

Updated 10/5/2023



Clinical Neuropsychology Postdoctoral Residency Program

VA Connecticut Healthcare System
Psychology Service – 116B
950 Campbell Ave.
West Haven, CT 06516
203-932-5711 x2465
<http://www.connecticut.va.gov/>



Application Review begins December 15, 2023. We do not participate in the APPCN Matching Program

Accreditation Status

The Clinical Neuropsychology Postdoctoral Residency Program at the **VA Connecticut Healthcare System** is fully accredited by the Commission on Accreditation of the American Psychological Association. Our site visit recently took place (August 2023) and is under review. The site visit should have occurred in **2021** but was delayed due to the pandemic). According to APA, “all accredited programs with site visits that continue to be delayed remain accredited and in good standing throughout this delay.”

APPLICANT ELIGIBILITY CRITERIA

Applicants for our Clinical Neuropsychology Postdoctoral Residency Program must meet the following minimum requirements in addition to the general eligibility requirements of the VA: [Resources for Health Professions Trainees Coming to VA | Eligibility and Forms - Office of Academic Affiliations and Am I Eligible v5.pdf \(va.gov\)](#) . Primary items are emphasized below and a more complete listing is provided at the end of this brochure.

1. U.S. citizenship. VA is unable to consider applications from anyone who is not currently a U.S. citizen. Verification of citizenship is required following selection.
2. A male applicant born after 12/31/1959 must have registered for the draft by age 26 to be eligible for any US government employment, including selection as a paid VA trainee.
3. Residents are subject to fingerprinting and background checks. Match result and selection decisions are contingent on passing these screens.
4. Have received a doctorate from an APA or CPA accredited graduate program in Clinical, Counseling, or Combined Psychology or PCSAS accredited Clinical Science program. Persons with a doctorate in another area of psychology who meet the APA or CPA criteria for respecialization training in Clinical, Counseling, or Combined Psychology are also eligible.
5. Have completed an internship program accredited by APA or CPA or have completed a VA- sponsored internship.

6. Again, please see the end of this brochure and above links for a more complete listing of requirements.

Applicants who meet these eligibility criteria are invited to apply for a position in the Clinical Neuropsychology Postdoctoral Residency Program with the Psychology Service, Department of Veterans Affairs, VACHS.

APPLICATION PROCESS:

After a careful reading of the information in this document, describing the possible training rotations and making sure that you have read our eligibility criteria, please submit your application through the APPA CAS portal. Application review will begin in December. We do not offer interviews because we believe in trying to increase fair access to training experiences while reducing financial, geographic, or other potential barriers. Our program is planning to hold a virtual open house in late December to allow people to meet us and to answer questions about our program. It will also provide an opportunity to speak with current fellows. Please know our rankings will not be influenced by choosing (or not choosing) to speak and/or meet with us.

We utilize APPIC's online application portal, APPA CAS. Materials should be uploaded to the site (APPA CAS <https://portal.appicpostdoc.org>) by December 15, 2023. It should include:

- A. A letter of interest describing career goals and how the features of the program as described will facilitate the realization of these goals.
- B. Your curriculum vita
- C. Three letters of recommendation
- D. A copy of your graduate transcript

Questions via email can be addressed to either:

Dr. John Beauvais (John.Beauvais@va.gov) or Dr. Joseph Kulas (Joseph.Kulas@va.gov)

For questions via regular mail, please use the following address:

John Beauvais, Ph. D.
Co-Director of Training, Clinical Neuropsychology Postdoctoral Residency Program
VA Connecticut Healthcare System – West Haven
Psychology Service – 116B
950 Campbell Ave.
West Haven, CT 06516

The VA Connecticut Healthcare System, Clinical Neuropsychology Postdoctoral Residency Program is accredited by the American Psychological Association. For information regarding APA accreditation of this fellowship or other accredited fellowships, please write or call:

***Office of Program Consultation & Accreditation
American Psychological Association
750 First Street NE
Washington, DC 20002-4242
202-336-5979
www.apa.org***

**This document may contain links to sites external to Department of Veterans Affairs. VA does not endorse and is not responsible for the content of the external linked websites.*

CLINICAL NEUROPSYCHOLOGY RESIDENCY PROGRAM

VA Connecticut Healthcare System offers a two-year postdoctoral fellowship in the specialty practice area of clinical neuropsychology. Our fellowship is currently accredited by the American Psychological Association. We have two fellowship positions and each year we recruit one position for the West Haven Campus.

