Team, PTSD Residential Rehabilitation Treatment Program (currently closed), Substance Abuse Residential Rehabilitation Treatment Program, Primary Care Mental Health Integration, and Whole Health. Fellows are expected to function as an advanced psychology trainee in selected rotations, and may thus also be involved in supervising more junior trainees as available. Additionally, Fellows will need to tailor specific rotations towards advanced neuropsychology training. Fellows may also develop new rotations consistent with their training goals at the discretion of the Training Director.

## **Diversity Programming at Salisbury**

The Hefner VAHCS strives to be a welcoming and supporting environment for all staff, trainees, Veterans, and families. We adopt a broad definition of diversity in an effort to be inclusive of all people. We encourage our trainees to explore not only their patients' identities, but also their own in an effort to grow in understanding.

#### **Diversity Mentoring Program**

The purpose of the Diversity Mentoring Program is to provide an opportunity for interns to discuss elements of diversity, equity, and inclusion with a mentor in a non-evaluative context. Fellows might explore personal experiences related to diversity, discuss how to navigate professional or training environments, examine diversity in relation to Veterans or colleagues, unpack current events, or explore other aspects of personal and professional development. We believe it is our responsibility to create an environment where our interns have the space and support to grow. This program is under development.

### Inclusion, Diversity, Equity, and Access (I-DEA) Committee

The purpose of this interdisciplinary group is to identify and address issues of equity and inclusion within the organization, develop strategies and recommendations for facility leadership, and provide resources with the goal of fostering an affirming and supportive workplace for all. The committee helps develop strategies to build inclusive, psychologically safe and culturally sensitive teams. I-DEA may also identify issues relevant to inclusive patient care. The committee meets monthly; interested Fellows may attend meetings and become involved as interest and time permits.

### **Cultural Conversations**

The Mental Health department hosts virtual discussions each month that encourage staff to engage in candid conversations in an effort to build communication and a sense of community. A psychologist moderates the conversations and each week, a different question or issue is explored together. The meetings are voluntary and include psychologists, psychiatrists, administrative staff, trainees, social workers, peer specialists, and support staff.

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### **LGBTQ+ Care**

Salisbury VAMC is dedicated to serving the needs of our LGBTQ+ Veterans and is rated a "Top Performer" by the Healthcare Equality Index. We have an LGBTQ+ consultation team that meets bimonthly to educate, consult, support, build networks, and create a welcoming environment at our VA for all Veterans. Every campus has an LGBTQ+ Point of Contact to increase our presence as clinical advocates and increase our accessibility to Veterans. A Veteran Care Coordinator liaises with the VISN and National LGBTQ+ administrations. We participate in Pride Celebrations in multiple cities in our catchment area to let LGBTQ+ Veterans know that they are very welcome at our VA. We also run clinical/support groups for transgender and LGB Veterans. Of note, the VA is in the process of a system-wide change in healthcare policy that would allow Veterans diagnosed with Gender Dysphoria to have the gender affirming surgeries as part of their healthcare at VA. Fellows are welcome to contribute to the consultation team, participate in Pride events, or co-facilitate groups.



# **Education and Career Development**

Educational goals include learning opportunities, teaching activities, and dissemination of research findings. Opportunities include VA Grand Rounds, VA online seminars, VA clinical training workshops, mandatory MIRECC Advanced Fellowship video teleconference seminar series ("V-Tels"), observation of brain cuttings at WFSM as available, and formal coursework offered by WFSM. WFSM was recently awarded a prestigious Clinical Translational Science Award to develop a Clinical Translational Science Institute (CTSI). The CTSI is part of a consortium of 60 similar programs funded through NIH to accelerate translational discoveries through a variety of mechanisms, including significant educational and training opportunities. The CTSI offers significant support specifically to early career investigators, including a Translational Research Academy, study coordinator pool, Research Navigators, biostatistical support, and two internal KL2 funding lines. Primary educational goals for Fellowship include:

1. Developing a firm knowledge base regarding recent developments in translational research as it relates to post-deployment mental health,

- 2. Complete at least one Grand Rounds presentation, in-service training, intern didactics, or other appropriate venue, and
- 3. Present research at a regional, national, or international scientific meeting.

## **MIRECC Fellowship Seminar Series**

The MIRECC Advanced Fellowship program videoconference seminar series ("V-Tels") offers Fellows a broad range of topics including state-of-the-art research methodologies, biostatistics, intervention and services research, quality improvement methods, grant funding, grant writing workshops, and career development. These weekly seminars are mandatory for Fellows (at least two per month).

#### **Advanced Seminar Series**

Seminars meet on Wednesdays from 3:00-4:30 PM. Other postdoctoral residents (clinical psychology), medical residents (neurology, psychiatry, pharmacology, and rehab), and predoctoral interns are invited to attend, but seminars are structured for the postdoctoral level and for Houston Guidelines for Board Certification. Fellows contribute to development of the scheduled topics and invited speakers, depending on group and personal need. Fellows are provided with readings relevant to each topic and are expected to arrive prepared to actively participate in discussion. The seminar series is a national series hosted by the Hefner VAMC, with trainees and staff participating from other VAMCs, universities, and training programs.

<u>Advanced Neuropsychology Seminar:</u> meets on the 2nd, 3rd, and 4th Wednesdays. Topics are varied but are related to the practice of neuropsychology and include mock American Board of Clinical Neuropsychology (ABCN) Fact Finding practice.

<u>Functional Neuroanatomy Seminar:</u> meets on the 1st Wednesday.

### **Diversity V-Tel**

A monthly Diversity Video-Teleconference (V-Tel) is offered solely to post-doctoral residents by a consortium of 13 VAHCSs around the country. Each month, a presentation and discussion focus on a different aspect of diversity. MIRECC Fellows are required to attend a total of 2 of these V-Tels across their 2 years of fellowship.

### **Ethics Training**

Fellows are required to complete 2 ethics trainings outside the context of the above training activities. Typically, there is a yearly Area Health Education Centers (AHEC) Program training sponsored by the VAHCS in partnership with WFSM that is free of charge. Other options may include online CE experiences and workshops or sessions at conferences and meetings.

# **Training Activities and COVID-19**

All staff and trainees are provided with access to medical masks including N-95s. At this time, masks are not mandated unless the Veteran requests the provider wear a mask, the Veteran is demonstrating symptoms of illness, or the provider has a possible exposure to COVID-19. Fellows may choose to wear masks and they will be provided with medical masks or N-95s on request. At the time of writing, we have resumed active recruitment of research participants. We see patients in multiple modalities including over video tele-health, in person, and a hybrid model integrating use of video technology and in-person testing.

At this time, Fellows are permitted to telework up to 2 days/week, provided they continue to demonstrate good productivity and the ability to complete necessary tasks with minimal distraction. Fellows are required to maintain an accounting of their time on telework days, and the telework policy may change at any time in response to directives from leadership. Fellows may not telework on days that they are scheduled to see research participants or clinical evaluations.

## **Requirements for Completion**

## For Fellows to successfully complete the program, they must complete all of the following:

- 1. Successfully meet or exceed expectations in competencies based on the goals of the Fellowship described above.
- 2. Complete all mandatory training activities (V-Tels, mandatory seminars, ethics and diversity trainings, publication submission, and grant submission),
- 3. Not be found to have engaged in any significant ethical transgressions,
- 4. Successfully resolved any Performance Improvement Plans, and
- 5. Complete two full training years (4160 hours).

Upon fulfillment of these requirements, a Certificate of Completion is awarded, verifying the Fellow's completion of a postdoctoral training program.

## **Stipend and Benefits**

The Fellowship program offers a full-time stipend of approximately \$52,838 for Fellowship year 1, and approximately \$55,694 for year 2. Benefits include: 11 Federal holidays, 13 days of accrued vacation, up to 13 days of accrued sick leave, authorized paid leave for conferences, health insurance, and vision and dental insurance. The Federal Tort Claims Act covers professional liability for services provided as a DVA employee.

### **Administrative Policies and Procedures**

The MIRECC Fellowship abides by the established due process procedures for the psychology training program (these are detailed in our Psychology Training Program, MH & BS Service Line Memorandum 11M-2-00-6). Our program does not require self-disclosure as part of the training year application process or training year activities. We collect no personal information about you when you visit our website.