The educational philosophy of the Neuropsychology postdoctoral fellowship follows the Scientist-Practitioner model. The focus of the program is to provide an advanced level of competence in Clinical Neuropsychology through a comprehensive understanding of the process of science and its application to clinical endeavors. Research participation, in conjunction with the application of scientific findings to their clinical casework, is expected. Although the fellowship is primarily clinical in nature, with approximately 30% of their time being spent in direct service delivery, the fellow is expected to contribute to research and/or program development in advancing clinical care. The program aims to educate students in accordance with the 1997 Houston Conference on Specialty Education and Training in Clinical Neuropsychology. The core domains identified by the Houston Conference (assessment, treatment and intervention, consultation, research, and teaching and supervision) are addressed throughout the training program in the specific clinics and through educational opportunities such as seminars and didactics. Residents completing the program will have solid foundational preparation to complete ABPP certification in Clinical Neuropsychology. Further, our program is designed to meet postdoctoral requirements for the State of Connecticut.

For the 2024 - 2026 training years the program will be recruiting for one fellow for the West Haven campus. The postdoctoral training program is a full-time, two-year program. Building upon the developmental level of the student, the fellow is given opportunities to develop their own "voice" with regard to assessment by using the skills that they have cultivated throughout their previous training. This includes but is not limited to test battery selection beyond a basic core, interview and report style, interaction with affiliate medical staff, and broader autonomy in administration of clinic responsibilities. As the fellow gains experience, they are given increased autonomy within the program. At completion of the fellowship, it is expected that they will feel comfortable in their own ability to manage the responsibilities associated with the practice of Clinical Neuropsychology.

Training in clinical care is driven by the concept of empirically based assessment and treatment. Fellows are expected to use the scientific literature to drive assessment approaches, case conceptualization, diagnostic impressions, and treatment recommendations. Critical evaluation of clinical methodologies and skeptical analysis of novel and traditional treatment approaches are strongly encouraged during all aspects of their training. Training is experiential in approach as the fellow will be given ample opportunities to gain experience with a broad range of patient populations including neurodegenerative disorders, traumatic brain injury, stroke, movement disorders such as Parkinson's Disease, motor neuron disease, substance abuse disorders, brain tumors and other cancers, and other more infrequently encountered disorders. The fellow will gain these experiences through the outpatient Neuropsychology clinic and in the numerous specialty medical clinics within the hospital.

The educational experiences across both positions are rounded out by training and didactic experiences throughout allied psychology training programs and clinics that provide a significant breadth of educational opportunities, with approximately 10% of the fellows time allotted to these activities. 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 fellows within the Neuropsychology fellowship and other Psychology fellowships at VACHS and interactions with staff on a junior colleague level.

Additionally, the fellows will receive the opportunity to develop supervision and mentoring skills through the supervision of practicum students and interns within their respective clinical duties. This supervision again builds upon the fellow's individual skill set, but includes supervision of test administration, report writing and case conceptualization, as the fellow advances. A focus on the development of approaches to supervision is fostered to allow for a broader understanding of potential issues within supervisory relationships.

COVID-19 Statement

Our Clinical Neuropsychology training program has undergone significant changes in response to COVID-19. During the pandemic, we have consistently tried to balance the safety, clinical, and training needs of Veterans and our fellows. Fellows are permitted to telework and conduct some clinical work virtually, as they are considered to be essential in providing Veteran care. We evaluations are in-person encounters with appropriate personal protective equipment consistent with policies that are implemented setting-wide. We will consistently explore new technologies, procedures, and flexibilities to support the clinical care and training that is being delivered. We expect that rotations will change and evolve, and we will work with our fellows in guiding that process and meeting their training goals. While in-person encounters and supervision will remain the preferred method of training and delivery of care, safety of our fellows, Veterans, and staff remains our highest priority, so we expect that telework and telehealth will continue to be a core component of our hybrid training and practice experience.