Health Professions Trainees (HPT), including MIRECC Fellows, may be subject to random drug testing. VA will initiate dismissal from against any trainee who is found to use illegal drugs, including marijuana, on the basis of a verified positive drug test. Dismissal will be initiated against any trainee who refuses to be tested. HPTs are required to receive all vaccinations listed on the CDC's list of recommended vaccines for healthcare workers, including COVID-19 and flu vaccinations (Meningococcal not required for psychology), or to request health or religious exemptions. Applicants should ensure they are able to meet this requirement prior to application. Recommended Vaccines for Healthcare Workers | CDC

HPTs are appointed as temporary employees of the Department of Veterans Affairs. As such, HPTs are subject to laws, policies, and guidelines posted for VA staff members. There are infrequent times in which this guidance can change during a training year which may create new requirements or responsibilities for

HPTs. If employment requirements change during the course of a training year, HPTs will be notified of the change and impact as soon as possible and options provided. The Training Director will provide you with the information you need to understand the requirement and reasons for the requirement in a timely manner.

### **Accreditations**

The MIRECC Advanced Psychology Fellowship Program at the **W. G.** (**Bill**) **Hefner VA Healthcare System** in Salisbury, NC, is not APA accredited. At this time, APA accreditation for post-doctoral training is not required as a requisite for board certification; thus, there is currently no plan to submit for accreditation in the near future. Of note, several of prior trainees have successfully earned board certification through ABPP/ABCN or are currently in the process of such.



## **Local Information**

The Hefner VAHCS is located in Salisbury, North Carolina. Salisbury is nestled in the rolling hills of the Central Piedmont region and is a city of approximately 28,000 with significant historical and natural attractions. The larger metropolitan areas of Charlotte, Winston-Salem, and Greensboro are all within a 45-minute drive. Beach and mountain resort areas are easy weekend trips with lakes and many fine golf courses in close proximity. The area is rated fifth in the country in terms of economic growth and is expected to continue leading the nation well into the next decade. The pleasant climate and relatively affordable cost of living make the area a popular relocation or retirement area.

In addition to providing all the attractions of a small town, Salisbury offers many big city amenities including a symphony, several art galleries, local live theater, museums, fine dining, two locally owned breweries, local wineries, summer festivals, and entertainment. The nearby metropolitan areas offer many additional cultural opportunities including theater, opera, and regional festivals. For sports enthusiasts, Charlotte is home to the Carolina Panthers NFL team, Charlotte Hornets NBA team, and the Charlotte Knights, a MLB AAA team affiliated with the White Sox. Charlotte also has the Charlotte Indpendence (United Soccer League), the Charlotte Roller Girls, and the Charlotte Checkers, a minor league hockey team affilliated with the Carolina Hurricanes. Kannapolis is home to the Chicago White Sox Single A minor

league team, the Intimidatators. Collegiate teams, including UNC-Chapel Hill and Duke, are also found in the Carolinas. Concord is home to Charlotte Motor Speedway, a major NASCAR venue, and the NASCAR Hall of Fame is located in Charlotte. Concord also has Concord Mills, a popular shopping mall, as well as Great Wolf Lodge, an indoor water park. Charlotte is also home to the U.S. National Whitewater Center. Salisbury is easily accessible from Interstate 85. Air travel is convenient through the Charlotte-Douglas International Airport in Charlotte, the Piedmont Triad Airport in Greensboro, the Concord-Padgett Regional Airports in Concord, or the Raleigh-Durham International Airport in Raleigh. Amtrak train service and bus lines are also available.













# **Application & Selection Procedures**

# **Eligibility**

Candidates must be US citizens who have completed an APA-accredited doctoral program in clinical or counseling psychology and an APA-accredited internship or not-yet-accredited VA internship by the start of the Fellowship. If the applicant has not completed the dissertation at the time of the application, a letter from the dissertation chair addressing dissertation status and anticipated completion date is required. Fellows are required to have completed the dissertation AND all requirements for degree conferment prior to their start date. An offer may be rescinded if the Fellow does not have the dissertation completed and accepted and the doctorate degree conferred by the agreed upon start date.

This program supports and adheres to Equal Employment Opportunity policies and the Americans with Disabilities Act. Applications from all qualified candidates are strongly encouraged. No applicant will be discriminated against on the basis of race, color, creed, religion, sex, gender, sexual orientation, place of

national origin, disability, or age. We do not require self-disclosure. Please also refer to the following websites for additional eligibility requirements: <a href="http://www.psychologytraining.va.gov/eligibility.asp">http://www.psychologytraining.va.gov/eligibility.asp</a> and <a href="https://www.va.gov/oaa/hpt-eligibility.asp">https://www.va.gov/oaa/hpt-eligibility.asp</a>

#### **Deadlines**

Applications must be received by e-mail no later than 11:59 PM on **December 17, 2023.** 

## **Application Review**

Our selection criteria are based on a goodness-of-fit model. The ideal candidate has demonstrated strengths in clinical work, research experience, academic preparation, and personal characteristics related to the profession. Houston Conference Guidelines state that varying levels of education and training in neuropsychology occur at different training levels based on an individual path, but at a minimum, competitive applicants will demonstrate a basic foundation in neuropsychology. Highly regarded candidates will have supervised experience with clinical interviewing, objective psychological and neuropsychological assessment, and applicable research interests and experience. Although this is a neuropsychology specialty program, applicants are expected to demonstrate a foundation in all aspects of psychology more generally, consistent with Houston Guidelines. We are recruiting Fellows whose professional goals are consistent with the training and experiences we offer to ensure that the post-doctoral experience is productive. Each application is initially reviewed for eligibility after all materials are received. A selection committee reviews all written materials and offers interviews to top candidates.

### **Interviews and Selection Processes**

Interviews for the 2024-2026 positions will be held in early January solely via video or phone teleconference in an effort to minimize financial burden. Final rankings and offers are determined by consensus of the committee based on applications and interview information. We do not participate in the APPCN Match and, as a neuropsychology advanced fellowship, we do not follow the Common Hold Date. We understand that applicants are often faced with having to make difficult decisions between programs with differing timelines. With this in mind, we make every effort to keep our review process timely and to keep candidates well informed of their status. We anticipate extending offers in early February.

## **Application Submission Requirements**

Interested individuals who meet eligibility criteria should submit the following application materials:

- 1. A cover letter of no more than two typed pages summarizing:
  - a. Your interest in the Hefner MIRECC Fellowship
  - b. Professional interests and description of career goals
  - c. Brief description of research interests
- 2. A curriculum vita (CV)
- 3. Three reference letters e-mailed from the letter writer
- 4. Unofficial graduate transcripts
- 5. Relevant publication reprints
- 6. Verification of good standing emailed from the doctorate program Training Director
- 7. A letter emailed from the dissertation chair with project status and anticipated date of completion if the dissertation is not complete at the time of application.

Please note: all degree requirements including dissertation defense and acceptance of the completed document by the academic program must be completed prior to the selected start date. Failure to meet this requirement may result in a rescinded offer.

## **Previous Fellows and Professional Positions**

Fellow	<b>Dates</b>	<b>Current Position</b>
Laura Anthony, PsyD	2009-2010	Neuropsychology testing/Psychologist, private practice
Jared Rowland, PhD	2010-2012	Research neuropsychologist, Salisbury VAMC
Saule Kulubekova, PhD, ABPP-CN	2011-2013	Neuropsychologist, Durham VAMC
Cory Lamar, MD*	2012-2013	Neurologist, private practice
Holly Miskey, PhD, ABPP-CN	2013-2015	Neuropsychologist, Salisbury VAMC
Robert Shura, PsyD, ABPP-CN	2013-2015	Neuropsychologist, Salisbury VAMC
Courtney Slough, PharmD*	2015-2016	Clinical Pharmacist, Salisbury VAMC
Timothy Brearly, PsyD	2015-2017	Neuropsychologist, Penn State Milton S. Hershey
		Medical Center
Sarah Martindale, PhD	2015-2018	Research Health Scientist, Salisbury VAMC
Mariah Delahanty, PharmD*	2016	Clinical Pharmacist, Salisbury VAMC
Erica Epstein, PsyD	2017-2019	Rehab Neuropsychologist, Inova
Mark Stern, PhD	2018-2019	Clinical Psychologist, Private Practice, CA
James "Trey" Bateman, MD*	2018-2019	Behavioral Neurologist, Wake Forest Baptist Health
Sagar Lad, PsyD	2019-2021	Neuropsychologist, Boise VAMC
Anna Ord, PsyD	2019-2021	Dean, School of Psychology & Counseling, Regent
		University
Anna Magnante, PsyD	2022-2024	Current Fellow
Victoria O'Connor, PhD	2022-2024	Current Fellow

<sup>\*</sup>Medical MIRECC Fellowship position

#### **Publications During Fellowship:**

For a complete list of manuscripts published be fellows, please e-mail the Directors.

## **MIRECC Fellowship Training Faculty**

Please note that this is a **partial list** of VA and WFSM clinicians and investigators who serve as clinical supervisors and research collaborators. Salisbury VAHCS has a large number of clinical psychologists spanning multiple specialties; only supervisors who are most active in the MIRECC program specifically are listed below. Applicants are encouraged to discuss their training goals with the Fellowship Director prior to applying to ensure a good match with faculty interests.