Clinical Neuropsychology Consultation Clinic

While the program has traditionally focused on work with patients referred from Neurology and Geropsychiatry, fellows work with a variety of individuals with wide ranging problems during the training year. Extensive experience in neuropsychological evaluation for diagnostics, treatment effects, and rehabilitation planning is provided. While feedback is offered to every patient, referrals for counseling, remediation, and rehabilitation are frequently made. Exposure to both standardized and process-oriented approaches to neuropsychological assessment is provided, though the primary clinical work utilizes a core battery comprised for utility with the disparate patient population served. This is the primary referral clinic for doctoral trainees. Dr. Beauvais currently serves as the director of this clinic and Drs. Beenken, Kulas, and Weisser serve as primary supervisors.

Geropsychiatry Clinic

This clinic provides a multi-disciplinary approach to evaluating and treating geriatric patients with cognitive and psychiatric diagnoses. The fellow typically works in this clinic during their second year, providing consultation to Geropsychiatry and working alongside other disciplines including social work and pharmacy. Neuropsychology's role includes administration of an abbreviated, flexible battery, and communication of findings to the multi-disciplinary team. This rotation is expected of the West Haven resident and takes place on the Orange campus.

Parkinson's Consortium

This consortium provides a multi-disciplinary approach to evaluating and treating patients with Parkinson's disease and related movement disorders. The fellow typically works in this clinic during their first year, providing consultation to Neurology and working alongside other disciplines including speech therapy, physical therapy, and nutrition. Neuropsychology's role includes administration of an abbreviated, flexible battery, and communication of findings to the Neurology Attending and the Yale DBS team, when appropriate, to inform treatment recommendations. This rotation is expected of the West Haven resident.

Neurocognitive Clinic

This clinic provides a multi-disciplinary approach to evaluating and treating patients primarily with neurodegenerative disease. The fellow typically works in this clinic during the first year. Neuropsychology's role includes administration of an abbreviated, flexible battery, and case

discussion with the Neurology Attending, Geropsychiatry, and Neurology Fellows. Patients are routinely followed in this clinic to allow for determination of cognitive change over time. Opportunities to observe the Neurological Examination and review neuroimaging are available. This rotation is expected of the West Haven resident and optional for the Newington resident.

ALS Clinic

In this multidisciplinary clinic, the fellow has the opportunity to gain understanding of ALS and people living with it across a broad perspective. Part of this experience involves participating in pre-clinic team meetings. Communicating with this collegial team allows the fellow to learn from the disciplines of neurology, speech language pathology, social work, nursing, physical therapy, and occupational therapy among others. The fellow will obtain a psychosocial history for Veterans and administer a cognitive screening measure. They will be able to follow the Veterans across time to track progress. There will also be the opportunity to build and administer fuller batteries for assessment. In exercising this flexibility, the fellow will practice making adaptations and accommodations for assessment. This rotation will also develop awareness of ALS resources and treatment recommendations. This rotation is expected of the West Haven resident during their second year.

Additional Rotations

Fellows in Clinical Neuropsychology can also receive training or didactics in other clinical settings (e.g., cognitive rehabilitation/remediation, neuroscience, neurology, or psychiatry grand rounds)

Typical Schedule and Responsibilities:

First Year Fellow(s):

Clinical: Outpatient/Inpatient cases, Neuro Cognitive Clinic and Parkinson's Consortium

Admin: Help manage Healthy Aging Class Series and NP SharePoint, assists with ordering test supplies

Second Year Fellow(s):

Clinical : Outpatient/Inpatient cases, Geropsychiatry Clinic and ALS Clinic, supervision experiences

Admin: Help manage group supervision schedule, database and NP seminar

Didactics

Clinical Neuropsychology Seminar (Required)

The Clinical Neuropsychology Seminar is a weekly series that covers a number of academic, clinical, and research issues in Clinical Neuropsychology. Topics will provide advanced training in brain-behavior relationships, including overviews of functional neuroanatomy, neurological diseases (e.g., cerebrovascular disease, traumatic brain injury), clinical syndromes (e.g., aphasia), ancillary neurodiagnostic procedures (e.g., neuroimaging, EEG), and professional issues in neuropsychology. Lectures will be delivered by prominent clinicians and researchers from diverse settings in order to provide a broad base of learning perspectives. The seminar also incorporates journal club.