#### **Salisbury VAHCS site:**

Holly M. Miskey, Ph.D., ABPP-CN

Co-Director of Training

Staff Neuropsychologist

Assistant Professor: Department of Neurology, Wake Forest School of Medicine

Instructor: Department of Psychiatry, Edward Via Virginia College of Osteopathic Medicine

Doctoral Degree: Clinical Psychology, University of North Carolina at Greensboro, 2013

Predoctoral Internship: Durham VA Medical Center, Durham, NC

Postdoctoral Fellowship: Research/Neuropsychology, Mid-Atlantic MIRECC, W. G. (Bill) Hefner

VA Healthcare System, Salisbury, NC

Clinical and Research Interests: TBI, executive functioning, impulsivity/disinhibition, and PTSD

### Robert D. Shura, Psy.D., ABPP-CN

Co-Director of Training

Polytrauma Neuropsychologist

Board Certified in Clinical Neuropsychology

Assistant Professor: Department of Neurology, Wake Forest School of Medicine

Instructor: Department of Psychiatry, Edward Via Virginia College of Osteopathic Medicine

Doctoral Degree: Clinical Psychology, Marshall University, 2013

Predoctoral Internship: VA Eastern Colorado Healthcare System, Denver, CO

Postdoctoral Fellowship: Research/Neuropsychology, Mid-Atlantic MIRECC, W. G. (Bill) Hefner

VA Healthcare System, Salisbury, NC

Clinical and Research Interests: TBI, validity testing, psychometrics, and ADHD

### Robin Hurley, M.D., FANPA

**ACOS** Research and Academic Affairs

Associate Director, Education - VISN 6 MIRECC

Director, MIRECC Special Fellowship for Physicians

**Board Certified Neuropsychiatrist** 

Professor, Department of Psychiatry, Wake Forest School of Medicine

Research and Academic Affairs; VISN 6 MIRECC; Brain Injury Clinic

Medical Doctoral Degree: Medical University of South Carolina

Residency in Psychiatry: Baylor College of Medicine

Clinical and Research Interests: Traumatic Brain Injury, post-deployment mental health, and

neuroimaging

#### Jared A. Rowland, Ph.D.

Research Neuropsychologist

Assistant Professor: Departments of Neurobiology & Anatomy, Psychiatry and Behavioral Medicine,

Wake Forest School of Medicine.

Doctoral Degree: Clinical Psychology, Virginia Tech, 2010

Predoctoral Internship: Veterans Affairs Medical Center, Salem, VA

Postdoctoral Fellowship: Research/Neuropsychology, Mid-Atlantic MIRECC, W. G. (Bill) Hefner

VA Healthcare System, Salisbury, NC

Research Interests: Post-deployment mental health, mild TBI, PTSD, cognitive sequelae of common post-deployment conditions, magnetoencephalography, graph theory-based network analysis, non-invasive imaging biomarkers of mild TBI and PTSD.

#### Sarah L. Martindale, Ph.D.

Research Health Scientist

Assistant Professor: Department of Physiology and Pharmacology, Wake Forest School of Medicine.

Doctoral Degree: Psychology (Behavioral Neuroscience), Baylor University, 2015

Postdoctoral Fellowship: Neuropsychology, Mid-Atlantic MIRECC, W. G. (Bill) Hefner VA Healthcare System, Salisbury, NC

Research Interests: Sleep, alcohol and substance use disorder, post-deployment mental health, TBI, modifiable behavioral treatment factors, co-occurring conditions, conditional process analysis, structural equation modeling.

#### David L. Butler, Ph.D., ABN

Staff Neuropsychologist

Board Certified, American Board of Professional Neuropsychology

FACT (Functional Adaptation and Cognitive re-Training) Program; SmartThink Program

Doctoral Degree: Clinical Psychology, Virginia Tech University, 1982

Predoctoral Internship: Veterans Affairs Medical Center Gulfport-Biloxi

Clinical and Research Interests: Adult and Pediatric Neuropsychology, Health/Medical

Psychology, Psychopharmacology, Couples Therapy.

## Richard C. Kennerly, Ph.D.

Neuropsychology Program Coordinator

Doctoral Degree: Clinical Health Psychology and Behavioral Medicine, University of North Texas, 2006

Predoctoral Internship: Neuropsychology Track, University of Ottawa Hospital, Ottawa, Ontario

Postdoctoral Fellowship: Psychiatric Centers at San Diego, San Diego, CA

Research and Clinical Interests: Alzheimer's, ADHD, neurofeedback, forensics

#### Ramona Rostami, Ph.D.

Staff Neuropsychologist

Doctoral Degree: Neuropsychology Major Area of Study, Fuller Graduate School of Psychology, 2018

Predoctoral Internship: Health Psychology Track, Salisbury VA Medical Center, Salisbury, NC

Postdoctoral Fellowship: Bedford VA Medical Center (Edith Nourse Rogers), Bedford, MA

Research and Clinical Interests: Dementias, TBI, Cognitive Rehabilitation,

Neuroantatomy/Neuroimaging

#### Catherine S. Bergmann, Psy.D.

Clinical Neuropsychologist

Doctoral Degree: Clinical Psychology, Institute for the Psychological Sciences, 2019

Predoctoral Internship: VA-Nebraska Western Iowa, Lincoln, NE

Postdoctoral Fellowship: Neuropsychology Associates of Fairfax, Fairfax, VA

Clinical and Research Interests: Multiple Sclerosis, Aging, Dementia, and Capacity

### Rebecca Resavy, Psy.D.

Clinical Neuropsychologist

Doctoral Degree: Clinical Psychology, American School of Professional Psychology; D.C., 2013

Predoctoral Internship: Chillicothe VAMC

Postdoctoral Fellowship: GV (Sonny) Montgomery VAMC

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Clinical and Research Interests: Dementia; Cultural intersectionality with aging; Capacity evaluations; Caregiver inclusion and support; Ethical considerations; Recovery oriented feedback; Disaster response

#### James R. Bateman, M.D., MPH

Behavioral Neurologist, Salisbury VA Medical Center Medical

Co-Head, Cognitive and Behavioral Neurology Section, Wake Forest School of Medicine

Wake Forest Alzheimer's Disease Research Center Staff

UCNS Certified in Behavioral Neurology & Neuropsychiatry

Assistant Professor of Neurology and Psychiatry, Wake Forest School of Medicine

Medical Doctoral Degree: UNC Chapel Hill School of Medicine

Residency in Neurology: UNC Health Care, Chapel Hill, NC

Fellowship: Behavioral Neurology & Neuropsychiatry, University of Colorado Anschutz School

of Medicine

Fellowship: MIRECC Advanced Physician Research Fellow, Salisbury VAMC

Clinical interests: Atypical dementias, neuropsychiatric symptoms in dementia

Research interests: Chronic stress and dementia pathophysiology, social determinants and health

#### Emelie McFarland, Psy.D.

Staff Geropsychologist, Geriatrics and Extended Care

Doctoral Degree: Clinical Psychology, Chestnut Hill College, Philadelphia, PA, 2019

Predoctoral Internship: Ancora Psychiatric Hospital, Hammonton, NJ

Postdoctoral Fellowship: Geropsychology, Veterans Affairs Medical Center, Durham, NC

Clinical and Research Interests: ACT for PTSD in older adults, Student training in

Geropsychology, Caregiver support, and Ageism

### Wake Forest School of Medicine site:

**Dwayne Godwin, Ph.D.** is a Professor of Neurobiology and Anatomy with joint appointment in the Institute for Regenerative Medicine and Dean of Graduate Programs in the Biomedical Sciences. He has extensive background in electrophysiological and cellular/molecular research. Dr. Godwin's lab has undertaken translational studies in magnetoencephalography in the context of mapping the spike and wave discharges of childhood epilepsy and has more recently turned this method to a greater understanding of brain networks involved in alcohol intoxication, including studies of nonhuman primates.

*Jennifer R. Stapleton-Kotloski, Ph.D.* is the MEG Scientist with expertise in multi-unit electrophysiology, brain-machine interfaces, mathematical statistics, and magnetoencephalography. She participates in epilepsy evaluations for the Wake Forest Baptist Medical Center Epilepsy Monitoring Unit and participates in several research investigations utilizing MEG to study brain activity of both humans and non-human primates.

Charles Tegeler IV, MD is Professor of Neurology and holds the McKinney-Avant Chair in Neurosonology and is Vice-Chair of the Promotions and Tenure Committee. He directed the Stroke Section and Stroke Center for 18 years, and has directed the Telestroke Program since it was established in 2009. His recent research focus is evaluation of a novel, noninvasive closed-loop EEG-feedback technology (HIRREM) for neurological and cardiovascular disorders.