Neuropsychology Case Conference (Required)

Each week, all neuropsychology trainees convene to discuss a case that has been recently evaluated for group discussion with one of the neuropsychology attendings. Participation in mock fact findings broadly consistent with the procedures utilized in ABCN oral examination will be expected.

Interdisciplinary Case Conference (Required)

Each month, neurology and neuropsychology trainees (and their attending) convene to discuss a case that has been recently evaluated by our respective services. Psychiatry and Geriatrics participate on a case by case basis. Each discipline contributes their perspective to the discussion, and the didactic often include a review of neuroimaging involved in the case from the neurology attending.

Professional Development Seminar (Required)

Alicia Heapy, Ph.D., Research Psychologist, and Anne Klee, Ph.D. facilitate a monthly meeting for all psychology post-doctoral residents at VACHS on professional development. Topics include: applying for a career development award, licensure requirements, studying for the EPPP, obtaining employment, and managing a research and clinical career.

Diversity Seminar (Required)

Meets monthly over the course of the year for all psychology post-doctoral residents at VACHS. Topics and speakers are selected to increase self-awareness and improve delivery of care.

VACHS Psychology Colloquia (Required)

The Psychology Service offers monthly colloquiums on the 2nd Thursday of each month. All staff and trainees are expected to attend. Local and national speakers present on an array of topics.

Brain Cuttings and Neuropathology (as available, as this is a not VA site experience)

Once a month, the Yale Neuropathology Service offers a lecture covering a wide range of topics involving CNS disorders. This is combined with an opportunity for post-mortem examination of the brain ('brain cutting'). Typical topics include: CNS tumors; neurovascular pathology; pathology of CNS infectious disease; CNS trauma; neurodegeneration; epilepsy pathology; muscle/nerve pathology; and neuroendocrine pathology. Brain cuttings at Yale have recently resumed and occur several times during the year. Neuropsychology fellows are supported in regularly attending these didactics with a VA attending.

Neuroanatomy (as available, as this is a not VA site experience)

Neuropsychology fellows, typically in their second year of training, are invited to attend neuroanatomy training with Dr. Hal Blumenfeld (or affiliated Neurologists) with the Yale medical students. This five (5) session course covers case based conferences on the spinal cord, brain stem, motor systems, sensory systems and cortical and cognitive systems.

Neurology Clinical Grand Rounds (as available)

Although the Grand Rounds are held at Yale, fellows may watch via videoconference. Clinical Grand Rounds occurs approximately every three weeks.

Psychiatry Grand Rounds (as available)

As the Grand Rounds are held at Yale, fellows may attend onsite at Yale, or potentially via Zoom. Grand Rounds occurs most Friday mornings.

Research

The program, consistent with its scientist practitioner approach encourages the resident to become an active participant in the scientific process. Each resident is expected as a part of their training to complete at least one research project, either constructed on their own or through participation in ongoing research projects within the Clinical Neuropsychology Consultation Clinic or one of the many ongoing research programs within the VACHS, including the National Center for PTSD, Pain Research, Informatics, Medical comorbidities, and Education (PRIME), Mental Illness Research, Education and Clinical Center (MIRECC), or within individual medical departments. Staff psychologists have active research programs within each of these programs and are able to easily integrate fellows into existing research programs or are able to assist in the development of a feasible project developed by a fellow. The aim of these projects will be for eventual publication in a peer-reviewed journal or presentation at a national scientific conference. Development of a fellow's own research ideas and skills to allow the continuation of that research following completion of the fellowship is strongly encouraged. A performance improvement project, in lieu of research, can be considered.

Training Goals and Evaluative Criteria

The Clinical Neuropsychology Residency provides training in the assessment and treatment of patients with various psychiatric and neurologic disorders. Residents will conduct neuropsychological evaluations, provide feedback to patients and their families, and consult with multidisciplinary teams. They will also participate in the Neuropsychology Seminar, which incorporates didactics, case conference and journal club activities. Residents may also become involved in cognitive remediation and/or therapy efforts. In terms of research, residents will be expected to either participate in on-going research endeavors and/or work on developing their own research proposal. The training objectives, advanced competencies, and activities are structured to be consistent with the newly updated Standards of Accreditation where passing the fellowship represents readiness at the entry level for advanced specialized practice.

Objective 1. Integration of Science and Practice

Fellows need to demonstrate the ability to critically evaluate and disseminate research or other scholarly activities (e.g., case conference, presentation, publications, and program evaluation).

Objective 2. Individual and Cultural Diversity

Fellows need to develop and demonstrate the ability to conduct all professional activities with sensitivity to human diversity, including the ability to deliver high quality services to an increasingly diverse population.

Objective 3. Ethical and Legal

Fellows act professionally and ethically. This includes behavior in accordance with the APA Code and relevant laws, regulations, rules, policies, standards and guidelines.

Objective 4. Assessment

Advanced proficiency in the use of clinical interview to obtain significant information, ultimately for assistance in answering the referral question (e.g., differential diagnosis). Proficiency is achieved when the resident displays the ability to 1) discriminate between valid and invalid test results; 2) develop reasonable hypotheses about a patient based on the test data and interview; 3) determine when follow-up is indicated; and 4) integrate objective test data into a comprehensive conceptualization. Assessment skills presume effective communication skills.

Objective 5: Consultation and Intervention

Advanced ability to prepare concise, informative and timely consultation reports based on the interview and/or test findings with clear presentation of case formulations. Advanced ability to effectively communicate findings, recommendations, and interventions to the patient, family, referral source, and potentially to staff from other disciplines.

Objective 7. Professional Values, Attitudes and Behaviors

Demonstrates a developing professional identity as a Clinical Neuropsychologist.

Objective 8 Supervision

Fellows develop competence in providing supervision to interns and more junior trainees.

Evaluation Process:

Residents in the Clinical Neuropsychology Program undergo formal evaluations twice per year. Initial skills are reviewed and a training plan is mutually developed. The first formal competency evaluation will occur several months following entry to the program to assure good acclimation to the program. The remaining evaluations will occur at regular six-month intervals, with the last occurring just prior to the resident's completion of the program. Frequency of feedback is modified in the presence of areas requiring more significant development. It is important to note that ongoing monitoring and feedback within the resident's supervision sessions provides the bulk of the feedback that the resident receives.

There are also multiple opportunities for fellows to provide feedback to individual supervisors and the program over the course of training. A copy of our evaluation form is available by request.

CORE TRAINING STAFF

There are over 75 professionals comprising the Psychology Service clinical, research, and postdoctoral staff at VA Connecticut. The staff represents a variety of orientations, and residents will have an opportunity to be supervised by different staff members. In addition, some consultation/supervision is available from medical staff and Yale consultants during the years of training.

Supervision is primarily provided by the psychology staff identified below. Supervision will cover clinical cases, research progress and other professional issues as they arrive. Consistent with accreditation guidelines the fellow will receive at a minimum two (2) hours of individual supervision per week. Fellows will also participate in one hour of group supervision per week with other trainees. The primary supervisors are available for ad hoc supervision whenever necessary. Further, the fellow will have opportunities for additional consultation and supervision with additional supervisors as available or within the specialty clinics. On-site supervision and intervention is available at all times for emergencies.

Primary Supervisors:

John E. Beauvais, Ph.D., has clinical and research interests in the area of Clinical Neuropsychology. He is actively researching the neuropsychological and psychological aspects of Multiple Sclerosis, predictors of driving in the elderly, and innovative approaches to assessment. He serves as the Ethics Consultation Coordinator for VA Connecticut. He is both the past President of the Association for Internship Training in Clinical Neuropsychology (AITCN) and is a Past Chair of the VA Psychology Training Council (VAPTC).

Beth Beenken, Ph.D., Primary employment setting: Eastern Blind Rehabilitation Center. Dr. Beenken specializes in clinical neuropsychology, providing evaluation for various populations including those with sensory impairments or alterations. In addition, she has interests in brief and eclectic psychotherapeutic interventions with a cognitive behavioral focus. Current research interests include developing a cognitive measure to assess spatial functioning in people with vision impairment.

Joseph F. Kulas, Ph.D., ABPP-Cn, Co-Director, is a board-certified clinical neuropsychologist whose clinical interests encompass broad areas including traumatic brain injury, sleep, dementia, and epilepsy. Research interests include the cognitive impact of chronic epilepsy, neural network models of traumatic brain injury, psychometric properties of neuropsychological measures, anxiety, and increasing the role of science in medicine.

Nicholas A. Vissicchio, Ph.D., is a clinical neuropsychologist who specializes in neuropsychological assessment of adult Veteran populations. His primary research interests include cognitive and psychosocial factors in Multiple Sclerosis as well as the influence of substance use disorders on cognition. He is also involved with individual and group supervision for neuropsychology trainees on both the Newington and West Haven campuses.

Valerie Weisser, Ph.D., currently provides individual and group supervision for neuropsychology trainees as well as supervision of interns in the interdisciplinary stroke clinic. She is the primary supervisor for fellows in the Parkinson's Consortium and Neuro Cognitive clinics. She also conducts neuropsychological and mental health evaluations within the compensation and pension department. Past research areas include cognitive and functional performance in Multiple Sclerosis and cognition in PTSD.

SALARY AND BENEFITS:

The salary for the postdoctoral residency program is consistent with national VA standards and locality pay differentials. Currently, the salary for our residents is \$60,446 for the first year and \$63,713 for the second year plus benefits including health insurance, vision and dental, federal holidays and other leave (sick leave and annual/"vacation" leave), in accordance with national VA guidelines.

Administrative Policies and Procedures

Authorized Leave Policy: In addition to OAA regulations for Annual and Sick leave, residents may request leave for academic/research purposes (e.g., attendance at professional and/or scientific meetings). Such academic leave can be approved as "authorized absence" and is considered part of the training experience. Exactly when leave may be taken is to be worked out with the relevant supervisory psychologists and should be discussed well in advance. For authorized absence, paperwork will need to be filled out and approved at least two weeks prior to traveling.

Due Process/Grievance Procedure Policies: At the beginning of the training year, residents are given a copy of our Due Process policy. This document provides a definition of problematic behavior and impairment, a listing of possible sanctions and an explicit discussion of the due process procedures. Also included are important considerations in the remediation of problems or impairment. Also, at the beginning of the training year, residents are given a copy of our grievance procedures policy. This document provides guidelines to assist residents who wish to file complaints against staff members. It also explains the process if a supervisor has a concern regarding a student that does not fall under the inadequate performance (i.e., Due Process). These policies are available, in advance, by request.

SETTING:

The mission of VACHS is "to provide high quality health care that meets the needs of the Veteran patients, to promote health through prevention and to maintain excellence in teaching and research." VACHS is a division of the VA New England Healthcare System that serves Veterans in Maine, New Hampshire, Vermont, Massachusetts, Rhode Island and Connecticut. As one of the more complex VA facilities in the nation, VACHS boasts an integrated system of healthcare delivery that encompasses a full range of ambulatory services as well as a tertiary care inpatient facility at its West Haven campus, an ambulatory care Center for Excellence at its Newington campus, six Community Based Outpatient Clinics, and a recovery-oriented Community Care Center. In FY2018, VACHS provided care to over 58,000 veterans (4.9% women) and documented over 770,000 outpatient visits. VACHS has an operating bed capacity of 191. VACHS is also home to a variety of special, regional treatment centers, including a Blind Rehabilitation Service, National Center for PTSD, Comprehensive Cancer Center, Rehabilitation Center of Excellence, and vibrant CT Surgery and PTCA programs.

In addition to providing excellent patient care, VACHS also provides a highly fertile environment for education and scientific investigations across many fields. While the neuropsychology fellowship falls solely under the auspices of VA Connecticut, our healthcare system is strongly affiliated with the Yale University School of Medicine and the School of Medicine at the University of Connecticut. These cooperative affiliations have helped make the VACHS a leader in research. Our facility has one of the VA's most extensive research programs, with an annual research budget of approximately \$28 million. Important research foci include aging, Alzheimer's Disease, cardiovascular disease, cancer, spinal cord regeneration, substance abuse, and schizophrenia. In addition, VACHS is also the home of a vibrant Mental Illness Research, Education, and Clinical Center (MIRECC) that spearheads several studies on Veterans with co-morbid psychiatric and substance use concerns.

Program Tables - Admissions, Support, and Placement Data

Date Program Tables are updated: 10/5/23

<p>Program Disclosures</p>	
<p>Does the program or institution require students, trainees, and/or staff (faculty) to comply with specific policies or practices related to the institution’s affiliation or purpose? Such policies or practices may include, but are not limited to, admissions, hiring, retention policies, and/or requirements for completion that express mission and values?</p>	<p>No</p>
<p>If yes, provide website link (or content from brochure) where this specific information is presented:</p>	<p>NA</p>
<p>Postdoctoral Program Admissions</p>	
<p>Briefly describe in narrative form important information to assist potential applicants in assessing their likely fit with your program. This description must be consistent with the program’s policies on intern selection and practicum and academic preparation requirements:</p>	
<p>Applicants must meet the following prerequisites to be considered for our program:</p> <ol style="list-style-type: none"> 1. Doctoral student in a clinical or counseling psychology program accredited by the American Psychological Association (APA) or the Canadian Psychological Association (CPA) 2. Approval for internship status by the graduate program training director 3. U.S. citizenship 4. Male applicants born after 12/31/1959 must have registered for the draft by age 26 5. Matched interns are subject to fingerprinting, background checks, and urine drug screens. Match results and selection decisions are contingent on passing these screens. VA appointment is contingent upon HR’s determination of eligibility (and suitability) for Federal employment. <p>The overall goal of our accredited fellowship in clinical neuropsychology is to prepare the fellow for entry-level specialty practice. Our program emphasizes a scientist-practitioner model of training and encourages the</p>	

development of professional and scientific skills consistent with this perspective.	
Describe any other required minimum criteria used to screen applicants:	
Psychology faculty review all submitted applications and ranking preference is given to applicants that have specific educational, clinical, and research experiences that are consistent with the type of work that is performed at VACHS within the clinical neuropsychology section.	
Financial and Other Benefit Support for Upcoming Training Year*	
Annual Stipend/Salary for Full-time Residents	\$60,446 (year1) \$63,713 (year2)
Annual Stipend/Salary for Half-time Residents	NA
Program provides access to medical insurance for resident?	Yes
If access to medical insurance is provided:	
Trainee contribution to cost required?	Yes
Coverage of family member(s) available?	Yes
Coverage of legally married partner available?	Yes
Coverage of domestic partner available?	Yes
Hours of Annual Paid Personal Time Off (PTO and/or Vacation)	96-104 (4 hours of Annual Leave earned after every full 2-week pay period that is worked)
Hours of Annual Paid Sick Leave	96-104 (4 hours of Annual Leave earned after every full 2-week pay period that is worked)

In the event of medical conditions and/or family needs that require extended leave, does the program allow reasonable unpaid leave to interns/residents in excess of personal time off and sick leave?	Yes
Other Benefits (please describe): Interns receive all federal holidays that fall within their appointment (typically 11 each year, consistent with Federal guidelines) and are eligible for up to 10 days of Authorized Absence for approved, professional development endeavors. A recent update from OAA states that Residents will be eligible for optional Federal Dental and Vision Programs.	
*Note. Programs are not required by the Commission on Accreditation to provide all benefits listed in this table	
Initial Post-Residency Positions (Provide an Aggregated Tally for the Preceding 3 Cohorts)	
	2019-2022
Total # of Residents who were in the 3 cohorts	5
Total # of residents who remain in training in the residency program	1
Academic teaching	PD=0, EP=0
Community mental health center	PD=0, EP=0
Consortium	PD=0, EP =0
University Counseling Center	PD=0, EP =0
Hospital/Medical Center	PD=0, EP =1
Veterans Affairs Health Care System	PD=0, EP =1
Psychiatric facility	PD=0, EP =0
Correctional facility	PD=0, EP =0
Health maintenance organization	PD=0, EP =0
School district/system	PD=0, EP =0
Independent practice setting	PD=0, EP =2
Other	PD=0, EP =0
Note: "PD" = Post-doctoral residency position; "EP" = Employed Position. Each individual represented in this table should be counted only one time. For former trainees working in more than one setting, select the setting that represents their primary position.	

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 and the following link for more information: [VA Drug-Free Workplace Program Guide for Veterans Health Administration Health Professions Trainees](#)
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/oaa/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. (N.B. With regard to COVID vaccinations: Health Professions Trainees (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 VA Training Director for your profession will provide you with the information you need to understand the requirement and reasons for the requirement in timely manner.)

- 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/oa/app-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 below.

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&FType=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.